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Florida Statewide Quality Assurance Program

What to expect and how to prepare for your Qlarant review beginning July 2018

May 26th, 2018

Empower Florida Conference



Qlarant



Introductions

- **Theresa Skidmore - Program Director**
- **Kristin Allen - Regional Manager**

Housekeeping

- Restrooms
- Cell Phones
- Stretch
- Sign-in Sheets
- Evaluations
- Questions

Session Purpose

- Review key components of a Provider Discovery Review (PDR)
- Discuss lower scoring standards within each component, common reasons standards are scored not met and provide tips and suggestions on how to avoid common mistakes
- Highlight changes to Qlarant tools and processes that will be implemented beginning July 1st, 2018

Quick Tips to Ensure a Positive Qlarant Review

- Study the Handbook and read requirements for services you provide
- Review Qlarant tools
- Prepare all year long not just when you first get your letter or a phone call to schedule
- Conduct your own self-assessment using Qlarant tools
- Have systems to organize your documentation including Administrative, Employee and Individual Service Records
- Answer the phone when we call 😊

Discovery Process Eligible Services

- ✓ Behavior Analysis
- ✓ Behavior Assistant
- ✓ CDC+ Consultant
- ✓ CDC+ Representative
- ✓ Life Skills Development 1 (Companion)
- ✓ Life Skills Development 2 (Supported Employment)
- ✓ Life Skills Development 3 (Adult Day Training)
- ✓ Personal Supports
- ✓ Residential Habilitation
 - ✓ Standard
 - ✓ Behavior Focus
 - ✓ Intensive
 - ✓ Enhanced – **New**
- ✓ Respite Care (Under 21)
- ✓ Special Medical Home Care
- ✓ Support Coordination
- ✓ Supported Living Coaching

Discovery Process

Person Centered Review (PCR)

- Person Centered Reviews assess outcomes and support delivery systems from the perspective of persons receiving services

Provider Discovery Review (PDR)

- Provider Discovery Reviews evaluate person's satisfaction and provider performance, based on service delivery measures and program standards

Provider Discovery Review (PDR)

- Centers around the provider's service delivery system
- Evaluates performance in delivering appropriate services and supports to assist the person in achieving personal goals/outcomes and meeting identified needs
- Assesses quality, billing and compliance with Waiver Handbook, Florida Administrative Code, and other state requirements, rules, and policy

Provider Discovery Review (PDR)

**Individual
Interviews**

Staff Interviews

**Policies and
Procedures
(Agencies Only)**

**Administrative
(All)**

**Qualifications
and Training**

**Observations
(If applicable)**

**Service Specific
Record Reviews**

**Alerts
(If applicable)**

New Interview Tools Effective July 1, 2018

- **PCR and PDR My Life Tool** replaces what was called PCR & PDR Individual Interview Tool
- Also New WSC and PDR Staff Interview Tools
 - ❖ **New tools will post to the Qlarant website in mid June**

Interviews

- Capture information from both the perspective of the person receiving services and the WSC/Provider rendering the service
- Gather information specific to the person's desired goals, outcomes and satisfaction with services
- Determine whether services are effectively implemented in accordance with the persons unique needs, expressed preferences & decisions concerning his/her life

Interviews

- **PCR My Life** - Questions asked and life areas reviewed are driven by all services person is receiving and in context of how WSC is supporting person
- **PDR My Life** - Questions asked and life areas reviewed are driven by specific service(s) person is receiving from provider

Interviews

- **PCR WSC Interview** – Questions asked and life areas reviewed are specific to person interviewed and WSC efforts to support person
- **PDR Provider/Staff Interview** – Questions asked and life areas reviewed assess provider's overall systems to support person's receiving services

Interviews

- Interviews with the person **do not** factor into a Service Provider or WSC's PDR score
- WSC and Staff interviews factor into the Person Centered Practices score and ultimately the overall PDR Score

My Life Tool

Focused Outcome areas

- Choice and self direction
- Rights
- Satisfaction
- Safety
- Future
- Stability

My Life Tool

Evaluate **Outcomes** and **Supports** for the following life areas

- My Service Life
- My Home Life
- My Work/Daily Life
- My Social Life
- My Health
- My Safety

My Life Tool

Expectations

- Yes
- No
 - Not present reasons for Outcome
 - Not present reasons for Support
- Unable to determine
- Not Applicable
- Likert – Strongly Disagree/Disagree/Agree/Strongly Agree

Low scoring Policy and Procedure Standards

July 2017 – March 2018				
	Service Providers (n = 1,149)		WSC (n = 408)	
P&P Standard	Standards Reviewed	% Met	Standards Reviewed	% Met
The provider maintains written Policies & Procedures detailing how the provider will ensure compliance with background screening and five-year rescreening.	943	81.2%	86	82.6%

