

Delmarva Foundation Florida

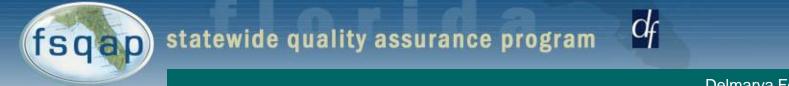
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Quality Council Meeting November 2016









Overview:





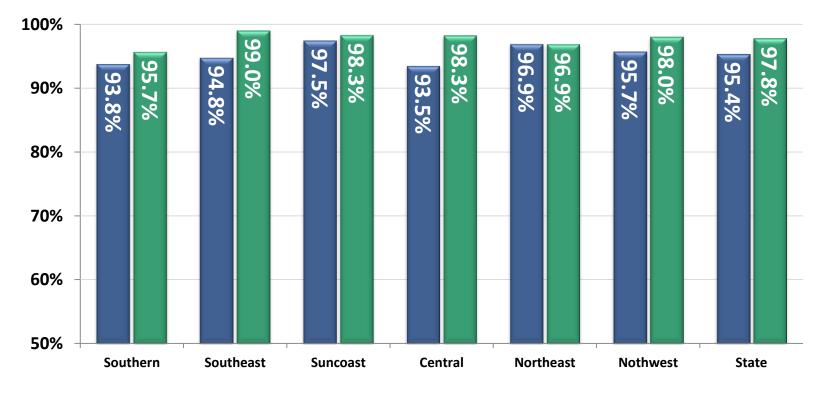
Person Centered Review (PCR) Individual Interview (II) Results





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II Results by Region and Waiver January - August 2016

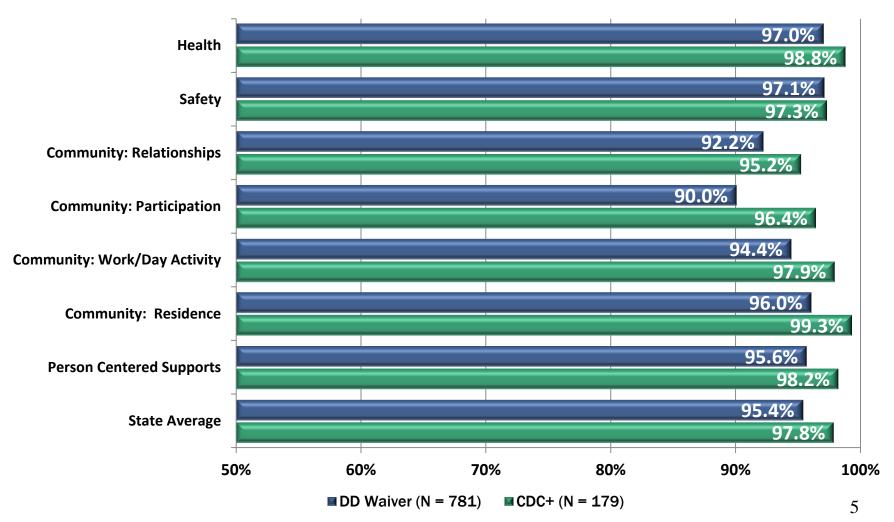


■ DD Waiver (N = 781)

■ CDC+ (N =179)



II Results by Standard: January - August 2016





Lowest Scoring Indicators: Individual Interview

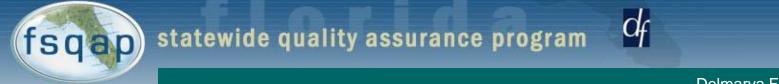
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Waiver Participants:

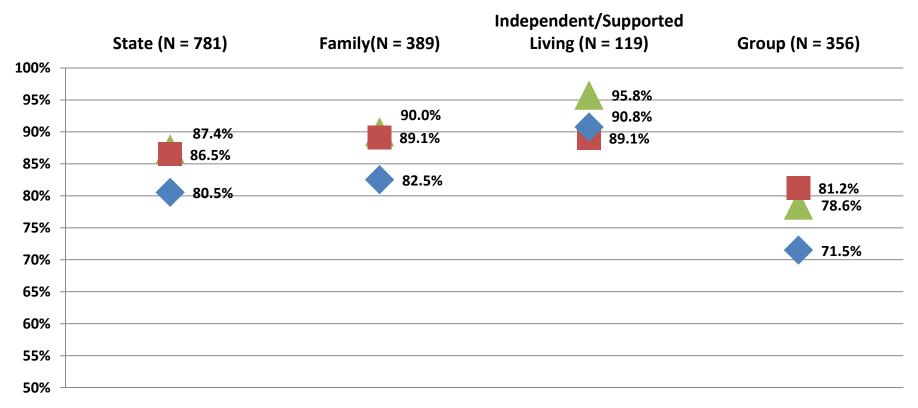
- 1. Person is provided education/information about social roles in the community. **(80.5%)**
- Person has opportunities to develop new friendships/relationships. (86.5%)
- 3. Person's preferences concerning social roles in the community are addressed. **(87.4%)**

CDC+ Participants

 Person has opportunities to develop new friendships/relationships. (87.4%)



DD Waiver: Lowest Scoring Standards by Home Type



A Person's preferences concerning social roles in the community are addressed.

