


Developmental Services
Adult Day Training (ADT) Services
 Monitoring Protocol

Day training programs for adults are training services intended to support the participation of individuals in daily, meaningful, valued routines of the community. For adults this may include work-like settings that do not meet the definition of supported employment. ADT Off-site models include the following services that teach specific job skills and other services directed at meeting specific employment objectives:

- Enclave – A group approach to training where individuals with disabilities work either as a group or dispersed individually throughout an integrated work setting with supervision by the provider.
- Mobile Crew – A group approach to training where a crew (lawn maintenance, janitorial) of individuals with disabilities are in a variety of community businesses or other community settings with supervision by the provider.
- Entrepreneurial – A group approach to training where individuals with disabilities work in a small business created specifically by or for the individuals.

Cite	Probes
<p>Explanation of Monitoring Tool Symbols/Codes</p> <p> Alert: Denotes a critical standard or cite relating to health, safety and rights. A deficiency requires a more intense corrective action and follow-up cycle.</p> <p>“W” Weighted Element: A “W” followed by 2.0 or 4.0 in the Cite column denotes elements that have a greater impact on the monitoring score.</p> <p>“R” Recoupment: An “R” in the Cite column denotes an element that is subject to recoupment of funds by the State if the element is “Not Met.”</p>	
<p>Standard: The provider successfully supports individuals to achieve desired goals and needed services through individualized training programs and meaningful daily routines and activities.</p> <p><i>For the following cites associated with this standard: Review results of the person-centered reviews, information available from individuals receiving the service and available documentation. The purpose of this section is to determine provider performance and the quality of supports in this area. Do not score a cite as met solely based on the presence of the documentation.</i></p>	
<p>1 W2.0</p>	<p>The provider develops an individualized implementation plan (IP) for all consumers.</p> <p>Ask the provider to describe the implementation planning process, including:</p> <p>Review results and recommendations from Person-Centered Reviews for cites 1 - 8.</p> <ul style="list-style-type: none"> • Who is typically involved? • When does it usually take place? • What happens with the IP once it is developed?



Cite		Probes
2 W2.0	An individualized implementation plan (IP) is developed under the direction of the consumer.	<ul style="list-style-type: none"> • Ask individuals receiving services about their participation in the IP development. Do services reflect interest and goals that they have? • Ask the provider how a consumer is involved in the development of their implementation plan. Is this participation documented in any way? <ul style="list-style-type: none"> ➤ Determine if there is consumer sign-off on the plan or any changes to the plan to indicate acceptance. ➤ Review monthly summaries to determine if updates are being made to the IP. ➤ Determine if the provider evaluates the strategies or methods for effectiveness and how frequently. • Ask the provider to describe how they monitor the progress of the individuals that they serve • Look for evidence that the provider is actively monitoring the progress of individuals. • Look for evidence of IP updates being made based on an individual achieving goals or not. • Look for evidence that individuals reviewed are making progress toward achieving identified goals. • Talk to consumers, family or guardians about the progress that is being made in achieving goals.
3	The IP identifies goal(s) and needs from the individual's support plan and other pertinent sources appropriate to the individual.	<ul style="list-style-type: none"> • Ask the provider about their process for ensuring their implementation plan is effective and contains information related to these standards. (The IP may include information from other sources, but at a minimum must contain goals from the support plan.) • The IP identifies training programs and activities to accomplish desired goals and identified needs. • Ask individual about training/activities in which they are involved. Do they feel these are beneficial? Are they interested in the training/activities? • Interactively, with the provider, review a sample of implementation plans. During review, <ul style="list-style-type: none"> ➤ Explore with the provider what other sources of information about an individual influence the implementation plan.

Cite		Probes
4	The IP identifies strategies and methods to assist the individual in meeting goal(s) as well as the data collection system to be used to assess success and achievement.	<ul style="list-style-type: none"> • Look for evidence of provider-developed implementation plan forms or other structures put in place to ensure that data is captured consistently and in such a way that it can be analyzed over time. <ul style="list-style-type: none"> ➤ Ask the provider how they determine strategies and methods that will assist individuals in meeting goals.
5 NEW	The implementation plan includes a description of methods that the provider will use to ensure the individual makes an informed choice concerning the types of work and meaningful day activities (type of activities).	Review the IP to ensure it contains this information.
6 W2.0	The IP is reviewed periodically to determine whether progress is being made and is updated to reflect new interests, goals, needs, or strategies to promote meaningful progress.	Review IP and provider's policies, as applicable, to determine if IPs are reviewed at stated time frames, and changes documented per stated procedures.

Cite		Probes
7	The provider is tracking and acting on an individual's progress or lack of progress.	<p>Review monthly summaries and the annual report to determine whether progress is noted.</p> <p>Determine whether:</p> <ul style="list-style-type: none"> • Activities, supports, tasks accomplished and training provided are detailed; • Follow-up is performed if indicated; • Progress statements contain objective (data/fact based) as well as subjective information; <p>Look for evidence that recommendations for changes in approach are made when progress is not being made.</p> <ul style="list-style-type: none"> • Look for evidence that individuals are making progress and that the provider is actively monitoring the progress of individuals. Examine monthly summaries and annual report information. • Talk to consumers, family or guardians about the progress that is being made in achieving goals. Are they learning new skills? Do they have suggested improvements or changes to the service system? • Review recommendations and results from the Person-Centered Reviews applicable to the provider to assist in determining whether progress is being made and the individual is included in the service delivery system.