Low scoring Policy and Procedure Standards

July 2017 – March 2018				
	Service Providers (n = 1,149)		WSC (n = 408)	
P&P Standard	Standards Reviewed	% Met	Standards Reviewed	% Met
The provider maintains written policies and procedures detailing hours and days of operation and the notification process to be used if the provider is unable to provide services for a specific time and day scheduled.	942	83.2%	86	90.7%

Low scoring Policy and Procedure Standards

July 2017 – March 2018				
	Service Providers (n = 1,149)		WSC (n = 408)	
P&P Standard	Standards Reviewed	% Met	Standards Reviewed	% Met
The provider maintains written policies and procedures, which detail the methods for management and accounting of any personal funds, of all individuals in the care of, or receiving services from, the provider.	670	84.8%	NA	NA

Low scoring Policy and Procedure Standards

July 2017 – March 2018				
	Service Providers (n = 1,149)		WSC (n = 408)	
P&P Standard	Standards Reviewed	% Met	Standards Reviewed	% Met
The provider maintains written policies and procedures, which detail methods for ensuring the person's confidentiality and maintaining and storing records in a secure manner.	943	88.1%	86	88.4%

Low scoring Policy and Procedure Standards

July 2017 – March 2018				
	Service Providers (n = 1,149)		WSC (n = 408)	
P&P Standard	Standards Reviewed	% Met	Standards Reviewed	% Met
The provider maintains written policies and procedures detailing how the provider will ensure a smooth transition to and from another provider.	943	89.8%	85	91.8%

Examples of Updates to Not Met Reasons for Policy & Procedure Standards

- The provider had written procedures detailing how the provider will ensure compliance with initial background screening but not five-year rescreening.
- The provider's written procedures did not detail hours and days of operation.
- The provider's written procedures did not include a detailed notification process if unable to provide services for a specific time and day scheduled.
- The provider had written procedures detailing how to ensure a smooth transition to another provider but not from another provider.

Examples of Updates to Not Met Reasons for Policy & Procedure Standards

- The provider had written procedures detailing how to ensure a smooth transition from another provider but not to a new provider.
- The provider's written procedures did not address physical storage of/access to confidential information.
- The provider's written procedures did not detail how the provider will control access to and protect electronic media.
- The provider's written procedures did not address how the provider will ensure the secure transmission of electronic protected health information.

Administrative (All)

- The provider addresses all incident reports.
- The provider identifies and addresses concerns related to abuse, neglect, and exploitation.
- All instances of abuse, neglect, and exploitation are reported.
- The provider identifies, addresses and reports all medication errors.
- The provider maintains the employment status of all employees on the Employee/Contractor Roster within the Clearinghouse.
 - 80.5% Met Service Provider
 - 77.3% Met WSC's

Qualifications and Training

- The provider received training in Requirements for all Waiver Providers. 65.5% Met
 - All Staff required to take this training, Mgmt., Direct Care etc.
- Annual in-service training less than 85% Met for WSC, SLC, RH, PS, LSD 1,2,3,
- The Supported Living Coach completed Introduction to Social Security Work Incentives. 82.8% Met

Qualifications and Training

- The employment status of the provider/employee is maintained on the Employee/Contractor Roster within the Clearinghouse.
84.2% Met for Service Providers / 80.9% Met for WSCs
- The provider received training in HIPAA. 89.6% Met Service Providers and WSC's
- The provider received training in HIV/AIDS/Infection Control. WSC's 88.8% Met

Annual In-Service training

- Required hours vary by service
- Establish and document a date for how you track your 12 month training period and stick to it
- The 12-month period **cannot** be based on the annual Provider Review date each year.
- Training should be specific to the service based on what is in the Handbook
- WSC's have more specific requirements
- Re-taking basic APD training courses will not be counted toward this requirement unless identified as a need in the APD Plan of Remediation.

Training Certificates and Documentation for Annual In-Service

- Classroom - Certificate of completion must include:
 - ✓ Participant's printed name and signature
 - ✓ Title of the course
 - ✓ Date training occurred (day and date as well as beginning and ending time)
 - ✓ Printed name of the trainer and signature
 - ✓ As of 1/1/16: Copy of the agenda or course syllabus

Training Certificates and Documentation for Annual In-Service

- Non-Classroom – Certificate of Completion must include:
 - ✓ Participant's name
 - ✓ Title of the course (if not titled as in the handbook, then written confirmation of the course content may be required)
 - ✓ Date(s) or period over which training course was completed and notation that course was successfully completed
 - ✓ Length of training/credit hours
 - ✓ Name of approved entity providing training

Tips to Ensure you Receive a Met for Other Required Trainings

Important things to remember...