Person has had opportunities to develop new friendships/relationships.

Person is provided education/information about social roles in the community.

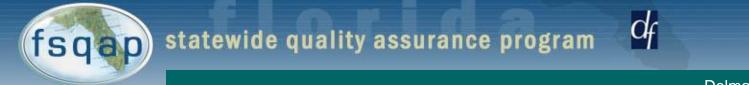


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Lowest Scoring II Standards: Group Homes by Region

Indicator	State (N = 256)	Northwest (N = 9)	Northeast (N = 36)	Central (N = 67)	Suncoast (N 47)	Southeast (N 57)	Southern (N = 40)
Person has had opportunities to develop new friendships /relationships.	81.2%	77.8%	81.8%	75.4%	89.1%	86.0%	75.0%
Person's preferences concerning social roles in the community are addressed.	78.6%	75.0%	90.6%	76.7%	88.4%	78.6%	61.5%
Person is provided education/information about social roles in the community.	71.5%	77.8%	78.8%	57.8%	83.3%	81.5%	60.0%





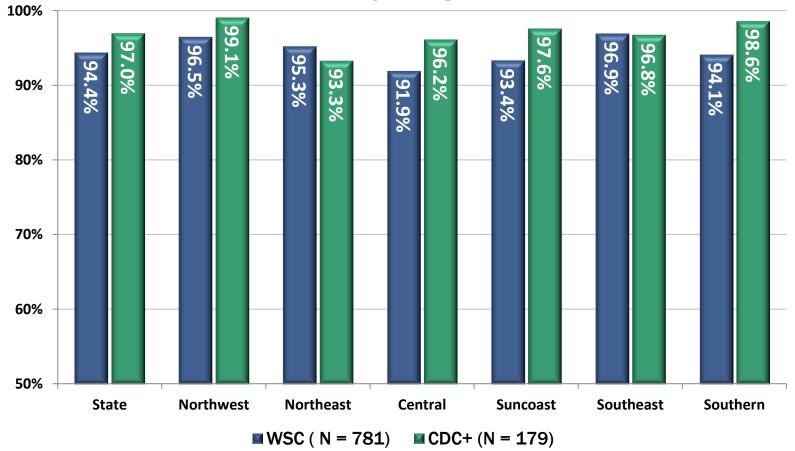
Person Centered Review (PCR)

Waiver Support Coordinator/CDC+ Consultant Record Review and Interview





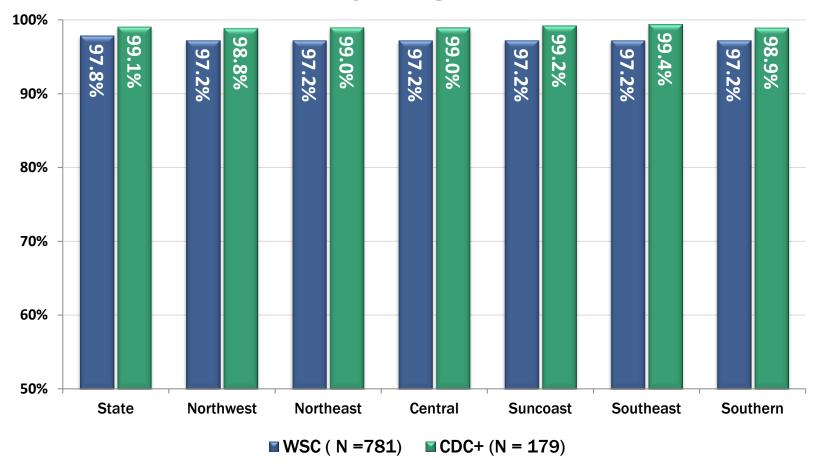
WSC/CDC+ Consultant Record Reviews by Region January - August 2016





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WSC/CDC+ Interview by Region January – August 2016





