



Florida Statewide Quality Assurance Program

**Quality Council
March 2015**

Review of Data





Overview

- **Volume of activity**
- **Provider Feedback**
- **Summary of Data**
 - **III results by demographics**
 - **NCI**
 - **PDR Results**
- **Supported Employment Drill Down**
- **Recommendations**



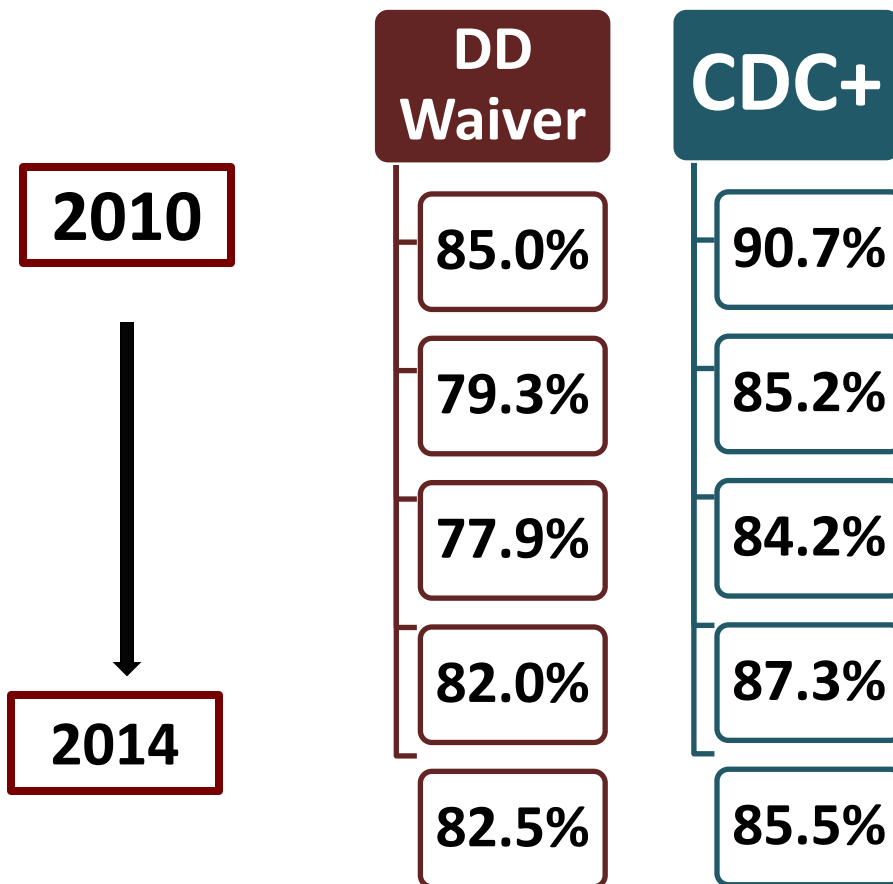
Volume of Activity

| Total Volume of Activity | | | | | | |
|------------------------------|--------------|--------------|---------------|---------------|--------------|---------------|
| January 2010 - December 2014 | | | | | | |
| Contract Year | PCR | | PDR | | | PCR/PDR |
| | DD | CDC | Total | Non-Compliant | CDC Rep | Total SSRR |
| 2010 | 1,486 | 163 | 2,638 | 99 | 133 | 11,428 |
| 2011 | 1,403 | 281 | 2,671 | 85 | 356 | 11,860 |
| 2012 | 1,425 | 304 | 2,599 | 54 | 396 | 11,183 |
| 2013 | 1,376 | 313 | 2,391 | 29 | 650 | 10,180 |
| 2014 | 1,448 | 285 | 2,858 | 11 | 326 | 10,188 |
| Total | 7,138 | 1,346 | 13,157 | 278 | 1,861 | 54,839 |



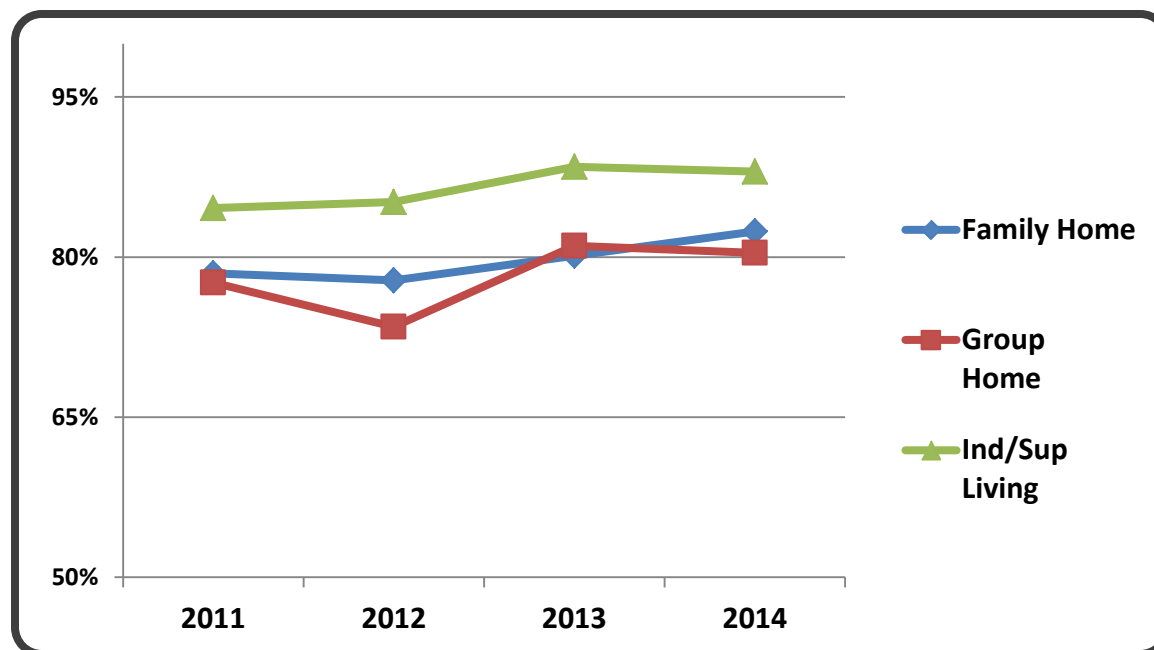
| Results from Provider Feedback Surveys Reviews Completed in 2014 | |
|---|--------------|
| Question | % Yes |
| Did the Quality Assurance Reviewer (QAR) identify the documents needed to complete the review? | 99.7% |
| Did the QAR explain the purpose of the review? | 99.4% |
| Did the QAR explain the review process and how the QAR or Delmarva team would conduct the review? | 98.8% |
| Did the QAR answer any questions you had in preparation for the review? | 99.4% |
| Did the QAR refer you to the FSQAP website, including the tools and procedures? | 98.4% |
| Did the QAR arrive at the review at the scheduled time? | 96.6% |
| If no, did the QAR call to notify you he/she might be a little late? (N=11) | 90.9% |
| Did the QAR provide you with the preliminary findings of your Provider Discovery Review (PDR) before leaving? | 99.1% |
| If you scored Not Met on any of the standards, did the QAR explain why? (N=227) | 99.1% |
| Total Responses | 327 |

Individual Interviews (III) Results by Year

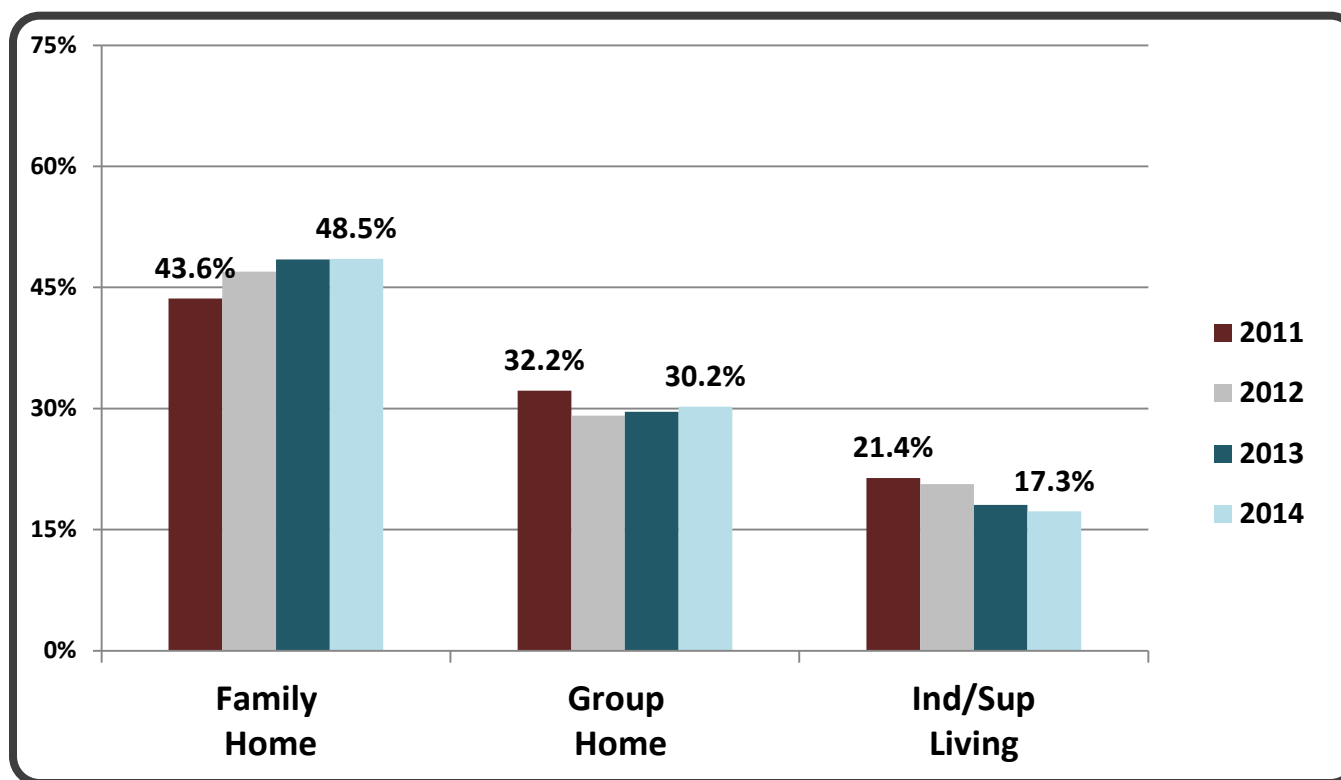


Individual Interviews (III)

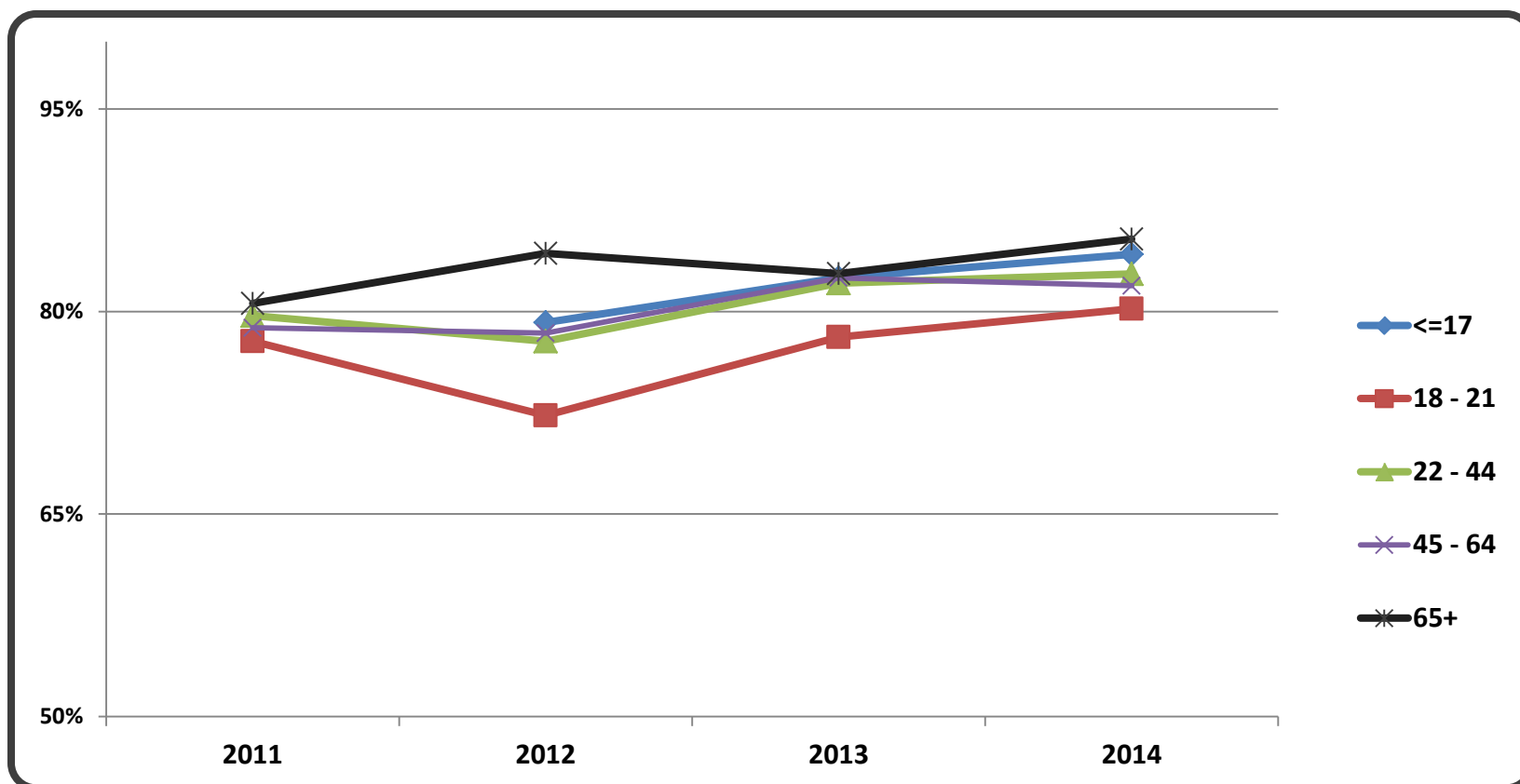
Percent Present by Residential Setting and Year



PCRs By Residential Setting and Year

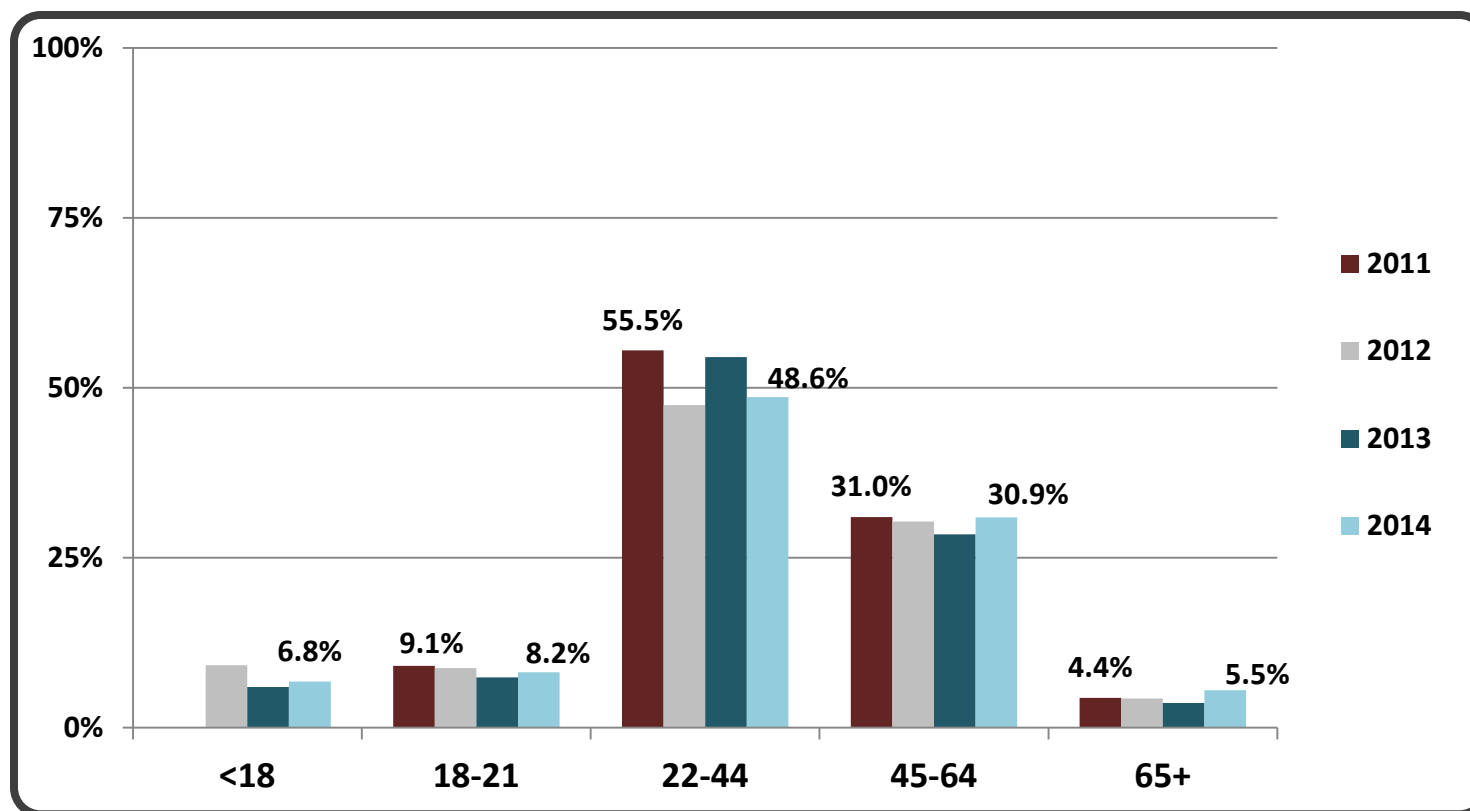


Individual Interviews (III) Percent Present by Age Group

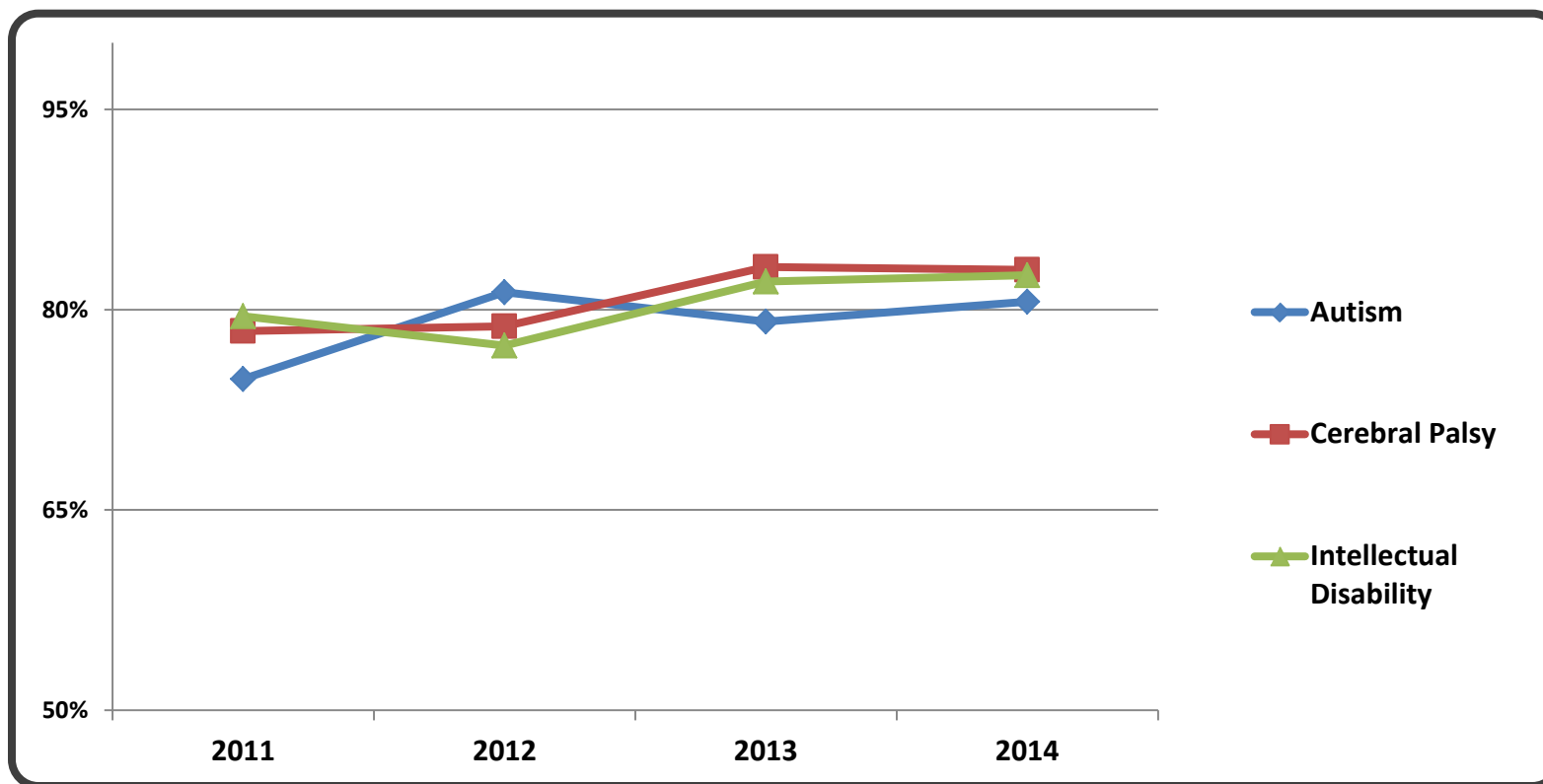




PCRs By Age Group and Year

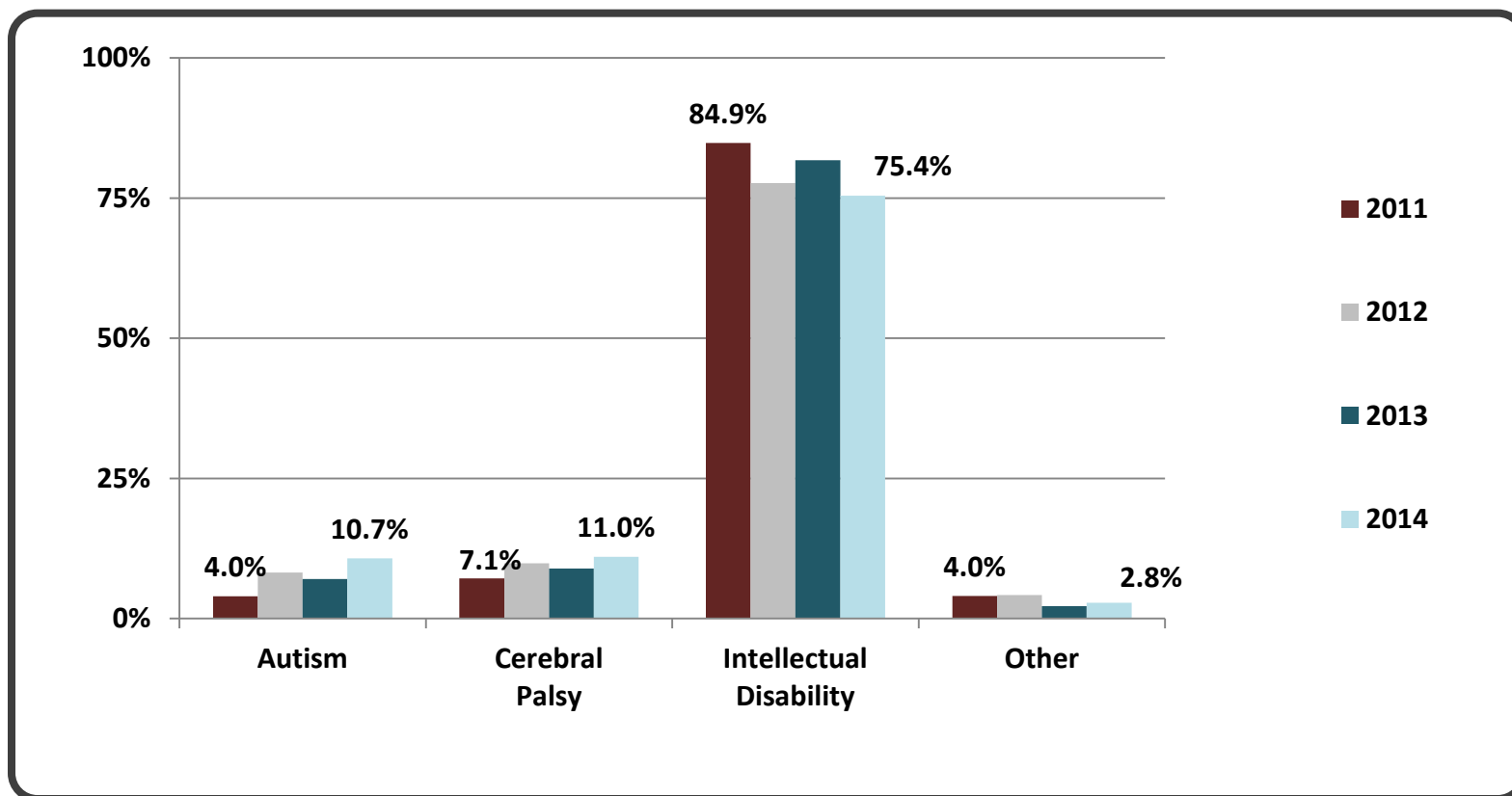


Individual Interviews (III) Percent Present by Disability

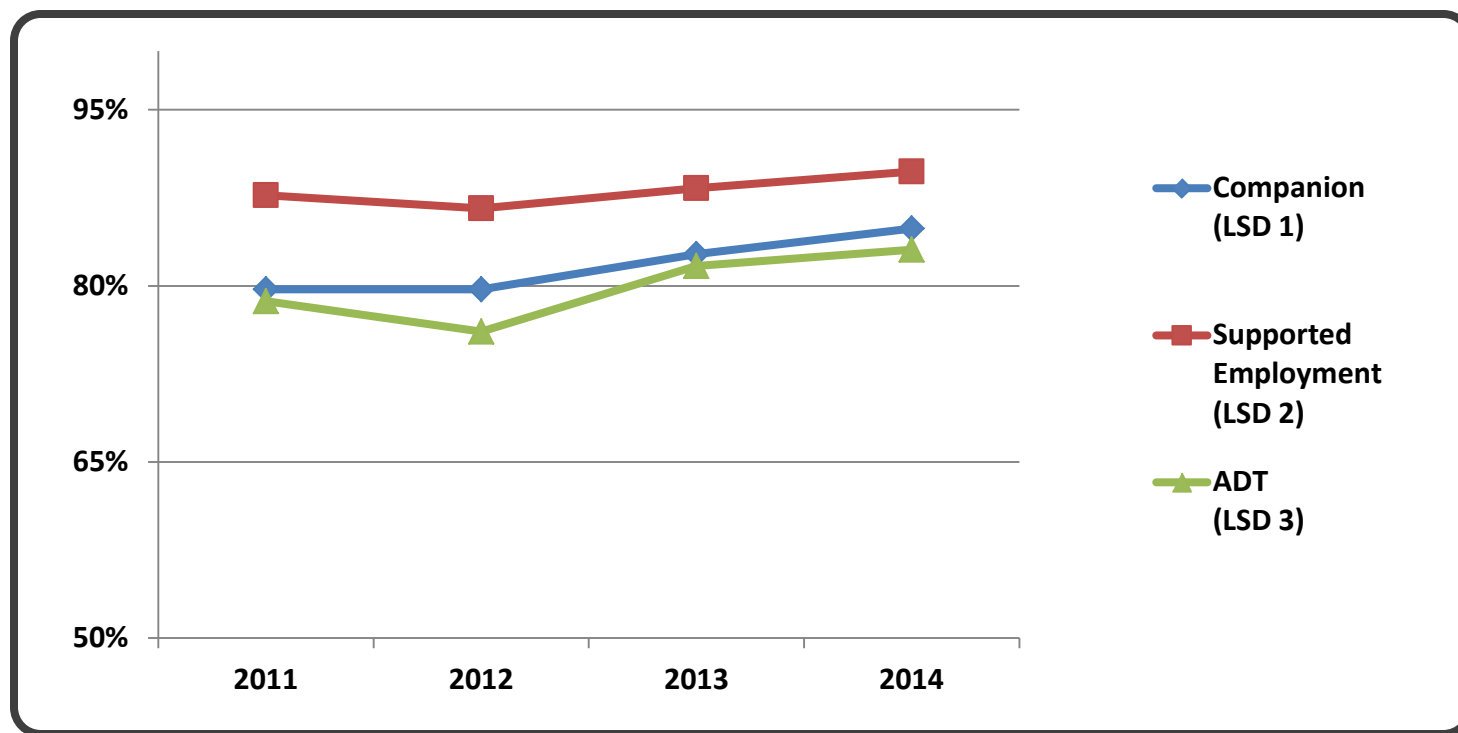




PCRs By Disability and Year

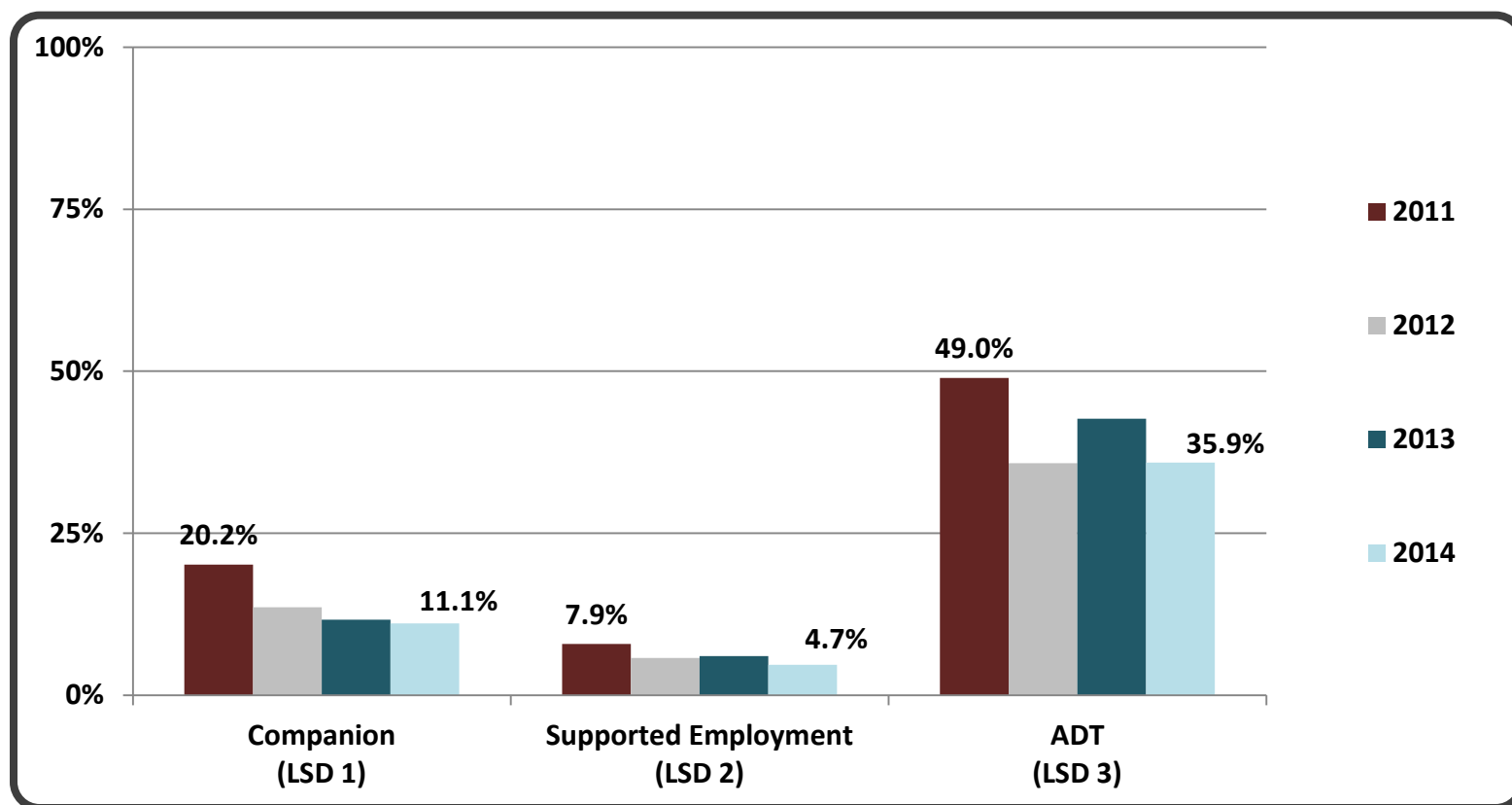


Individual Interviews (III) Percent Present by Service





PCRs By Service and Year





Lowest Scoring III Standards Jan - Dec 2014

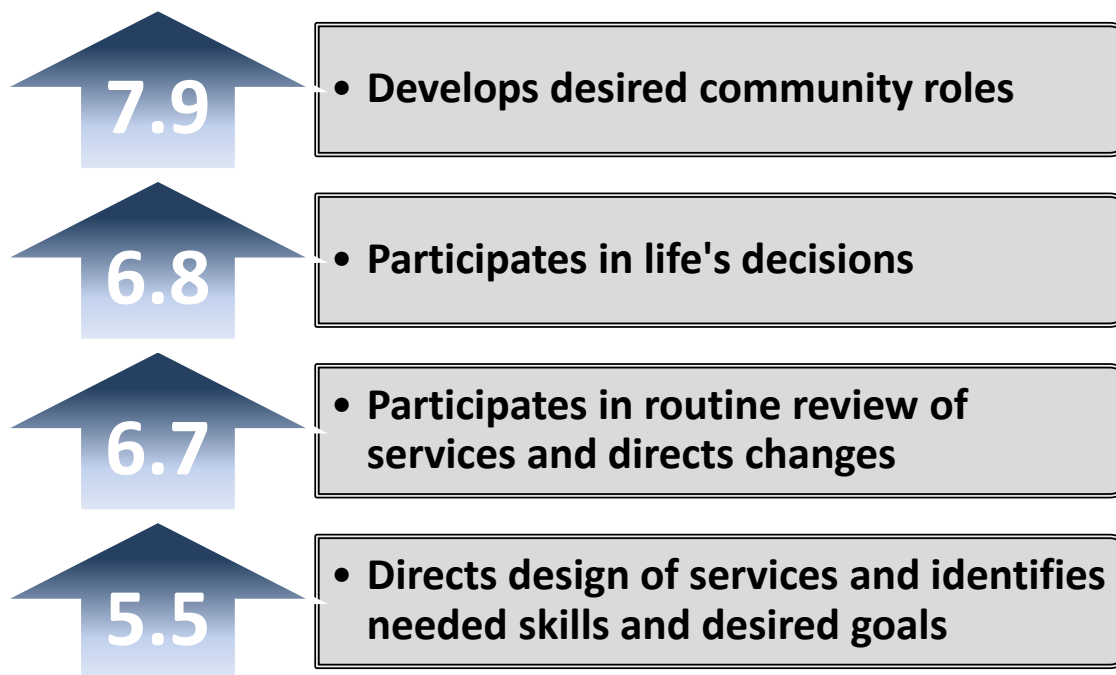
Person is developing desired community roles: 72.6%

Person is afforded choice of services and supports: 76.7%

Person is healthy: 78.9%

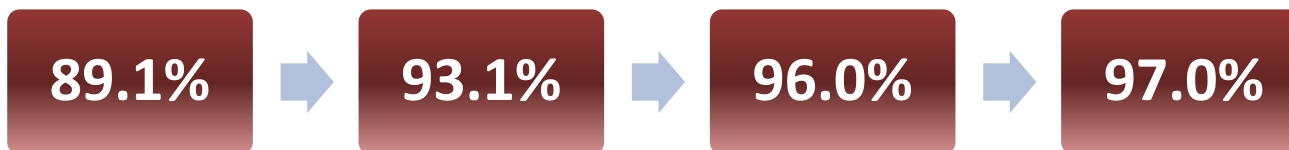
**Person directs design of services, identifies needed skills
and desired goals: 79.6%**

Greatest Percentage Point Change in III Standards 2011 to 2014





CDC Consultant Review Results



CDC Representative Review Results

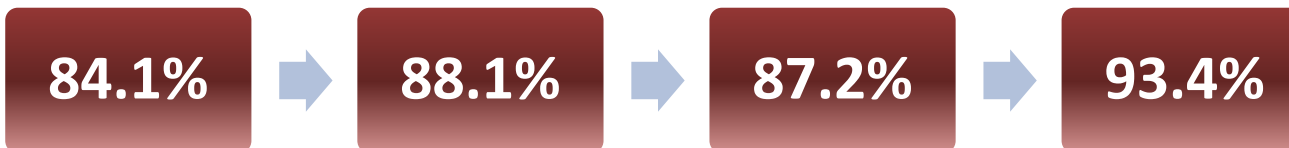




Table 8: NCI Consumer Survey Results by Focused Outcome Areas

January -December 2014

| | Number Responses | Percent Negative | In Between | Percent Positive | 2013 Positive | 2012 Positive | 2011 Positive |
|---------------------------------|------------------|------------------|--------------|---------------------------------|---------------|---------------|---------------|
| Person Centered Approach | 5,111 | 13.7% | 9.3% | 77.1% | 74.7% | 76.1% | 78.2% |
| Choice | 8,315 | 18.2% | 33.5% | 48.3% | 47.5% | 43.8% | 44.1% |
| Safety/Security | 3,129 | 4.0% | 8.0% | 88.0% | 89.6% | 88.3% | 89.0% |
| Rights | 6,942 | 8.6% | 3.2% | 88.2% | 88.7% | 89.1% | 88.5% |
| Community Inclusion | 14,101 | 33.6% | 3.1% | 63.4% | 64.6% | 65.5% | 66.6% |
| | | Poor | Fair | Excellent/ Very Good | | | |
| Health | 1,085 | 6.0% | 43.8% | 70.0% | 54.9% | 35.6% | 33.7% |



Some NCI Questions with the Highest **Negative** Response

Do you have a job in the community: 86.4%

Do you have any volunteer work: 76.9%

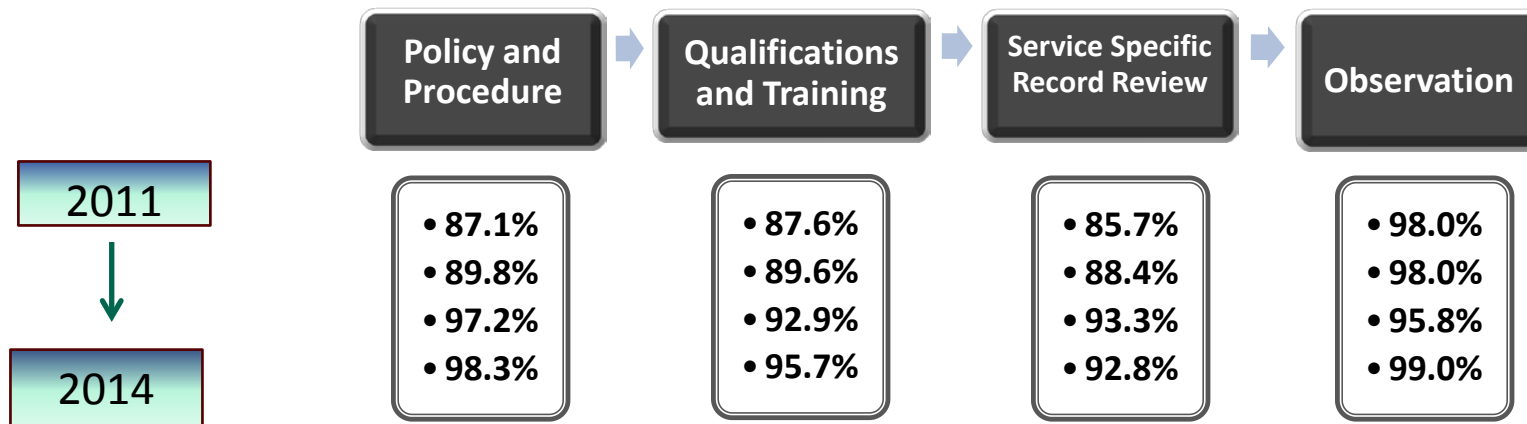
Did you choose people you live with: 44.1%

Who chose place where you live: 38.6%

Would you like to go somewhere else or do something else during the day: 32.3%

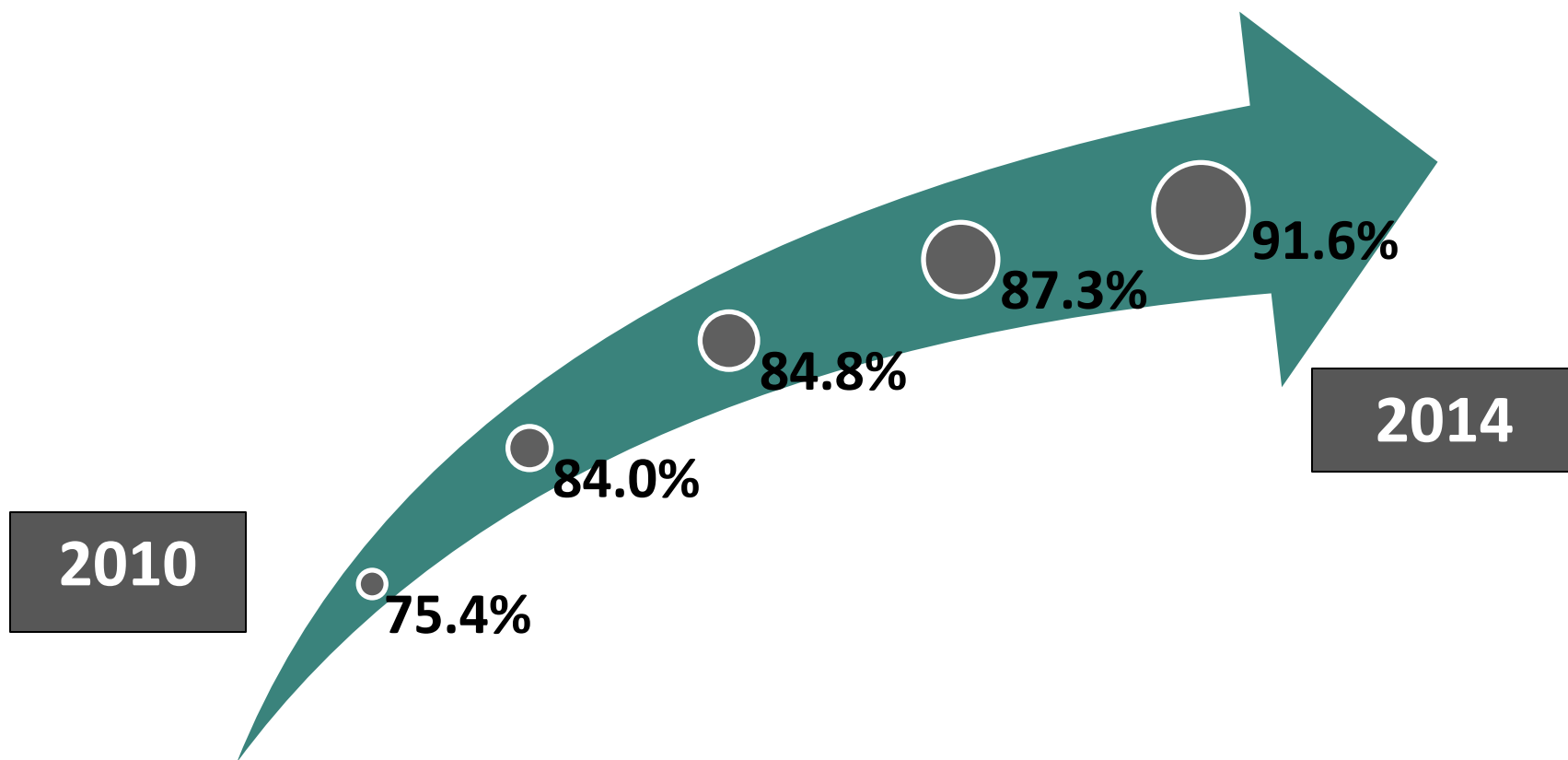
Would you like to work somewhere else: 26.9%

Average PDR Scores: DD Waiver Participants 2011 - 2014



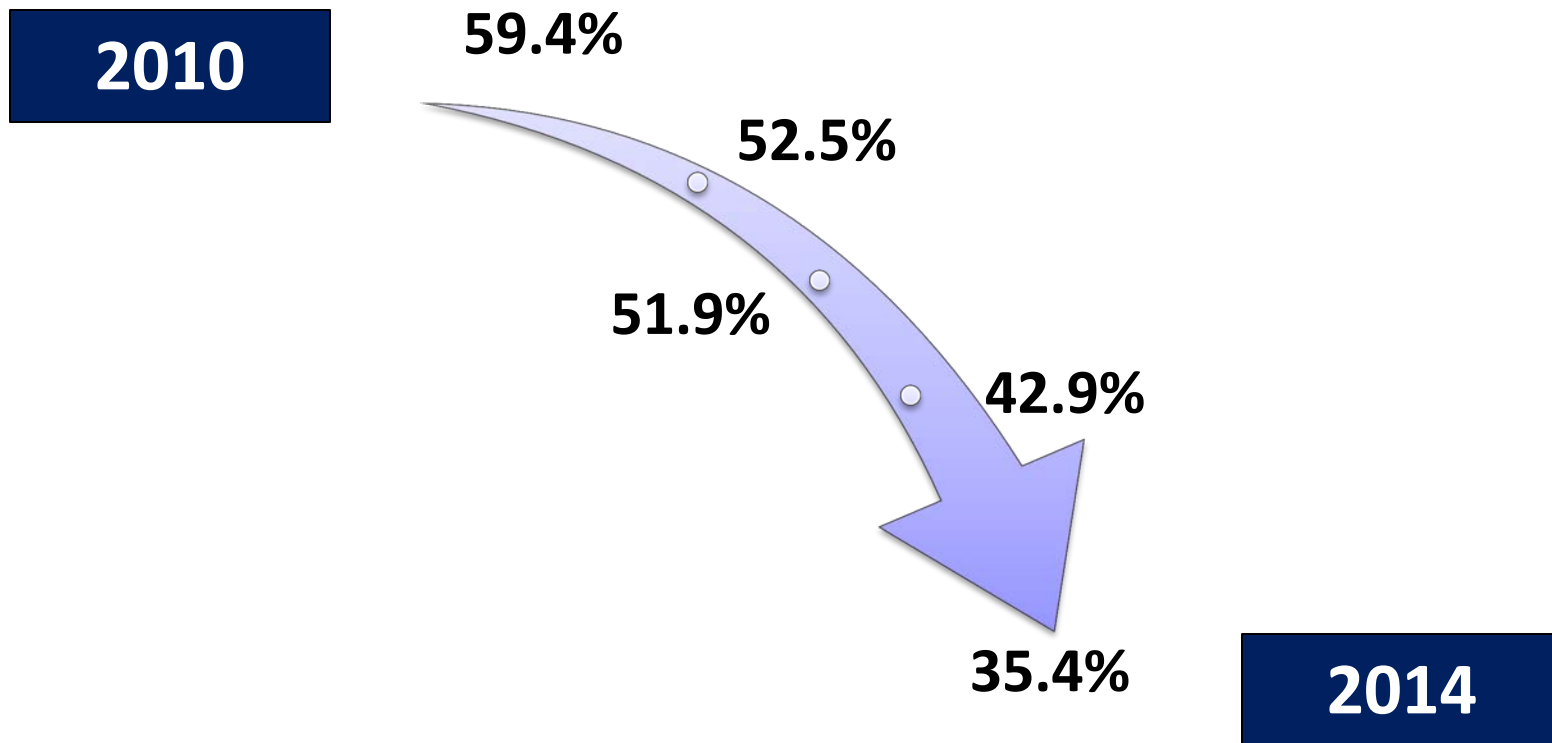


Percent of providers with background screening compliance met





Percent of providers with at least one billing discrepancy





Alerts Identified During the Review

| Alert Type | 2011 | 2012 | 2013 | 2014 |
|-------------------------------|--------------|--------------|--------------|--------------|
| Rights | 11 | 13 | 9 | 12 |
| Health/Safety | 187 | 123 | 90 | 99 |
| Background Screening | 426 | 413 | 289 | 168 |
| Total # PDRs | 2,668 | 2,599 | 2,261 | 2,858 |
| Rate Per 1,000 Reviews | | | | |
| Rights | 4.1 | 5.0 | 4.0 | 4.2 |
| Health/Safety | 70.1 | 47.3 | 39.8 | 34.6 |
| Background Screening | 159.7 | 158.9 | 127.8 | 58.8 |



Supported Employment

| Percent of Individuals Who Receive Supported Employment by Demographic Category | | |
|--|-----------|-------------|
| Age Group | # | % |
| < 18 | 0 | 0.0% |
| 18 - 21 | 0 | 0.0% |
| 22 - 44 | 41 | 7.2% |
| 45 - 64 | 16 | 4.3% |
| 65+ | 3 | 5.4% |
| Residential Setting | | |
| Family Home | 22 | 3.8% |
| Independent/ Supported Living | 32 | 15.9% |
| Group Home | 5 | 1.4% |
| Other | 1 | 2.2% |
| Disability | | |
| Intellectual Disability | 56 | 6.4% |
| Cerebral Palsy | 3 | 2.3% |
| Autism | 1 | 0.8% |
| Other | 0 | 0.0% |
| Total | 60 | 5.2% |



Recommendation

As there will be a renewed focus on person centered thinking and planning, driven by the handbook and CMSs new assurances, it would help providers to understand the new assurances and their role in meeting these assurances. Training on this topic is recommended for all provider types.



Recommendation

The state should explore the development of service log and summary templates to assist providers of Supported Employment and other services to understand what documentation is required and offer suggestions for successful documentation. Perhaps a QC workgroup could assist.



Recommendation

Because the Observation scores have been consistently high they do not appear to validly represent residential and day program activity across the state. Beginning in 2015, at least one third of observations will be unannounced. Delmarva should track the scores between the announced and unannounced observations and work with the state to develop and implement improvement initiatives as indicated.



Ideas, questions, suggestions?

**Other thoughts about recommendations we can make for
system performance improvement?**

Thank you for all you do!