



Florida Statewide Quality Assurance Program

Quality Council
December 15, 2010

Digging Into the Data
January – October 2010





Delmarva Reviews by APD Area January – October 2010

APD Area	Number of PCRs		Number of PDRs	
	Waiver	CDC+	Completed	Non-Compliant
1	50	4	34	0
2	81	14	140	5
3	62	6	109	7
4	104	9	211	7
7	116	20	159	8
8	44	2	73	1
9	59	12	61	1
10	105	14	134	1
11	195	25	255	7
12	32	2	72	0
13	80	5	124	5
14	34	2	41	0
15	33	3	115	0
23	167	22	208	11
Total	1,162	140	1,736	53



Provider Discovery Reviews Rights, Health, and Safety Alerts by Area January – October 2010

APD Area	Rights	Health/ Safety	Total Alerts	Pct Providers w/ Alert*
1	0	2	2	5.9%
2	0	1	1	0.7%
3	0	9	9	7.3%
4	0	7	7	3.3%
7	0	11	11	6.9%
8	2	27	29	28.8%
9	0	18	18	27.9%
10	4	8	12	7.5%
11	1	10	11	3.1%
12	0	9	9	11.1%
13	0	11	11	8.9%
14	0	7	7	14.6%
15	2	29	31	23.5%
23	2	56	58	21.6%
State	11	205	216	10.5%

* Providers may have more than one alert.



Reasons for Alerts (PDRs)

Rights

- **Access to all areas in the home or family members (4)**
- **Abuse issues (2)**
- **Improper monitoring (hidden cameras) (2)**
- **Locked doors (3)**



Reasons for Alerts (PDRs)

Health/Safety

- **Medication Issues**
 - **Improper or lack of medication administration training/validation (81)**
 - **Improperly stored medications (5)**
 - **Trained but not with APD approved trainer (3)**
 - **Medication error (1)**
 - **Staff had not signed off on medications (1)**
 - **Tube feeding without proper training (1)**



Reasons for Alerts (PDRs)

Health/Safety

- **Lapse in vehicular insurance, registration, or driver's license (103).**
- **Locked or blocked doors (7)**
- **Improper restraint use (2)**
- **Miscellaneous**
 - **Broken chairs**
 - **Broken windshield**
 - **Excessive dust and dirt**



Background Screening (DD Waiver) January – October 2010

APD Area	Number of Employees w/ BG Not Met	Number of Providers w/ BG Not Met	Pct w/ BG Not Met
1	5	4	11.8%
2	31	28	20.0%
3	39	34	31.2%
4	46	42	19.9%
7	68	48	30.2%
8	41	28	38.4%
9	33	20	32.8%
10	46	35	26.1%
11	94	66	25.9%
12	20	17	23.6%
13	30	29	23.4%
14	5	4	9.8%
15	49	37	32.2%
23	88	65	31.3%
State	595	457	26.3%



Reasons Screening Not Met

Times Noted	Reason Cited
297	The provider did not present the required Federal Bureau of Investigation screening clearance letter.
220	The provider did not present the required Florida Department of Law Enforcement screening clearance letter or another acceptable form of FDLE screening.
202	The provider did not present a Local Criminal Records Check obtained within county of residence.
179	The provider did not present an Affidavit of Good Moral Character.
67	The provider did not provide proof of completing the required five year re-screening.



Reasons Screening Not Met

Times Noted	Reason Cited
23	The provider presented an Affidavit of Good Moral Character but it was not notarized.
16	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).
9	The provider presented an Affidavit of Good Moral Character, but it was not signed.
7	Background screening results identified a disqualifying offense and the provider has not taken action to resolve or terminate the employee.



CDC Representative Background Screening Not Met October 2010 (N=10)

Times Noted	Reason Cited
9	The provider did not present an Affidavit of Good Moral Character.
8	The provider did not present a Local Criminal Records Check obtained within county of residence.
9	The provider did not present the required Florida Department of Law Enforcement screening clearance letter or another acceptable form of FDLE screening.
5	The provider did not present the required Federal Bureau of Investigation screening clearance letter.
1	The provider did not provide proof of completing the required five year re-screening.



