

| Results and Recommendations | |
|---|---|
| January - June, 2012 | |
| Discovery | Recommendations |
| <p>Individual interviews to date indicate an average III score of 76.6%, representing a downward trend since Year 1 (89.9%) & Year 2 (85.0%).</p> <p>The standard showing the lowest rate measures the degree to which the individual is developing desired community social roles (60.6%) and this is lower than Year 1 by 12% points.</p> <p>The NCI area measuring community inclusion has also remained relatively low (65%)</p> | <p>Providers, particularly Support Coordinators, should work to ensure individuals are participating in the development of their support plans and implementation plans, so they can include goals important to the person that will help develop important community connections – person centered goals.</p> <p>Training on developing social roles and other aspects of becoming more involved in the community should be offered at various locations across the state. Two types of sessions should be offered: provider focus to help develop systems that enhance community integration; individual/family focus to help identify options available and natural supports in the community.</p> |
| <p>NCI results to date indicate individuals have a limited amount of choice in their lives.</p> <p>The NCI Focused Area of Choice reflected a lower score than any other focused area, with a rate of just under 43%. Individuals make the following choices independently :</p> <ul style="list-style-type: none"> Chose a place to live (31%) Who to live with (37%) Who helps at home (35%) Who helps at work (36%) Who helps during the day (26%) Who chooses your daily schedule (55%) | <p>Delmarva should work with APD and AHCA to develop choice training, with sessions targeting providers and sessions for individuals and families. These should be offered across the state or through a web-based training module. Provider training should be accountability based.</p> |

| Results and Recommendations | |
|--|--|
| January - June, 2012 | |
| Discovery | Recommendations |
| <p>Results to date indicate that individuals living independently, or with supported living are more likely to have outcomes met than individuals living in a group home. Also, individuals with Supported Employment were much more likely to have outcomes met.</p> <p>Only 16.5% of respondents to date indicated having a job in the community, and 26% indicated having any volunteer work.</p> | <p>APD initiatives should be developed, or expanded, to help individuals obtain work in integrated environments in the community.</p> <p>Evidence continues to indicate that efforts to increase the number of individuals working in the community should continue. The workgroup from the Quality Council has selected Supported Employment as a quality improvement initiative, including a member from the Supported Employment state initiative as well. Efforts from this group should be shared with the state and used to help increase delivery of this important service.</p> |
| <p>Young adults, 18-21, appear to be less likely to have outcomes met than individuals in any other age group. Individuals with an intellectual or developmental disability often remain in high school until age 21, and have typically maintained a higher level of outcomes due to the additional supports offered through the school systems.</p> <p>Although preliminary, these results may suggest either supports in the school system for young adults have been reduced or students are leaving school at an earlier age and the transition from school to work or a day program has not always been optimal.</p> | <p>An individual's transition plan, developed in school, is an integral part of moving into adulthood, independent living, and an integrated work environment. Outcome results by age group should be monitored through the end of the contract year. If the 18-21 year old group continues to show lower outcomes than others, focus groups across the state may be helpful to gather information about the transition process, how it is working and where it may need revisions, if supports have been reduced for schools, or if some other factors are impacting outcomes for these young adults.</p> |
| <p>The III Standard that helps determine if the person is healthy dropped close to 20% since Year 1. While most or all participants have a doctor, and have been to a Dr., compared to the previous years, a smaller proportion had health problems.</p> | <p>The Delmarva Nurse, Linda Tupper, has several different types of health related trainings that could be beneficial to offer in the state. Identifying and addressing various health problems specific to individuals with developmental disabilities or individuals in a wheel chair could be the focus of one training session.</p> |

