

2010 Quality Council Meeting Minutes

September 21, 2010

9:00 AM – 4:00 PM

Aloft Hotel

200 North Monroe, Tactic Room #3

Tallahassee, FL 32301

Type of meeting:

Quarterly Quality Council Meeting

Facilitator(s):

Walt Wooten, Area 1 APD Administrator

Beth Kidder, Agency for Health Care Administration (AHCA)

Quality Council Member Attendees:

Jamie Levin, WSC/Self Advocate

Pamela Dicks, Self Advocate

Phil Pearson, Family Care Council (FCC), Area 12

Jill MacAlister, Waiver Support Coordinator (WSC)

Melissa Moskowitz, Provider

Mike Bonner, Self Advocate

Quality Council Member Attendees via Telephone:

Suzanne Sewell, Florida Association of Rehabilitation Facilities (FARF)

Veronica Gomez, WSC

Quality Council Member Not in Attendance:

Latasha Williams, Florida Developmental Disabilities Council

AHCA – APD – HSRI – DF Attendees:

Melanie Johnson, AHCA; Leigh Meadows, AHCA; Steve Coleman, Senior Behavior Analyst, APD; Steve Dunaway, APD; Jolie LaTourelle-Jones, Bureau Chief – Quality Assurance and Clinical Supports, APD; Alexandra Weimorts, CDC+/APD; Val Bradley, Human Services Research Institute (HSRI); Charmaine Pillay, DF; Gwen Williams, DF; Kristin Allen, DF; Theresa Skidmore, DF; Sue Kelly, DF; Carol McDuff, DF

General Public Attendees:

Marilyn Yon, Pyramid; James Ueborhost, Pyramid Players; Steven Moskowitz, Moskowitz, Inc.; Jennifer Jacoby, The ARC of Bradford Cty.; Darlene Hinkle, WSC – Area 3; Teris Robinson, Improve Life Management; Pat Carper, RN, MedEd America, Inc.; Thomas Randolph, Pyramid

Note Taker:

Carol McDuff (DF)

Acronyms:

APD- Agency for Persons with Disabilities

AHCA- Agency for Healthcare Administration

DF- Delmarva Foundation

FARF- Florida Association of Rehabilitation Facilities

FCC- Family Care Council

FDDC- Florida Development Disabilities Council

HSRI- Human Services Research Institute

WSC- Waiver Support Coordinator

CMS- Centers for Medicare and Medicaid Services

NCI – National Core Indicators

III – Individual Interview Instrument

HBA – Health and Behavioral Assessment

SSRR – Service Specific Record Reviews

FSQAP – Florida Statewide Quality Assurance Program

PCR – Person Centered Review

PDR - Provider Discovery Review

Agenda Notes

I. Opening Remarks/ Overview Of Meeting

1. **Welcome and Introductions-** Walt Wooten, Co chair, welcomed everyone to the Quality Council meeting. He introduced Beth Kidder, Co chair/AHCA and then had the QC Members introduce themselves.
2. **Review and Approval of Minutes-** Melanie Johnson, AHCA – Moved for the QC Members to approve the meeting minutes from the July 28, 2010 meeting. The minutes were approved.

II. Delmarva Foundation

1. **Quality Assurance and the Person Centered Review Process (PCR): What does it look like? What does it sound like?**

Charmaine Pillay (DF) provided an introduction to PCR process – What it looks like, what it feels like. Delmarva, provided the members with a visual of the PCR process through “skits”. Delmarva reviewed portions of the National Core Indicators (NCI), the Individual Interview Instrument (III), the Health and Behavioral Questionnaire (HBA), and the CDC+ Representative tool.

Theresa Skidmore (DF) provided a broad overview of the PCR process.

Sample selection for a PCR typically consists of two recipients on a WSC's caseload. DF stays true to the sample and may follow the person selected for a PCR from WSC to WSC.

The tools used during a PCR Interview:

- National Core Indicators (NCI) – Information from NCI is not used in the PCR reporting.
- Individual Interview Instrument
- Health and Behavioral Assessment

DF has begun reviewing the Consumer Directed Care (CDC+) program. There are currently 1,552 CDC+ participants in this program. DF has been working closely with AHCA and APD for effective methods to provide quality assurance for this process.