Cite		Probes
8	The provider has taken action on the results reported through the person centered review process.	<p>Sample size is at least two person-centered reviews in those instances when more than one has been conducted. 100% of the sample equals a designation of ‘Met.’</p> <ul style="list-style-type: none"> • Determine if any person-centered reviews have been conducted with consumers receiving services and supports from this provider. • Ask the provider if they have received person-centered review results and what action they have taken based on the results. • Interactively, with the provider, review records and documentation for individuals that have taken part in the person-centered review process. Determine if there is any documented evidence that the provider has acted on the recommendations in the report. • Talk with individuals who participated in the person centered review to determine whether changes were discussed with them and have been made. Are they satisfied with the service changes? <p><i>Note: If there have been no person-centered reviews conducted with individuals for which this provider renders services and supports, score this element ‘Not Applicable.’</i></p> <p><i>Note: The provider may address the Person-Centered Reviews recommendations in a manner other than that identified in the report.</i></p>
As appropriate to the individual goals, needs, and interests:		
9	Services stress training in activities of daily living.	<ul style="list-style-type: none"> • Review results and recommendations from Person-Centered Reviews to assist in determining compliance with cites 8 – 13. • Ask the provider/staff about the services and supports they offer. • Ask the provider/staff to describe the characteristics of the individuals receiving services and supports. • Ask the provider/staff how they approach training with an individual. • Ask the provider/staff how they handle age and cultural differences of individuals. • Interactively with the provider, review a sample of implementation plans. • Talk with individuals to determine if the services/goals are important and appropriate for them. Are they individualized? Varied?
10	Services stress training in self-advocacy.	
11	Services stress training in adaptive and social skills.	
12	Services are age and culturally appropriate.	
13 W2.0	Training activities and routine are meaningful to the individual and consistent with the support plan and approved cost plan.	<ul style="list-style-type: none"> • Ask the provider how they determine that the services and supports they deliver are meaningful to an individual. • Determine if the provider offers a variety of activities that are of interest to the

Cite		Probes
		<p>individual.</p> <ul style="list-style-type: none"> • Do programs and activities appear to be individualized, or “one size fits all”? • Ask individuals whether the activities are based on the individual’s interest, choice or related goal or need, not the convenience of the provider. • Discuss with the individual whether skills training and activities match with the individual’s expectations. <p><i>Note: This can be community service activity.</i></p>
14	Off site ADT services teach specific job skills and other services directed at meeting specific employment objectives.	<ul style="list-style-type: none"> • Review results and recommendations from Person-Centered Reviews. • Ask individuals to describe their work routines and any training they receive. Are they satisfied with the level of services? <p>ADT-Off Site models include</p> <ul style="list-style-type: none"> ➤ Enclave – A group approach to training where individuals with disabilities work either as a group or dispersed individually throughout an integrated work setting with supervision by the provider. ➤ Mobile Crew – A group approach to training where a crew (lawn maintenance, janitorial) of individuals with disabilities are in a variety of community businesses or other community settings with supervision by the provider. ➤ Entrepreneurial – A group approach to training where individuals with disabilities work in a small business created specifically by or for the individuals. <ul style="list-style-type: none"> • Ask the provider about the focus of off-site training activities. • Ask the provider to describe some of the off site training activities that are being offered. <p><i>Note: This can be community service activity.</i></p> <p><i>Score this element ‘Not Applicable’ if provider is not sponsoring any of the off site programs noted.</i></p>
15 W2.0	Facility-based and off-site programs pay individuals receiving ADT for performance of productive work; pay is commensurate with members of general work force doing similar work.	<ul style="list-style-type: none"> • Ask the individuals/provider/staff if any of the programs they provide offer pay to individuals • Look for wage schedules and evidence that individuals are being paid for their work. <p><i>Note: Individuals receiving ADT services who are performing productive work that benefits the organization or would have to be done by someone else if not done by the individual must be paid. Pay follows per wage and hour regulations of the Department of Labor.</i></p>

Cite		Probes
16 W2.0	At least annually, providers conduct an orientation informing individuals of supported employment and other competitive employment opportunities in the community.	<ul style="list-style-type: none"> • Talk to individuals to determine whether they are aware of employment options and how they obtained this information. • Determine from provider/staff how orientation information is presented. Review documentation.
Standard: The provider and all of the provider's staff are qualified to provide Adult Day Training services.		
17  W4.0	Level two background screenings are complete for all direct service employees.	<p>Review available personnel files or records to ascertain compliance. Check for:</p> <ul style="list-style-type: none"> • Notarized affidavit of good moral character; • Proof of local background check • Documentation of finger prints submitted to FDLE for screening and screening reports on file • Criminal records that include possible disqualifiers have been resolved through court dispositions.
18  W4.0	All employees undergo background re-screening every 5 years.	<p>Review available personnel files or records to verify that employees undergo background re-screening at least every 5 years</p> <p>Look for evidence of completion and submission of an FDLE Form, identified as either attachment 3 or 4.</p> <p><i>Note: Fingerprint cards are not required on resubmission.</i></p>
19	Managers or directors have no full time responsibility for providing services.	<ul style="list-style-type: none"> • Review a job description for a manager or director. • Interview several managers and directors and ask them to describe their day-to-day responsibilities.
20	Program director has bachelor's degree and two years related experience.	<p>Review the program director's personnel record and qualifications.</p> <p><i>Note: Related experience substitutes on a year-for-year basis for the required college education.</i></p>
21	Instructors (supervisors) have associate's degree and two years experience in related field.	<p>Review instructor/supervisory staff personnel records for qualification requirements.</p> <p><i>Note: Related experience substitutes on a year-for-year basis for the required college education.</i></p>
22	Direct service staff work under appropriate supervision.	<p>Interview direct service staff to determine</p> <ul style="list-style-type: none"> ➤ Who supervises their work