| Results and Recommendations | |
|---|---|
| January - June, 2012 | |
| Discovery | Recommendations |
| <p>Information from the Health and Behavioral Assessment indicates that: 45% of individuals on the waiver take behavioral or psychiatric medication (30% on CDC+) 80% take some type of prescription medication 34% of waiver recipients were taking 5 or more medications 62 individuals were taking 10 or more medications</p> | <p>The number and type of drugs taken by individuals should be included in the Person Centered Report provided to the Support Coordinator. The report should be modified to contain a type of alert if specific combinations and/ or number of drugs are listed – to be determined with input from a medical advisor. The alert should be sent to the Support Coordinator, the Medical Case Manager for the Area, the Local and State APD office and to AHCA.</p> |
| <p>There is a lack of consistency between compliance on record reviews (SSRR) and III outcomes. SSRR results for individuals receiving ADT showed a higher degree of compliance (97%) while SSRR compliance for Supported Employment was one of the lowest (82%). Individuals receiving ADT were much less likely to have outcomes present than were individuals receiving Supported Employment. Compliance with documentation requirements does not appear to produce better outcomes for individuals.</p> | <p>AHCA and APD have worked over the years to create efficiencies in paperwork required by providers. However, perhaps a workgroup with Delmarva, APD, AHCA, and provider representatives could further examine the amount of documentation required by providers. Identifying and eliminating unnecessary or duplicative work will increase time for providers to better focus on individuals, their needs, and goals.</p> |
| <p>170 (13%) providers received a citation for not having proper documentation to support completion of required background screening procedures.</p> <p>Providers or staff most often failed to present the required the following: Federal Bureau of Investigation screening clearance letter Affidavit of Good Moral Character Local Criminal Records Check obtained through the county office</p> | <p>Over the years, APD has implemented various methods to ensure providers have all background screening documentation in place. Often the Area office will have document that need to also be in the provider’s file but are not. AHCA, APD, and Delmarva should work with the Quality Council and perhaps implement one or more of the recommendations developed by QC members to address this issue.</p> |

| Results and Recommendations | |
|--|--|
| January - June, 2012 | |
| Discovery | Recommendations |
| <p>CDC+ Consultant Review results have remained fairly consistent since Year 1.</p> <p>CDC+ Representative results have improved from 71% in Year 1 to 91% to date in Year 3. Representative background screening compliance has increased from 32% to 65%.</p> <p>This appears to indicate that a review process has greatly improved their systems for maintaining documents for billing and other requirements.</p> | <p>Delmarva recommends continued review of the CDC+ Representatives in the review process.</p> |

| Results from Provider Feedback Surveys | | | |
|---|------------------|------------------|-----------------------------|
| Reviews Completed January 2010 - June 2012 | | | |
| Percent Yes | | | |
| Question | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan-Jun 2012) |
| Did the Quality Assurance Reviewer (QAR) identify the documents needed to complete the review? | 94.5% | 95.0% | 99.0% |
| Did the QAR explain the purpose of the review? | 98.4% | 95.4% | 98.0% |
| Did the QAR explain the review process and how the QAR or Delmarva team would conduct the review? | 94.5% | 92.5% | 97.0% |
| Did the QAR answer any questions you had in preparation for the review? | 89.1% | 90.8% | 95.0% |
| Did the QAR refer you to the FSQAP website, including the tools and procedures? | 90.6% | 88.7% | 95.0% |
| Did the QAR arrive at the review at the scheduled time? | 96.1% | 93.3% | 97.0% |
| If no, did the QAR call to notify you he/she might be a little late?* | 95.0% | 62.5% | 83.0% |
| Did the QAR provide you with the preliminary findings of your Provider Discovery Review (PDR) before leaving? | 95.3% | 94.6% | 97.0% |
| If you scored Not Met on any of the standards, did the QAR explain why? | 92.8% | 92.0% | 98.0% |
| Total Responses | 221 | 239 | 189 |

*10 of 16 called to inform provider. (2011)

*5 of 6 called to inform provider. (Yr3Q1_2)

| Volume of Activity and Average Scores July 2010 - June 2012 | | | |
|--|--------------------------|----------------------|--|
| Volume of Activity | | | |
| | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| Person Centered Review | 1,623 | 1,668 | 849 |
| Provider Discovery Review | 2,579 | 2,668 | 1,303 |
| Observations | 1,229 | 1,439 | 470 |
| Service Specific | 9,074 | 10,760 | 4,319 |
| Average Scores | | | |
| | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| Individual Interview | 89.9% | 85.0% | 76.6% |
| Policies and Procedures | 80.7% | 87.1% | 89.3% |
| Education and Training | 84.6% | 87.6% | 89.3% |
| SSRR | 82.3% | 85.7% | 87.2% |
| Observations | 97.2% | 98.3% | 98.0% |



| Background Screening and Recoupment July 2010 - June 2012 | | | |
|--|--------------------------|----------------------|--|
| | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| Percent of Providers with: | | | |
| Background Screening Met | 75.4% | 84.0% | 87.0% |
| At Least One Recoupment | 59.4% | 52.5% | 48.4% |