Training Standards Percent of Providers With at Least One Not Met

The provider received 8-hrs of annual in-service related to implementation of individually tailored services specific to Adult Day Training.	62	33.9%
The provider received training in Person Centered Approach/Personal Outcome Measures. (5 day POM training for WSCs addressed under WSC specific training requirements)	1,731	32.6%
The provider received training specific to the needs or characteristics of the individual as required to successfully provide services and supports. (Included in 34 hour Statewide and 26 hour Area Specific training for WSCs/CDC+ Consultants)	1,146	31.8%
The provider received training with an emphasis on choice and rights(Included in 34 hour Statewide and 26 hour Area Specific training for WSCs/CDC+ Consultants)	1,147	30.3%



Training Standards Percent of Providers With at Least One Not Met

The provider received training on the Medicaid Waiver Services Agreement, its Attachments and the Developmental Disabilities Waiver Services Coverage and Limitations Handbook and its appendices. (Included in 34 hour Statewide and 26 hour Area Specific tra	1,147	29.6%
The provider received training in Zero Tolerance.	1,736	28.3%
The provider received training specific to the scope of the services rendered. (Included in 34 hour Statewide and 26 hour Area Specific training for WSCs/CDC+ Consultants)	1,147	27.6%
The provider received training in the development and implementation of the required documentation for each waiver service provided. (Included in 34 hour Statewide and 26 hour Area Specific training for WSCs/CDC+ Consultants)	1,145	27.4%



Services With Compliance Scores <80% (PDR) January – October 2010

Service	# PDR	Ave PDR Score
Behavior Assistant	92	78.2%
Companion	777	74.5%
In Home Support Services	703	78.9%
Personal Care Assistance	823	71.8%
Respite	775	71.7%



Standards Most Often Not Met Behavior Assistant

Standard	# SSRR	% Not Met
The provider submits documents to the Waiver Support Coordinator as required.	97	59.8%
The provider has service logs for each date of service.	96	34.4%
The provider has documentation of required monitoring and supervision by the responsible Certified Behavior Analyst.	97	33.0%



Standards Most Often Not Met Companion

Standard	# SSRR	% Not Met
The Provider submits documents to the Waiver Support Coordinator as required.	871	61.1%
The provider has service logs for each date of service which identify activities that are reflective of the individual's support plan goals/outcomes.	872	45.1%
The provider has a system in place to gather historical information about the person's behavioral and emotional health, with the person's/legal representative's consent.	871	31.8%



Standards Most Often Not Met In Home Support Services

Standard	# SSRR	% Not Met
The Provider submits documents to the Waiver Support Coordinator as required.	837	66.4%
The provider has service logs for each date of service that are reflective of the individual's communicated personal goals.	837	39.5%
The record includes monthly summaries that reflect progress toward the communicated personal goals.	837	30.7%



Standards Most Often Not Met Personal Care Assistance

Standard	# SSRR	% Not Met
The Provider submits documents to the Waiver Support Coordinator as required.	912	65.1%
The provider has service logs for each date of service that are reflective of the individual's communicated personal goals.	912	44.4%
The provider has a system in place to gather historical information about the person's behavioral and emotional health, with the person's/legal representative's consent.	910	36.7%



Standards Most Often Not Met Respite

Standard	# SSRR	% Not Met
The Provider submits documents to the Waiver Support Coordinator as required.	862	69.4%
The provider has service logs for each date of service that are reflective of the individual's communicated personal goals.	862	45.1%
The provider has a system in place to gather historical information about the person's behavioral, and emotional health with the person's/legal representative's consent.	856	36.4%



CDC+ Representative Average Score = 70.1% Small Sample Size

Standard	# SSRR	% Not Met
Background screening results for all Directly Hired Employees are available for review.	16	75.0%
Complete and signed Job Descriptions for each service provider are available for review.	16	43.8%
Signed Employee/Employer Agreement for each Directly Hired Employee (DHE) is available for review.	16	37.5%



Breakout Groups