- Obtain training from an approved source, refer to APD website:

<http://apd.myflorida.com/providers/training/web-based.htm>

- Required time frames to complete initial training
- Have system to track trainings that expire and/or have to be retaken every so many years
- Get a valid, complete training certificate from the trainer

Tips to Ensure you Receive a Met for Other Required Trainings

- HIPPA
- Direct Care Core Competency/Competencies
- HIV/AIDS/Infection Control
- CPR
- First Aid
- Zero Tolerance

Low scoring Observation Indicators for Licensed Residential Homes

Individuals have a key to their bedroom door (76.9%, n=843)

Training in use of public transportation is available and facilitated (84.7%, n= 557)

Individuals participate in the development of the 'house rules' (88.9%, n=849)

Observations

Observation Review Checklist - 8 Focus Areas

- Autonomy & Independence
- Community Opportunity
- Privacy
- Dignity & Respect
- Physical Environment
- Medication Management
- Restrictive Interventions
- Abuse, Neglect & Exploitation

Service Specific Record Reviews

- Service meets needs/desired outcomes of person receiving services
- Service match's description of the service in the Handbook
- Service stays within limitations of the Handbook
- Record match's goals/outcomes in person's Support Plan

Low Scoring Service Record Review Standards

Provider documents efforts to assist the person to define abuse, neglect, and exploitation including how the person would report any incidents on an ongoing basis.

Service	# Met	Total # Scored	% Met
Residential Habilitation Standard	589	792	74.4%
Supported Living Coaching	277	362	76.5%
Residential Habilitation Behavior Focus	106	133	79.7%

Low scoring Service Record Review Standards

The 3rd Quarterly/Annual Report covering services provided and billed during the period under review contains all required components.

Service	# Met	Total # Scored	% Met
Supported Living Coaching	167	238	70.2%
Life Skills Development 2 (SEC)	88	119	74.0%
Residential Habilitation Standard (IB and BF less than 73% met)	388	512	75.8%
Life Skills Development 3 (ADT)	297	374	79.4%

Low scoring Service Record Review Standards

The current Implementation/Employment Stability Plan covering services provided and billed during the period under review contains all required components.

Service	# Met	Total # Scored	% Met
Supported Living Coaching	259	364	71.2%
Life Skills Development 2 (SEC)	128	180	71.1%

Low scoring Service Record Review Standards

The provider has complete Service Logs covering services provided and billed during the period under review.

Service	# Met	Total # Scored	% Met
Life Skills Development 1 (Companion)	497	630	78.9%
Respite	281	356	78.9%
Personal Supports	1022	1282	79.7%

Low Scoring Service Record Review Standards

The provider submits documents to the Waiver Support Coordinator as required.

All service providers struggle with this standard – percentage met ranged from just 65.1% to 76.6%

PDR – Service Specific Record Review (SSRR)

January 1st, 2018 – Revisions to Standards related to the Annual Report, apply to following service tools:

- ✓ Behavior Analysis
- ✓ Behavior Assistant
- ✓ Life Skills Development 2
- ✓ Life Skills Development 3
- ✓ Residential Habilitation Standard
- ✓ Residential Habilitation Behavior
- ✓ Focus
- ✓ Residential Habilitation Intensive
- ✓ Residential Habilitation Enhanced - **New**
- ✓ Supported Living Coaching

PDR – Service Specific Record Review (SSRR)

- Service Logs
 - Name of person receiving service
 - Name of person providing the service
 - Name of the service
 - Date of service
 - Time in/out
 - Summary or list of services provided

PDR – Service Specific Record Review (SSRR)

- The Implementation Plan covering services provided and billed during the period under review is in the record. (B)
 - **NEW** Not Met Reason - Provider documentation does not demonstrate date the support plan was received from WSC. (B)
- The current Implementation Plan covering services provided and billed during the period under review contains all required components.
 - **NEW** Not Met Reason - Current Implementation Plan was not signed by the recipient/legal representative.

Alerts

- Alerts - 5 points off overall PDR score
 - Medication Administration Training/Validation
 - Medication Storage
 - Background Screening including Employee Roster
 - Health and Safety
 - Rights
 - Drivers License and Insurance
 - ANE (Abuse, Neglect, Exploitation)

What else is new beginning July 1st, 2018

- A Provider is eligible for PDR in each Region they render services
- Updates to protocols and not met reasons within the Administrative, Observation and Service Specific Record Review (SSRR) tools

July 1st, changes - Deemed Status Criteria

Providers other than Support Coordinators who meet the following criteria:

- ✓ Overall PDR score of 95.00% or higher
- ✓ No alerts
- ✓ No billing discrepancies
- ✓ Or total billing discrepancy dollars amount to less than 5.00% of total reimbursed amount (based on records reviewed) - **NEW**

July 1st, changes - Deemed Status for Support Coordinators

Support Coordinator providers who meet the following criteria:

- ✓ Overall PDR score of 99.00% or higher
- ✓ No alerts
- ✓ No billing discrepancies

Still receive a PDR but will only be sampled for 1 PCR per treating WSC

Florida Statewide Quality Assurance Program

Customer Service Representative:

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Website

How will I know if tools change?

- Sign up for e-notifications

Where are the tools?

- [www.florida.qlarant.com](http://www.florida qlarant.com)