WSC Record Review Scores: <90% Met

- The Support Coordination Progress Notes demonstrate pre-Support Plan planning activities were conducted. (85.0%)
- The current Annual Report is in the record. (86.2%)
- 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. (88.2%)
- 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.(89.0%)



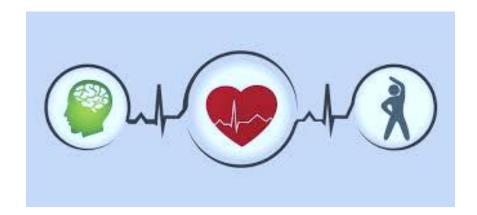
CDC+ Consultant Record Review Scores: <90% Met

 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. (89.4%)



Health Summary

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





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Key Health Questions: Percent Yes

	2013		2014		2015		2016 YTD	
In the past 12 months:	Waiver (1,300)	CDC (304)	Waiver (1,047)	CDC (270)	Waiver (1,355)	CDC+ (385)	Waiver (781)	CDC+ (179)
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	2.9%	1.6%	2.6%	0.7%	2.8%	0.3%	2.8%	0.6%
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	4.1%	1.3%	2.8%	1.5%	2.4%	0.5%	2.8%	0.6%
Have you been admitted to the hospital (2015 added, including baker acts)	13.6%	13.8%	12.9%	14.8%	15.8%	10.9%	12.4%	19.0%
Have you been Baker Acted?	3.1%	1.0%	3.2%	2.2%	-	-	-	-
Have you been to an Emergency Room ?	24.0%	21.4%	22.3%	21.5%	21.4%	15.3%	19.3%	26.3%
Have you been to an Urgent Care Center?	5.2%	2.6%	3.9%	5.2%	4.2%	3.4%	3.5%	6.1%



Key Health Questions by Home Type: DD Waiver

In the past 12 months:	Family (n =336)	Ind/Sup (n= 119)	Group (n=256)	Total (N=781)
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	n=4	5.0%	3.9%	2.8%
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	n=2	n=0	7.0%	2.6%
Have you been admitted to the hospital (including baker acts)?	14.3%	8.4%	14.5%	12.4%
Have you been to an Emergency Room?	19.9%	22.7%	21.5%	19.3%
Have you been to an Emergency Room? Have you been to Urgent Care?	19.9% 3.0%	22.7% 5.9%	21.5% 3.9%	19.3% 3.5%



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Rx Medications: January – August 2016

	D	D	CDC+		
# of Rx	N	%	N	%	
0	121	15.5%	33	18.4%	
1-3	367	47.0%	100	55.9%	
4-6	229	29.3%	39	21.8%	
7+	64	8.2%	7	3.9%	
Total	781	100.0%	179	100.0%	

Home Type:

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	Family (n =336)	Ind/Sup (n= 119)	Group (n=256)	Other (n=17)	Total (N=781)
4+ Rx	26.5%	32.8%	60.9%	52.9%	37.5%



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Top 5 Medications taken by Waiver Type: January– August 2016

	DD Waiver (N = 781)				CDC+ (N = 179)	
Medication Name (Type)	N	%	Medication Na	me (Type)	N	%
1. Risperdal (Antipsychotic)	119	15.2%	1. Depakote (Antio	convulsant)	21	11.7%
2. Depakote (Anticonvulsant)	117	15.0%	2. Keppra (Anticor	nvulsant)	19	10.6%
3. Synthroid (Hormone)	78	10.0%	3. Risperdal (Antip	osychotic)	18	10.1%
4. Klonopin (Sedative)	75	9.6%	4. Klonopin (Sedat	tive)	17	9.5%
5. Omeprazole (Antacid)	67	8.6%	5. Catapres (Sedat	tive)	16	8.9%



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Top 5 Medications for Individuals taking 4 or more Medications by Home Type v. State Average: DD Waiver Only

Medication Name (Type)	State Average	Family Home (n = 89)	Independent/ Sup. Living (n = 39)	Group Home (n = 156)
1. Depakote (Anticonvulsant)	15.0%	25.8%	17.9%	41.7%
2. Risperdal (Antipsychotic)	15.2%	25.8%	23.1%	29.5%
3. Klonopin (Sedative)	9.6%	19.1%	2.6%	26.3%
4. Cogentin (Anti-Tremor)	8.1%	11.2%	5.1%	25.0%
5. Synthroid (Hormone)	10.0%	19.1%	15.4%	18.6%

>2x the rate of use for all individuals taking medications



Provider Discovery Review (PDR)

statewide quality assurance program

Service Provider Results

fsqap

- Support Coordinators Results
- Record Review Results
- Lowest Scoring PDR Standards
- Billing Discrepancies