Cite		Probes
23 W2.0	Staffing ratio does not exceed ten (10) individuals per direct service staff for facility-based programs.	<ul style="list-style-type: none"> ➤ How many individuals they are responsible for in their day-to-day activities. <p>Administrative staff and those not providing direct services to individuals are not considered direct service staff, unless temporarily assigned to cover for intermittent absences of direct service staff to maintain authorized ratios.</p> <p>Area office approval is required if the ratio exceeds 1:10. Review the service authorizations and/or waiver from the Area office.</p>
24	Direct service staff must be at least 18 years of age and has a high school diploma or equivalent.	<p>Review a sample of direct service staff personnel records, job descriptions and qualifications.</p> <p><i>Note: Two years of related experience may substitute for a diploma. Experience requirements are applicable to new hires as of the initiation of the Quality Assurance program being conducted by Delmarva. Employees hired before the initiation of this contract cannot be the sole reason that a provider receives a designation of "Not Met" at this element.</i></p>
<p>Standard: The provider and the provider's staff meet training requirements for delivery of Adult Day Training services.</p> <p><i>For all the following cites associated with this standard: Review Area office requirements for mandatory meetings and training documentation. Review provider's training records to determine if documentation is maintained, and at a minimum includes: The topic of the training; Length of the training session; Training dates; Participants' signature; Instructor's name; Objectives and/or a syllabus.</i></p> <p>NOTE: The Area office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff, or providers and their staff may attend a program offered through another provider.</p>		
25	The provider attends mandatory meetings and training scheduled by the Area office and/or Agency.	<ul style="list-style-type: none"> • Ask the provider if they are aware of Area office and Agency mandatory meeting and training schedules. Ask the provider if they can produce any notices, announcements or agendas received about meetings or training. • Ask the provider what Area office and Agency meetings or training they have attended during the review period. • Ask the provider for any evidence they have to verify attending the meeting or training. • Look for evidence in documents supplied by the provider of attendance at Area office and Agency meetings, such as notes in personnel files or other records. <p><i>Note: If the Area office has not sponsored any mandatory meetings, score this element as 'Not Applicable.'</i></p>

Cite		Probes
26 W2.0	Independent vendors and agency staff receive training on responsibilities and procedures for maintaining health, safety and well being of individuals served.	<ul style="list-style-type: none"> • Ask the provider and/or their staff about what types of training programs they have and continue to attend. <p>Training on health, safety and well-being of individuals <u>could include</u> such topics as:</p> <ul style="list-style-type: none"> • Fire safety for the environment; • Evacuation procedures in the event of natural or other disasters; • Training on what to do in the event of personal health emergencies involving consumers; • Transportation safety; • Basic infection control training, e.g., hand washing before and after all contact with consumers. • Appropriate mealtime interventions • Positioning requirements, as applicable <p>Refer also to the provider’s policy in this area to determine compliance.</p>
27	Independent vendors and agency staff receive training on medication administration and on supervising individuals in the self-administration of medication.	<p>Determine if:</p> <ul style="list-style-type: none"> • The provider has a policy related to their own and/or staff training on medication administration or supervision of self-administration of medication. • The provider and/or staff receive training on medication administration or supervision of self-administration of medications, when applicable to their job responsibilities and the needs of individuals in the program. • Determine if medication administration training includes evidence of a return demonstration of the training by an RN for the provider and staff. • Determine if the training includes recognizing adverse drug reactions, drug-to-drug interactions or food and drug interactions. • Determine if training is provided by a qualified trainer (Physician or Registered Nurse); the curriculum used is developed or approved by an RN or other appropriate entity (e.g. Area office). <p><i>Note: A provider’s policy on medication administration may be that their program does not administer or supervise self-administration of medications and all staff are made aware of this position and trained on this policy.</i></p>

Cite		Probes
28	Independent vendors and agency staff receive training on required documentation for service(s) rendered.	<p>Look for evidence that the provider and/or staff have received training on the type and format of documentation that is required for the services and supports that they render.</p> <p>Examples of this training <u>could include</u>:</p> <ul style="list-style-type: none"> • The proper format and content of a progress note, • Recording data related to an individual's progress towards achieving goals, • Documenting the activities that individuals participate in during their time with the provider. • Instruction on documentation that is required for reimbursement and monitoring purposes. • Development of an individual Implementation Plan and supporting documentation requirements.
29 NEW	Direct service staff has received training in the Agency's Direct Care Core Competencies Training.	<p>Look for documented evidence that direct service staff have received this training or an equivalent which has been approved by the Agency.</p> <p>Training was received within the required timeframes as developed by the Agency.</p> <p>This training may be completed using the Agency's web-based instruction, self-paced instruction or classroom-led instruction. Self-paced instruction must be approved by the Area Office prior to use.</p>
30	Independent vendors and agency staff receive training on responsibilities under the Core Assurances.	<p>Look for evidence that the provider and/or staff have been familiarized with and have had some training related to the Core Assurances section of their Waiver Services Agreement and the DS Waiver Services Florida Medicaid Coverage and Limitations handbook.</p> <p>Examples of this training <u>could include</u> instruction on:</p> <ul style="list-style-type: none"> • The rights of individuals in the program and how the provider respects these rights; • Maintaining confidentiality of consumer information; • Offering individual's choice of services and supports; • Recognizing and reporting of suspected abuse, neglect or exploitation; • Assisting individuals in achieving personal goals and desired outcomes; • Rendering services in an ethical manner.