| Table 10: Provider Discovery Reviews | | |
|--|------------|------------|
| Reason Background Screening Scored Not Met | | |
| January - June 2012 | | |
| Reason | Num | Pct |
| The provider did not present an Affidavit of Good Moral Character. | 94 | 24.7% |
| The provider presented an Affidavit of Good Moral Character, but it was not signed. | 1 | 0.3% |
| The provider presented an Affidavit of Good Moral Character but it was not notarized. | 2 | 0.5% |
| The provider did not present a Local Criminal Records Check obtained within county of residence. | 111 | 29.1% |
| The provider did not present the required Florida Department of Law Enforcement (FDLE) screening clearance letter or another acceptable form of FDLE screening. | 48 | 12.6% |
| The provider did not present the required Federal Bureau of Investigation screening clearance letter. | 70 | 18.4% |
| Background screening results identified a disqualifying offense and the provider has not taken action to resolve or terminate the employee. | 2 | 0.5% |
| The provider was not under constant visual supervision of another fully screened employee when working, pending FBI/FDLE final clearance (no longer than 90 days). | 3 | 0.8% |
| The provider did not provide proof of completing the required five year re-screening | 21 | 5.5% |
| The provider did not provide proof of completing all aspects of the required five year re-screening conducted 8/1/2010 forward. | 29 | 7.6% |
| Total Number of Reasons Cited | 381 | |

| Health Related Indicators | | | |
|---|--------------------------|--------------------------|--|
| Waiver Services Recipients | | | |
| | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| Do you have any problems with your teeth? | 11.3% | 12.5% | 16.8% |
| Do you have health problems? | 38.2% | 41.8% | 43.2% |
| Have you been admitted to the hospital this past year? | 13.0% | 14.9% | 15.9% |
| Have you been treated in the emergency room this past year? | 20.8% | 25.5% | 22.8% |
| Does the individual take behavior/ psychiatric medication? | 35.3% | 41.1% | 44.6% |
| Average number of Rx Drugs taken. | 3.45 | 3.95 | 3.87 |
| Number of Reviews | 1,473 | 1,402 | 697 |

| Health Related Indicators | | | |
|---|--------------------------|--------------------------|--|
| CDC+ Participants | | | |
| | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| Do you have any problems with your teeth? | 14.3% | 7.1% | 13.8% |
| Do you have health problems? | 37.9% | 35.9% | 41.4% |
| Have you benn admitted to the hospital this past year? | 13.0% | 10.3% | 17.8% |
| Have you been treated in the emergency room this past year? | 21.1% | 21.4% | 15.8% |
| Does the individual take behavior/ psychiatric medication? | 23.0% | 26.4% | 29.6% |
| Average number of Rx Drugs taken. | 2.89 | 2.57 | 3.14 |
| Number of Reviews | 161 | 281 | 152 |

| Number of RX Medications Taken per Person | | | |
|---|---------------|---------------|-------------------------|
| Waiver Service Recipients | | | |
| (Range 0 - 19) | | | |
| Number Rx Medications Taken | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| 0 | 23.3% | 18.3% | 18.2% |
| 1 | 13.1% | 13.8% | 9.6% |
| 2 | 11.6% | 11.1% | 15.1% |
| 3 | 11.7% | 10.9% | 13.2% |
| 4 | 9.3% | 9.8% | 9.8% |
| 5 | 7.6% | 8.6% | 7.6% |
| 6 | 6.7% | 5.7% | 7.3% |
| 7 | 5.0% | 5.8% | 5.2% |
| 8 | 3.2% | 4.7% | 3.6% |
| 9 | 2.4% | 3.3% | 2.4% |
| 10 or more | 6.2% | 8.1% | 8.0% |
| Reviews | 1,473 | 1,402 | 697 |

| Number of RX Medications Taken per Person | | | |
|---|---------------|---------------|-------------------------|
| CDC+ Participants | | | |
| (Range 0 - 19) | | | |
| Number Rx Medications Taken | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan - Jun 2012) |
| 0 | 28.0% | 28.1% | 23.7% |
| 1 | 18.6% | 14.2% | 11.8% |
| 2 | 14.9% | 15.3% | 10.5% |
| 3 | 9.9% | 14.6% | 13.8% |
| 4 | 5.6% | 10.7% | 14.5% |
| 5 | 6.2% | 6.0% | 7.9% |
| 6 | 4.3% | 3.6% | 7.2% |
| 7 | 5.0% | 2.5% | 3.3% |
| 8 | 2.5% | 1.1% | 3.3% |
| 9 | 0.6% | 1.1% | 0.0% |
| 10 or more | 4.3% | 2.8% | 3.9% |
| Reviews | 161 | 281 | 152 |