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PDR Component Scores by Region for Service Providers January – August 2016

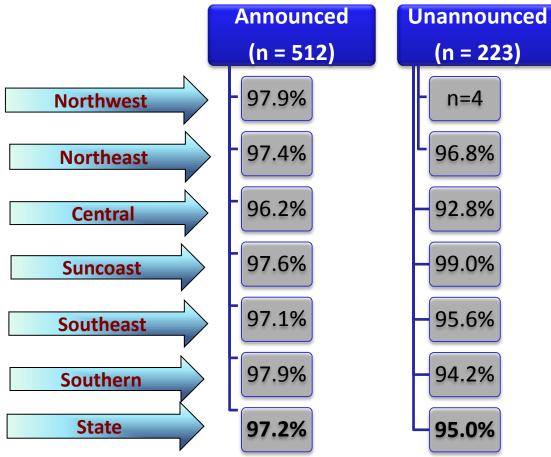
Region	Staff Interview (N=1,572)	Provider Individual Interview (N=1,612)	Policy & Procedure (N=978)	Qualifications & Training (N=2,377)	Service Record Reviews (N=3,448)
Northwest	98.6%	97.1%	92.5%	94.8%	92.8%
Northeast	98.0%	97.8%	93.6%	96.4%	91.2%
Central	96.4%	96.2%	91.1%	96.3%	92.8%
Suncoast	98.5%	97.4%	93.9%	96.4%	93.9%
Southeast	96.1%	95.7%	94.6%	95.6%	91.5%
Southern	97.3%	96.1%	93.3%	95.6%	93.3%
State	97.3%	96.7%	93.3%	96.0%	92.6%



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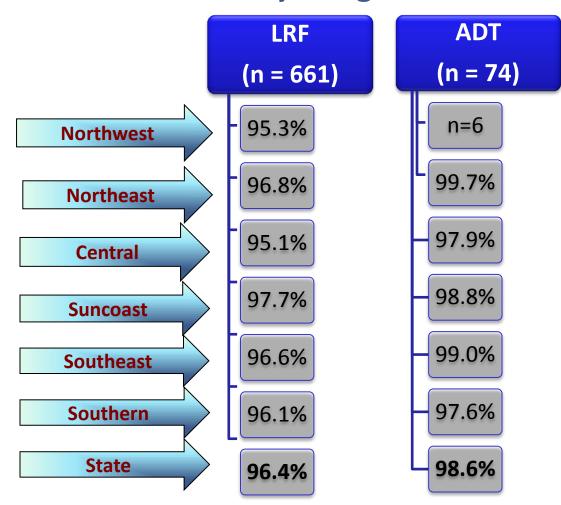
PDR Observation Scores by Region

Announced v. Unannounced: January – August 2016





PDR Observation Scores: Licensed Residential Facility (LRF) v. ADT January – August 2016



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PDR Component Scores by Region for WSCs: January – August 2016

	Policy & Qualifications &		WSC Reco	ord Reviews
Region	Procedure (N=348)	Training (N=464)	Announced (N=739)	Unannounced (N=548)
Northwest	100.0%	97.2%	96.1%	95.6%
Northeast	96.8%	95.8%	94.9%	92.2%
Central	97.7%	96.3%	93.4%	93.2%
Suncoast	97.2%	96.5%	94.1%	91.9%
Southeast	100.0%	97.6%	96.8%	96.4%
Southern	98.2%	97.8%	95.0%	94.2%
State	98.2%	96.8%	95.0%	93.8%

Note: The number of reviews for each component is in the addendum.



SSRR Scores by Service: January – August 2016

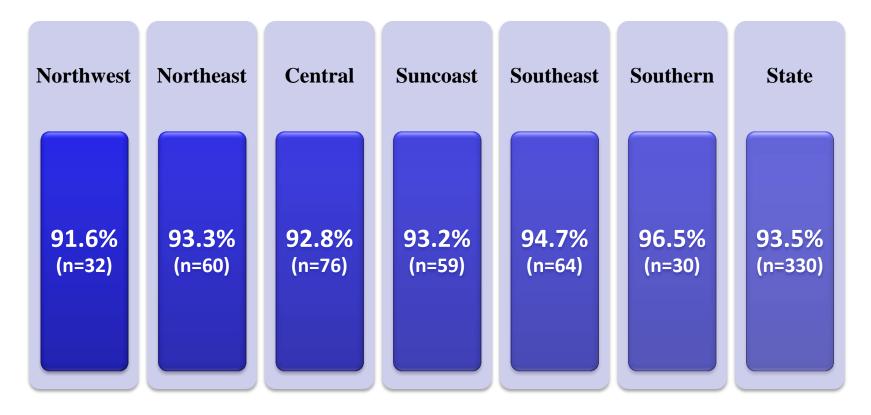
Service	N	Percent Met
Behavior Analysis	108	97.1%
Behavior Assistant	34	95.8%
Life Skills Development 1 (Companion)	494	92.5%
Life Skills Development 2 (SEC)	123	89.5%
Life Skills Development 3 (ADT)	260	93.7%
Personal Supports	1013	92.0%
Residential Habilitation Behavior Focus	123	93.9%
Residential Habilitation Intensive Behavioral	11	92.9%
Residential Habilitation Standard	697	92.6%
Respite	285	92.0%
Supported Living Coaching	300	91.9%
Average SSRR	3,448	92.6%

fsqap statewide quality assurance program

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CDC+ Representative Record Review Results by Region January – August 2016





Lowest Scoring PDR Standards

- Staff Interview
 - Person is provided information about social roles in the community. (83.5%)
- PDR Individual Interview
 - Provider provides person with information about potential social roles in the community. (83.4%)



Lowest Scoring PDR Standards (cont.)

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- Observations Licensed Residential Facilities (n=344)
 - Individuals have a key to their home. (63.4%)
 - Bedroom doors lock. (81.8%)
 - Individuals can lock the bedroom door. (81.9%)
 - Individuals participate in the development of the 'house rules'.
 (82.4%)
 - Training in the use of public transportation is available and/or facilitated. (86.5%)
 - Bathroom doors lock (88.2%)



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%)
 - how the provider will ensure compliance with background screening and five-year rescreening. (82.58)
 - 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. (85.0%)



Lowest Scoring PDR Standards (cont.)

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Qualifications and Training:

- The Life Skills Development 2 provider completes eight hours of annual in-service training related to employment. (80.6%)
- The Supported Living Coach provider completes eight hours of annual in-service training. (83.6%)
- The provider meets all minimum educational requirements and levels of experience for Behavior Assistant. (83.3%)



Service Providers with 1 or more Billing Discrepancies (BDs) by Service Type January - August 2016						
Service	# of Providers with 1+ BDs	% of Providers with 1+ BDs				
Behavior Analysis (N = 107)	18	16.8%				
Behavior Assistant (N = 34)	8	23.5%				
CDC+ Consultant (N = 184)	4	2.2%				
Life Skills Development 1 - Companion (N = 495)	90	18.2%				
Life Skills Development 2 - SEC (N = 123)	24	19.5%				
Life Skills Development 3 - ADT (N = 260)	34	13.1%				
Personal Supports (N = 1,014)	175	17.3%				
Residential Habilitation - Behavior Focus (N = 123)	11	8.9%				
Residential Habilitation - Intensive Behavioral (N = 11)	1	9.1%				
Residential Habilitation - Standard (N = 695)	29	4.2%				
Respite (N = 285)	42	14.7%				
Support Coordination (N = 1,279)	139	10.9%				
Supported Living Coaching (N = 300)	48	16.0%				
State Average	623	12.7%				



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Top Billing Discrepancy Reasons by	/ Service		
Standard	# Not Mets	# of Providers Reviewed	% Not Met
Support Coordination			
The Support Coordination Progress Notes demonstrate required monthly contact/activities were completed and are in the record.	83	1,274	6.5%
Level of care is reevaluated at least every 365 days and contains all required components for billing.	74	1,277	5.8%
Supported Living Coach			
The provider has complete Daily Progress Notes for each date of service provided and billed during the period under review.	30	299	10.0%
The 3rd Quarterly/Annual Report covering services provided and billed during the period under review is in the record.	15	266	5.6%
The Implementation Plan covering services provided and billed during the period under review is in the record.	12	299	4.0%



Top Billing Discrepancy Reasons by Service										
Standard	# Not Mets	# of Providers Reviewed	% Not Met							
LSD 1 – Companion										
The provider has complete Service Logs covering services provided and billed during the period under review.	78	493	15.8%							
LSD 2 – Supported Employment Coach										
The provider has complete Service Logs covering services provided and billed during the period under review.	13	123	10.6%							
The Employment Stability Plan covering services provided and billed during the period under review is in the record.	10	123	8.1%							
LSD 3 - ADT										
The provider maintains Daily Attendance Logs covering services provided and billed during the period under review.	27	260	10.4%							
The Implementation Plan covering services provided and billed during the period under review is in the record.	9	260	3.5%							



Service Provider Alerts: January – August 2016



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Alerts Identified by Region: January – August 2016

Region	Total # of PDRs	Total # of Alerts	Rights	Health & Safety	ANE	BckGrnd Alerts	Med Admin.	Driver's License & Ins.
Northwest	48	7	0	2	0	5	0	0
Northeast	206	21	0	1	1	10	6	3
Central	175	33	4	4	0	12	12	1
Suncoast	183	36	1	10	0	19	5	1
Southeast	200	41	2	7	0	23	6	3
Southern	166	38	2	8	0	19	9	0
State	978	176	9	32	1	88	38	8





"Upon the observation of the group home, it was noted there were video surveillance cameras in the common areas. The group home manager was only able to present consents for 2 of the 8 individuals who reside there."

