

### **Slide 1: Introduction**

Welcome to the Florida Statewide Quality Assurance Program Provider/Staff Interview Presentation presented by Robyn Turlakis, Regional Manager with Delmarva Foundation. This presentation is not approved for in-service or continuing education hours. The intention is to provide an overview of the Provider/Staff Interview tool that has been in effect since 2015 and is available to providers on the Delmarva Foundation website at [www.dfmc-florida.org](http://www.dfmc-florida.org). The presentation will last approximately 30 minutes and contains a voice-over, as well as a written narrative guide.

### **Slide 2: Purpose**

The purpose of this presentation is to review: the reason for and processes of the Provider/Staff Interview; the different components of the interview; how it is incorporated into the PDR score; what we (Delmarva) want to learn from you; tips for staff to help with the process; and takeaways from the interview. At the end of this presentation, we hope to have provided the information you need regarding the Delmarva Discovery Provider/Staff Interview process to help make it a positive and informative part of the PDR for you.

### **Slide 3: Benefits of a staff interview**

There are many benefits to incorporating the provider and staff interviews into the quality assurance process. Providers and staff are given a voice in the review process and a place to share their accomplishments and challenges. Including interviews with providers and staff helps create a well-rounded review approach where quality is assessed not only through paperwork, but through the eyes of those directing the service delivery system.

### **Slide 4: Interview Processes Solo Providers**

If the provider is a solo, the interview will occur with the solo provider. The reviewer calls in advance of the PDR to schedule PDR activities, including the interview. A time and place for the interview is selected. The interview is usually conducted at the time and location of the PDR for a solo provider, but the time and location can vary depending on the specifics of the review. The interview incorporates all services the provider offers and includes discussions of all individuals receiving services from the provider in the period of review.

### **Slide 5: Interview Processes Agency Providers**

If the provider is an agency, a sample of staff working for the agency is selected for the interview. When the reviewer contacts the provider to schedule the Provider Discovery Review, the reviewer will ask for a list of current staff. The list needs to include each service the staff rendered during the period under review. The reviewer will then randomly select a sample of staff ensuring all services rendered during the period of review will be covered. The number selected depends on the size of the provider and number of services offered. Because providers are aware of scheduling conflicts staff may have and times staff works with individuals, they should assist with scheduling the staff interviews.

### **Slide 6: Interview Processes**

Each interview usually takes between 30 minutes to an hour depending on the services rendered by the staff. The interviews encompass discussion about all of the individuals for whom the staff is rendering services, with the exception of Waiver Support Coordinators. The interview with Waiver Support Coordinators directly relates to the individuals who were interviewed during the Person Centered Review process. If the staff is comfortable with it, the manager of the provider agency may sit in with the staff during the interview. However, this is only at the request of the staff and only the staff being interviewed may respond to the questions. The manager of the provider agency is not permitted to add additional comments or probes.

### **Slide 7: Interview Components**

Nine components are measured during the provider/staff interview. Person Centered Planning is the first component covered in the tool. Because person centered practices are paramount in the service delivery system and Centers for Medicare and Medicaid Services requirements, this is the longest section of the interview. The Community component is divided into four sub-sections: Residence, Work, Activities, and Relationships. The Health component includes two sub-sections: Best Possible Health and Health Addressed. The Safety component includes two sub-sections: People are Safe, and Safety Addressed.

### **Slide 8: Interview Components**

Not all components are completed for every service. Based on information entered by the reviewer, the tool is programmed to show sections applicable to the services the person being interviewed renders.

The questions, also called probes, seen on the left side of the tool are designed to guide reviewers and are not the only questions which may be asked of the provider or staff.

Throughout the interview, providers and staff are encouraged to use examples or best practices to explain how they integrate the components into daily service delivery. Next, we explain in more detail each interview component and sub-sections.

### **Slide 9: Person Centered Practices**

The first component in the tool consists of 14 findings related to person centered supports and is the largest component of the interview. Person Centered Practices are the cornerstone of service delivery as you have learned in your APD required trainings. Reviewers ask questions and lead discussion to determine if person centered planning has been utilized in order to identify and meet the needs of individuals receiving services. This section is applicable to all providers and staff.

Person Centered Supports encompasses a variety of topics. A key area is how individuals receiving services are involved in making decisions about their documentation, such as Implementation Plans and Behavior plans, Support Plan goals, and service delivery details, such as when and where to receive services. Reviewers ask questions to obtain information related to the processes used to ensure staff is involving individuals in the service delivery system. Questions address how the staff determines the person is driving services and supports and how satisfaction or dissatisfaction is determined.

The reviewer also uses the interview to help determine how education about confidentiality, privacy, and rights is provided and how staff determines what the person's preferences are. Providers and staff maintain a plethora of confidential information about a person receiving services. The provider and staff should have a system for asking and knowing what the person's preferences are for how, what, and where their confidential information is kept. This is critical to a person centered approach. Additionally, reviewers ask about how providers solicit preferences and opinions from individuals receiving services and how those preferences and opinions are respected. This includes preferences and opinions about their personal property.

### **Slide 10: Community: Residence**

The first sub-section of Community addressed during the interview is about where the person resides, specifically: Individuals have opportunities for integration in all aspects of their lives including where they live. This is applicable only for providers and staff rendering Residential Habilitation, Personal Supports, or Supported Living. The Community: Residence component has a total of seven findings.

Using questions/probes in this section of the tool, reviewers lead discussion related to various aspects of the person's residence, such as if the person was supported to:

- Choose where and with whom to live
- Furnish and decorate the residence according to the person's preferences
- Have privacy
- Help determine house rules
- Access food as desired

To address this component, the reviewer asks question that relate to the degree to which individuals are satisfied with their residence. If the person is not satisfied, how does staff address choices and preferences to move? The reviewer will ask if a person has preferences to live in the community independently and how the provider and staff support this desire. The reviewer may ask how long the person has resided there and how this living situation was chosen. Reviewers probe to determine if there was choice provided for housemates and roommates or if they were assigned. If they were assigned or the individual has realized the roommate match is not a good fit, the reviewer will ask how preferences or changes discussed and mutually agreed upon for the residence.

### **Slide 11: Community: Work**

The Community: Work sub-section relates to where the person works or attends meaningful day activities and how the provider and staff are ensuring opportunities for integration in these places. Specifically the findings are: Individuals have opportunities for integration in all aspects of their lives, including where they work. This Community sub-section is applicable to providers and staff rendering Life Skills Development 1, Life Skills Development 2, Life Skills Development 3, and Personal Supports, if it is being used in the capacity of a meaningful day activity. For this sub-section, there are three findings. These address how individuals are supported by staff to choose where to work and to change this if desired by the person; and how options for integrated work or day activity settings are offered.

To gather information in this area, the reviewer may ask how long the person has been at the current work or day activity and how this was chosen. If the person is not satisfied with the current work situation, how does staff address other choices and preferences? If a person is not working in the community, how is education provided to the person about community options for employment?

### **Slide 12: Community: Activities**

The Community: Activities sub-section addresses how individuals have opportunities for integration in all aspects of their lives, including access to community services and activities. This area is applicable only for providers rendering Residential Habilitation, Supported Living, Life Skills Development 1, and Personal Supports. There are four findings used to assess if the provider or staff:

- Promotes opportunities for individuals to be engaged in the community
- Supports individuals to direct community involvement
- Solicits people's preferences for developing social roles
- Provides information about potential social roles in the community

Integration with community activities is not only about going in to the community, but becoming a part of the community. Reviewers assess the extent to which providers support individuals to make that happen. They ask about community life, community opportunities, community involvement, and education and preferences related to social roles. Providers and staff are given the opportunity to share examples of how they have addressed community life preferences for individuals who have received services from them over the previous 12 months, which is the period of review.

### **Slide 13: Community: Relationships**

The final sub-section for the Community component is about ensuring individuals have opportunities for integration in all aspects of their lives, including opportunities for new relationships. This area is applicable only for providers and staff rendering Residential Habilitation, Supported Living, Life Skills Development 1, and Personal Supports. There are three findings to help determine if the provider:

- Creates opportunities for people to develop new friendships and relationships
- Supports people to maintain friendships
- Utilizes each person's communication preferences to develop friendships and relationships

To assess this area, reviewers may ask asked about processes used to assist individuals to maintain current relationships, to create new relationships, and to ensure individuals are supported to keep in touch with friends through various preferred means. These could be via telephone, cell phone, text, electronic mail, written letter, computer, or other social platforms. The ability to communicate with friends is essential to developing and maintaining relationships.

#### **Slide 14: Health: Best Possible Health**

After completing all sub-sections related to the Community component, the reviewer will move to questions about the Health and Safety components. There are two sub-sections for Health and two for Safety. Reviewers first explore if staff is supporting individuals to be in their Best Possible Health. This sub-section includes only one finding which applies to all providers and staff, with a focus on how information about health is gathered. All providers and staff have the responsibility to know about a person's health and general medical needs, medications, and physicians. They need to know what the system is for gathering information, how it is utilized, where it can be accessed, and how often it is updated. This awareness is critical in helping to maintain a person's health in the best way possible.

#### **Slide 15: Health: Needs Addressed**

The second aspect of health is if providers and staff are addressing specific health needs of people receiving services. This applies to providers and staff rendering Residential Habilitation, Supported Living, and Personal Supports. There are six findings for this area which address if the provider is:

- Aware of people's health needs
- Supporting people to go to a doctor or dentist and choose medical providers
- Assisting people to learn about medications and to direct their own healthcare
- Talking with people about preventive care

To assess these areas, reviewers will ask staff about how people are involved in their own healthcare and what systems are in place to learn about people's health needs and health status. Providers and staff are given opportunities to provide examples from the previous 12 months (which is the review period) of how they have assisted individuals in directing their own healthcare and health needs, selecting their providers, and learning about medications and medication options.

