



Quality Council Meeting

July 2016





Overview:





Person Centered Review (PCR) Demographic Breakdown



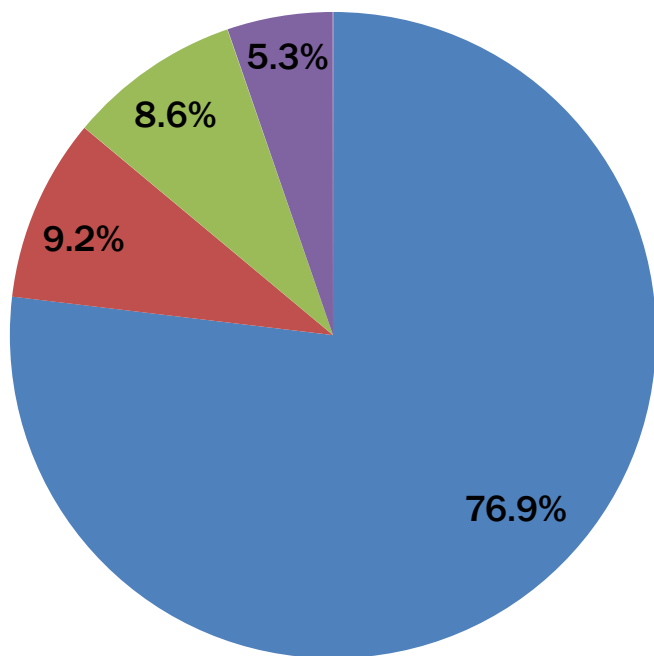


Person Centered Reviews: January – May 2016

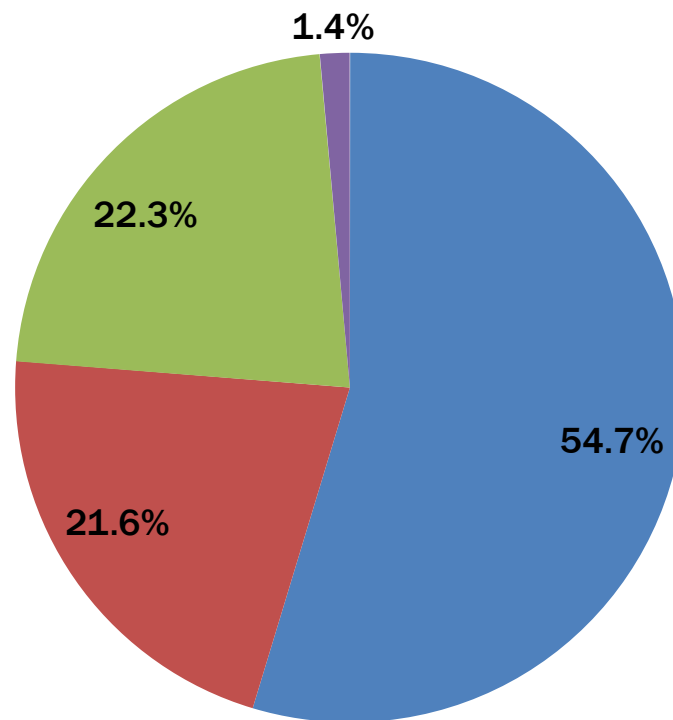
		Region						Total
		Northwest	Northeast	Central	Suncoast	Southeast	Southern	
DD Waiver	N	51	92	121	119	104	80	567
	%	9.0%	16.2%	21.3%	21.0%	18.3%	14.1%	100.0%
CDC+	N	19	15	35	24	19	27	139
	%	13.7%	10.8%	25.2%	17.3%	13.7%	19.4%	100.0%
State	N	70	107	156	143	123	107	706
	%	9.9%	15.2%	22.1%	20.3%	17.4%	15.2%	100.0%

PCR by Primary Disability: January – May 2016

Waiver Participants (N = 567)



CDC+ Participants (N = 139)



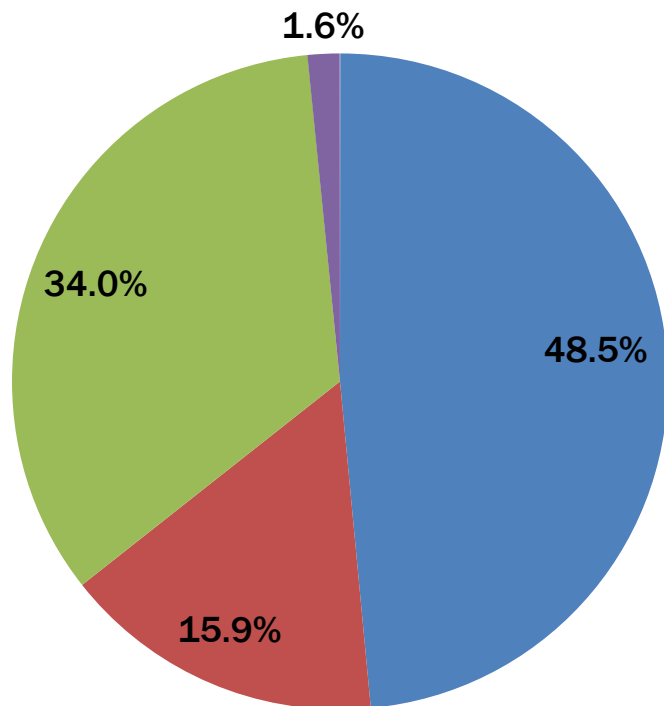
■ Intellectual ■ Cerebral Palsy ■ ASD ■ Other*

*Other: 22 other; 8 Spina Bifida

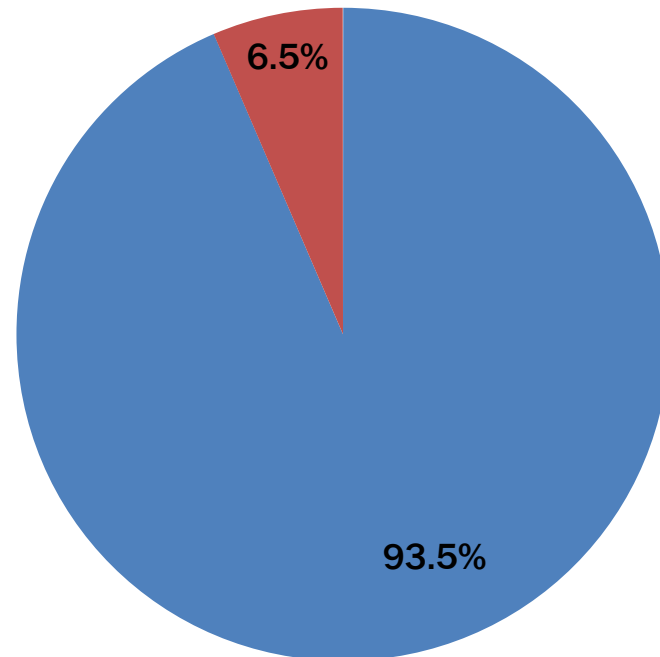
*Other: 2 other

PCR by Residential Setting: January – May 2016

Waiver Participants (N = 567)



CDC+ Participants (N = 139)

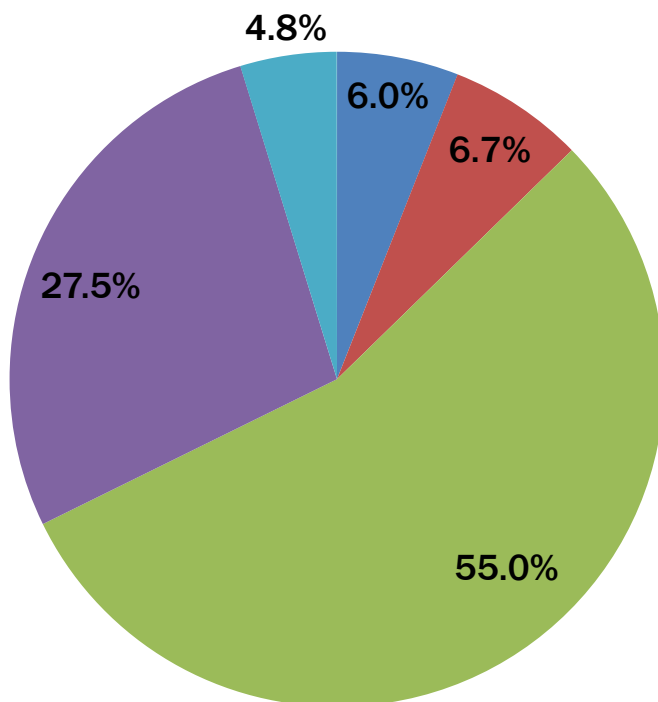


■ Family ■ Ind/Sup ■ Group ■ Other*

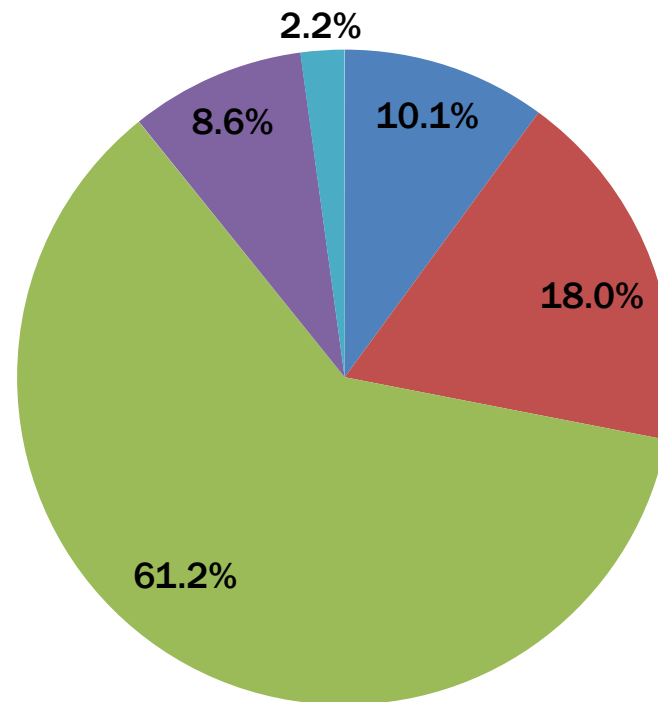
*Other: 7 ALF; 2 Foster Home

PCR by Age Group: January – May 2016

Waiver Participants (N = 567)



