

## QUALITY COUNCIL MEETING MINUTES

*9:00 a.m. – 4:00 p.m.*

*Thursday October 21, 2021*

**Type of meeting:**

Quality Council Meeting

**Facilitator(s):**

Theresa Skidmore

**Members:**

Courtney Swilley, FARF

Theresa Wyres, Small Agency Provider

Patty Houghland, Disability Rights Florida

Jill MacAlister, CDC Consultant

John Collins, Self-Advocate

Linda Travis, Solo WSC

Sandy Dayton, Agency Provider

Mary Jo Pirone, Self-Advocate

Latosha Obry, Self-Advocate

**Absent Members:**

Veronica Gomez, Agency WSC

Dina Justice, Family Care Council Florida

**APD Attendees:**

Edwin DeBardeleben

Meghan Torres

David Dobbs

Tom Rice

Kaleema Muhammad

Hillary Jackson

Lukas Tubeck

**AHCA Attendees:**

Cathy Cross

**Qlarant Attendees:**

Bob Foley  
Theresa Skidmore  
Charlene Henry  
Katy Glasgow  
Robyn Turlakis  
Kristin Allen  
Christie Gentry  
Janet Tynes

**Other Attendees:**

Valerie Bradley, HSRI  
Stephanie Giordano, HSRI

**Scribes:**

Charlene Henry, Qlarant

**Acronyms:**

ABC- Allocation, Budget and Control System  
ADT- Adult Day Training  
AHCA- Agency for Health Care Administration  
ANE- Abuse, Neglect, and Exploitation  
APD- Agency for Persons with Disabilities  
CDC+-Consumer Directed Care  
CMS- Centers for Medicare and Medicaid Services  
CMS- Consumable Medical Supplies  
DD- Developmental Disability  
EVV-Electronic Visit Verification  
FARF- Florida Association of Rehabilitation Facilities  
FBI-Federal Bureau of Investigations  
FCCF- Family Care Council Florida  
FDDC- Florida Development Disabilities Council  
FDLE- Florida Department of Law Enforcement  
FSQAP - Florida Statewide Quality Assurance Program  
HHS – Health and Human Services

HCBS-Home and Community Based Services  
HSRI- Human Services Research Institute  
iBudget- Individual Budget  
I/DD- Intellectual and Developmental Disabilities  
ICA – Individual Comprehensive Assessment  
II- Individual Interview  
LOC- Level of Care  
MWEW – Medicaid Waiver Eligibility Worksheet  
NASDDS - National Association of State Directors of Developmental Disabilities Services  
NCI- National Core Indicators  
NGQSI – Next Generation Questionnaire for Situational Information  
PCR - Person Centered Review  
PDR - Provider Discovery Review  
QQS - Qlarant Quality Solutions  
QA-Quality Assurance  
QAR-Quality Assurance Reviewer  
QC-Quality Council  
QI-Quality Improvement  
QO- Qualified Organization  
SAN – Significant Additional Needs  
SSRR -Service Specific Record Reviews  
SC – Support Coordination  
TRAIN-Training Finder Real-time Affiliate Integrated Network  
WSC- Waiver Support Coordinator

### **Welcome & Introductions**

Theresa Skidmore, Florida Director – Qlarant

Beginning at approximately 9:00 a.m., Theresa Skidmore opened the meeting. Theresa welcomed all members, guests; also provided introductions and housekeeping comments; Adrienne Dissis is the newest family member representative on the council.

## **July 2021 Refresher with Approval of Minutes**

Theresa Skidmore, Florida Director – Qlarant

Theresa Skidmore provided a refresher from the July 2021 meeting held via Zoom. Please see the July minutes for details. A motion to approve the minutes was made by Patty Houghland and seconded by Mary Jo Pirone.

## **Qlarant Updates**

Theresa Skidmore, Florida Director – Qlarant

Theresa provided an update regarding tools and activities Qlarant is working on. She started out talking about PCRs and QO WSC PDRs, indicating we are starting to offer in-person interviews; WSCs reviews will remain a desk review. Theresa talked about the process for doing the in-person meeting and discussed the Health & Safety questions QARs will ask. If any answers to the questions pose a risk, then the reviewer will switch to zoomgov for the interview. There are no changes to the PCR interview tool; there was one change to the Health Summary where a COVID-19 vaccine question was added along with updates to the common medication list. Qlarant still does the NCI In-Person Survey as part of our contract and this will be done via zoomgov with use of a camera if the person chooses not to meet in-person at this time; no mail-out survey will be done this year. On the PDR side, a new Administrative Tool and Service Record Tool for QOs (WSCs) and updates to the Administrative Tool for all other providers are posted. Theresa showed participants where to find the tools on the Qlarant website. Jill asked about monitoring of WSCs for disseminating the satisfaction survey to individuals; she said there is no way for a supervising WSC to monitor the WSCs under her for this as a WSC can only monitor those they do this for. Ed offered that he would be able to further discuss during the APD session.

Theresa noted QO WSC reviews will only go back to July 1, 2021 for notes but reviewers will have to look back further than July for other documents such as waiver eligibility worksheets, Support Plans, etc. Coordinators are still responsible for bringing records into compliance, July 1 forward. Theresa ended her update with a review of the Desk Review procedures. These procedures are being updated to address iConnect, sampling and other general edits; these procedures will remain in place until 12/31/21.

## **HSRI Presentation**

Valerie Bradley, President Emerita & Stephanie Giordano, Director

Valerie and Stephanie presented on select sections from Florida's participation in the National Core Indicators-I/DD Adult Family Survey and gave updates on the DSP (Direct Service Professional) workforce from a national perspective.

Stephanie discussed Adult Family Survey data touching on the changes, cancellations or reductions to services due to COVID-19. She talked about the use of technology during the pandemic and areas where family members felt they needed more help. Next, she discussed financial challenges and data trends for receiving services. Valerie discussed Direct Support Professionals touching on the root of the crisis, recruitment/retention efforts, and what should be the focus going forward to meet the needs of those receiving services through this workforce. Members, Patty Houghland and John Collins voiced their concerns for the current workforce issue. Member, Adrienne Dissis also commented that it might be helpful to apply some of the flexibilities from the CDC+ program to waiver services where possible.

Please see presentation slides for more details.

### **APD Update / Critical Incident Reporting and Management**

Ed DeBardeleben, Chief, Program Development, Compliance & Policy

Meghan Torres, Program Administrator for Quality Improvement

Meghan Torres gave an update on Critical Incident Reporting and Management. APD reports on the Fiscal Year 21, July 1 – June 30. Meghan started out talking about Reportable Incidents and noted these must be reported but are not considered life threatening; 4645 incidents in this category, showing as significantly higher for this time of the year. Top 3 this past quarter, ER visits, Baker Acts and Client Injuries. She talked about trends for each region for last fiscal year and then showed incidents by region so far for first quarter. She noted Southern Region consistently reported lower numbers. Patty Houghland asked does Southern Region have a lot of behavioral group homes or standard group homes. Is a Baker Act considered reportable or critical? Meghan said they are reportable. Hillary Jackson (Southern Region, Regional Operation Manager) said they do have a lower number of behavioral residential settings and they are addressing lack of reporting with residential providers. Meghan discussed Critical Incidents; 386 so far. Top 3 this past quarter, Life Threatening Illness, Unexpected Client Death and Verified Findings of Abuse, Neglect and Exploitation. There has been no change in the top 3 since last fiscal year. Patty Houghland asked did unexpected deaths include COVID-19; Meghan said yes, it does include COVID-19 deaths. Meghan reminded everyone of the change in reporting for COVID-19 from being critical to reportable unless the person was hospitalized. She discussed reporting by region, location and setting. Licensed settings are the highest with the home setting next. Meghan noted the sexual misconduct reports include allegations and confirmed cases; APD follows-up on each at the State Office and Regional levels. Kristin asked about the category marked Other for locations; Meghan said these could be a library, hospital or any other setting not identified, where the actual incident took place. Meghan

reviewed incidents for the current fiscal year; she said numbers are down for first quarter overall for this category.

David Dobbs (APD Chief of Staff) addressed initiatives related to direct care workers. For the short term, he stated they are taking part in the American Rescue Plan Act. Federal Gov't increased their share of the match to bolster waiver services and providers; plan was submitted to CMS in July and plan has been approved. This funding will provide stipends, lump sum bonuses to increase recruitment and retention efforts. Legislative Budget Commission will meet in November to discuss the spending. For the long term, there is a provision in Appropriations Act for reporting of the impact of the minimum wage increase to providers. Report is due 12/1. This will help them as they work on a rate increase to meet the requirement to increase the minimum wage. Patty asked about where to see the plans as she has plan 1 and 2 but not 3. David said there are only 2 plans – the plan submitted in August was provisionally approved. Patty asked was the State of Florida thinking that \$10 an hour minimum wage was going to be enough because she said it wouldn't be good enough.

Ed gave the APD Update. He said Florida would take part in the Staff Stability Survey administered by HSRI in January - June 2022. He said this survey does not apply to WSCs, nor 1099 contractors; it will only go to agency providers. He said this survey provides useful data so the state will be eagerly awaiting the responses. iBudget Handbook was updated September 2021 to address iConnect and EVV. There are training modules for iConnect and is required of all providers; not all modules have been rolled out yet but providers will be notified as new ones come out. He then addressed the implementation of Senate Bill 82. There are no longer any solo WSCs. Part of the bill requires Level 1 training for existing WSC. 1039 are a part of the learning plan – 863 done with Level 1, 112 in process, 64 have not started. By October 29<sup>th</sup>, all existing WSCs must have completed Level 1 training. He noted they are working with the Regions to make sure all the QOs get their WSCs trained. He heard of WSCs having issues with completing the training; he encouraged people to read the instructions and follow the steps. They are working with the Regions to provide technical assistance to use TRAIN FL for their training needs, especially pre-service training. A person having more than 1 TRAIN account does cause a problem. He encouraged providers to find out if their staff have an existing account before they start taking trainings to ensure trainings completed count correctly. Question – why is level 2 training not counted toward in-service hours for WSCs. Ed said Level 1 & 2 count toward in-service hours (16 hours) for new WSCs in their first year; Level 1 counts toward in-service hours (8 hours) for existing WSCs. Passing score for WSC training is 85%; those who want to be mentors have to score 90%. Adrienne Dissis commented it would be good to have a way to notify the QO supervisor when their WSCs finish their required training. Ed said they are looking into a way for QOs to pull the report from training completed; right now only the APD Regions can do this. The bill requires

APD to put into place a scorecard to show performance of the WSCs. Ed said as of 10/1/21 there have been 1,247 satisfaction surveys submitted; scores range from 2.17 to 5.0. He talked about following instructions regarding when to give the individual their code to complete the survey; it should be given to them at the time of the Support Plan meeting, not before. He said taking part in the survey is not mandatory for people. Jill noted as a supervisor she couldn't manage her WSCs getting those survey codes out. Ed said they need to look at that; he further noted they would be making more enhancements to the scorecard. They will be further detailing the violations, so they can be clearer. He said the WSC supervisor can require the WSC to show proof they have given the code to people; they can have the WSC print out something to show they did it. Patty Houghland noted it would be good to have a way to evaluate an old WSC, especially if they were unhappy, changed and got a new one. Ed encouraged individuals/families to call their regional office and voice their WSC complaints or concerns because these could fall under an ethical or professional violation. Jill MacAlister asked about selection packets that list individual WSCs when we have moved to QOs since July 1; she suggested changing the packet to list the QO agency names only due to the length of the packet. Ed spoke about the importance of people knowing who is going to be their coordinator and them having choice. He said he would pass this suggestion along to Lynn Dawe who works with the regions in this area. Ed commented the scorecard identifies counties the WSC works in and so it is important the QO attaches the specific county the WSC serves. Patty commented it makes sense to list the QO agency then have the QO be tasked with connecting the individual to WSCs in the agency.

Individual Comprehensive Assessment will be in the validation stage starting Spring 2022; there will be 1500 people selected to participate with 150 people getting a revalidation or retest 30 days from the initial assessment. Assessors to be trained end of January/early February 2022 to start administering the validation process at the end of February/beginning of March 2022. These will be done in-person. Florida State University will analyze the data for the resource allocation model. APD recognizes the need for a transition period between the QSI and the ICA; both assessments will be done as they phase out the QSI and move completely to ICA. Ed wrapped up his updates by announcing his retirement from APD in December.

Question – is Life Skills Development 1 (Companion) still allowed in the group home right now as a provision of Appendix K. Tom Rice, APD said this is still allowed and can be extended up to 6 months past the end of the public health emergency, which would be until January 2022.

### **Qlarant Data Presentation**

Dr. Katy Glasgow, Scientist

Katy presented an overview of data from Provider Discovery Reviews (PDR), for July – September 2021.

Katy reviewed PDR scores by provider size and region. She also reviewed the number and types of alerts. She touched upon review scores by service and discussed comparisons between FY 21 and FY 22 Q1. Katy discussed Low Scoring Indicators for Life Skills Development 2 (SEC) and Supported Living Coaching and went over Billing Discrepancy Indicators by service. Katy discussed Medication Use, highlighting the medications identified in the Health Summary, average and excessive usage by waiver type and year. She then discussed Controlled Medications by residential setting and primary disability for those on the waiver. She rounded out the presentation reviewing Most Commonly Prescribed/Greatest Increases in prescription for medications, including controlled and over-the-counter.

Please see presentation slides for more details.

### **Quality Council Follow-Up & Next Steps**

Theresa Skidmore, Florida Director – Qlarant

Theresa said Qlarant would inform APD and AHCA of any remaining questions or concerns. 2022 meeting schedule was discussed; potential meeting dates and locations will be emailed to members.

### **Attachments:**

July 2021 Minutes

Qlarant Data Presentation

HSRI Presentation