Cite		Probes
31	Independent vendors and agency staff receive training on responsibilities under the requirements of specific services offered.	<p>Look for evidence that the provider and/or staff have been familiarized with and have had training related to the service specific sections of their Waiver Services Agreement and the DS Waiver Services Florida Medicaid Coverage and Limitations handbook.</p> <p>Examples of this training <u>could include</u> instruction on:</p> <ul style="list-style-type: none"> • Implementation plan development and monitoring; • Specifics of rendering services and supports; • Service limitations; • Service documentation requirements • Billing for services; and • Outcomes established for service delivery.
32	Independent vendors and agency staff receive training on use of personal outcomes to establish a person-centered approach to service delivery.	<p>Look for evidence that the provider and/or staff have received training on using desired outcomes for individuals as the guide for rendering services and supports.</p> <p>Examples of this training <u>could include</u> instruction on:</p> <ul style="list-style-type: none"> • Designing training programs that address the consumers goals from the Support Plan; • Involving the consumer and/or family in the development of the implementation plan; • Designing services and supports from the standpoint of the outcome that is desired by the individual and/or family. • Training in Personal Outcome Measures, or another person-centered planning approach. • Individualizing service delivery methods. <p>Refer also to the provider’s policy in this area to determine specified training.</p> <p><i>Note: This does not mean that the provider must have received the official Personal Outcome Measures training (with the exception of Support Coordinators). Other person-centered approaches are acceptable.</i></p>

Cite		Probes
33 W2.0	Independent vendors and agency staff receive training specific to the needs or characteristics of the individual as required to successfully provide services and supports.	<p>Look for evidence that the provider and/or staff assigned to render services and supports to individuals have received some orientation to an individual and their unique characteristics and needs.</p> <p>The family or guardian, a physician or nurse, other providers or people who are in regular contact with and understand the unique characteristics and needs of the individual can provide this orientation.</p> <p>Examples of this training <u>could include</u> instruction on:</p> <ul style="list-style-type: none"> • Communicating with the individual; • Repositioning requirements for the individual; • Instruction on a behavior program, if applicable to the individual; • Appropriate positioning/mealtime intervention. • Specific training to implement a training program tailored to an individual's goals. <p>This training may be one-on-one in nature, and therefore documentation may not take the form of an agenda, or curriculum with handouts and outline. Look also for evidence in the consumer records, such as in progress notes or other provider documentation.</p>
34	Proof of current training and certification is available for all staff in Cardiopulmonary Resuscitation (CPR).	<ul style="list-style-type: none"> • Independent vendors and agency staff complete this training within 30 days of initially providing services. • Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to regulations. • Review personnel files and other provider training records for evidence of required CPR training. • Review CPR certificates or CPR training documentation to determine expiration date and need for updated training. <p><i>Note: A certified trainer must provide CPR training.</i></p>

Cite		Probes
35	Proof of current training is available for all staff in AIDS and infection control.	<ul style="list-style-type: none"> • Independent vendors and agency staff complete this training within 30 days of initially providing services. • Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to regulations. • Review personnel files and other provider training records for evidence of required training. • Infection control may be a separate training or included and documented as part of the AIDS training as “universal precautions.” <p><i>Note: American Red Cross First Aid Training does not meet the requirements for HIV/AIDS training.</i></p>
36 W2.0	Staff attends eight (8) hours of annual in-service training related to implementation of individually tailored services.	<ul style="list-style-type: none"> • Review personnel files and other provider training records for evidence of required training. • If applicable, ask staff about the in-service training that they have received.
37	Proof of required training in recognition of abuse and neglect to include domestic violence and sexual assault, and the required reporting procedures is available for all independent vendors and agency staff.	<ul style="list-style-type: none"> • Review personnel files and other provider training records for evidence of required training. • If applicable, ask staff about the in-service training that they have received. • Training should include prevention, detection and reporting requirements.
Standard: Services are provided at an intensity and duration necessary for successful support of the individuals served.		
38	Services are rendered at a time mutually agreed to by the individual and provider.	<ul style="list-style-type: none"> • Look for evidence in provider records that service times have been discussed with the individual. • Ask the provider to describe how service times are negotiated with individuals. • Ask consumers if the time of the service is consistent with their needs and expectations. <p><i>Note: This service generally begins at the age of 22 when an individual is out of the public school system, or if the person has graduated from the public school system. However, an individual can begin adult day training at the age of 16 if the public school system is willing to provide funding for this service throughout the person’s legal age of eligibility for school system service.</i></p>
39	In facility-based ADT individuals spend a minimum of four hours in	<ul style="list-style-type: none"> • Review recommendations and results of the Person-Centered Reviews applicable to the

