



Toll Free Contact
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1-866-254-2075

July 20, 2010

ELIZABETH ISAACS
3415 CHELSEA ST
ORLANDO FL 32803-2903

ELIZABETH ISAACS:

Attached is the Person Centered Review Report (PCR) that was recently completed by a Delmarva Foundation Quality Assurance Reviewer.

If you dispute the findings of the review, all requests for reconsideration must be received within 30 days of receipt of the PCR report. You have the option of submitting the reconsideration in writing or by fax to the Tampa or Tallahassee address located below.

If you have any questions about this Person Centered Review report, please contact our Customer Service Representative at 1 866-254-2075.

Thank You,

Charmaine Pillay
Director of Florida Programs
Delmarva Foundation

Attachments

Tallahassee Office
2039 Center Point Blvd
Suite 202
Tallahassee, FL 32308-4366
(850) 671-5096
(850) 878-2958 Fax

Tampa Office
Tampa Oaks II
12906 Tampa Oaks Blvd
Suite 130
Temple Terrace, FL 33637
(866) 254-2075
(813) 977-0027 Fax

Person Centered Review (PCR) Report

Orlando, FL 32806-5664

Review ID: Reviewer: Cheryl King Interview Date: 06/01/2010 Review Period: 05/01/2009 - 04/20/2010	Medicaid ID: Area of Residence: 7 Living Arrangement: Large group home Waiver: DD Tier: Tier 2 Date of Birth:
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Waiver Support Coordinator: ELIZABETH ISAACS

WSC Phone Number:

Review Type: Person-Centered Review

Record Review Results by Service

Service	Provider	Weighted Score*	Alert	Recoup
Companion	A+ HOME-AID INC	100% (25/25)	0	No
Residential Habilitation Services	PRIMROSE CENTER INC	79% (23/29)	0	No
Support Coordination - Full	ELIZABETH ISAACS	55% (38/69)	0	Yes

*Critical standards are weighted more than others in determining the overall record review score, which may cause a variation in scores. Critical standards are specific to health, safety, and potential recoupment concerns.

Potential Recoupment Reported to AHCA

Service	Provider	Standard	Reason Not Met
Support Coordination - Full	ELIZABETH ISAACS	The current approved Cost Plan is in the record.	The current approved Cost Plan is not in the record.

Service Specific Issues from Record Reviews

Residential Habilitation Services -- PRIMROSE CENTER INC (024247196) Weighted Score 79%

	Standard Scored as Not Met	Reason Not Met
6	The record includes data to support the current Implementation Plan.	The provider did not have data for one or more months reviewed. The provider did not maintain data indicating goals are being implemented.
15	The provider addresses the individual's communicated choices and preferences.	There was no documentation that indicated the individual's preferences were solicited.

16	The provider addresses the person's interests regarding community participation and involvement.	The provider is aware of and addresses the person's interests regarding community participation and involvement but has not documented knowledge and efforts.
20	The Provider submits documents to the Waiver Support Coordinator as required.	The provider did not have proof of document submission of copies of daily attendance log, monthly. The provider did not have proof of document submission of copies of annual report prior to the annual support plan update.

Support Coordination - Full -- ELIZABETH ISAACS (677460196) Weighted Score 55%

	Standard Scored as Not Met	Reason Not Met
2	The current Support Plan was completed and submitted to the APD Area office within the required timeframes.	The current support plan was completed less than 20 days prior to the effective date. The current support plan was not submitted to the Area APD office.
3	The current Support Plan was distributed to the individual/legal representative/providers within the required timeframes.	No documentation is available to show proof the Support Plan was distributed to the individual/legal representative/providers within 10 calendar days of effective date.
5	The current approved Cost Plan is in the record.	The current approved Cost Plan is not in the record.
10	The current Support Plan reflects the individual's communicated personal goals.	Documentation does not reflect effective use of a Person Centered approach to determine individual's preferences and goals. Support planning process is driven more by family/providers instead of the person.
11	The Support Plan reflects the individual's communicated choices and preferences.	The current Support Plan does not include information regarding the person's choices or preferences. There is no documentation in current support plan and/or progress notes reflecting efforts made to solicit individual's choices and preferences. There is no documentation in progress notes reflecting efforts made to adapt to person's communication style in order to better understand the person's preferences.
12	Generic resources/supports are identified in the current Support Plan.	Current Support Plan does not identify non-waiver supports the person receives.
15	The Support Coordinator addresses the individual's communicated personal goals.	The Support Coordinator addresses the individual's communicated personal goals but has not documented knowledge and efforts.
16	The Support Coordinator is aware of the person's recent progress towards or achievement of personal goals.	Documentation does not reflect progress being made towards goals. The Support Coordinator is aware of the person's recent progress towards or achievement of personal goals but has not documented knowledge and efforts.
18	The Support Coordinator addresses the individual's/legal representative's expectations of the services he/she is receiving.	The Support Coordinator addresses the individual's/legal representative's expectations of the services he/she is receiving but has not documented knowledge and efforts.

22	The individual/legal representative is provided with education related to his/her own safety needs, i.e., natural disasters, community safety, home safety, etc.	Documentation does not reflect efforts made by Support Coordinator to support and educate individual/legal representative on matters related to natural disaster safety. The individual/legal representative is provided with education related to his/her own safety needs, i.e., natural disasters, community safety, home safety, etc. but has not documented knowledge and efforts.
23	The Support Coordinator addresses the individual's safety needs and safety skills.	The Support Coordinator addresses the individual's safety needs and safety skills but has not documented knowledge and efforts.
24	The Support Coordinator is aware of how individuals are empowered to make informed decisions regarding their own safety.	The Support Coordinator is aware of how individuals are empowered to make informed decisions regarding their own safety but has not documented knowledge and efforts.
27	The Support Coordinator knows which rights are important to the individual.	Documentation does not reflect the Support Coordinator's efforts to identify the right(s) most important to the person.
28	The Support Coordinator can identify methods for teaching individuals about their rights, that are tailored to their learning style.	The Support Coordinator can identify methods for teaching individuals about their rights, that are tailored to their learning style but has not documented knowledge and efforts.
29	Referrals are made to non-HCBS waiver funded resources based upon the individual's expressed need or outcome.	WSC has no documentation to identify attempts to make referrals to non-waiver funded vendors/providers/services. WSC has not discussed non-waiver funded vendors/providers/services with the person.
30	The Support Coordinator has evidence of referrals to service providers and selection of or change to providers based upon individual choice.	WSC has no documentation to show how referrals to service providers were based on the choice of the individual.

Recoupment Detail

Standard Not Met: The current approved Cost Plan is in the record.

Cost plan was not in the file for the months 7/2009, 8/2009, 9/2009, 10/2009, 11/2009, 12/2009, 1/2010, 2/2010, 3/2010, 4/2010, 5/2010. All billed at a rate of \$130.95

Individual Interview Instrument

4 out of 12 scored as Met

Elements of Attainment/Accomplishment	Met	Reason
The Person is afforded choice of services and supports.	No	<p>The person was not informed about services prior to the selection of services.</p> <p>The person did not participate in the selection of his/her provider.</p> <p>The person is unaware he/she could change providers.</p> <p>The person did not interview or participate in selection of the provider/support worker.</p> <p>There are limited efforts made to learn and/or adapt to the person's communication style.</p> <p>There are limited efforts to foster a means of functional communication for the person.</p>
The Person actively participates in decisions concerning his or her life.	No	<p>The provider makes decisions on daily routine regarding personal care for the person.</p> <p>The provider makes decisions on leisure activities within the home for the person.</p> <p>The provider did not assist with exploring and choosing living arrangements with the person.</p> <p>The provider did not offer options regarding work for the person.</p> <p>There are limited discussions with the person regarding preferences.</p> <p>There are limited efforts made to learn and/or adapt to the person's communication style.</p> <p>There are limited efforts to foster a means of functional communication for the person.</p>
The Person directs the design of services and participates in the identification of needed skills and strategies to accomplish desired goals.	No	<p>The strategies to address stated goals are not as person prefers/requests.</p> <p>The WSC did not discuss goals with the person prior to the Support Plan meeting.</p> <p>There are limited efforts made to learn and/or adapt to the person's communication style.</p>
The Person participates in routine review of services, and directs changes desired to assure outcomes/ goals are met.	No	<p>The provider does not include the person in the review of services.</p>
The person has the necessary supports in place to meet needs and goals.	Yes	
The Person is free from abuse, neglect and exploitation.	No	<p>The person has limited or no discussions with the provider about abuse, neglect or exploitation.</p> <p>The person does not know what abuse, neglect or exploitation is.</p> <p>The person does not know what to do if abuse occurs.</p>
The Person is safe or has self-preservation skills.	No	<p>The provider does not discuss safety with the person.</p> <p>The person is not aware of emergency procedures.</p>
The Person is healthy.	Yes	

The Person is educated and assisted by supports and services to learn about rights and to fully exercise rights, but especially those that matter most to the person. This includes dignity, respect, and privacy.	No	The provider is not educating the person on rights.
The Person is achieving desired outcomes/goals or receiving supports that demonstrate progress toward specified outcomes/goals (e.g. an increase in abilities, experiences, choices, increments toward success).	Yes	
The person is satisfied with the supports and services received.	Yes	
The Person is developing desired community roles that are of value to the person.	No	The provider is not supporting the person in integrated activities.

Funding Source Disclaimer

Support coordinators must coordinate access to services through all available funding sources prior to accessing waiver services. Funding sources must be accessed in this order:

1. **Third Party Payer**
2. **Medicare**
3. **Other Medicaid Programs (plan, Medicaid Durable Medical Equipment and medical Supplies Program)**
4. **Waiver**

DD Waiver Services Coverage and Limitations Handbook pg. 2-6