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"There is no toilet paper in the bathroom. Toilet paper is kept by the office area instead of the bathroom due to one person's behavior. If a person needs to use the bathroom, he or she needs to ask the staff for toilet paper."



"Group home has cameras in the common areas without consent forms signed by the individuals/guardians."



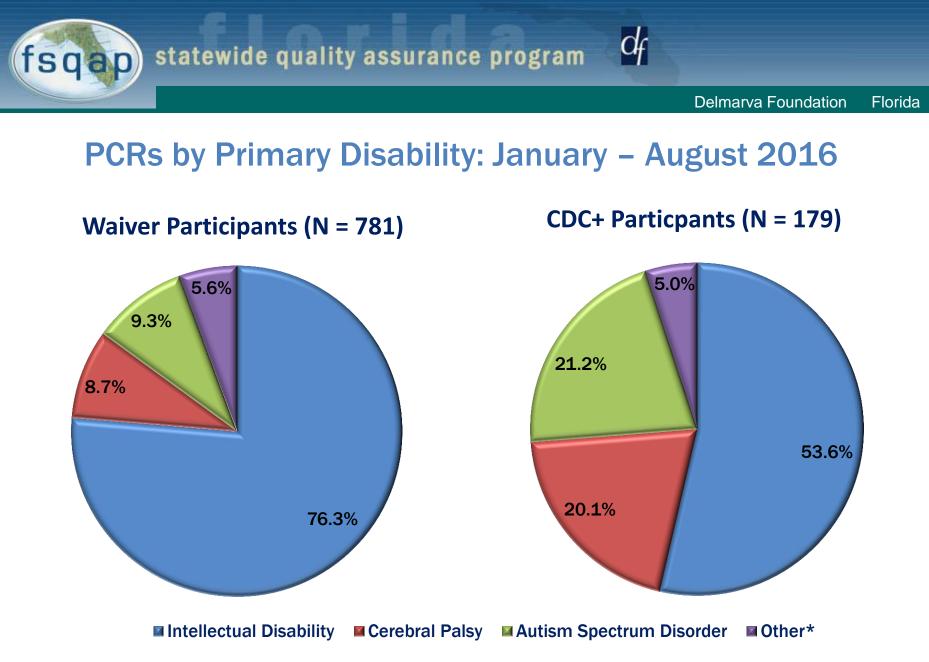
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Questions???



ADDENDUM



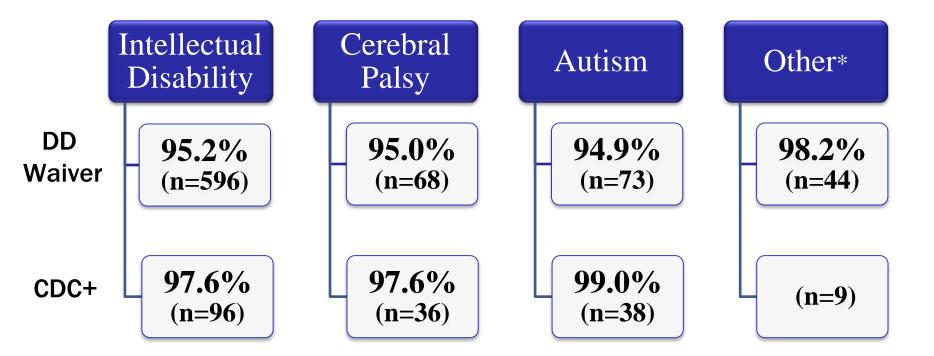
*Other: 9 Spina Bifida; 4 Downs Syndrome; 30 Other