Cite		Probes
W2.0	specific training or program activities designed to meet individual needs and personal goals defined in the support plan(s).	<p>provider.</p> <ul style="list-style-type: none"> • Ask the provider for any schedules or documentation of individuals in the sample being reviewed to determine the amount of time spent in training and program activities related to needs/goals. • Observe and talk with individuals receiving services and supports—ask them about the variety of activities they are offered. Are the activities consistent with what they want for supports and services? • Ask the provider to describe how they collect data to determine an individual’s success and achievement of goals from their implementation plan • Ask the provider how they assess the successes and achievements of individuals in their programs • Look for evidence that the provider’s data collection system is being consistently implemented • For full-time participants. This will vary if the person attends on a part-time basis. <p><i>Note: ADT services are usually limited to a specific number of days per year, operating a minimum of 6 hours per day on a regularly scheduled basis. Adult day training services may be provided as an adjunct to other services included on an individual’s support and cost plan. For example: An individual may receive Supported Employment or other services for part of a day or week and adult day training services at a different time of the day or week. Adult day training services will only be billable for the prorated share of the day or week that the individual actually attended that service.</i></p> <p>Note: An individual cannot receive a more than a total of 35 hours a week of a paid support, or a combination of paid supports designed to be used as a meaningful day activity. An individual may not receive a combination of ADT, NRSS or Supported Employment services that exceeds 35 hours per week.</p>
40	Services are provided in a designated adult day training center or other training sites in the community as agreed to by the individual and provider.	<ul style="list-style-type: none"> • Review recommendations and results of the Person-Centered Reviews applicable to the provider. • Ask the provider to identify where training is provided. • Look for evidence that individuals have agreed to the locations. • Talk with individuals encountered during the site visit about the locations where they are

Cite		Probes
		<p>receiving training. Was a choice presented? Are they satisfied?</p>
41	<p>Providers of incidental transportation comply with program requirements</p>	<p>Determine if the provider transports individuals.</p> <ul style="list-style-type: none"> ➤ If transportation is provided in personal cars and/or agency vehicles, check personnel files to verify that valid licenses, vehicle registration and proof of insurance coverage are current. ➤ The Area office should be notified of any traffic violations immediately with the exception of parking tickets. ➤ Ask the provider about their system to assure vehicle safety. ➤ Ask to see any written procedures if they are available. <p><i>Note: Incidental transportation is considered that which is outside of the transportation for disadvantaged program.</i></p>

Cite	Probes	
<p>Standard: The provider maintains sufficient reimbursement and monitoring documentation to verify service delivery and to evaluate each individual's services and supports.</p> <p><i>Note: Score based on the presence or absence of the required documentation.</i></p>		
42 R	<p>Provider has at a minimum an individual implementation plan.</p>	<p>Interactively, with the provider, review a sample of implementation plans to determine they contain, at a minimum:</p> <ul style="list-style-type: none"> • Name, address and contact information of the individual served; • Goal(s) from the support plan that the service will address. • Strategies employed to assist the individual in meeting the support plan goal(s). • System to be used for data collection and assessing the individual's progress in achieving the support plan goal(s). • For ADT, include a description of methods that the provider will use to ensure the individual makes an informed choice concerning types of work and meaningful day activities. <p>Additionally, the implementation plan <u>may</u> include training objectives appropriate to the individual's programs and services.</p> <p>This Cite is subject to recoupment if not available.</p>
43 R	<p>The IP is developed, at a minimum, within 30 days of new service initiation, or within 30 calendar days of service authorization effective date when services are being continued.</p>	<ul style="list-style-type: none"> • Review records to compare service authorization date with IP development timeframes. • How does the provider monitor that IP's are being completed within state defined timeframes? <p>The implementation plan is submitted to the waiver support coordinator at the time of the first claim submission, and at least annually thereafter at the time of the support plan update and, any time major or significant updates and changes are made before they are implemented.</p> <p>This Cite is subject to recoupment if not available within 30 days of the effective date of the authorization.</p>

Cite		Probes
44	Provider has at a minimum supporting data (notes) to the implementation plan.	<p>Interactively, with the provider, review a sample of records to determine if they contain supporting data that:</p> <ul style="list-style-type: none"> ▪ Identifies the individual’s progress toward achieving the goal(s) identified in the implementation plan; <p>Supporting data may include:</p> <ul style="list-style-type: none"> ▪ Progress notes relevant to training and activity sessions. (May include information from the monthly summary and Annual Report.) ▪ Any assessments used to identify additional needs/desires of the individual. ▪ Data or data displays from training sessions. ▪ Other information gathered and used to determine strategies, meaningful activities or approaches. <p>Supporting data may be used to create the monthly summary of progress for the individual.</p> <p>Review the provider’s policies/procedures and strategies on the IP to determine what supporting data is to be collected and how.</p>
45 R NEW	Provider has at minimum, copies of service log(s).	<p>Interactively, with the provider, review the daily service logs and claims submissions for the period being reviewed.</p> <p>Service logs are to be submitted to the waiver support coordinator on a monthly basis.</p> <p><i>Note: A service log contains the individual’s name, social security number, Medicaid ID number, the description of the service, activities, supplies or equipment provided and corresponding procedure code, times and dates service was rendered.</i></p> <p>This Cite is subject to recoupment if not available.</p>