Reviewers will ask about overall health and the health needs of people receiving services, such as if people receiving services have doctors, specialists, and dentists they can access and they chose. Reviewers will ask questions of the staff to help determine if and how preventive health has been discussed with individuals including the reasons for preventive health, risks in delaying access to preventive health, and ways to assist in making informed choices for preventive health.

### **Slide 16: Safety: Individuals Are Safe**

The two sub-sections for safety complete the interview with the provider and staff. Reviewers 1<sup>st</sup> address how staff ensures individuals are Safe, with a focus on abuse, neglect and exploitation. This sub-section applies to all providers and staff interviewed during the PDR and includes four findings to determine if providers:

- Gather information about safety
- Provide education about abuse, neglect and exploitation
- Support people to know how to recognize, prevent and report abuse, neglect and exploitation

During this portion of the interview, reviewers will ask about the systems providers have in place to gather information about safety. Reviewers will ask how the providers utilize the collected information, where it can be accessed, and how often it is updated.

Prevention of abuse, neglect, and exploitation is critical throughout the service delivery system. It is why reviewers include questions to determine how providers discuss abuse, neglect, and exploitation with individuals receiving services, how education is provided on how to report incidents, and how individuals and supports would recognize if abuse, neglect or exploitation was occurring. Education about all the types of abuse should be considered. These include physical abuse, verbal abuse, and sexual abuse. Education should be individualized to each person receiving services and to that person's learning style.

### **Slide 17: Safety: Needs Addressed**

The final section of the interview addresses the safety needs of individuals and if those needs are addressed by the providers and staff. This section applies to providers and staff rendering Residential Habilitation, Personal Supports, and Supported Living. There are nine findings in this final section to determine if the provider:

## Delmarva Provider/Staff Interview Training

### Narrative to accompany slides

- Supports people with lingering issues of past abuse, neglect or exploitation
- Is aware of people's safety needs and supports them to have needed supplies and safety equipment in the event of an emergency
- Responds when people feel unsafe at home or in the community
- Supports people to know what to do in the event of an emergency such as a fire or severe weather, provides education on how to respond to an emergency, and ensures people have and are aware of the emergency evacuation procedures

Reviewers will ask the provider or staff to describe the systems that are in place to determine how people's safety needs are being addressed, how education is provided to individuals to keep them safe, and how they know individuals are able to appropriately respond to an emergency and evacuate the building if necessary. Providers and staff are given the opportunity to provide examples of their systems that ensure people are safe and their awareness of all safety needs for people.

#### **Slide 18: Tips**

We understand being interviewed can cause some anxiety. Delmarva reviewers strive to create a relaxed and comfortable environment to encourage you to provide honest responses to the questions and to provide examples to help use real world scenarios. Please be assured there are no wrong answers. If a reviewer asks a question you don't understand, please ask for clarification. The goal and intended outcome of the interview process is for us to better understand your service delivery systems and interactions with people receiving services, and to have honest discussion helps provide the best and most accurate information.

#### **Slide 19: How Information Is Used**

Provider/Staff Interview findings are reported in the PDR report. The percent met for the interview is calculated by dividing the total number of findings scored as met by the total number answered, or the total number applicable for the person interviewed. The provider interview results are listed separately in the PDR report and are also incorporated into the provider's person centered practice score.

In the PDR report, there is a summary of results section and a detailed findings section. The detailed findings section lists each of the Components. Next to the Components there is a list of findings the reviewer identified. If there were no findings, the report will state "no findings noted for this area". If



there were multiple provider interviews conducted, the report includes a column indicating the number of times a finding was noted. This is located in Section 2 of the report.

### **Slide 20: Takeaways: What Can Be Learned**

What can be learned from the interview process? We believe there are many lessons that can be taken away from the interview and applied to service delivery. This is a time when providers or staff can pause and think about their service delivery systems as a whole. Thinking and reflecting on various examples for some of the Components may help you realize what is working for or what is not working for individuals receiving services. The interview process can also highlight what needs to happen next to assist individuals in achieving their next steps and can help identify who can take the lead to provide that assistance.

### **Slide 21: Questions?**

If you have any questions, concerns, or feedback, please contact our customer service representative, Beth Stratigeas at 1-866-254-2075.

### **Slide 22: Website**

If you have not signed up for our electronic notifications, you can do so at [www.dfmc-florida.org](http://www.dfmc-florida.org). If you sign up for electronic notifications, you will receive communication when Delmarva is hosting a training opportunity, a quality council meeting, or has released revisions to the Discovery tools.

The website at [www.dfmc-florida.org](http://www.dfmc-florida.org) has various resources for providers, family members, and individuals receiving services on the Medicaid Waiver program. The website includes best and shared practices reviewers have observed during reviews. The web site includes all of the discovery review tools, including the Provider Interview Tool.

Thank you for your time.