A. Theresa Skidmore (DF) – Speaker/Power Point Presentation

The Person Centered Review process begins with a face-to-face interview with the individual; Includes a review of supports & services specific to that individual; and includes a review of the Cost Plan, Support Plan, Implementation plan and service records from each provider rendering services to the individual

Tools used for a Person Centered Review: There are 3 primary tools used during the PCR – the National Core Indicators (NCI) – Information from NCI is not used in the PCR; Individual Interview Instrument; Health and Behavioral Assessment. The Service Specific Record Review is completed for each provider who renders services to the person participating in the interview.

Skit Cast - Delmarva Reviewer – Gwen Williams; Mark - James Ueborhorst; Theresa Skidmore – Support Coordinator; Charmaine Pillay – Supported Living Coach; Kristin Allen – In Home Support provider.

Skit #1: Let's meet Mark

Mark lives in an Apartment in Tallahassee

Mark's services include:

- Support Coordination
- Supported Living Coaching
- In Home Support Services
- Adult Day Training

Scene 1 - National Core Indicator (NCI) Survey

The NCI is a tool used to gather information which is used at a national level for states to compare their data from state to state. This is a survey and the questions are designed to elicit a "Yes" or "No" response. The NCI is composed primarily of 2 sections (examples below). For Section I, the person being interviewed must answer the questions. If the person is not able to answer Section 1 questions, then the Reviewer moves on to Section 2. Family members or guardians who know the person may assist with Section 2 answers. Responses to the NCI are not used in decision making for the PCR.

Section 1

- Employment / other activities
- Home
- Safety and Health
- Friends and Family
- Satisfaction with Services/Supports
- Self Directed Supports

Section 2

- Community Inclusion
- Choices
- Rights
- Access to needed services

Scene 2 - Individual Interview Instrument (III)

The III captures information regarding supports and services from the perspective of the person; there are 12 Elements of Accomplishment/Attainment covering areas such as satisfaction with services, safety, and health.

Scene 3 - Health & Behavioral Assessment (HBA)

The HBA is a comprehensive questionnaire developed by the Delmarva Registered Nurse Reviewer (DFNR). Based on the answers to the HBA questions, "Discoveries" (areas for follow-up) may be generated on the PCR report.

A sample of questions from the HBA:

- Have you seen a doctor in the past year? What kind of doctor?
- Do you have a dentist?
- Have you been to the ER? Admitted to the hospital?
- Do you take medication? What kinds?
- How is your health...better, worse, the same?

Consumer Directed Care (CDC+)

CDC+ began in Florida in 2000 as a research & demonstration waiver. In March 2008, CDC+ became a permanent Florida Medicaid State Plan Option. The Program was approved for expansion and currently there are approximately 1,552 CDC+ participants statewide. CDC+ participants are included in Delmarva's sample for Person Centered Reviews.

More on CDC+

Consumer Directed means participants direct their own care & manage their own funds. Participants can manage the program on their own or select a CDC+ Representative to handle this task. A CDC+ representative is an advocate who manages the individuals program and acts in the best interest of the participant. Participant/Representative are responsible for maintaining their records and documentation, which Delmarva conducts record reviews to ensure compliance.

Scene 4 – Record Review with CDC+ Representative

Two Delmarva staff provided a skit on the record review process for a CDC+ Representative. One DF staff was the QAR and the other the CDC+ Representative. This provided insight into the record review process, the types of questions DF would ask, and the documents the Representative would need to have available.

Service Specific Record Reviews (SSRR)

A Record Review with the Support Coordinator and other service providers is used to assess whether the provider is in compliance with program standards and uses a person centered approach to service delivery. SSRR are completed for each designated provider who provides services to the person participating in the PCR.

Service Specific Tool Format

Gathering information for the Service Specific tool uses the following Discovery Methods:

- Record Review (RR)
- Individual Interview (II)
- Provider Interview (PI)
- Provider Documentation (PD)
- Observation (O)

PCR/PDR Individual Record Review

An individual Record Review is completed for each person sampled in either a PCR or PDR. The QAR reviews the prior 12 months of documentation maintained for each service. Documentation required for monitoring/reimbursement includes:

- Support Plans, Implementation Plans
- Cost Plans, Service Authorizations
- Service Logs, Progress Notes, Monthly Summaries

- Quarterly reviews, Annual Reports, etc.

Service Specific Individual Record Review

Some examples of questions that will be asked during a Service Specific Record Review:

- Does the service meet the person's needs/desire outcomes?
- Does the service match the description of the service per the handbook?
- Does the service stay within the limitations per the handbook?
- Does the service stay within the limitations of the Service Authorization?
- Does the record match the person's Support Plan?