Cite		Probes
46 R	<p>Provider has at a minimum a monthly summary of an individual's progress toward achieving support plan outcomes for the period being reviewed.</p>	<p>Interactively, with the provider, review a sample of records to determine if they contain a monthly summary note indicating an individual's progress, or lack thereof, toward achieving the goal(s) identified on the implementation plan for the month billed.</p> <ul style="list-style-type: none"> ➤ Progress statements in the monthly summary should contain objective (data/fact based) as well as subjective information. ➤ Progress statements should be consistent with available supporting data and information. ➤ This should not be just the submission of progress notes to the support coordinator. The provider should draw some conclusions in a sentence or statement. <p>Review monthly summaries and the annual report to determine whether progress is noted. Determine whether:</p> <ul style="list-style-type: none"> • Activities, supports, tasks accomplished and training provided are detailed; • Follow-up is performed if indicated; • Progress statements contain objective (data/fact based) as well as subjective information; <p>Look for evidence that recommendations for changes in approach are made when progress is not being made.</p> <p>This Cite is subject to recoupment as monitoring documentation if not available.</p>
47 R	<p>Provider has at a minimum an annual report.</p>	<p>Interactively, with the provider, review a sample of records to determine if they contain an annual, written report that indicates the individual's progress toward their support plan goal(s) for the year.</p> <p>Progress statements in the annual report should contain objective (data/fact based) as well as subjective information.</p> <p>Progress statements should be consistent with monthly summaries and other supporting data.</p> <p>The report is to be submitted to the waiver support coordinator prior to the annual support plan update.</p> <p>This Cite is subject to recoupment as monitoring documentation if not available.</p>

Cite	Probes	
48	Provider has at a minimum results of the annual satisfaction survey.	Interactively, with the provider, review a sample of records or other files and reports to determine if they contain satisfaction survey results and resulting quality improvement measures that have been put in place as a result of the survey.
49	Provider has at a minimum performance data on the Projected Service Outcomes.	Interactively, with the provider, review any performance improvement data that is available related to projected service outcomes defined in Chapter One of the DS Waiver Services Florida Medicaid Coverage and Limitations handbook.
Standard: Provider bills for services as authorized.		
50 R	ADT services are limited to the amount, duration and scope of the service described on the individual's support plan, current approved cost plan and service authorization.	<ul style="list-style-type: none"> • Interactively, with the provider, review a sample of approved cost plans and/or service authorizations in comparison with claims data, attendance logs, supporting data and monthly summaries. • Verify that the provider has on file a service authorization for the services provided. • Review staffing ratios as compared to service authorizations or the cost plan to determine if the provider is in compliance. <p>This Cite is subject to recoupment if the provider is rendering the service without an authorization, or is billing for more than the authorized service levels.</p>

Cite	Probes	
51 R	The provider bills for adult day training as defined and specified in the DS Waiver Services Medicaid Coverage and Limitations handbook.	<ul style="list-style-type: none"> • Interactively, with the provider, review documentation and billing procedures. • Determine if the provider has a process to ensure that documentation is on file before a claim is generated. • Determine if the provider has a process for verifying that billing is performed in accordance with program requirements. • Review claims and billing data to determine that ADT services are not being provided concurrently (at the same time) with PCA, NRSS, or Companion services. • Transportation between day training sites is included as a component part of the ADT services and included in the rate paid to the provider of this service. • When the supervisor of a mobile crew or enclave does not meet the qualifications for a supported employment coach, even when the individual meets the criteria for supported employment, the support is billed as adult day training-off site. • If the support is provided to groups larger than eight individuals, regardless of the wage, the service is billed as adult day training off site. • If the support is provided in groups of eight or less and the individuals are paid less than minimum wage, the service is billed as adult day training off site. • Provider is not billing for any day an individual is absent from the service. <p><i>Note: ADT services are training services expected to enhance skills and achieve individual goals and outcomes.</i></p> <p><i>Note: Check billing against attendance log and claims.</i></p> <p>This Cite is subject to recoupment for any individual when there is evidence that the individual is not receiving this service as defined (e.g., no evidence of training services or meaningful activities for the individual and services were billed).</p>
Standard: The provider meets projected service outcomes established for service delivery.		
52	The provider has established a systematic method to collect projected service outcome data.	<ul style="list-style-type: none"> • Ask the provider to discuss the goals and Projected Service Outcomes that they are monitoring. • Ask the provider what data they are collecting and how they collect the data (e.g., record review, specially developed forms

Cite		Probes
		<p>completed by employees, consumer satisfaction surveys, etc.)</p> <ul style="list-style-type: none"> • Ask for samples of the tools or other evidence that confirms data is being collected and monitored. • Ask the provider to describe how it is determined they are meeting Projected Service Outcomes. • If the provider has any data or reports that they produce and maintain related to the Projected Service Outcomes, ask to see these reports and identify how long the provider has been tracking this data.
53	The provider reviews data periodically and corrective measures are put in place if the data indicates that the goal is not being achieved.	<ul style="list-style-type: none"> • Ask the provider how it is determined they are achieving Projected Service Outcomes. • Ask the provider how frequently they perform this monitoring. • Ask the provider if they have identified any areas in need of improvement and what corrective actions they have taken. • Look for evidence that the provider is collecting and monitoring data according to the time frames they have defined.

For elements 54-59, document findings in comments as #met/total sample. 100% of the sample must meet criterion in order for the elements to be designation ‘Met’ except where otherwise indicated.

Outcomes should be measured considering individual skills and circumstances.

Reviewers will determine achievement of Projected Service Outcomes at the time of the review.

Reviewers will also use the results and status of recommendations from the Person-centered Reviews applicable to the provider, information from the sample records and documentation reviewed, and discussions with the individuals receiving the services.

Cite		Probes
54 W2.0	Individuals receiving services demonstrate an increase in abilities consistent with their support plan.	<ul style="list-style-type: none"> Look for evidence in supporting data that the individuals are making progress towards achieving their personal goals. <p>Note: Based on the age, level of functioning, interest and health condition, the individual is assisted with the acquisition, retention or maintenance of skills reflective of their interests. The activities must be meaningful to the individual. For example, an individual with Alzheimer’s, the provider tailors interventions based on the needs of the individual which may include skill maintenance.</p> <p>Through interview with the individual/staff it can be verified that the individual has made progress at least on one step of the goal and this is verified through documentation. Interview guardian, if necessary.</p>
55 W2.0	Individuals served who have a stated support plan goal to be employed in the community, have been provided with specific information, opportunities for exploration, and the necessary support to make progress towards this goal on supported employment or other competitive employment opportunities.	<p>Reviewers should look for documentation to support that the provider has communicated the referral and followed up on person’s desire for employment.</p> <p>Review supporting documentation and/or the implementation plan for evidence that the provider is educating and/or providing information related to the individual’s goal.</p> <p>Note: If there is no stated support plan goal for the individual to be employed in the community, score this ‘not applicable’.</p> <p>Provider may utilize outside resources to address this element with their consumers (VR representative, SS Administrators, Employers).</p>
56 NEW	Individuals served who have a stated support plan goal to be involved in the community in another type of arrangement such as volunteer work have been provided with specific information, opportunities for exploration, and necessary support to make progress towards the goal.	<p>Provider may utilize outside resources to address this element with their consumers.</p> <p>Review supporting documentation and/or the implementation plan for evidence that the provider is educating and/or providing information and supports for exploration and experience related to the individual’s goal.</p> <p>Note: If there is no stated support plan goal for the individual to be involved in another type of arrangement, score this ‘not applicable’.</p>

Cite		Probes
57 W2.0	All Individuals served who have responded to the annual satisfaction survey are satisfied with the services based on the results or the provider has addressed any concerns raised during the survey	<p>Review annual satisfaction survey for results.</p> <p>Discuss satisfaction with individuals receiving services.</p> <p>Review steps/actions that the provider took to respond to individual's concerns.</p> <p>Provider should track the results of the satisfaction surveys and address aggregate concerns.</p> <p>Provider should ensure the effectiveness of any corrective measures put in place by monitoring the status of quality improvement initiatives as needed and makes adjustments as necessary to ensure improvement in their service delivery system.</p> <p>Look for documentation that the provider has distributed satisfaction surveys to each individual receiving the service.</p>
58 W2.0	Individuals achieve goals on their support plan throughout the year	<p>Review provider documentation to determine whether the individual has achieved a current or previous support plan goal.</p> <p>Provider must demonstrate evidence that 80% of the individuals sampled achieved at least one goal on their current or previous support plan within the last twelve months.</p> <p>Interview individual and guardian if necessary.</p>
59 W2.0	Individuals demonstrate freedom of choice, including being informed about rights and service options (i.e., more inclusive programs, supported employment, etc.).	<p>Look for evidence that the provider offers the individual choices.</p> <p>Interview individual to determine if they are provided with opportunity to express choice.</p> <p>Providers are educating and/or informing individuals about their rights and services, including supporting employment and specific ADT services.</p>

Cite	Probes	
<p>If the provider is not rendering services to individuals that have problems with behavior such as those that follow, score the elements in this section Not Applicable.</p> <p>Types of Problems with Behavior:</p> <p>Actions of the individual which, without behavioral, physical, or chemical intervention</p> <ol style="list-style-type: none"> 1. Have resulted in self-inflicted, detectable, external or internal damage requiring medical attention or are expected to increase in frequency, duration, or intensity resulting in self-inflicted, external or internal damage requiring medical attention. 2. Have occurred or are expected to occur with sufficient frequency, duration or magnitude that a life-threatening situation might result, including excessive eating or drinking, vomiting, ruminating, eating non-nutritive substances, refusing to eat, holding one's breath, or swallowing excessive amounts of air. 3. Have resulted in external or internal damage to other people that require medical attention or are expected to increase in frequency, duration or intensity resulting in external or internal damage to other persons that requires medical attention. 4. Have resulted or are expected to result in major property damage or destruction. 5. Have resulted or are expected to result in arrest and confinement by law enforcement personnel 		
<p>Standard: Behavioral Services result in objective and measurable improvements in behavior that are consistent with the individual's outcomes.</p>		
60	<p>When rendering services and supports to individuals identified as having problems with behavior, the provider is assisted by a qualified professional or professionals who meet the requirements in the Medicaid Handbook for the type of service the professional is providing.</p>	<p>If individuals in the program experience problems with behaviors determine from the provider what qualified behavioral professional assists them with services for this individual.</p> <p>Determine if the behavioral professional is</p> <ul style="list-style-type: none"> • An employee of the provider, review personnel files. • On contract or an adjunct to the service under review, request that qualifications be available during the time of the review. <p>Ask to speak with the certified or licensed professional(s) responsible for developing interventions or supports for the individual(s). If psychotropic medications are used, then a licensed physician must be involved. For other services (e.g., counseling) refer to the Medicaid Waiver Handbook for provider qualifications.</p> <p>Look for evidence that the prescribing professional is monitoring the individual</p> <p>1:1 staffing ratios must be approved by the Area office LRC. Look for evidence that this approval was received.</p>
61	<p>Behavior Service goal(s) are consistent with and relate directly to the individual's personal outcomes/goals.</p>	<p>Review the person's support plan, if available, service authorization information, the implementation plan and the individual's behavioral plan (intervention/treatment/therapy plan) to determine if a clear connection exists between behavioral supports and services and the persons stated personal outcomes/goals.</p>

Cite		Probes
62	The individual has a written, individual plan developed by a certified or licensed professional that clearly identifies what will change as a result of intervention, the intervention(s) to be used and how progress will be measured.	<p>Review record(s) of individuals that the provider or staff has identified as having problems with behaviors. Is a behavior plan present, and who developed the plan?</p> <p>Review the individual's records and the behavior services plan to determine:</p> <ul style="list-style-type: none"> • The problem with behavior is described in writing and in objective measurable terms. • There is evidence that interventions, treatments and therapies were based on the results of an assessment of the problem with behavior by the behavior service professional. • There is documentation that interventions account for medical problems, significant life changes, or other factors that might worsen the problem with the behavior. • If the individual was evaluated by a physician or other medical professional to rule out potential medical problems that might account for the problem with behavior. <p><i>Note: The plan may be written by someone other than the behavior service professional, but must be approved by the professional.</i></p>
63 W2.0	Written consent to use the plan was obtained from the individual or guardian.	<ul style="list-style-type: none"> • Review records and other documentation to determine that signed consent is on file. If consent was not obtained, look for documentation of the reason. • Talk with individuals receiving the service. Are they aware of the plan and interventions? Are they in agreement with the need for intervention and approaches used?
64	Implementers (provider staff) of the plan are able to carry out the plan as written.	<ul style="list-style-type: none"> • Ask staff to describe the procedures and the circumstances under which they are used • Observe the actual use of the procedure or intervention if possible. • Interview the individual for their understanding of implementation of the plan. • Review personnel and training records to verify staff training on the program.
65 W2.0	A system is in place to assure that procedures are carried out as designed.	<ul style="list-style-type: none"> • Review behavior service plan to determine if a plan to monitor implementation is available. • Review provider or behavioral professional documentation to determine if monitoring occurs as planned. • If there are problems with implementation, are these addressed and corrected?

Cite		Probes
66 W2.0	There is evidence of progress or lack thereof in reducing the problem with behavior.	<p>Review available and required documentation to determine whether progress is being made, or if lack of progress, that there is a plan for the continuation, modification or termination of services.</p> <p>Documentation available for review to determine whether progress is being made should include:</p> <ul style="list-style-type: none"> • Data collected on plan implementation. Are the data collected as required in the plan? • Data displays (graphed). Review to determine progress and currency of graphing. • Progress should be verified in writing as a progress note or summary. <p><i>Note: Some measurable progress must be demonstrated or predicted or the current array of services must be seriously questioned.</i></p>
67	Emergency procedures (e.g., reactive strategies, crisis management procedures) used by the provider for problems with behavior are developed and implemented under the guidance of certified or licensed behavioral services professionals.	<ul style="list-style-type: none"> • Determine if a written procedure is available. Is the procedure individualized? • Review any procedures that the provider has for emergency or crisis management. (<i>Note: The provider may have general procedures, as well as individualized. Reviewers should look at both.</i>) • Determine who developed the emergency or crisis management procedure, and if it is approved by the LRC or the Area office. • Determine if the procedure identifies: <ul style="list-style-type: none"> ➢ How staff will be trained; ➢ What documentation must be kept and submitted upon use of the emergency procedure.
68	Staff are able to use the procedure when and as designed	<ul style="list-style-type: none"> • Review personnel and training records to determine whether staff has been trained in the use of these procedures. (Certain procedures such as ACT or TEAM require periodic retraining or certification.) • Determine whether only trained staff is allowed to use these procedures. • Talk with individuals and staff to determine their awareness of, and familiarity with these procedures.

Cite		Probes
69	Records are kept on the use of the emergency procedure and occurrences of the problem behavior.	<p>Request to see reports on use of emergency procedures. Verify the following:</p> <ul style="list-style-type: none"> • Daily reports on the employment of physical, chemical, or mechanical restraints by those specialist authorized in the use of such restraints are made to the chief administrator of the program. • A monthly summary including the type of restraint, the duration of usage and the reasons therefore will be submitted to the Area office administrator and the district local advocacy committee. <i>(Note: Reports may be sent to the Area office Developmental Disabilities Program Office for routing to Area office Administrator.)</i> • Review the agency procedure for reporting the use of emergency interventions. • Determine if the use of emergency interventions was properly reported. Review documented number of restraints reported to the Local Review Committee. <p><i>Note: If emergency or crisis procedures have not been used, score this element Not Applicable.</i></p>

Adult Day Training 11-22-05.doc

03.06.02; 03.12.02; 03.13.02; 09.05.02; 09.12.02; 12.27.02; 02.04.03; 02.10.03; 02.25.03; 10-24-05; 11-22-05