| Average Number of Prescription Drugs Taken | | | |
|--|------------------|------------------|-----------------------------|
| Waiver Services Recipients | | | |
| Area | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan-Jun 2012) |
| 1 | 3.98 | 5.24 | 3.97 |
| 2 | 3.65 | 3.49 | 3.76 |
| 3 | 3.38 | 4.11 | 3.77 |
| 4 | 3.18 | 4.32 | 4.10 |
| 7 | 3.00 | 2.95 | 2.91 |
| 8 | 4.01 | 5.00 | 4.44 |
| 9 | 2.37 | 3.97 | 2.60 |
| 10 | 3.02 | 3.47 | 3.44 |
| 11 | 3.55 | 4.19 | 4.94 |
| 12 | 3.62 | 4.11 | 4.67 |
| 13 | 4.00 | 3.74 | 3.42 |
| 14 | 3.98 | 3.94 | 3.56 |
| 15 | 2.44 | 3.85 | 3.24 |
| 23 | 3.88 | 4.02 | 3.84 |
| State | 3.45 | 3.95 | 3.87 |

| Average Number of Prescription Drugs Taken | | | |
|--|------------------|------------------|-----------------------------|
| CDC+ Participants | | | |
| Area | Year 1 (2010) | Year 2 (2011) | Year 3 (Jan-Jun 2012) |
| 1 | 1.67 | 2.33 | 3.22 |
| 2 | 2.27 | 2.82 | 2.43 |
| 3 | 2.71 | 3.38 | 4.00 |
| 4 | 3.18 | 1.91 | 4.18 |
| 7 | 2.21 | 2.57 | 3.68 |
| 8 | 0.00 | 5.80 | 2.00 |
| 9 | 2.92 | 2.44 | 3.60 |
| 10 | 2.16 | 2.22 | 1.67 |
| 11 | 3.73 | 2.40 | 2.88 |
| 12 | 7.00 | 0.80 | 3.67 |
| 13 | 2.83 | 3.47 | 4.33 |
| 14 | 1.50 | 2.00 | 3.00 |
| 15 | 4.50 | 1.00 | 2.29 |
| 23 | 3.46 | 3.20 | 2.67 |
| State | 2.89 | 2.57 | 3.14 |

| Providers Who Scored Less Than 85 Percent | | | | | | | | | | | |
|---|---------------------|----------------------|------------------|---------------------|----------------|------------------|-------------------------|----------------------|------------------|-----------------------------|--|
| By Area and Year | | | | | | | | | | | |
| Area | Year 1 (2010) | | | Year 2 (2011) | | | Year 3 (Jan - Jun 2012) | | | Difference Year 3 to Year 1 | |
| | Number w/ Low Score | Total Number Reviews | Pct w/ Low Score | Number w/ Low Score | Number Reviews | Pct w/ Low Score | Number w/ Low Score | Total Number Reviews | Pct w/ Low Score | | |
| 1 | 15 | 54 | 27.8% | 15 | 75 | 20.0% | 4 | 18 | 22.2% | -5.6% | |
| 2 | 131 | 223 | 58.7% | 119 | 206 | 57.8% | 29 | 80 | 36.3% | -22.5% | |
| 3 | 102 | 156 | 65.4% | 67 | 150 | 44.7% | 24 | 89 | 27.0% | -38.4% | |
| 4 | 175 | 298 | 58.7% | 119 | 300 | 39.7% | 53 | 136 | 39.0% | -19.8% | |
| 7 | 104 | 219 | 47.5% | 78 | 246 | 31.7% | 34 | 87 | 39.1% | -8.4% | |
| 8 | 83 | 134 | 61.9% | 53 | 116 | 45.7% | 24 | 50 | 48.0% | -13.9% | |
| 9 | 60 | 100 | 60.0% | 46 | 103 | 44.7% | 7 | 41 | 17.1% | -42.9% | |
| 10 | 98 | 192 | 51.0% | 120 | 229 | 52.4% | 54 | 108 | 50.0% | -1.0% | |
| 11 | 103 | 271 | 38.0% | 117 | 359 | 32.6% | 59 | 211 | 28.0% | -10.0% | |
| 12 | 68 | 106 | 64.2% | 42 | 118 | 35.6% | 12 | 54 | 22.2% | -41.9% | |
| 13 | 76 | 176 | 43.2% | 49 | 141 | 34.8% | 38 | 89 | 42.7% | -0.5% | |
| 14 | 36 | 78 | 46.2% | 23 | 70 | 32.9% | 8 | 43 | 18.6% | -27.5% | |
| 15 | 87 | 146 | 59.6% | 62 | 124 | 50.0% | 16 | 49 | 32.7% | -26.9% | |
| 23 | 300 | 485 | 61.9% | 234 | 433 | 54.0% | 91 | 248 | 36.7% | -25.2% | |
| State | 1,438 | 2,638 | 54.5% | 1,144 | 2,670 | 42.8% | 453 | 1,303 | 34.8% | -19.7% | |