*Other: 4 Downs Syndrome; 5 Other 39

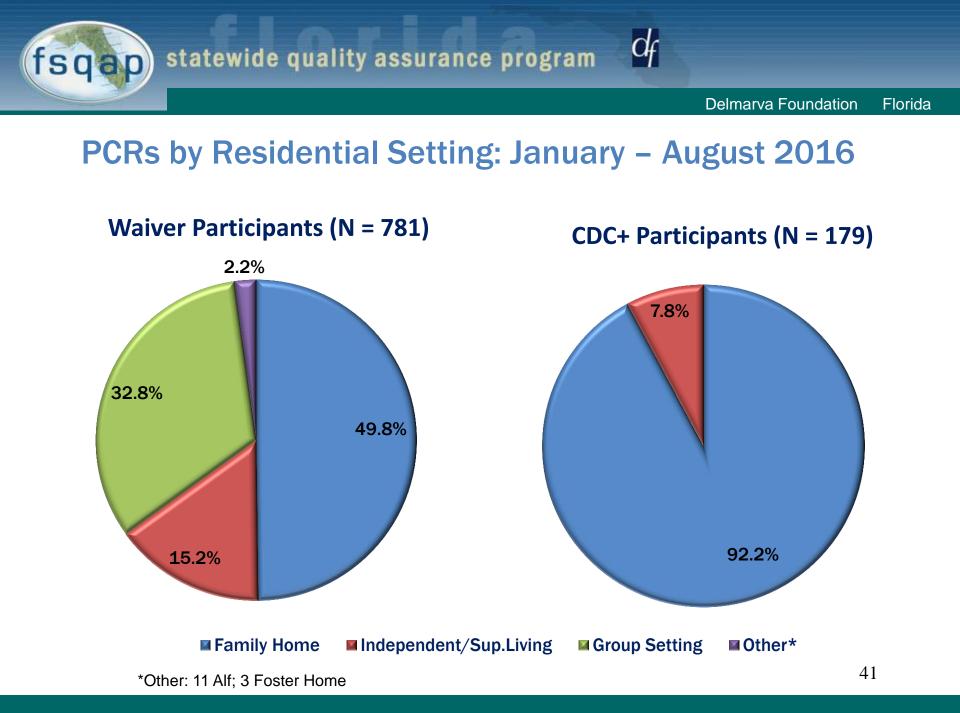


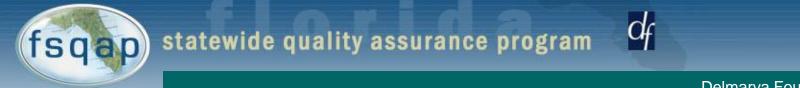
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Individual Interview Results by Primary Disability January – August 2016

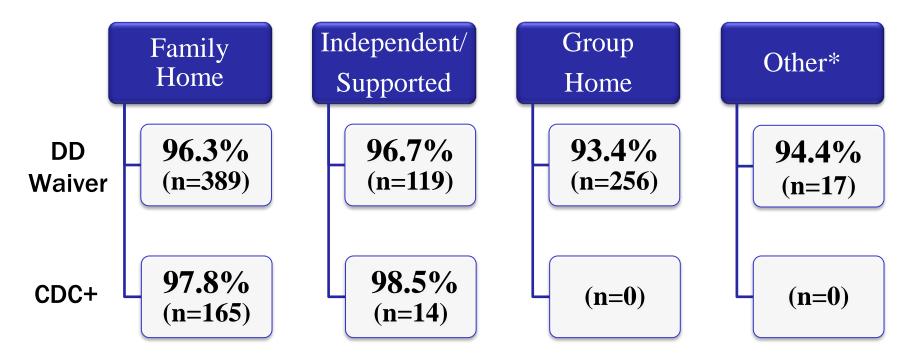


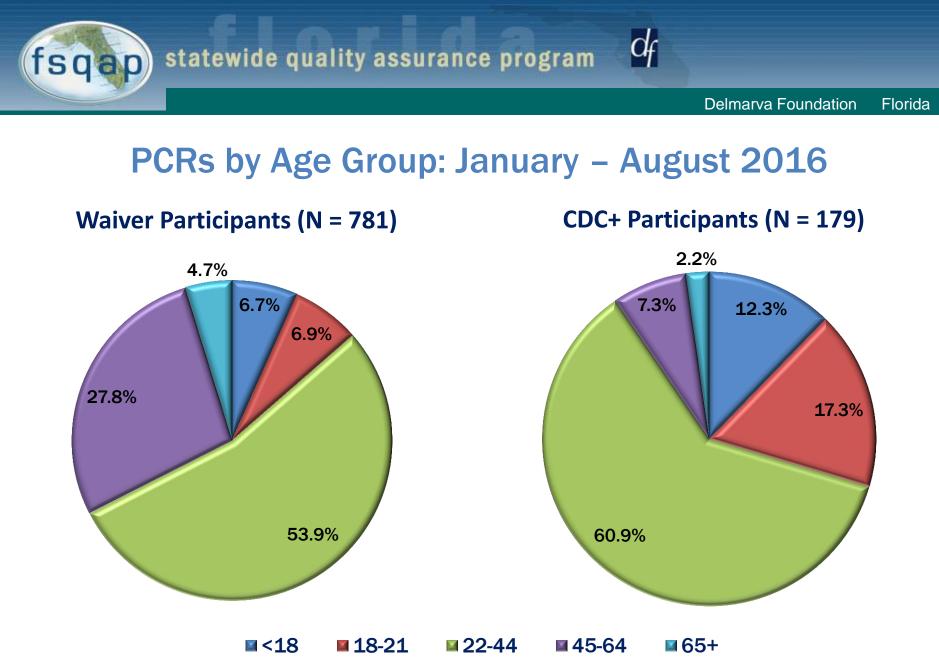
*DD Waiver Other: 10 Spina Bifida; 4 Downs Syndrome; 30 other. *CDC+ Other: 5 other; 4 Downs Syndrome