CDC+ Participants (N = 139)



■ <18
 ■ 18-21
 ■ 22-44
 ■ 45-64
 ■ 65+



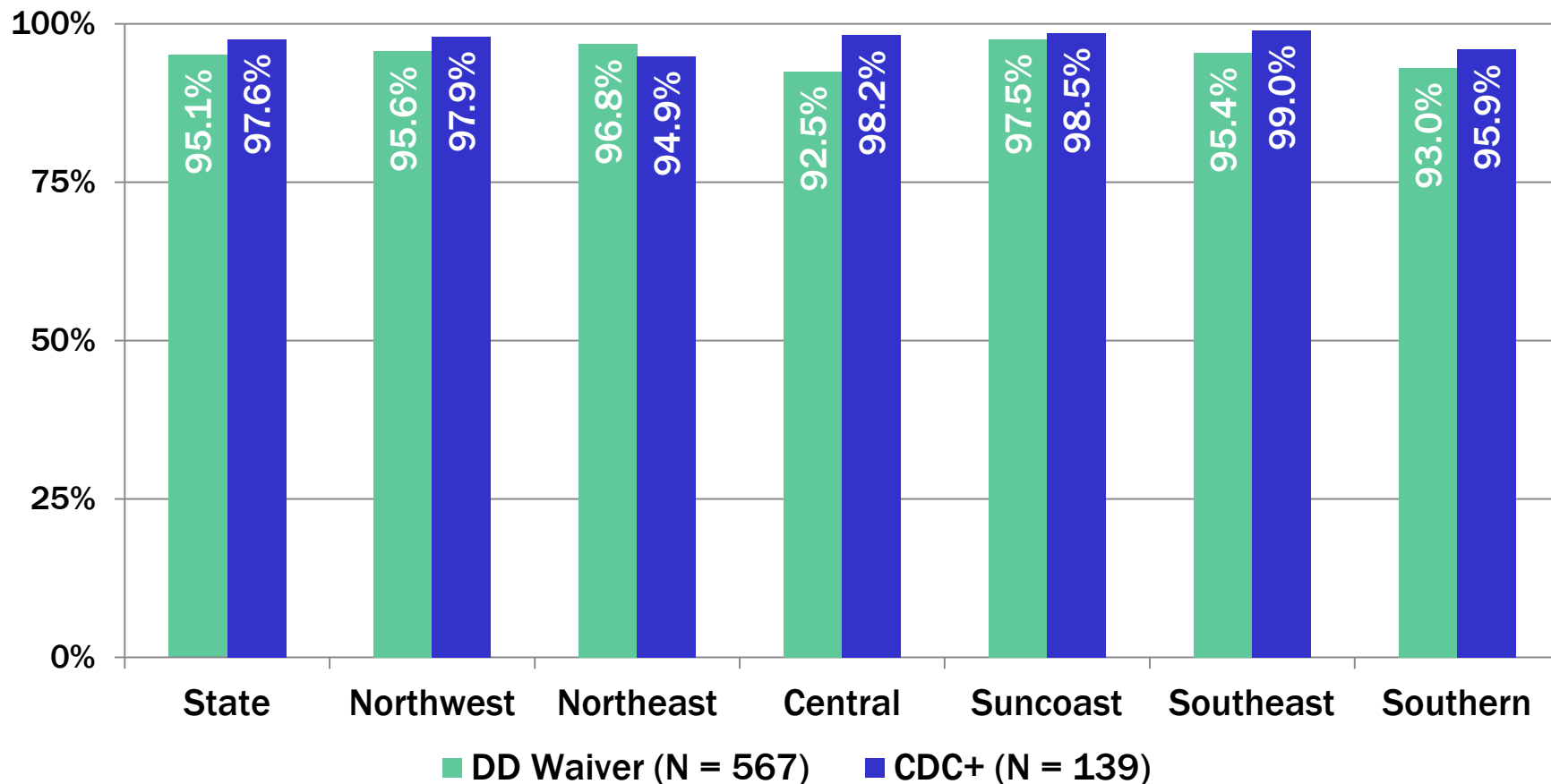
Person Centered Review (PCR)

Individual Interview Results





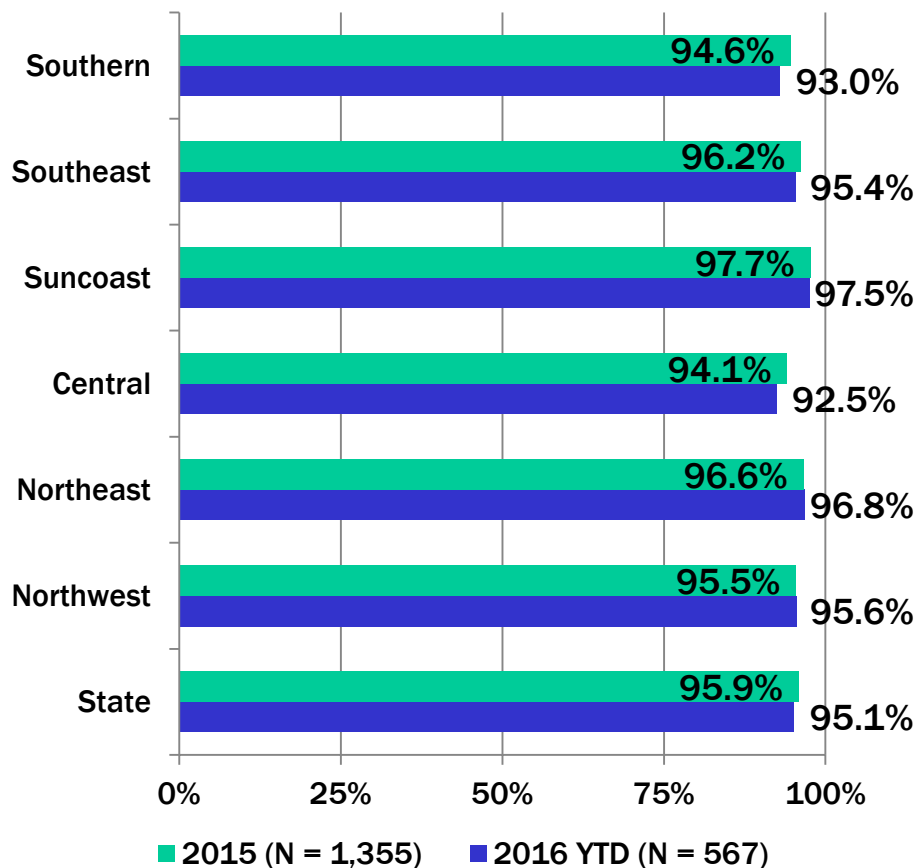
Individual Interview Results by Region: January - May 2016



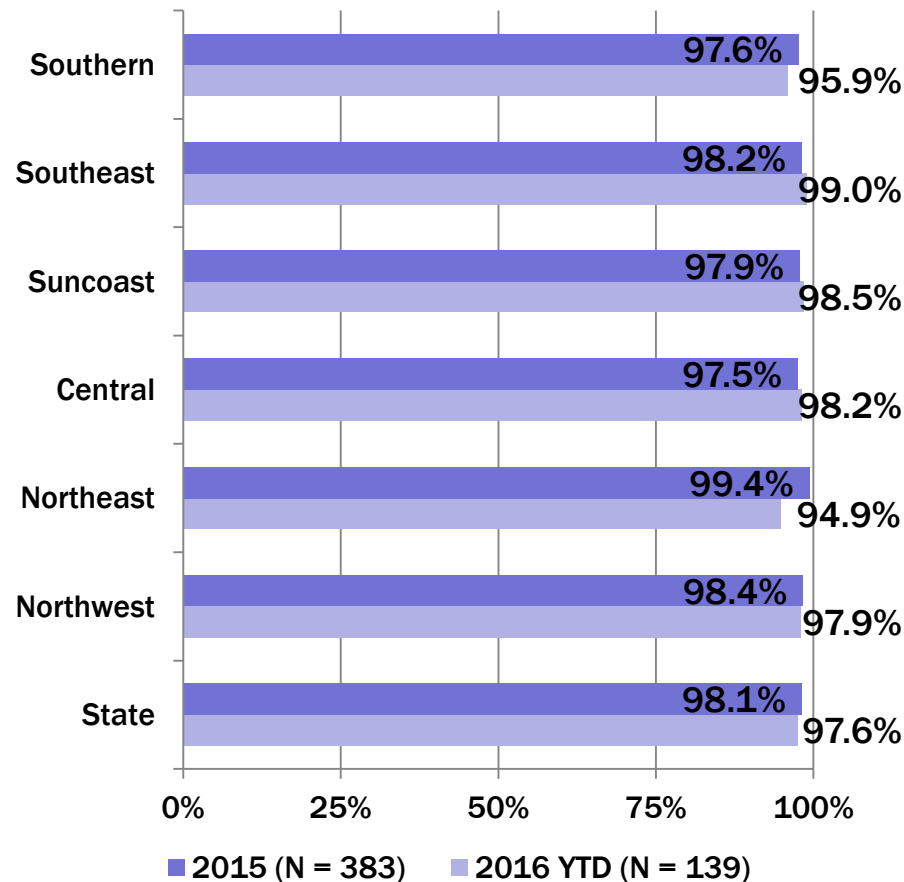


Individual Interview Results: 2015 v. 2016 YTD

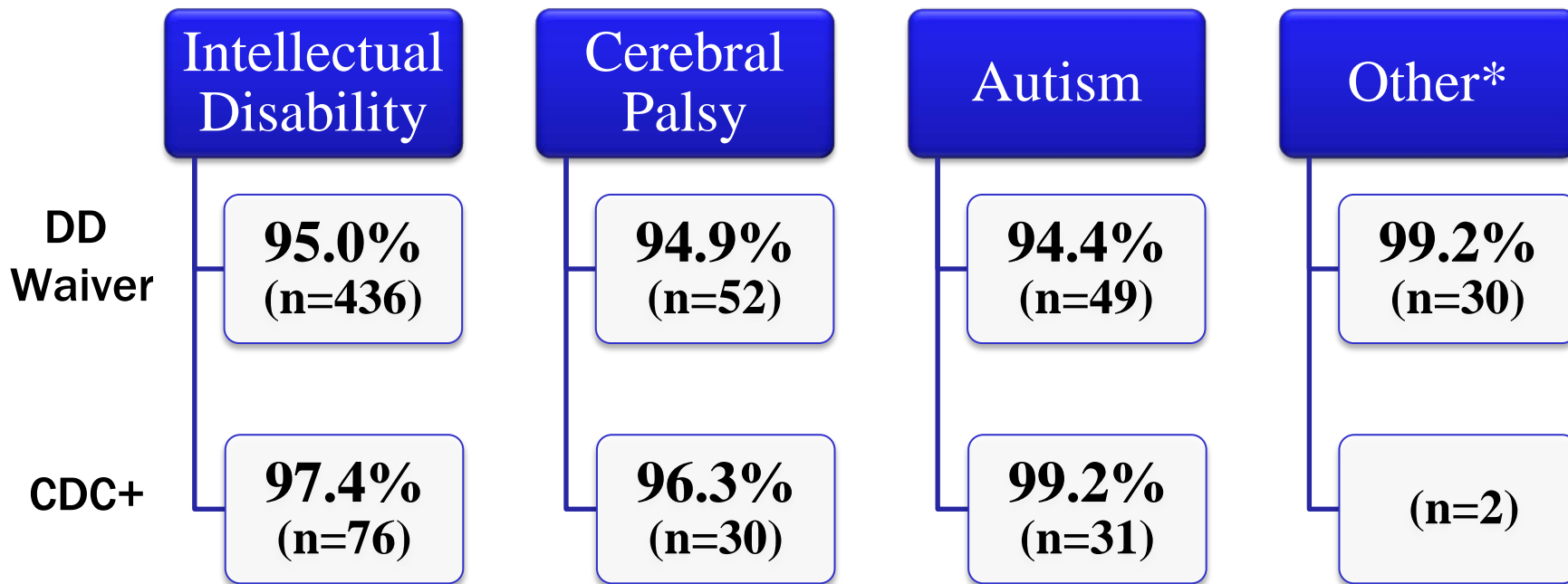
Waiver Participants



CDC+ Participants



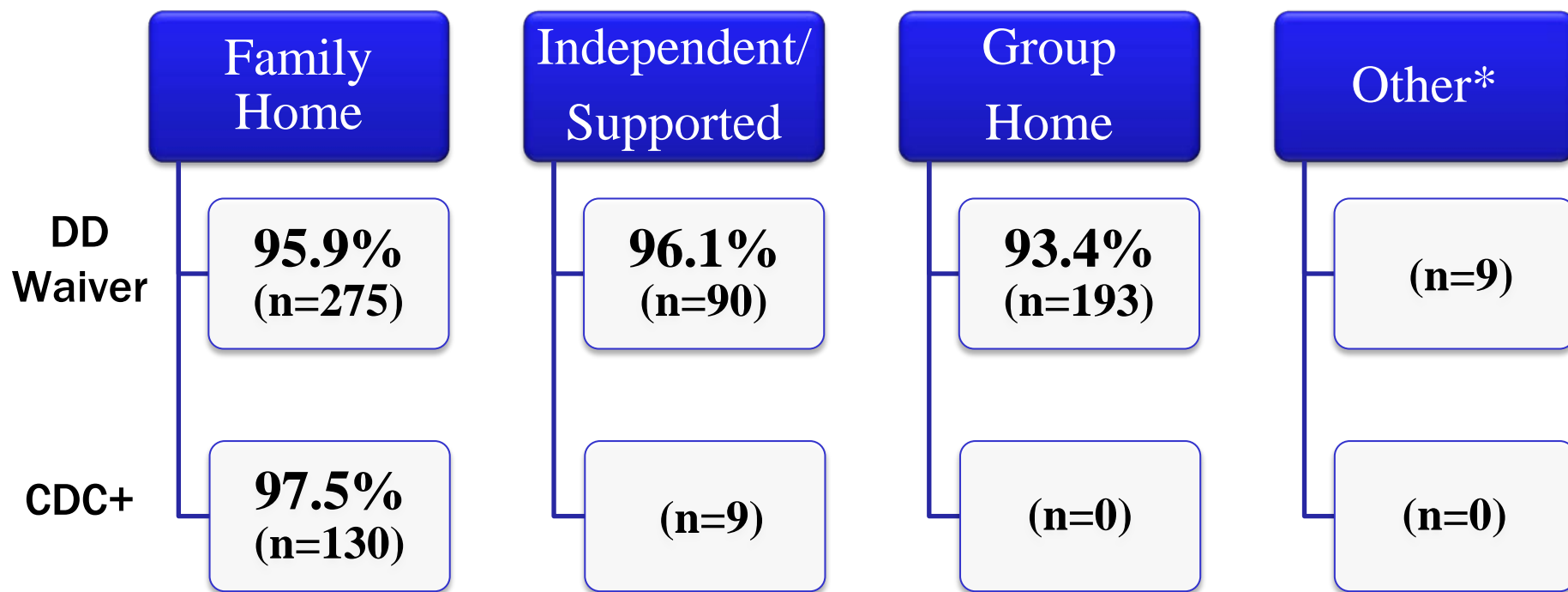
Individual Interview Results by Primary Disability January – May 2016



*DD Waiver Other: 8 Spina Bifida; 22 other.

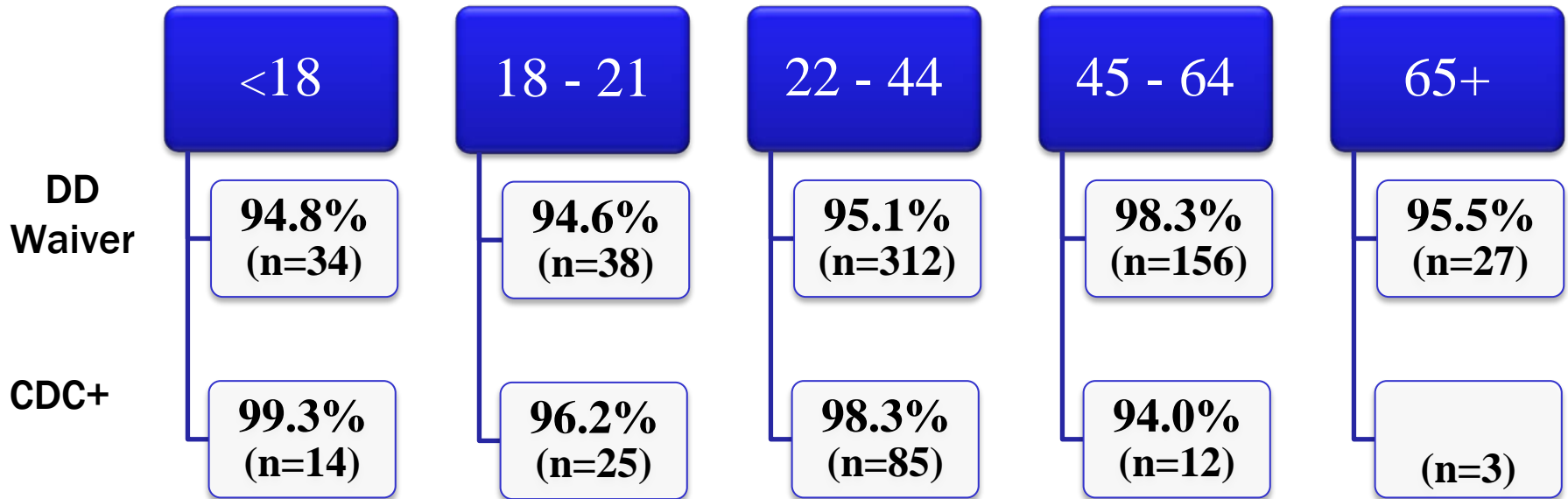
*CDC+ Other: 2 other

PCR Individual Interview Results by Residential Setting January – May 2016



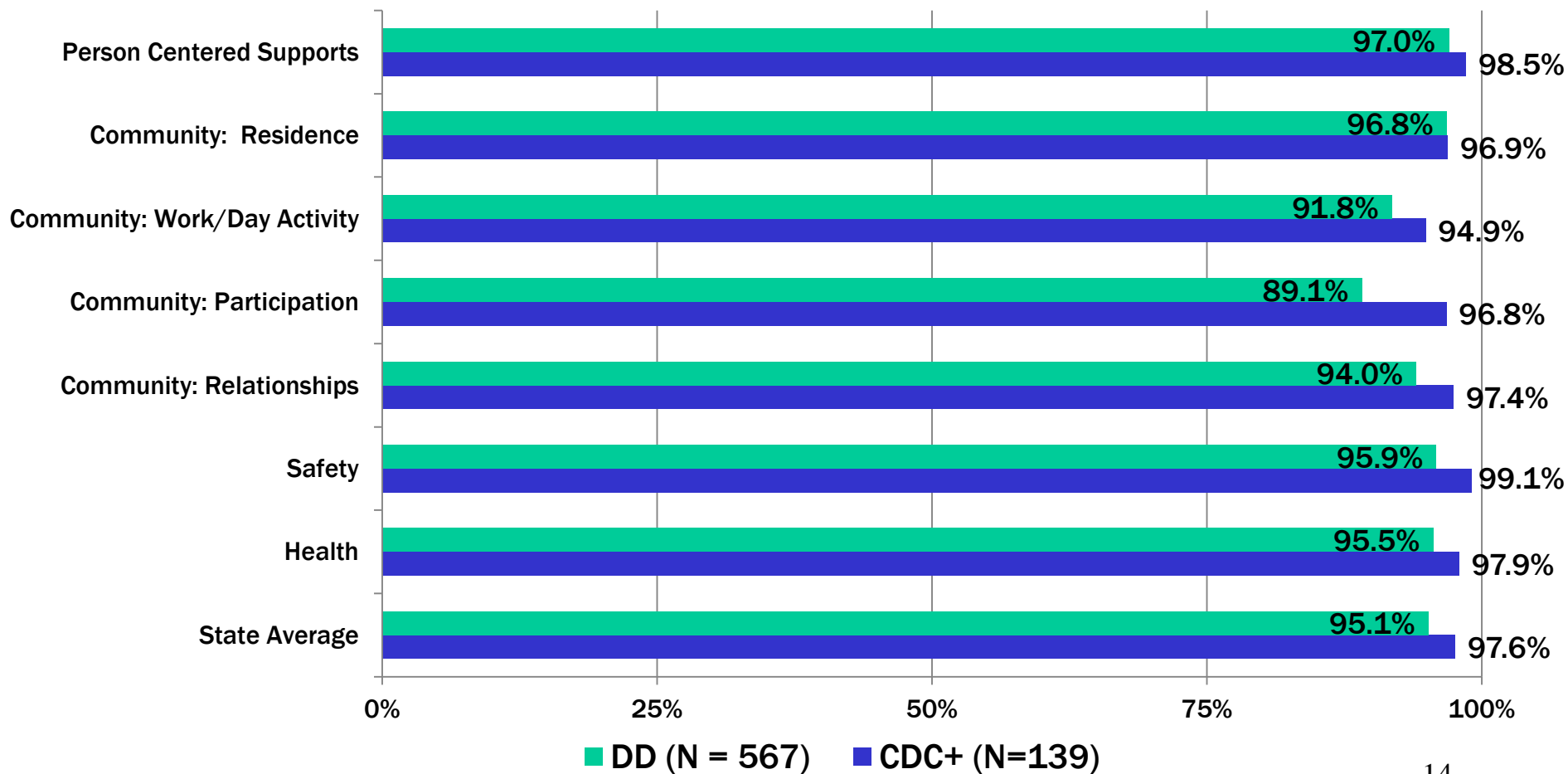
*Other: 7 ALF; 2 Foster Home

Individual Interview Results by Age Group January – May 2016





Individual Interview Results by Focus Outcome Area January - May 2016

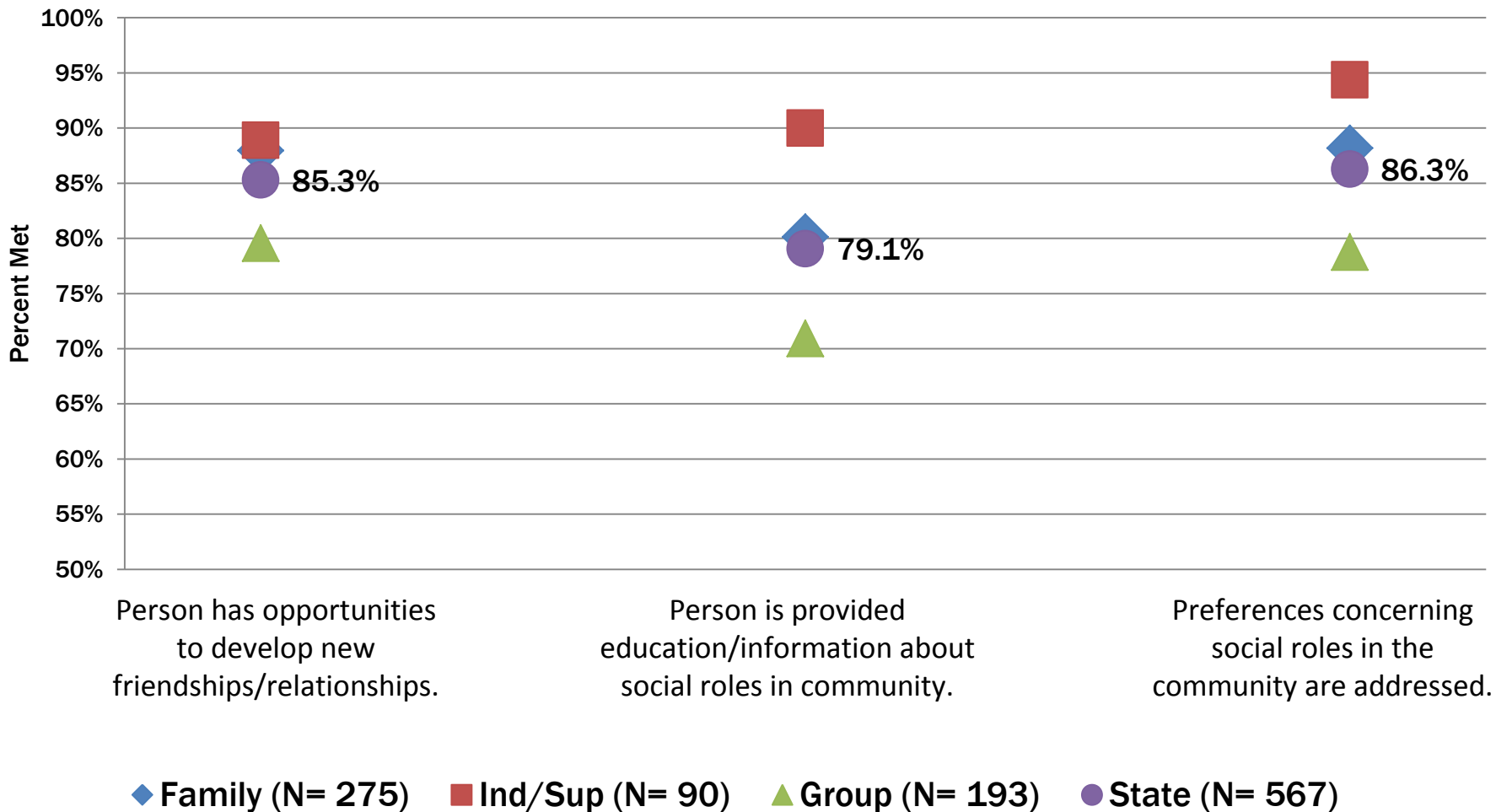




Lowest Scoring Indicators: Individual Interview

- Waiver Participants:
 1. **Person is provided education/information about social roles in the community. (79.1%)**
 2. **Person has opportunities to develop new friendships/relationships. (85.3%)**
 3. **Person's preferences concerning social roles in the community are addressed. (86.3%)**
- CDC+ Participants
 1. **Person has opportunities to develop new friendships/relationships. (87.6%)**
 2. **Person indicates adaptive equipment is in good working condition. (88.6%)**

DD Waiver: Lowest Scoring Standards by Home Type





Person Centered Review (PCR)

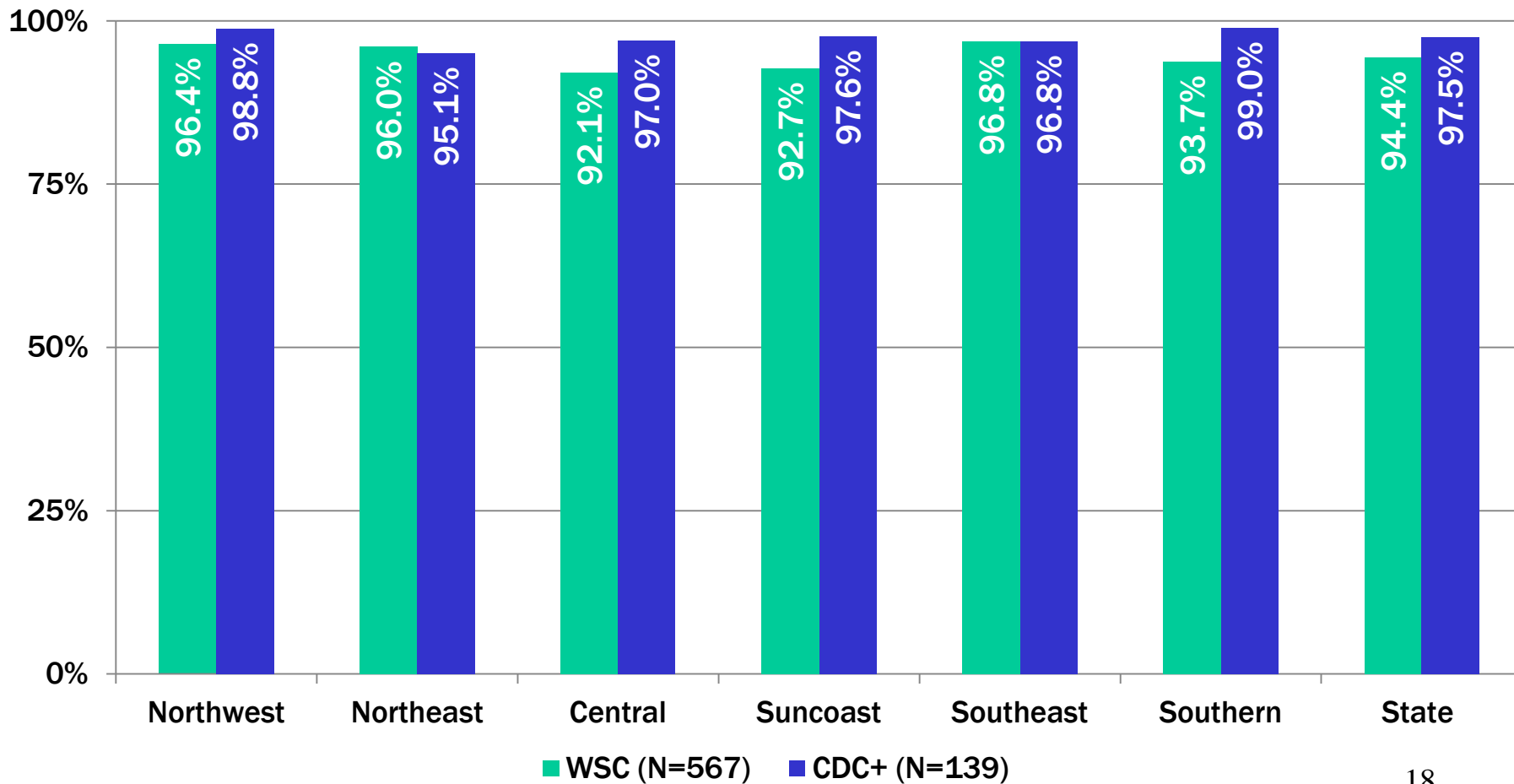
Waiver Support Coordinator/CDC+ Consultant

Record Review and Interview



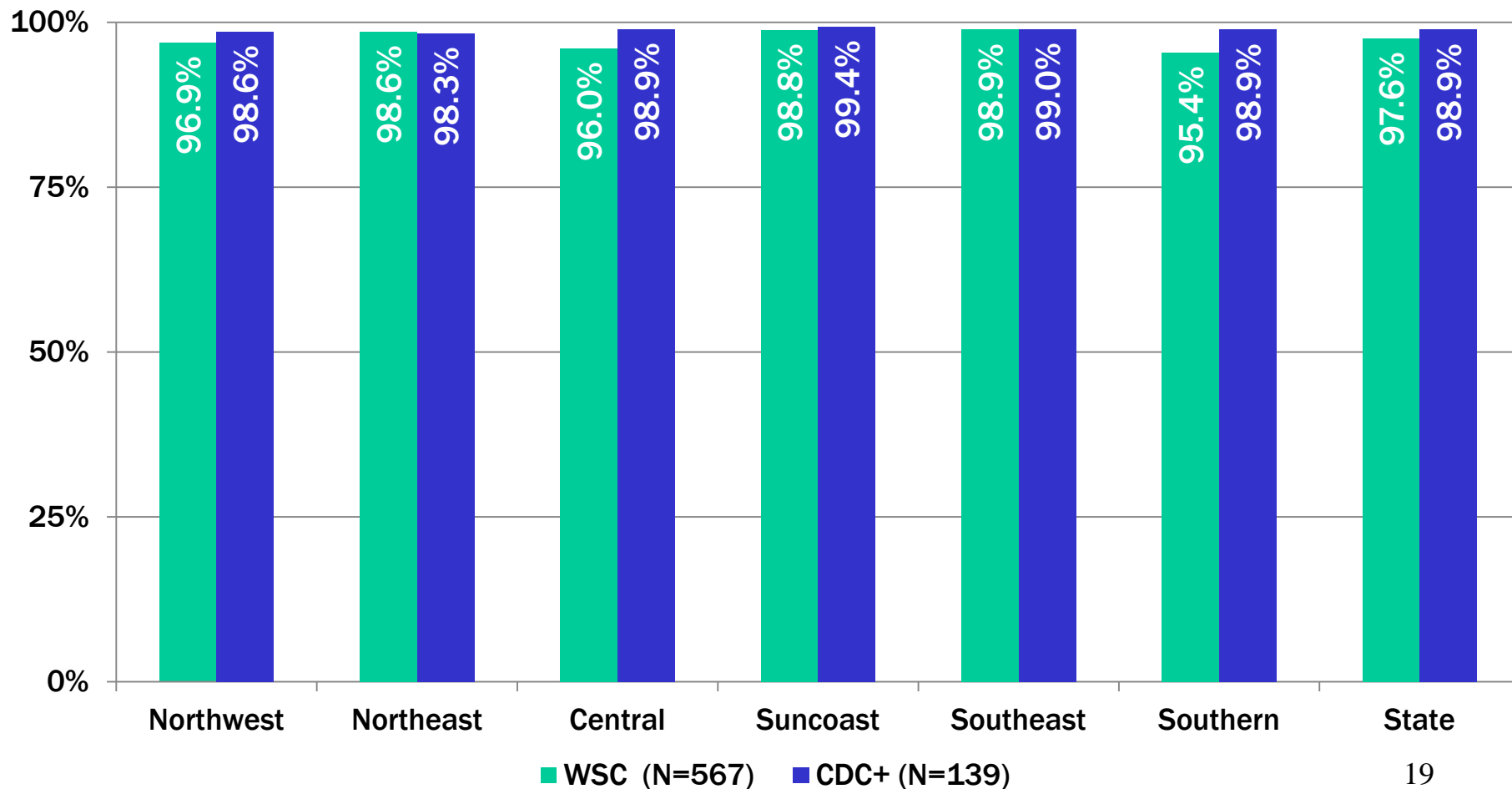


WSC and CDC+ Consultant Record Review January - May 2016





WSC and CDC+ Consultant Interview Results January - May 2016





Lowest Scoring Indicators and Top 3 Reasons Not Met: WSC Record Review

- **The Support Coordination Progress Notes demonstrate pre-Support Plan planning activities were conducted (eff. 3/1/2016) (84.5%)**
 - WSC documentation did not demonstrate pre-support planning activities took place.(34 x)
 - WSC documentation demonstrated pre-support plan activities took place but did not document review of status of current goals/outcomes and discussions of potential changes/updates to goals/outcomes for the next year. (8x)
 - WSC documentation did not demonstrate efforts to support the person to make informed choices among waiver service providers. (8x)



Lowest Scoring Indicators and Top 3 Reasons Not Met: WSC Record Review

- **The current Annual Report is in the record. (86.3%)**
 - The Annual Summary did not include a description of progress toward meeting individually determined goals. (46x)
 - The Annual Summary did not include a report of the supports and services received throughout the year. (12x)



Lowest Scoring Indicators and Top 3 Reasons Not Met: WSC Record Review

- **WSC documentation demonstrates a copy of the Support Plan is provided to all service providers within 30 calendar days of the Support Plan effective date. (89.2%)**
 - WSC documentation did not demonstrate a copy of the Support Plan was distributed to the service providers within 30 days of effective date. (25x)
 - WSC documentation demonstrated a copy of the Support Plan was distributed to some but not all service providers within 30 days of the effective date. (19x)
 - WSC documentation did not demonstrate a copy of the Support Plan was distributed to the person or when applicable the legal representative within 10 days of the effective date. (11x)



Lowest Scoring Indicators and Top 3 Reasons Not Met: WSC Record Review

- **The Support Coordinator documents efforts to assist the person to define abuse, neglect, and exploitation including how the person would report any incidents on an ongoing basis. (89.4%)**
 - WSC documentation did not demonstrate how the person would report incidents of abuse, neglect, and exploitation. (44x)
 - WSC documentation did not demonstrate personalized efforts to assist the person to define abuse, neglect, and/or exploitation. (40x)
 - WSC documentation did not demonstrate a method to document information about the person's history regarding abuse, neglect, and/or exploitation on an ongoing basis. (18x)



Lowest Scoring Indicators and Top 3 Reasons Not Met: WSC Record Review

- **The Support Coordinator documents efforts to ensure services are delivered in accordance with the service plan, including type, scope, amount, duration, and frequency specified in the Cost Plan. (89.7%)**
 - WSC documentation did not demonstrate review of the person's service provider documentation. (38x)
 - WSC documentation demonstrated review of some but not all services. (6x)
 - Support Coordinator billed for services prior to rendering services on one or more dates during the period under review. (5x)



Lowest Scoring Indicators and Top 3 Reasons Not Met: CDC+ Consultant Record Review

- **The Consultant documents efforts to assist the person to define abuse, neglect, and exploitation including how the person would report any incidents on an ongoing basis. (89.2%)**
 - Consultant documentation did not demonstrate personalized efforts to assist the person to define abuse, neglect, and/or exploitation. (8x)
 - Consultant documentation did not demonstrate how the person would report incidents of abuse, neglect, and exploitation. (7x)
 - Consultant documentation did not demonstrate personalized efforts to provide education to the person in the area of abuse, neglect, and exploitation. (4x)



Lowest Scoring Indicators: WSC Interview

- Support Coordinator provides education/information to the person about social roles in the community. **(84.3%)**
- Support Coordinator addresses the person's preferences concerning social roles in the community. **(89.8%)**

Health Summary

- Health related events occurring in the last 12 months.
- Medication Use





Key Health Questions: Percent Yes

	Waiver		CDC+	
	2015 (N= 1355)	2016 YTD (N= 567)	2015 (N= 385)	2016 YTD (N = 139)
In the past 12 months:				
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	2.8%	3.0%	0.3%	0.7%
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	2.4%	3.2%	0.5%	0%
Have you been admitted to the hospital(including baker acts)?	15.8%	12.0%	10.9%	18.7%
Have you been to an Emergency Room?	21.4%	19.5%	15.3%	25.9%



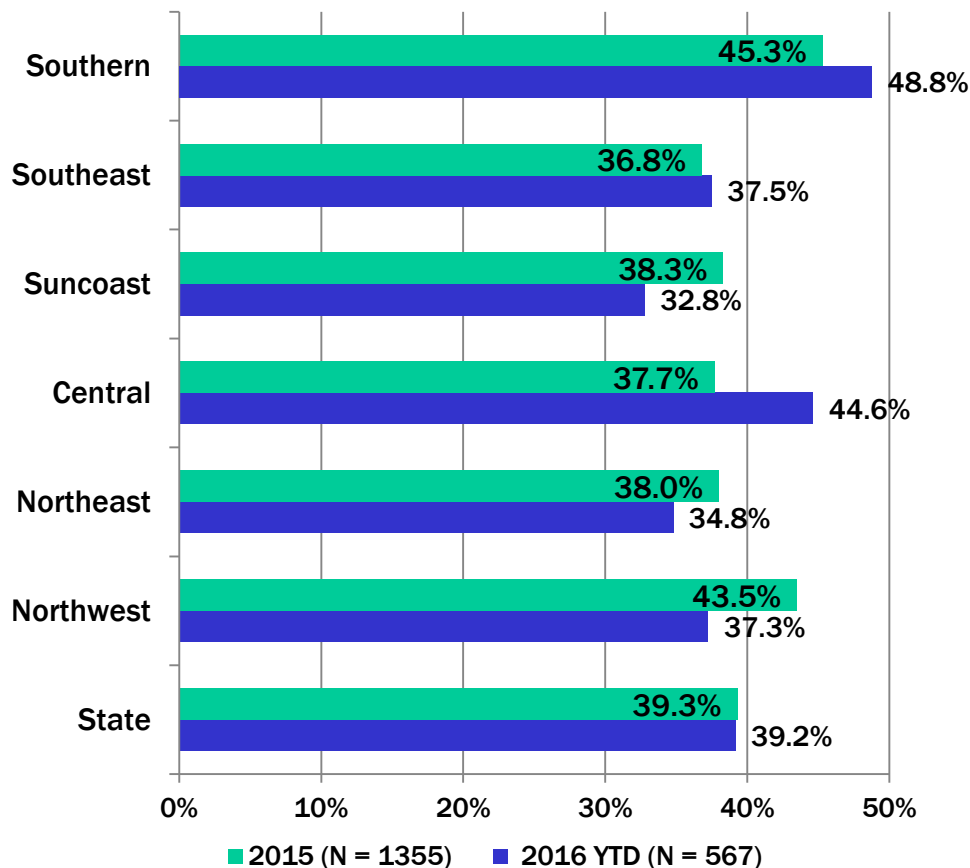
Key Health Questions by Home Type: DD Waiver

In the past 12 months:	Family (n =275)	Ind/Sup (n= 90)	Group (n=193)	Other (n=9)	Total (N=567)
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	2	5	10	0	17
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	1	0	17	0	18
Have you been admitted to the hospital (including baker acts)?	36	6	25	1	68
Have you been to an Emergency Room?	51	19	39	1	110

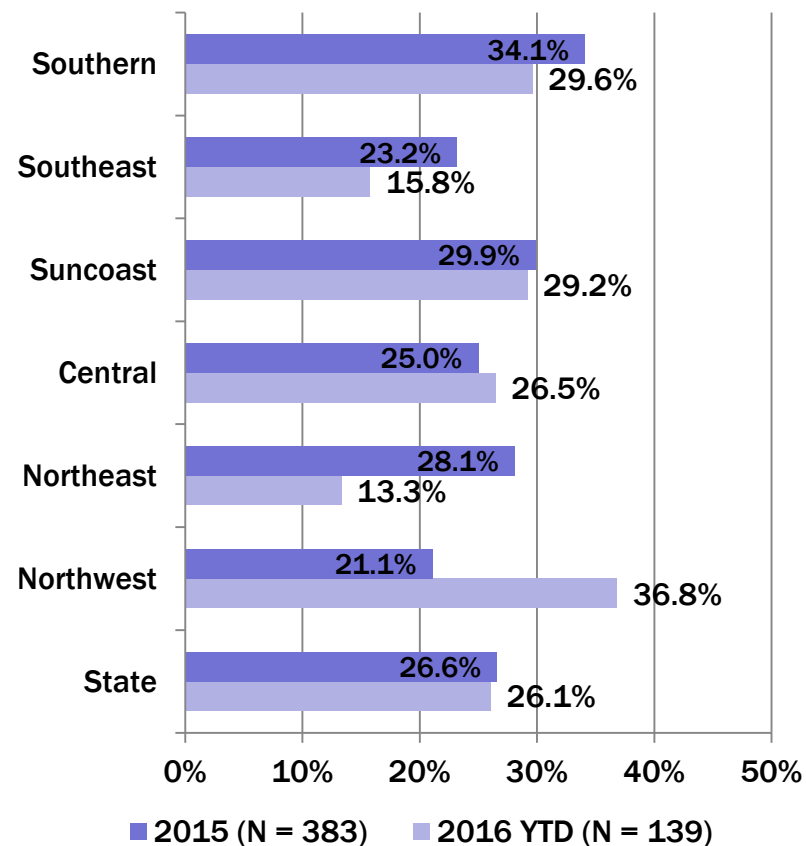


4 or More Prescription (Rx) Medications: 2015 v. 2016 YTD

Waiver Participants

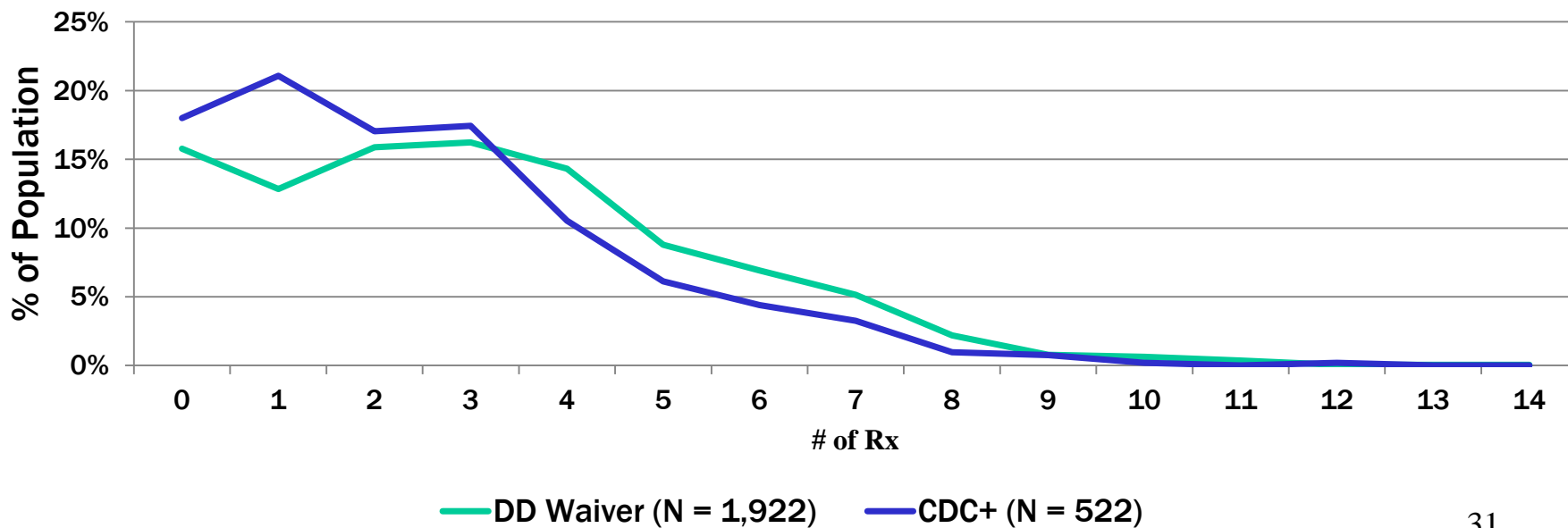


CDC+ Participants



Digging a little Deeper....

- **Mean # of Rx Medications: January 2015 – May 2016**
 - Waiver: 3.09
 - CDC+: 2.48
 - Difference in means is statistically significant ($p < .001$)



4 + Rx Medications: Waiver Participants January 2015 – May 2016

- 39.3% of individuals are taking 4 or more Rx medications.
- Home Type:**

	Family (n=928)	Ind/Sup (n=340)	Group (n=616)	Other (n=38)	Total (n=1,922)
4+ Rx	24.9%	36.8%	61.0%	60.5%	39.3%

- Age Category:**

	<18 (n=152)	18-21 (n=126)	22-44 (n=995)	45-64 (n=557)	65+ (n=92)	Total (n=1,922)
4+ Rx	27.6%	40.5%	34.4%	48.1%	56.5%	39.3%



4 + RX Medications: CDC+ Participants January 2015 – May 2016

- 26.4% of individuals are taking 4 or more Rx medications.
- **Home Type:**

	Family (n=482)	Ind/Sup (n=40)	Total (n=522)
4+ Rx	25.9%	32.5%	39.3%

- **Age Category:**

	<18 (n=60)	18-21 (n=72)	22-44 (n=329)	45-64 (n=53)	65+ (n=8)	Total (n=522)
4+ Rx	31.7%	29.2%	22.2%	41.5%	-	26.4%



Provider Discovery Review (PDR)

- Results for Service Providers
- Results for Support Coordinators
- CDC+ Representative Record Reviews
- Lowest Scoring PDR Standards





Service Provider Reviews by Region January – May 2016

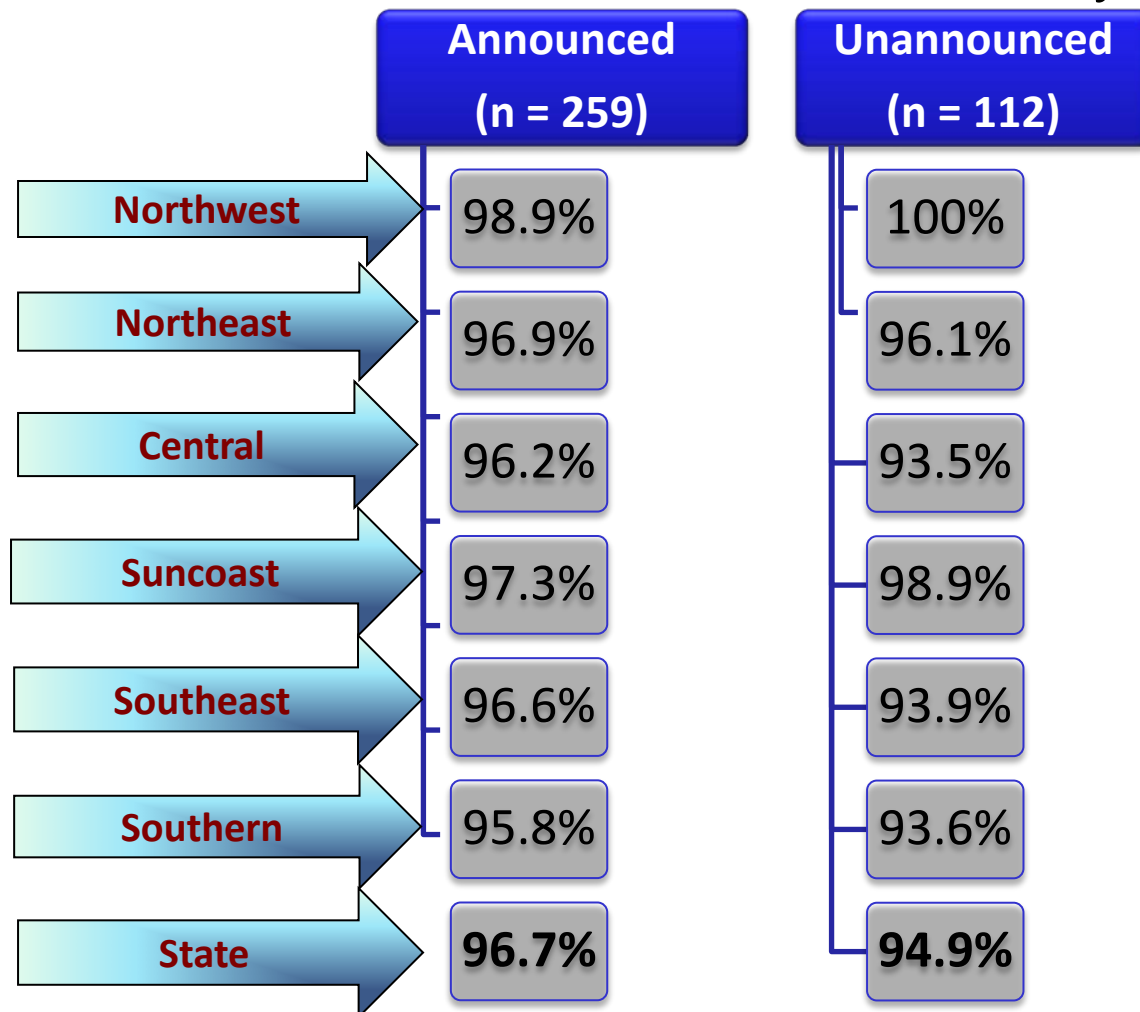
Region	PDRs	PII	Staff Interview	P&P	Q&T	Observations (N=371)	
						A	Un-A
Northwest	17	34	30	17	17	11	1
Northeast	119	184	166	119	119	39	25
Central	88	141	148	88	88	75	16
Suncoast	96	146	140	96	96	53	11
Southeast	107	154	155	107	107	53	25
Southern	81	142	143	81	81	23	34
State	508	801	782	508	508	259	112



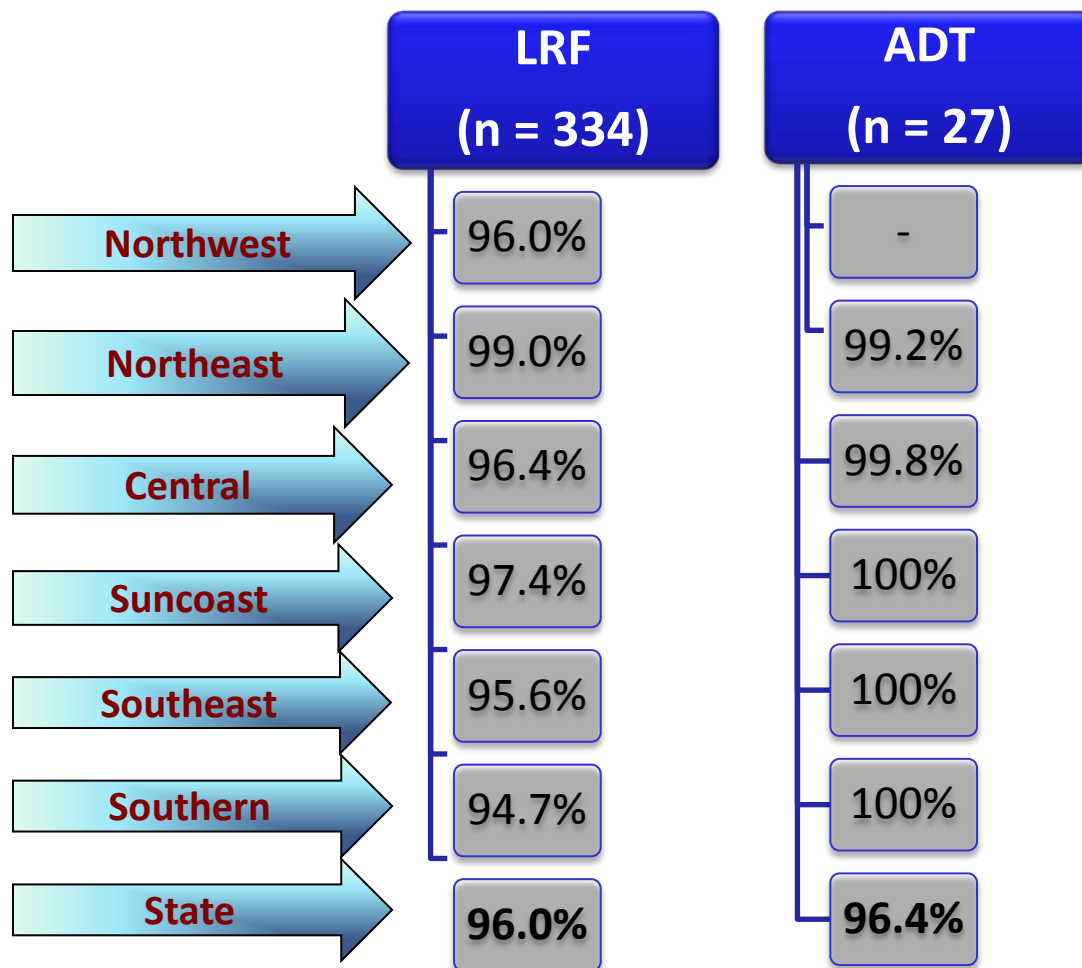
PDR Component Scores by Region Service Providers: January – May 2016

	PII	SI	P&P	Q&T	SSRR
Northwest	98.4%	99.2%	93.2%	98.1%	93.0%
Northeast	97.7%	97.8%	93.5%	96.5%	91.3%
Central	96.5%	96.9%	91.6%	95.9%	94.0%
Suncoast	97.6%	98.3%	93.0%	96.6%	93.8%
Southeast	95.0%	95.0%	94.1%	96.0%	92.1%
Southern	95.5%	96.3%	91.0%	94.7%	93.8%
State	96.6%	97.0%	92.8%	96.0%	92.9%

PDR Observation Scores by Region Announced v. Unannounced: January – May 2016



PDR Observation Scores: LRF v. ADT January – May 2016





SSRR Scores by Service January – May 2016

Service	N	Percent Met
Behavior Analysis	59	97.7%
Behavior Assistant	17	95.7%
Life Skills Development 1 (Companion)	245	92.9%
Life Skills Development 2 (SEC)	51	94.7%
Life Skills Development 3 (ADT)	86	95.5%
Personal Supports	506	91.9%
Residential Habilitation Behavior Focus	58	94.8%
Residential Habilitation Intensive Behavioral	4	-
Residential Habilitation Standard	374	92.6%
Respite	146	92.1%
Supported Living Coaching	149	92.3%
Average SSRR	1,695	92.9%



Number of PDRs by Region and Component Support Coordinators: January – May 2016

Region	P&P	Q&T	Record Reviews	
			A	UA
Northwest	13	13	51	35
Northeast	39	39	81	50
Central	48	48	85	59
Suncoast	42	42	120	68
Southeast	48	48	105	58
Southern	34	34	80	52
State	224	224	522	322