| Providers With Low Scores on Multiple Reviews | | | |
|---|-------------------------------------|----------------------------|--------------------------------------|
| Score Less Than 85% on Two or Three Reviews | | | |
| January 2010 - June 2012 | | | |
| Area | Number w/ Multiple Low Scores | Total Number of Reviews | Percent w/ Multiple Low Scores |
| 1 | 3 | 94 | 3.2% |
| 2 | 74 | 282 | 26.2% |
| 3 | 45 | 202 | 22.3% |
| 4 | 95 | 362 | 26.2% |
| 7 | 55 | 298 | 18.5% |
| 8 | 47 | 140 | 33.6% |
| 9 | 23 | 117 | 19.7% |
| 10 | 72 | 246 | 29.3% |
| 11 | 69 | 433 | 15.9% |
| 12 | 26 | 148 | 17.6% |
| 13 | 37 | 226 | 16.4% |
| 14 | 13 | 89 | 14.6% |
| 15 | 42 | 176 | 23.9% |
| 23 | 189 | 634 | 29.8% |
| State | 790 | 3,447 | 22.9% |

| Seven Key Foundational Outcomes: Number and Percent Met | | | |
|---|-------------------|--------------------------------|--------------------|
| July 2011 - June 2012 | | | |
| Delmarva Reviews (NCI and III) | | | |
| Foundational Standard | Number Met | Total Number of Reviews | Percent Met |
| Health is excellent, very good v fairly good, poor (Number Excellent or Very Good) | 291 | 810 | 35.9% |
| Do you have family you see? (Number Yes) | 504 | 558 | 90.3% |
| Person directs the design of services and participates in the identification of needed skills and strategies to accomplish desired goals. (Number Met) | 1,257 | 1,688 | 74.5% |
| Can be alone with friends or visitors at your home, or does someone have to be with you? (Number who can be alone with friends.) | 1,084 | 1,314 | 82.5% |
| Person is free from abuse, neglect and exploitation. (Number Met) | 1,421 | 1,690 | 84.1% |
| Person is safe or has self-preservation skills. (Number Met) | 1,380 | 1,689 | 81.7% |
| 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. Includes dignity, respect, and privacy. (Number Met) | 1,417 | 1,688 | 83.9% |
| Total July 2010 - June 2011 | | 1,858 | 86.7% |
| Total July 2011 - June 2012 | | 1,690 | 77.9% |



| People Receiving Services Who Met Key Health, Safety and Quality of Life Outcomes | | | | |
|--|------------------------------|----------------------|------------------------------|----------------------|
| Number and Percent Met by Fiscal Year | | | | |
| | July 2010 - June 2011 | | July 2011 - June 2012 | |
| Number of Key Outcomes "Met" | Number Individuals | Percent "Met" | Number Individuals | Percent "Met" |
| 7 | 256 | 13.8% | 103 | 6.1% |
| 6 | 513 | 27.6% | 255 | 15.1% |
| 5 | 504 | 27.1% | 500 | 29.6% |
| 4 | 309 | 16.6% | 412 | 24.4% |
| 3 | 133 | 7.2% | 217 | 12.8% |
| 2 | 87 | 4.7% | 114 | 6.7% |
| 1 | 36 | 1.9% | 76 | 4.5% |
| 0 | 20 | 1.1% | 13 | 0.8% |
| Total | 1,858 | | 1,690 | |