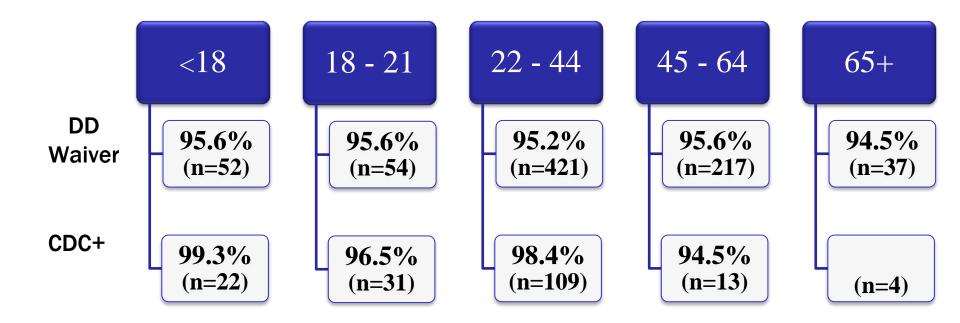
PCR Individual Interview Results by Residential Setting January – August 2016







Individual Interview Results by Age Group January – August 2016





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- The Support Coordination Progress Notes demonstrate pre-Support Plan planning activities were conducted. (85.0%)
 - WSC documentation did not demonstrate pre-support planning activities took place.
 - 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.
 - WSC documentation did not demonstrate efforts to support the person to make informed choices among waiver service providers.



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- The current Annual Report is in the record. (86.2%)
 - The Annual Summary did not include a description of progress toward meeting individually determined goals.
 - The Annual Summary did not include a report of the supports and services received throughout the year.
 - The Annual Summary did not include any pertinent information about significant events that happened in the life of the person during the previous year.



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- 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.
 (88.2%)
 - WSC documentation did not demonstrate review of the person's service provider documentation.
 - WSC documentation demonstrated review of some but not all services.



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- 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.(89.0%)
 - WSC documentation did not demonstrate personalized efforts to assist the person to define abuse, neglect, and/or exploitation.
 - WSC documentation did not demonstrate how the person would report incidents of abuse, neglect, and exploitation.
 - WSC documentation did not demonstrate personalized efforts to provide education to the person in the area of abuse, neglect, and exploitation.



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

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- 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. (89.4%)
 - Consultant documentation did not demonstrate how the person would report incidents of abuse, neglect, and exploitation.
 - Consultant documentation did not demonstrate personalized efforts to assist the person to define abuse, neglect, and/or exploitation.
 - Consultant documentation did not demonstrate personalized efforts to provide education to the person in the area of abuse, neglect, and exploitation.



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Number of Service Provider Reviews by Region January – August 2016

			Staff			Observations	
Region	PDRs	PII	Interview	P&P	Q&T	Α	Un-A
Northwest	48	86	79	48	90	33	4
Northeast	206	358	333	206	468	79	70
Central	175	295	302	175	443	118	39
Suncoast	183	286	271	183	431	129	13
Southeast	200	297	296	200	506	85	41
Southern	166	290	291	166	439	68	56
State	978	1,612	1,572	978	2,377	512	223



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Number of WSC Reviews by Region January – August 2016								
			Record Reviews					
Region	P&P	Q&T	А	UA				
Northwest	27	33	61	50				
Northeast	60	74	114	87				
Central	70	86	128	100				
Suncoast	68	95	159	109				
Southeast	75	104	149	111				
Southern	48	72	120	91				
State	348	464	731	548				