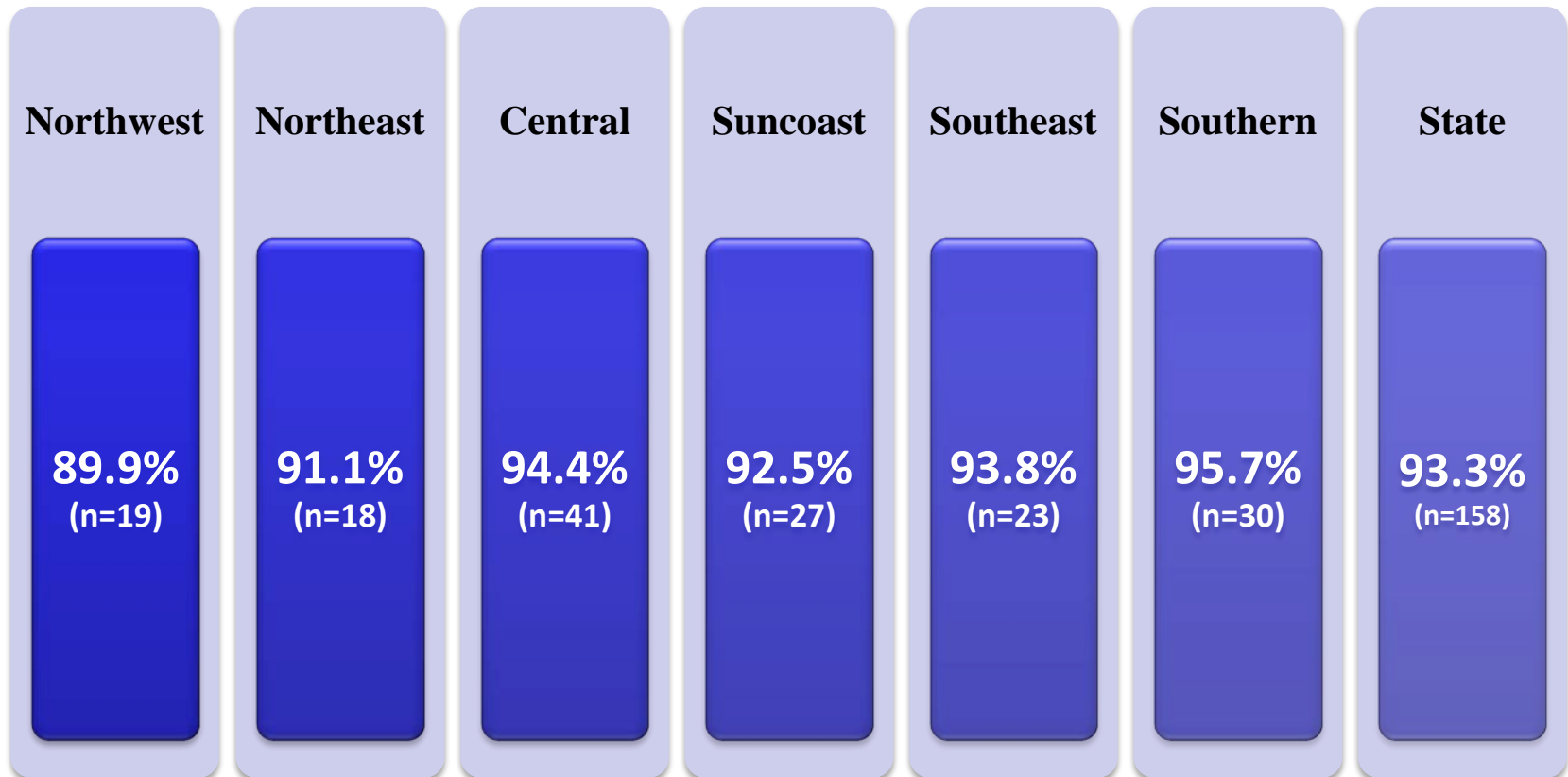
PDR Component Scores by Region

WSCs: January – May 2016

	P & P	Q & T	Announced	Unannounced
Northwest	100%	97.7%	96.4%	95.8%
Northeast	96.5%	96.5%	95.0%	93.3%
Central	97.7%	95.8%	93.2%	92.3%
Suncoast	96.9%	96.0%	93.0%	89.9%
Southeast	100%	97.8%	97.1%	97.2%
Southern	97%	97.7%	93.7%	92.0%
State	97.9%	96.8%	94.6%	93.2%



CDC+ Representative Results by Region January – May 2016





Lowest Scoring PDR Standards

- **Staff Interview**
 - Person is not provided information about social roles in the community. **(82.6%)**

- **PDR Individual Interview**
 - Provider does not provide person with information about potential social roles in the community. **(82.5%)**



Lowest Scoring PDR Standards (cont.)

■ Policy & Procedures

- The provider maintains written policies and procedures detailing:
 - the methods for management and accounting of any personal funds, of all individuals in the care of, or receiving services from, the provider. **(75.5%)**
 - hours and days of operation and the notification process to be used if the provider is unable to provide services for a specific time and day scheduled. **(83.1%)**
 - how the provider will ensure compliance with background screening and five-year rescreening. **(83.4%)**



Lowest Scoring PDR Standards (cont.)

Qualifications and Training:

- The provider completes eight hours of annual in-service training. **(79.5%)** (exp. 4/30/16)

Service	N	# Met	# Not Met	% Met
Respite	10	6	3	66.7%
Supported Living Coach	22	17	5	77.7%
LSD 1	13	9	3	75.0%
Personal Supports	33	24	6	80.0%

- The Supported Living Coach provider completes eight hours of annual in-service training. **(82.9%)** (eff. 5/1/16)
- The provider meets all minimum educational requirements and levels of experience for Behavior Assistant. **(83.3%)** (eff. 5/1/216)

Lowest Scoring PDR Standards (cont.)

- **Observations - LRF (n=344)**
 - Individuals do not have a key to their home. **(56.6%)**
 - Individuals cannot lock the bedroom door. **(79.5%)**
 - Bedroom doors do not lock. **(79.5%)**
 - Individuals did not participate in the development of the 'house rules'. **(80.9%)**
 - Training in the use of public transportation is not available and/or facilitated. **(83.6%)**



Lowest Scoring PDR Standards (cont.)

- **CDC+ Representative**
 - Background screening results for all providers who render direct care are available for review **(83.4%)**.



Service Provider Alerts: January – May 2016



5 Alerts



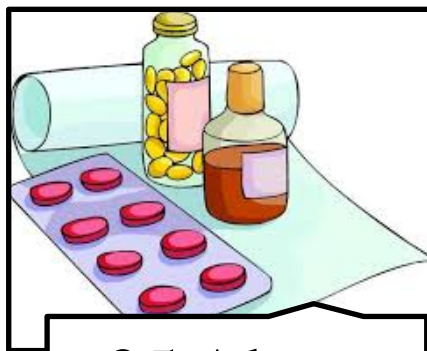
16 Alerts



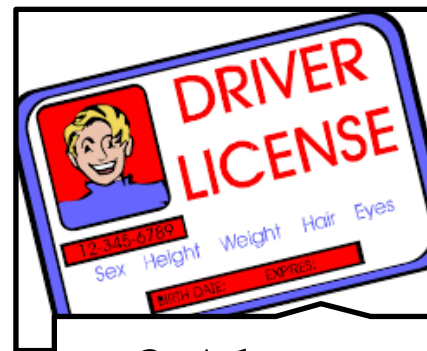
1 Alert



48 Alerts



25 Alerts



3 Alerts



Alerts Identified by Region January – May 2016

Region	Total # of PDRs	Total # of Alerts	% of PDRs with an Alert	Rights	Health & Safety	Abuse, Neglect, & Exploitation	Background Alerts	Medication Admin.	Driver's License & Insurance
Northwest	141	1	0.7%	0	1	0	0	0	0
Northeast	262	12	4.6%	0	0	1	7	3	1
Central	197	17	8.6%	0	0	0	8	9	0
Suncoast	284	21	7.4%	1	5	0	11	3	1
Southeast	229	24	10.5%	2	6	0	11	4	1
Southern	175	23	13.1%	2	4	0	11	6	0
State	1,288	98	7.6%	5	16	1	48	25	3



“...an individual stated that she’d been slapped by another resident while on the bus headed home Individual stated that she did inform staff of the incident. Agency owner stated that she did not file an APD incident report, as the incident did not meet handbook criteria to file one. She further stated that she did not call the incident in to the Abuse Registry. Reviewer contacted the Florida Abuse Hotline regarding alleged abuse. Report was not accepted. Upon further discussion with the agency owner, it was discovered that there is an internal system for documenting these type situations, as the home has a communication book. Agency owner provided the book to the Reviewer. There was no entry documenting the incident..”



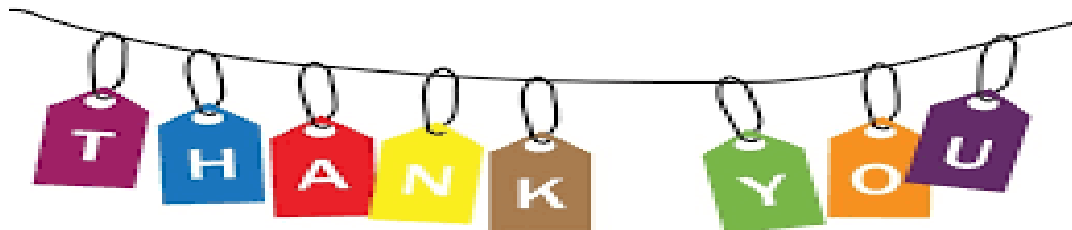
“There was an attendance log on the poster board in the common area of the dining room / kitchen that contained individuals names / Medicaid numbers / Social Security numbers



“During an interview at the ___ residence, an individual reported he is bathed in the backyard of the residence. ...He reported he is bathed outside due to his wheelchair being unable to get into the bathroom Abuse was contacted twice and did not take the call indicating there was no harm since he seems okay with this situation...”



“Person residing in foster home sleeps on a netted enclosure. The provider zips this net closed in order to enclose the person while she sleeps. Provider did not present documentation to justify this practice. A call was made to the abuse hotline and the call was accepted by...”



Questions???