Scene 5- Record Review with Mark's providers

DF staff role played the record review process for In-Home Supports;

Questions and Answers:

An example of some of the questions:

- How long does the NCI take to complete? – If the representative is organized @ 1.5 hours; if not, an afternoon.
- The time spent on a review depends on how organized the representative is.
- Is there mandated training for the Representative? Yes, there is mandated training – 1.5 to 2 days – Alexandra Weimorts (APD)
- Do providers know the impact when there is a Not Met (NM)? Yes, at the end of a PDR the provider receives a preliminary findings report.
- Comment: Small providers want to know the financial impact for potential recoupment.
- Do providers know when they are being reviewed? A notification letter is sent to providers 90 days prior to the review with information concerning information/documents needed during the review. In addition, the QAR reviews what is needed during by the review during the initial phone contact with the provider.

III. Human Services Research Institute

1. Involving Individuals, Families & Stakeholder in Quality Improvement: A Framework for Understanding Quality how for Delmarva's "Florida Statewide Quality Assurance Program"

Human Services Research Institute – Val Bradley, President

Developmental Disabilities are a \$20 billion industry nationally. When providing services for people with DD it is not just ideology, you have to count/measure it. Expectations have been established for people with developmental disabilities and their families.

IV. Delmarva dashboards/Quarterly Reporting

1. Results from Delmarva Reviews -Sue Kelly (DF)

Sue provided an orientation on how to navigate the Florida Statewide Quality Assurance Program (FSQAP) website (how to access the FSQAP and log in for accessing the public site). Sue examined the data across APD Area offices on the website and discussed the possibility of more drill downs for additional information.

2. Phil Rond (DF) presented the "Dashboards" as a starting point for high level comparisons of quality management. It was suggested that the focus of dashboards be on key performance indicators. Dashboards only operate in Excel 2007 and 2010; not earlier Excel versions. To date, four PDR Dashboards have been set up. Sue Kelly cautioned people about using dashboards information for comparing one APD area to another as the number (n) of reviews in some areas is too small. As "n" approaches 30, then one can do more comparisons.

V. Open Discussion with Council Members:

1. Walt Wooten, Area 1 APD - A parking lot will be established for issues outside the scope of the quality council; primary focus of QC needs to be with the DF contract. Walt Wooten requested additional training for APD staff on the new quality assurance review process. Suggestions for future trainings: mail out PPT presentation(s); call in conference calls; go to meetings. He is concerned about comparisons may be drawn across areas using dashboards

and requested a statement be included in the dashboards advising users not to draw comparisons between areas.

2. Phil Pearson – Raised concerns regarding families not receiving their financial statements. Emphasized the need to take a comprehensive look of the quality assurance process, including policy development and provider remediation. Mr. Pearson suggested that members look at the current DD wait list, and take a closer look at Adult Day Training (ADT) providers. Recommended that the Council explore ways to recognize outstanding providers in the community. Family Care Council could have a link to recognize outstanding providers.
3. Pamela Dicks- Provided a survey for QC members to review and return to her.
4. Jill MacAlister –Raised questions about the status of APD on the resolving concerns about unresolved service requests and the Pre-service authorization of services. Request for more information on other Quality Assurance forums in the State.
5. Mike Bonner- Raised concerns related to the CDC+ monthly statements not being received on-time by all families. Alexandra Weimorts – APD became its own fiscal agent in 2008. Because APD is dependent upon bank statements, there is a 30-45 day delay in the delivery of monthly statements. Families were notified of this delay.
6. Walt and Beth Kidder will take other issues back to AHCA and APD for further review.

VI. Next Steps

1. APD is in the process of revitalizing the Area Quality Councils.
2. What are the big questions the Area Offices should be asking?
3. Identifying non-responders within the waiver and deciding how to capture data from these families.
4. What can be done to recognize outstanding provider performance?
5. Additional Training is needed for APD Area Office staff on the Delmarva quality assurance process.
6. What are the top 5 topics the QC thinks we should be working on?

VII. Next Meeting;

December 15th, Tampa, FL

VIII. Adjourn

Additional Information

Future Dates:

- Next Quality Council Meeting will be held December 15, 2010 in Tampa, Florida. Location to be disclosed at a later date.

Notes:

Attachments:

