

# Florida Quality Council Qlarant Data Presentation

April 2024

**Qlarant** 

Florida Statewide Quality Assurance Program

Best People. Best Solutions. Best Results.™

# Presentation Outline

## Provider Discovery Reviews (PDRs)

- Fiscal Year (FY) 24 Q1-Q2\* Snapshot
- Staff Qualifications and Trainings (Q&T)
- Background Screenings (BGS)
- Service Specific Record Reviews (SSRRs)
- Alerts (A)

## Person Centered Reviews (PCRs)

- FY24 Q1-Q2 Snapshot
- Record Reviews
- Stability
- Health Summary: Preventative Care
- My Life Interview (MLI) Outcomes and Supports by FY and Life Area

## FY23\*: MLI Outcomes by Individual Interview Capabilities

- Interview Capabilities by Age and Residential Setting
- Differences in Outcomes by Interview Capability
- Lowest Scoring Outcomes for People who Responded Independently

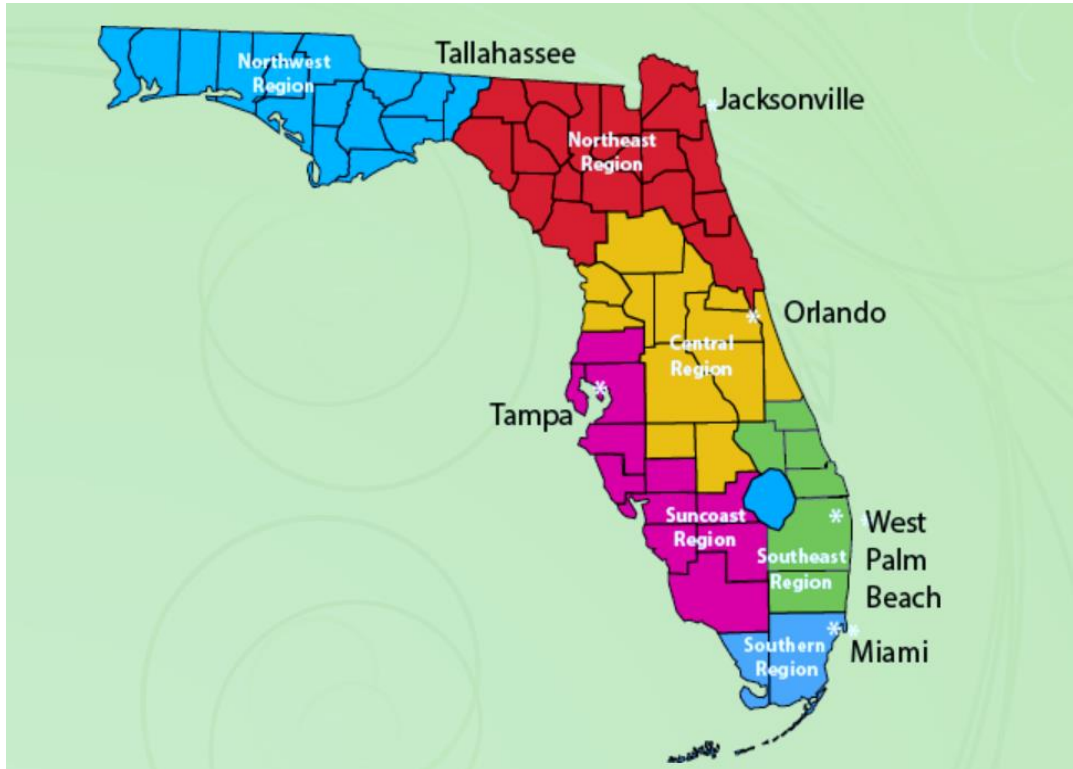
\*FY24 Q1-Q2 includes reviews completed and approved between July 1, 2023 and December 31, 2023.

\*FY23 includes reviews completed and approved between July 1, 2022 and June 30, 2023.

# Provider Discovery Reviews



# FY24 Q1-Q2 (July 2023 – December 2023)



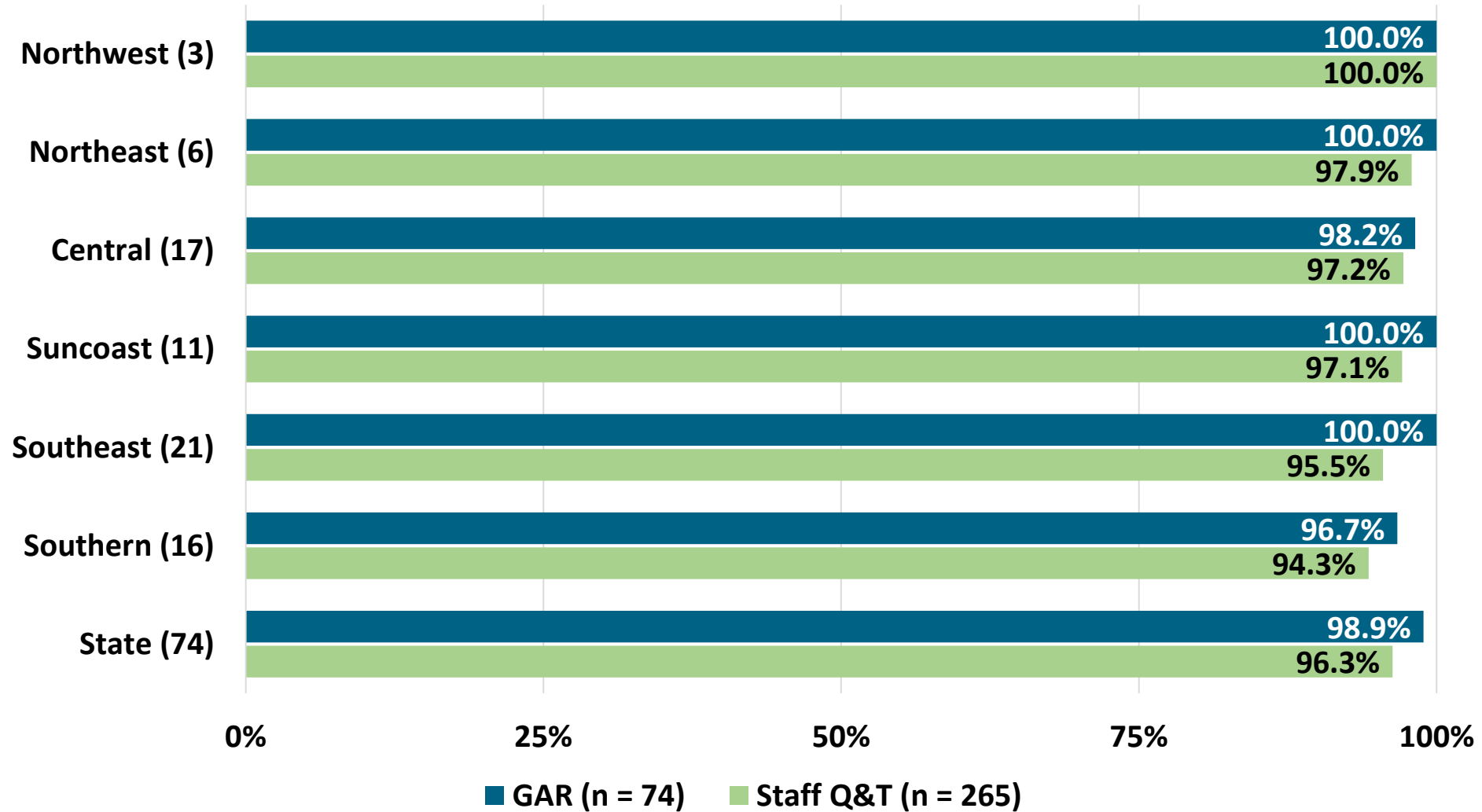
Region	# of PDRs	
	Service Providers	Qualified Organizations (QOs)
Northwest	70	3
Northeast	152	6
Central	140	17
Suncoast	161	11
Southeast	170	21
Southern	95	16
<b>State</b>	<b>788</b>	<b>74</b>

# Average Service Provider Scores by Region and PDR Review Component: July 2023 – December 2023

Region (n)	General Administrative Review (GAR)		Staff Q&T (2,041)	SSRR (2,504)	Observations (569)	
	Agencies (N = 678)	Solos (N = 110)			LRH* (N = 493)	ADT* (N = 76)
Northwest (70)	99.0%	100.0%	91.9%	91.8%	99.5%	100.0%
Northeast (152)	97.9%	100.0%	92.9%	93.6%	99.1%	99.9%
Central (140)	96.0%	95.0%	92.8%	91.3%	97.6%	98.5%
Suncoast (161)	94.2%	84.6%	91.1%	89.5%	99.1%	99.5%
Southeast (170)	98.5%	94.7%	92.4%	94.1%	99.7%	100.0%
Southern (95)	98.7%	100.0%	92.4%	93.7%	99.2%	100.0%
<b>State (788)</b>	<b>96.9%</b>	<b>96.6%</b>	<b>92.2%</b>	<b>92.2%</b>	<b>98.9%</b>	<b>99.5%</b>

\*LRH: Licensed Residential Homes; \*ADT: Adult Day Training

# Qualified Organization Average Administrative Review Scores by Region July 2023 – December 2023



# Provider Discovery Review Trends

FY22: July 2021 – June 2022

FY23: July 2022 – June 2023

FY24 Q1-Q2: July 2023 – December 2023

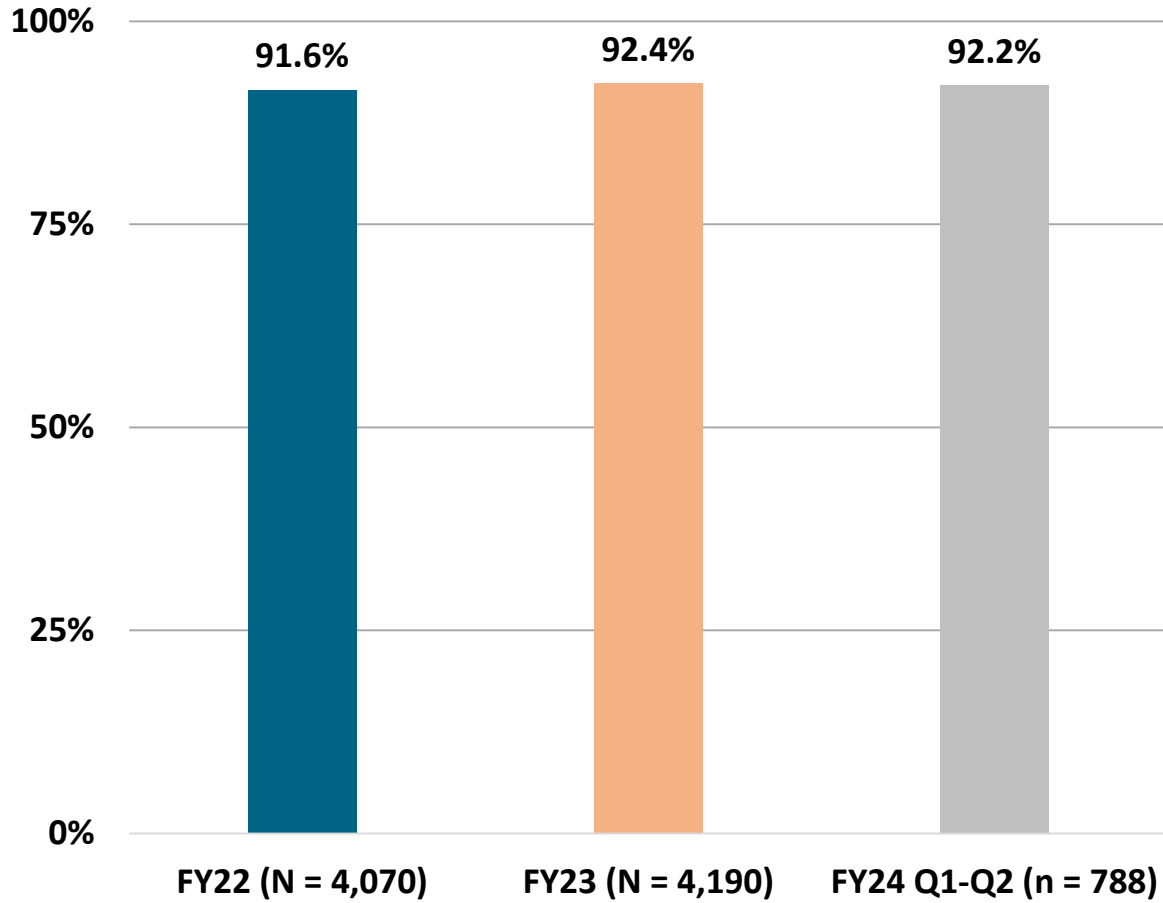
# Staff Qualifications and Training (Q&T)



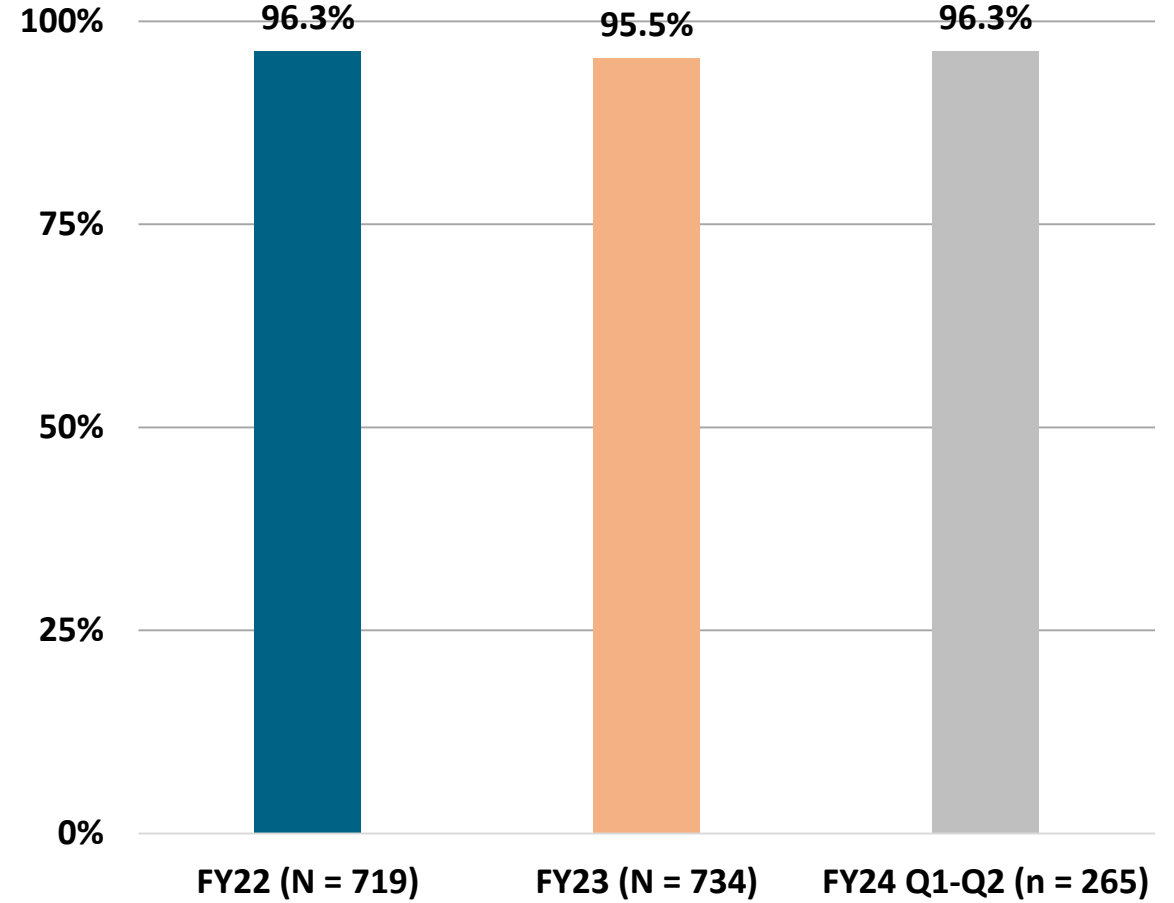


# Average Staff Q&T Scores by FY

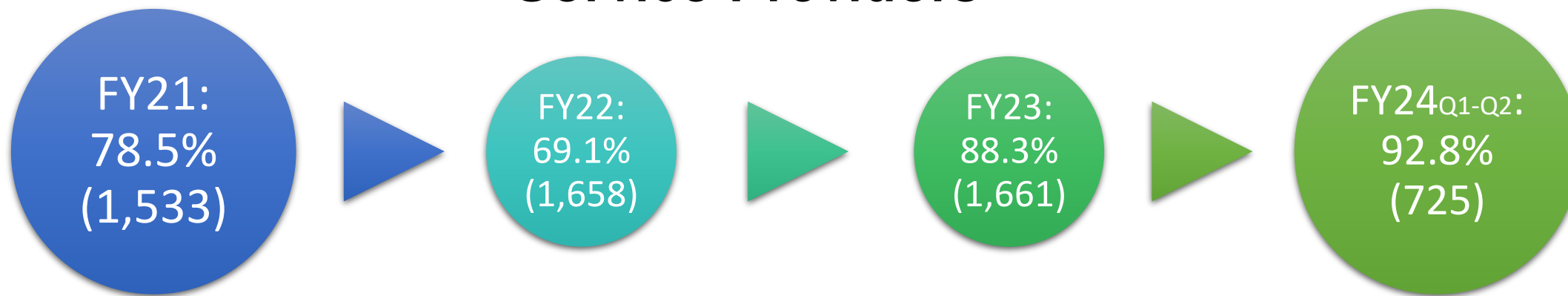
**Service Providers**



**WSCs/CDC+ Consultants**



## Basic Medication Administration Validation: Service Providers



In FY24 Q1-Q2, 52 Basic Medication Administration Validation Certificates were deemed out of compliance.

### The top 3 reasons the standard was not met include:

- Not having the Established Primary Route circled (noted 18 times)
- Missing or incorrect Validation Expiration Date (noted 14 times)
- Missing or incorrect Validation Effective Date (noted 10 times)

# Compliance: 100% of Staff Meet Requirements

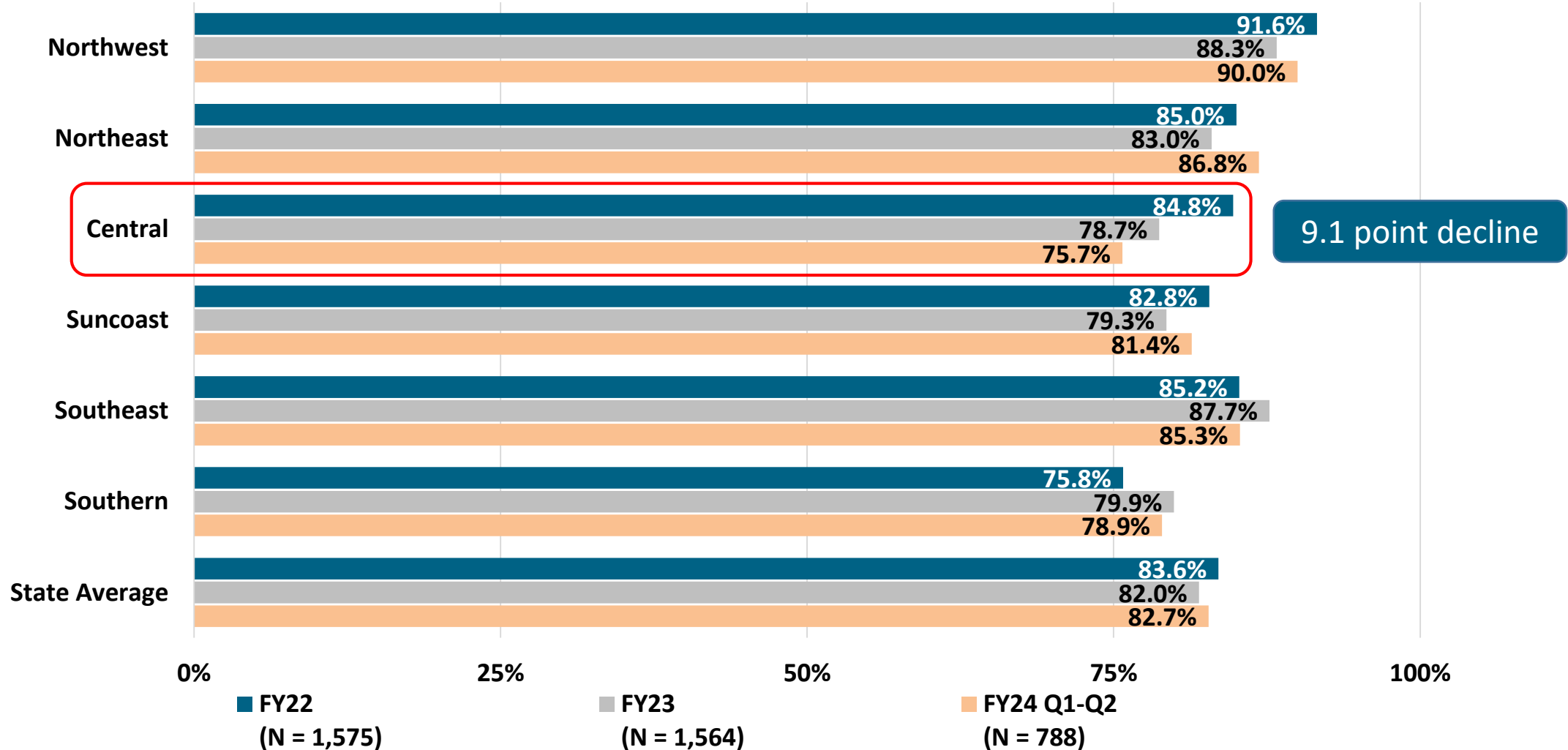
Fewer than 85% of **Service Providers** were in compliance with the following requirements:

- Completing required hours of annual in-service training (LSD1, LSD2, LSD3, Personal Supports, Supported Living Coaching, and Residential Habilitation - Standard)
- Completing/maintaining training in HIV/AIDS/Infection Control.
- HIPAA training requirements.

Fewer than 95% of **QOs** were in compliance with the following requirements:

- The Support Coordinator completes 18 hours of job related annual in-service training.
- Completing/maintaining training in HIV/AIDS/Infection Control.
- HIPAA Training requirements.
- First Aid Training requirements.

# Background Screening Compliance\* by FY and Region: Service Providers



\*Compliance = 100% of Staff meet BDS requirements

# 212 Staff across 142 service providers did not meet ALL Level II Background Screening Requirements

## Most Common Not Met Reasons:

Provider did not present a current Local Law/Criminal Records Check. (A)

- 44.3% (94) of Not Mets

The affiant's initials were not next to one or more acknowledgement statements on the current APD Attestation of Good Moral Character presented.

- 38.7% (82) of Not Mets

Provider did not present complete, signed, and dated APD Attestation of Good Moral Character.

- 36.8% (78) of Not Mets

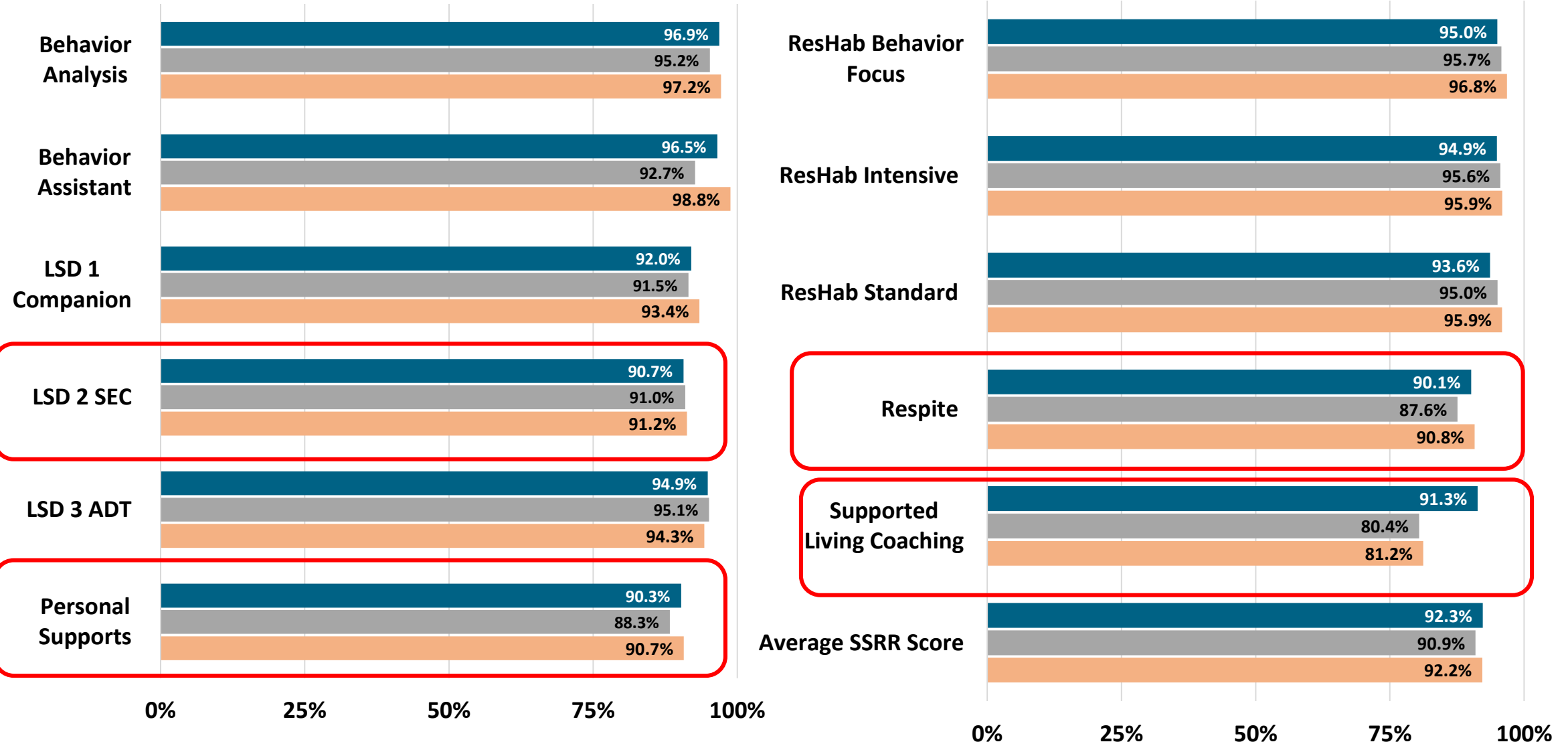
Provider did not present evidence of current APD General FDLE/FBI clearance from the Clearinghouse. (A)

- 31.1% (66) Not Mets




# Service Specific Record Reviews



# Weighted SSRR Scores by Service and FY



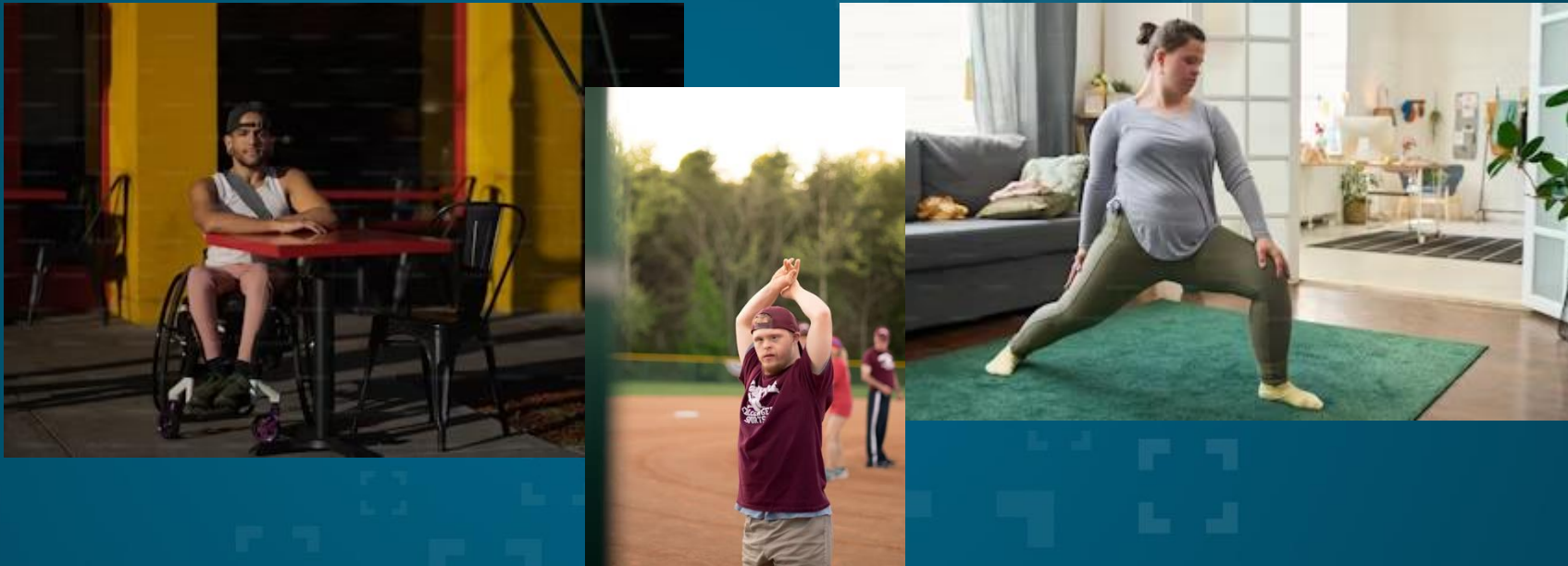
# Alerts by FY

Alert Type	FY22 (608)	FY23 (533)	FY24 Q1-Q2 (201)
Abuse/Neglect/Exploitation	0.0%	1.1%	0.5%
Background Screening	31.9%	39.2%	46.3% 
Clearinghouse Roster	16.8%	22.0%	16.4% 
Driver's License/Insurance	4.3%	3.8%	5.0%
Health & Safety	1.2%	1.8%	2.5%
Medication Admin/Training	37.3%	15.0%	13.9%
Medication Storage*	6.1%	12.9%	11.9%
Rights	2.1%	4.5%	3.0% 
Vehicle Insurance	0.3%	0.0%	0.5%

\*Due to COVID-19, Observations were suspended in March 2020 and did not resume until January 2022 (FY22 Q2); therefore Medication Storage alerts were NA in FY21 and comparisons between FY22 and FY23 should be made with caution.



## Person Centered Reviews



# FY24 Q1-Q2 Snapshot

## July 2023 - December 2023

Region	Waiver	CDC+
Northwest	29	2
Northeast	46	13
Central	136	12
Suncoast	125	15
Southeast	135	8
Southern	85	5
<b>Total</b>	<b>556</b>	<b>55</b>

### MLI Outcomes

**Waiver:**  
84.5%

**CDC+:**  
88.0%

### MLI Supports

**Waiver:**  
97.2%

**CDC+:**  
99.1%

### Record Reviews

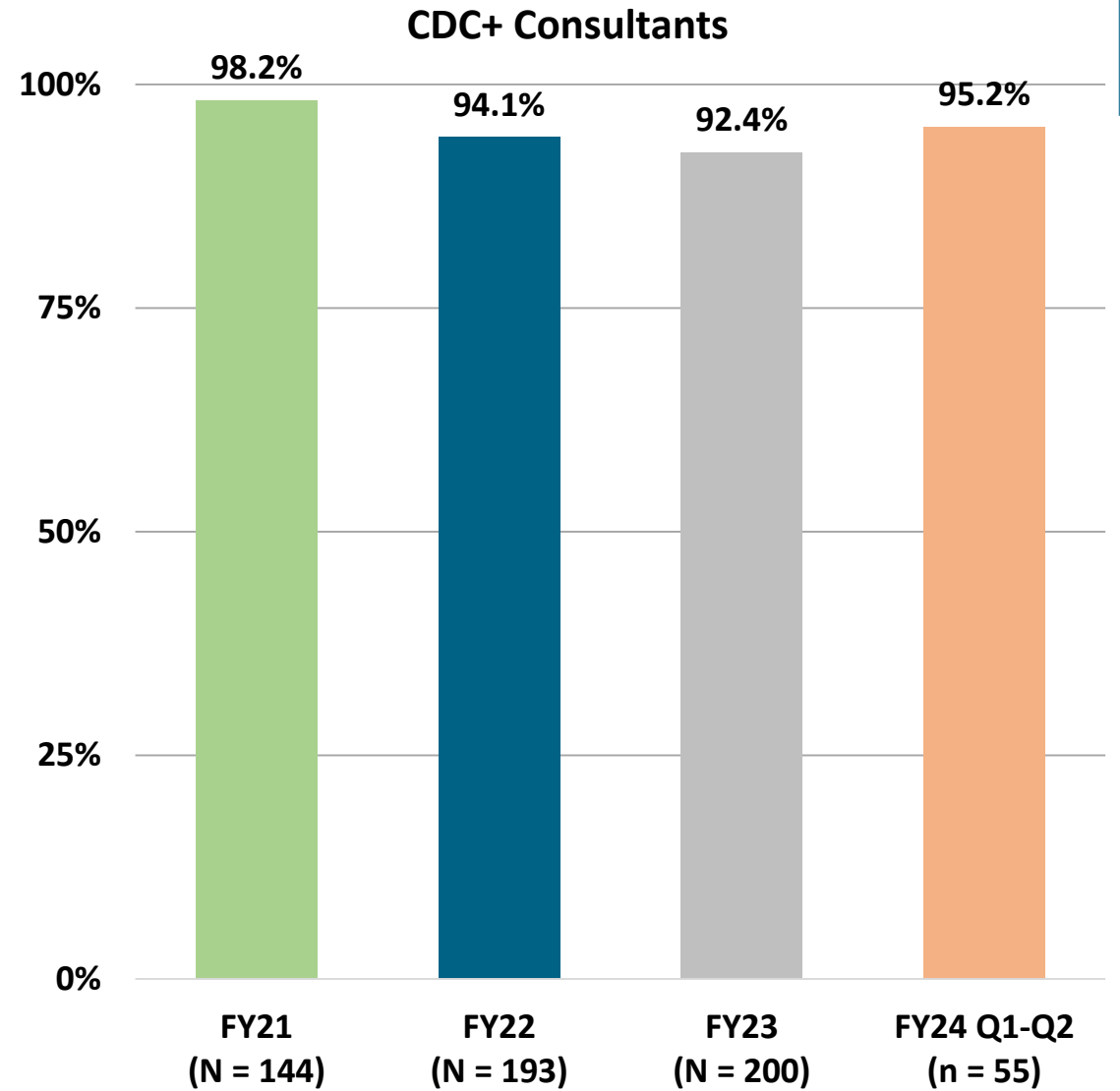
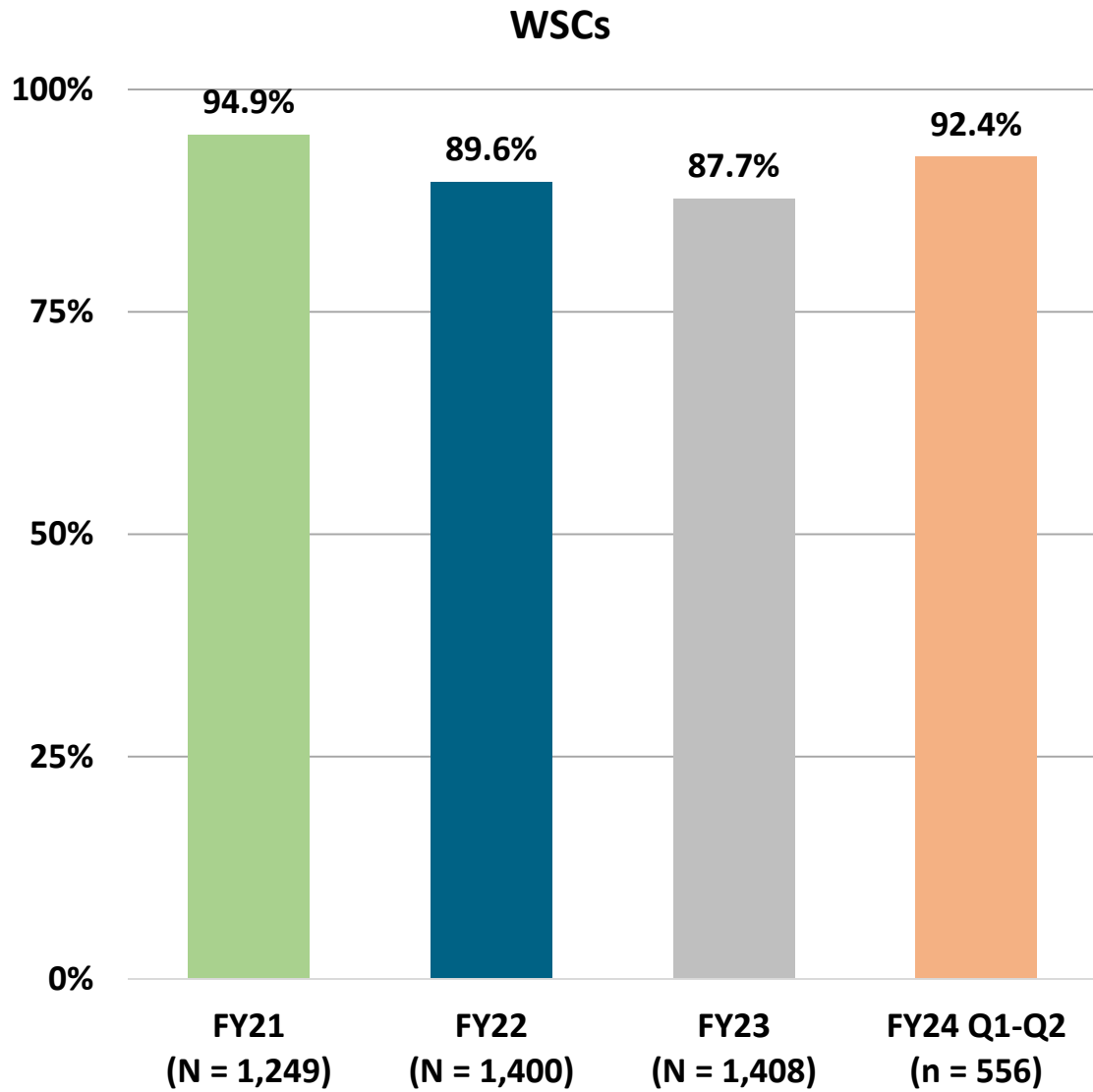
**Waiver Support Coordinators (WSC):**  
93.3%

**CDC+ Consultants (C):**  
95.8%

# WSC/CDC+ Consultant Record Reviews



# WSC/CDC+ Consultant Record Review Scores by FY



# Historically Lower Scoring Record Review Indicators: WSCs FY21 → FY22 → FY23 → FY24 Q1-Q2

The Support Plan reflects support and services necessary to **address assessed risks.**

• 97.5% (1,188) → 78.2% (1,323) → 68.4% (1,375) → **74.7% (553)**

The Support Plan includes supports and services consistent with **assessed needs.**

• 98.0% (1,248) → 68.4% (1,375) → 68.2% (1,397) → **75.8% (553)**

**Level of care** is completed accurately using the **correct instrument/form.**

• 86.7% (1,207) → 75.6% (1,388) → 73.7% (1,402) → **84.5% (554)**

Support Coordinator Progress Notes demonstrate pre-Support Plan planning activities were conducted.

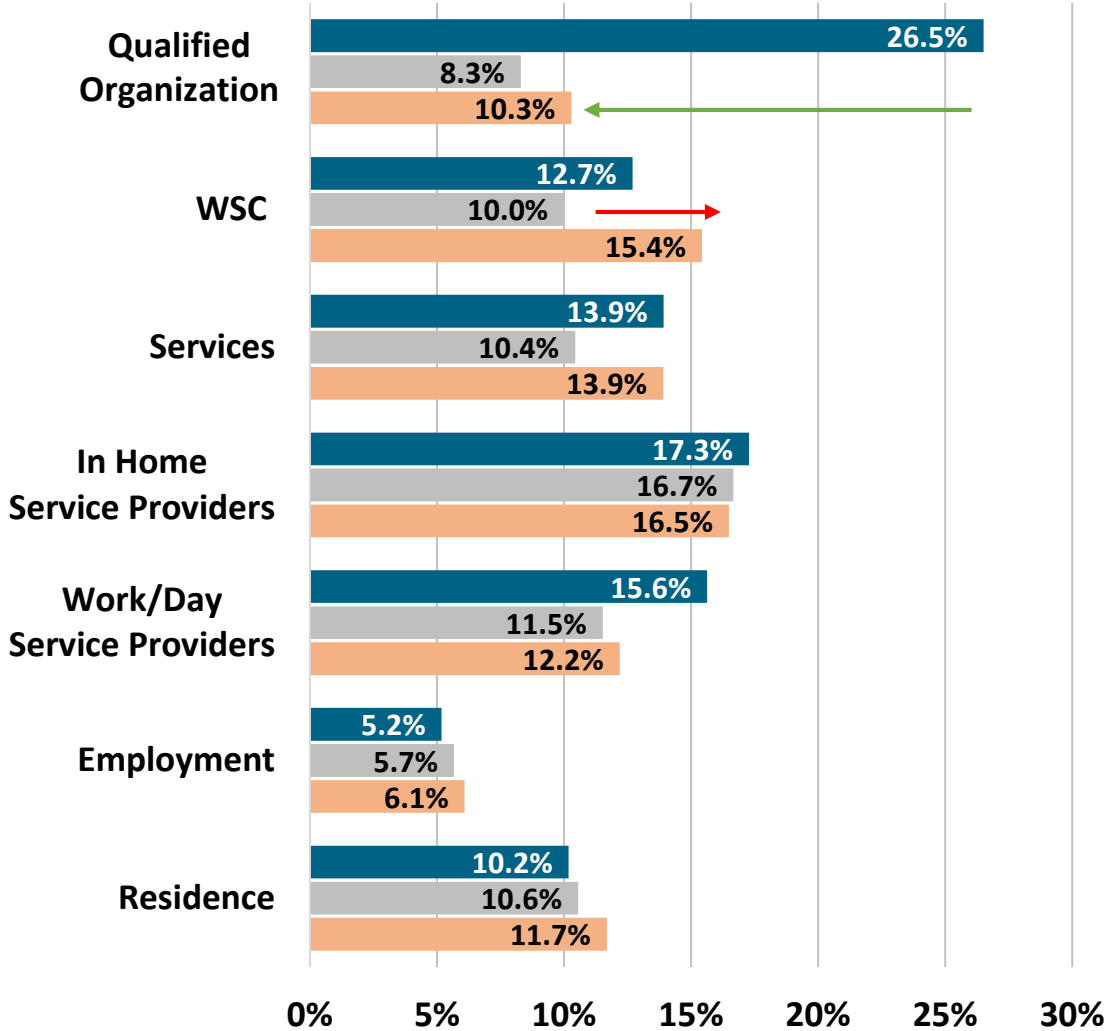
• 83.4% (1,241) → 87.0% (1,332) → 67.7% (1,389) → **84.8% (532)**

# My Life Interview (MLI)

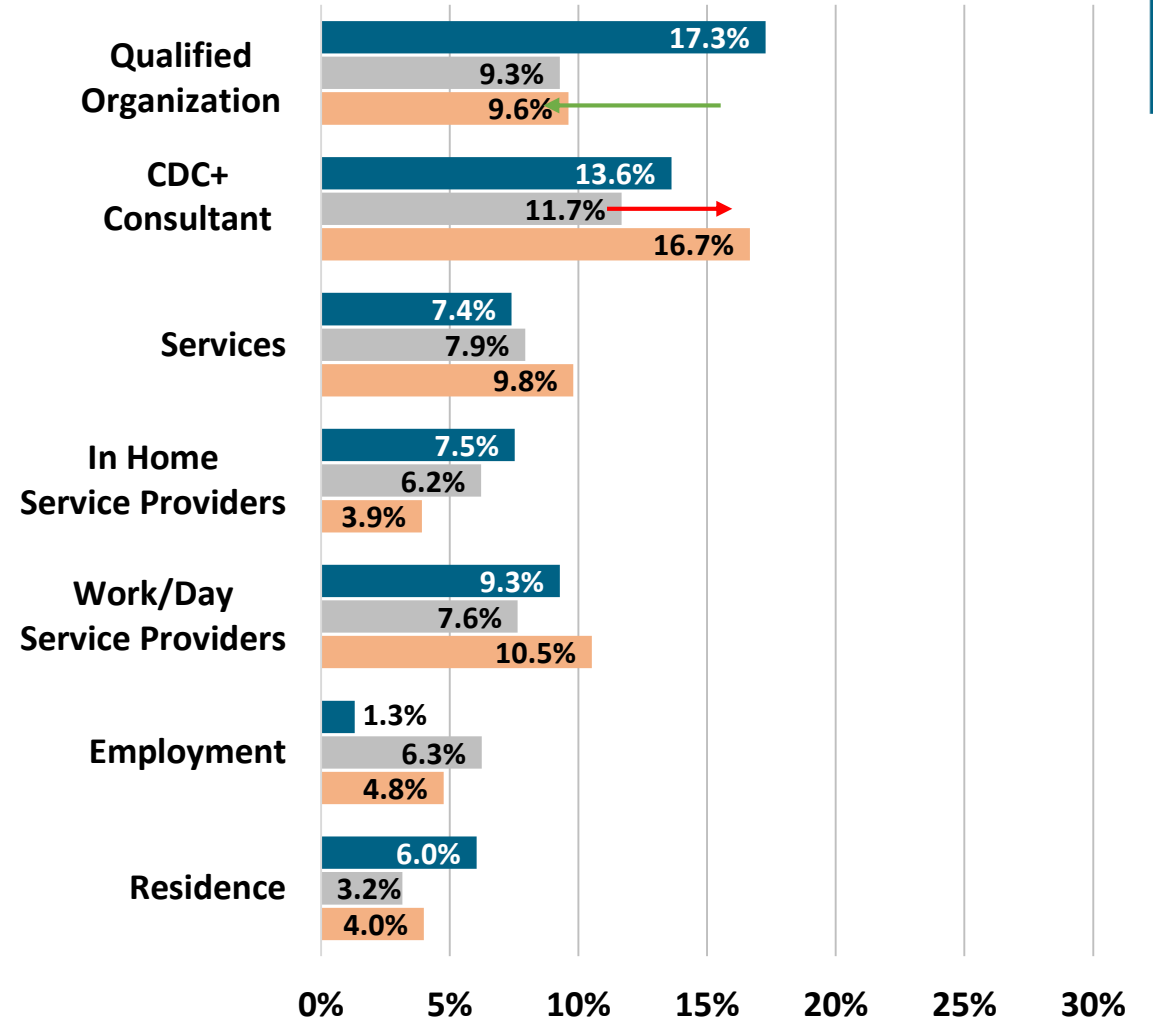


# Stability: Percent with 1 or more changes in past year

## Waiver



## CDC+



■ FY22 (1,400) ■ FY23 (1,408) ■ FY24 Q1-Q2 (566)

■ FY22 (N = 193) ■ FY23 (200) ■ FY24 Q1-Q2 (55)

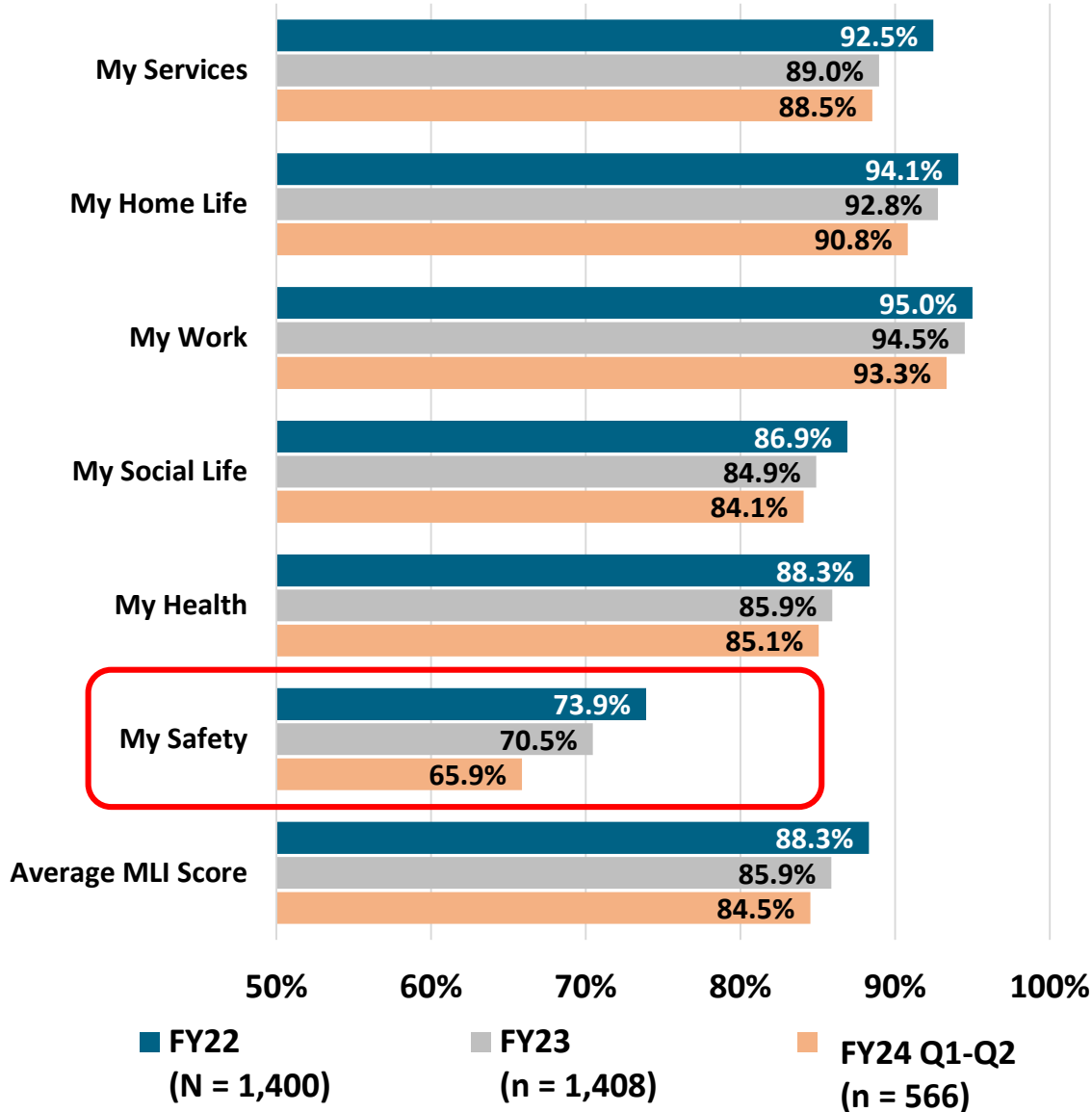
# Stability: Top Reason(s) for Change in Service Providers (Waiver Participants only)

Source of Change	Reason for Change	Waiver	
		n	%
<b>WSC (n = 83)</b>	My WSC was no longer rendering services	33	39.8%
	Change in WSC was made by my natural supports.	20	24.1%
	Change in WSC was made by my choice.	14	16.9%
	Change in WSC was made by my paid supports.	14	16.9%
	The WSC agency changed my WSC without asking my choice.	6	7.2%
	I moved to an area where my WSC did not render services.	3	3.6%
<b>In Home service providers (n = 78)</b>	Change in service providers in my home was made by my paid supports.	31	39.7%
	Change in service providers in my home was made by my choice.	26	33.3%
	Change in service providers in my home was made by my natural supports.	17	21.8%
	My service providers were no longer rendering services.	11	14.1%

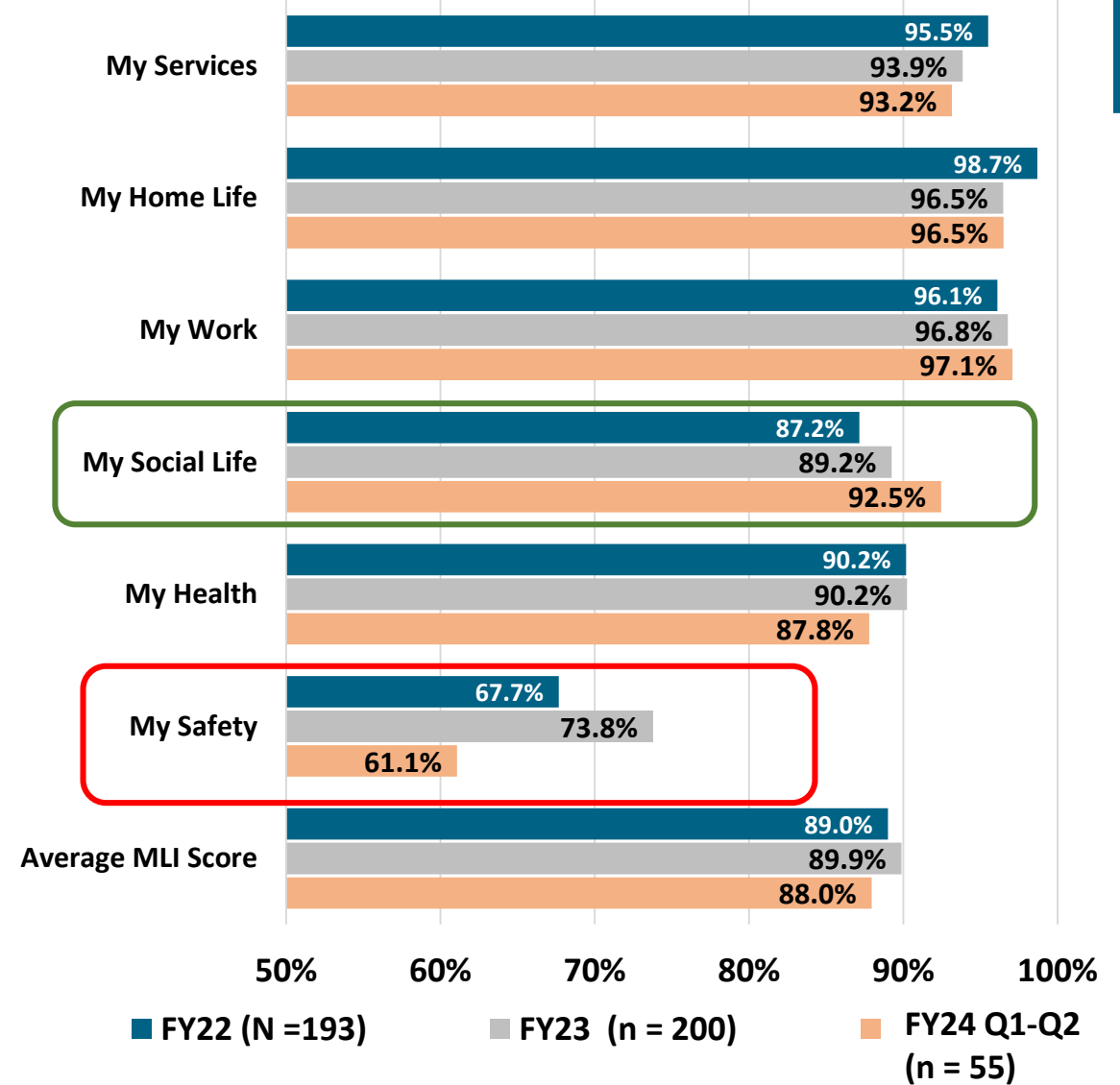


# MLI Outcomes by Life Area and FY: FY22 – FY24 Q1-Q2

## Waiver



## CDC+



# FY24 Q1-Q2 Lowest Scoring Outcomes

**I understand my medications.**  
**Waiver: 41.4%**  
**CDC+: 54.8%**

**I am not aware of...**

**potential side effects of my medications.**  
 82.5% of Not Mets  
 (236/286)

**the medications I take.**  
 74.5% of Not Mets  
 (213/286)

**why my medications are prescribed.**  
 67.5% of Not Mets  
 (193/286)

**I understand what abuse, neglect, and exploitation (ANE) mean.**  
**Waiver: 50.0%**  
**CDC+: 56.1%**

**I do not understand...**

**what exploitation means.**  
 76.5% of Not Mets  
 (192/251)

**what neglect means.**  
 69.3% of Not Mets  
 (174/251)

**all the different types of abuse.**  
 63.7% of Not Mets  
 (160/251)

**I know what to do if ANE occurs.**  
**Waiver: 62.4%**  
**CDC+: 53.1%**

**I do not know...**

**what the Abuse Hotline is.**  
 70.8% of Not Mets  
 (153/216)

**where to find the Abuse Hotline number.**  
 69.0% of Not Mets  
 (149/216)

**what to do/who to go to if ANE occurs.**  
 37.5% of Not Mets  
 (81/216)

**My safety needs are addressed.**  
**Waiver: 62.9%**  
**CDC+: 62.3%**

**I do not know...**

**how or when to call 911.**  
 71.4% of Not Mets  
 (157/220)

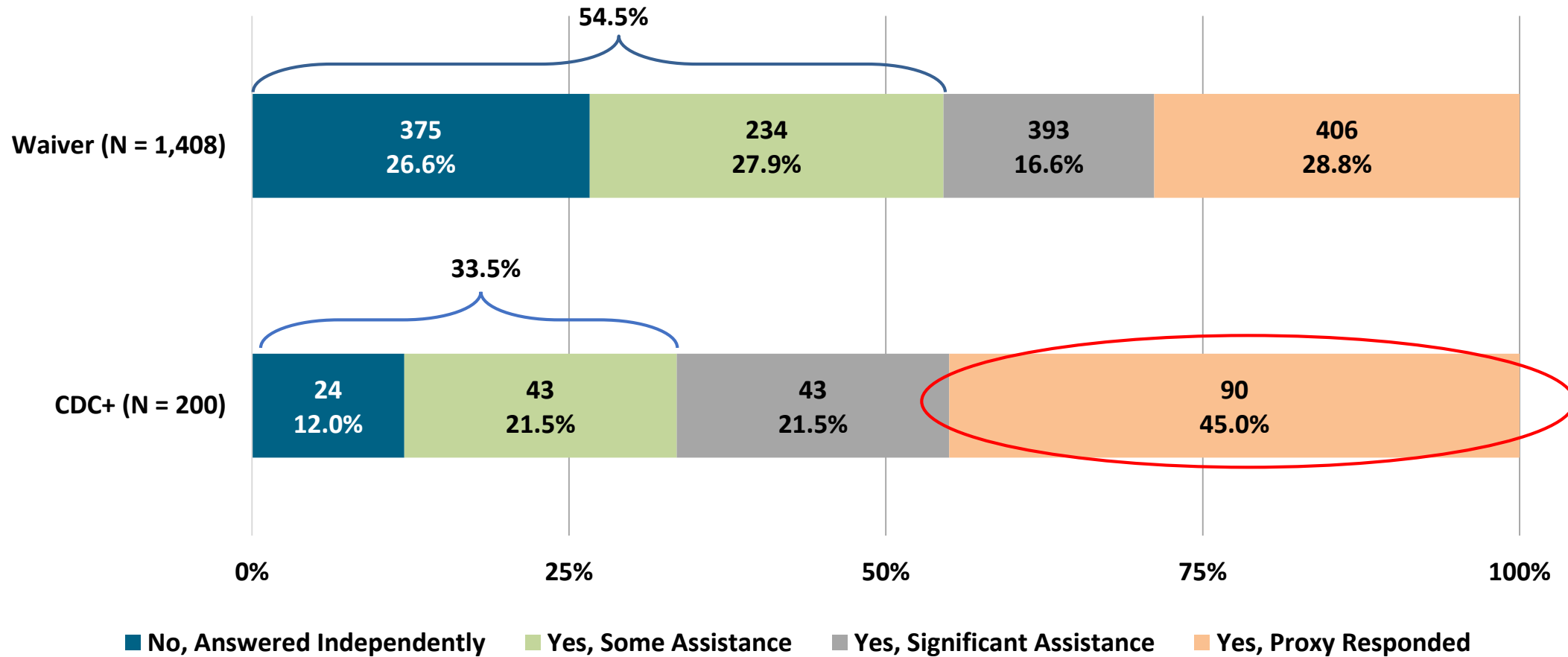
**how to keep myself safe when out in my community.**  
 52.3% of Not Mets  
 (115/220)

**what to do in the event of a fire.**  
 50.5% of Not Mets  
 (111/220)

# FY 2023: Individual Interview Capabilities and MLI Outcomes

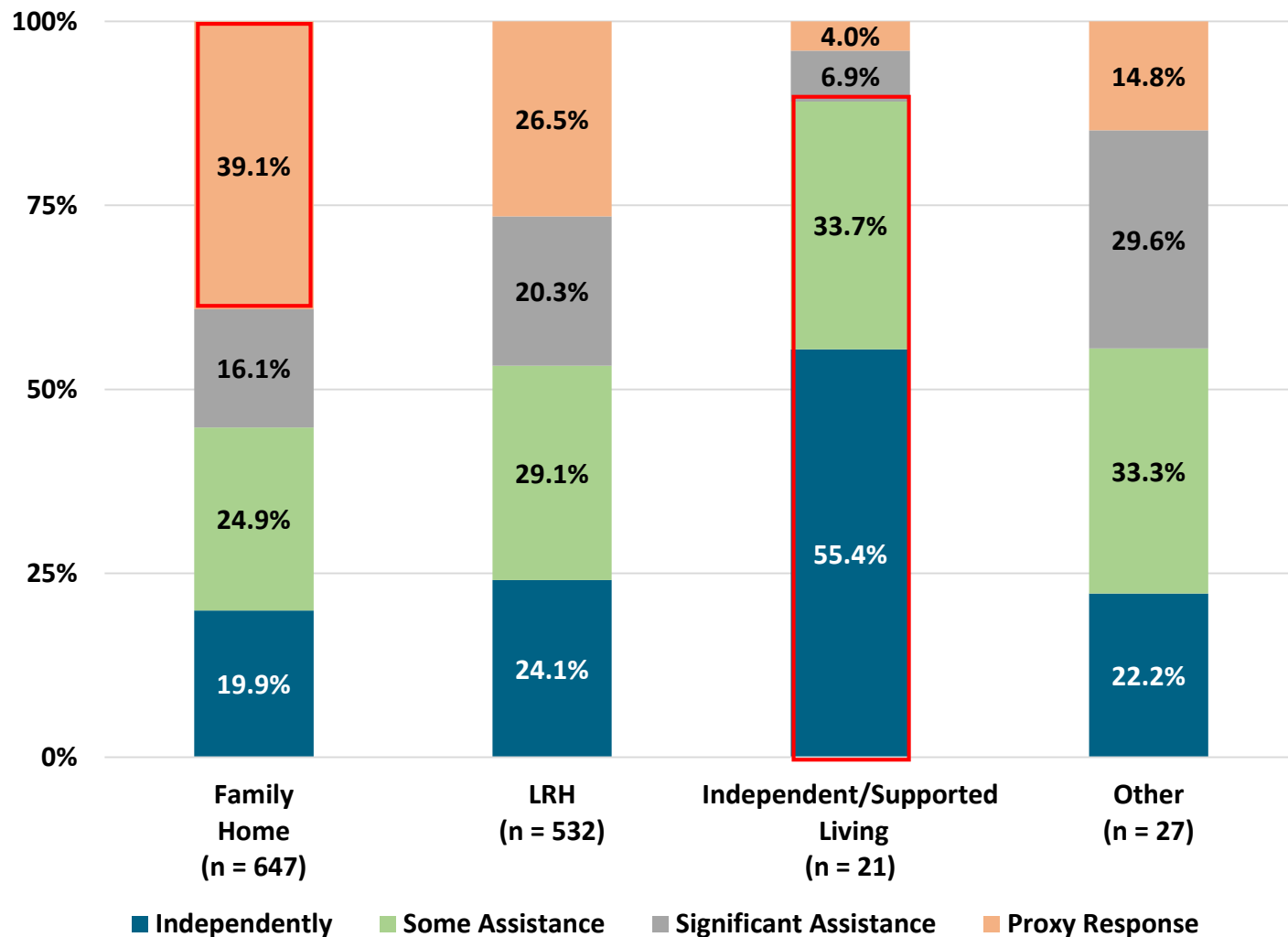


# Did anyone assist the person with answering interview questions?

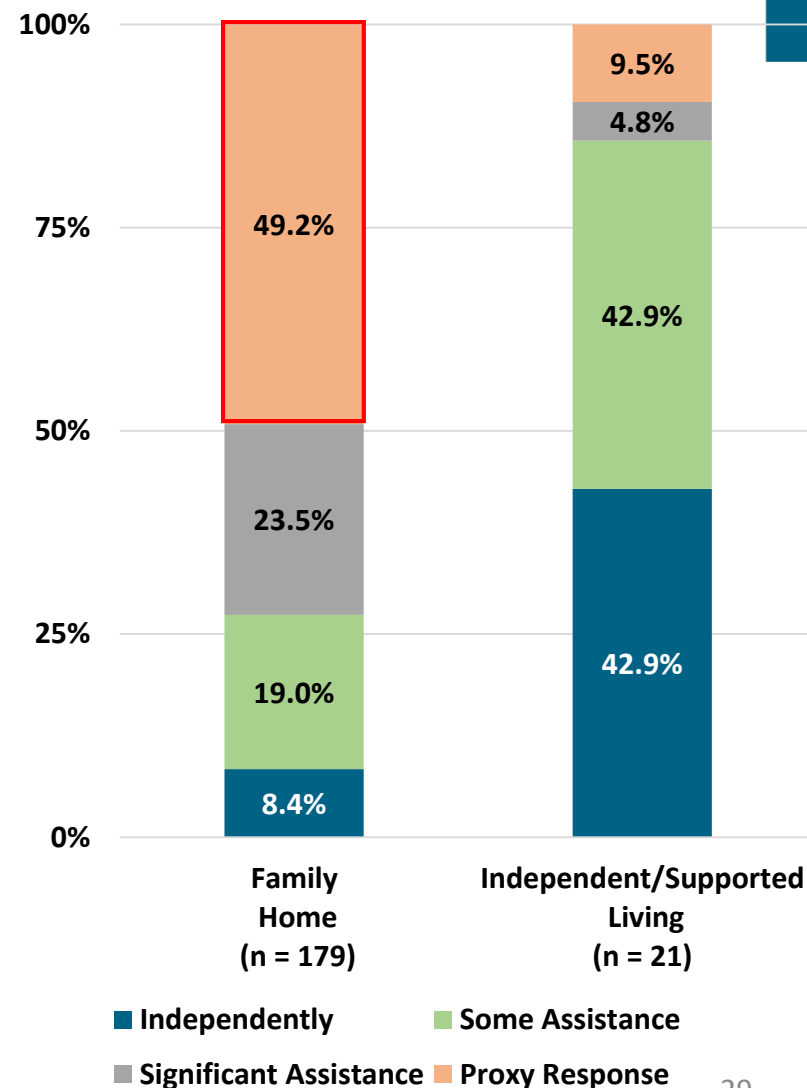


# Interview Response Ability by Residential Setting

FY23 Waiver Participants



FY23 CDC+ Participants

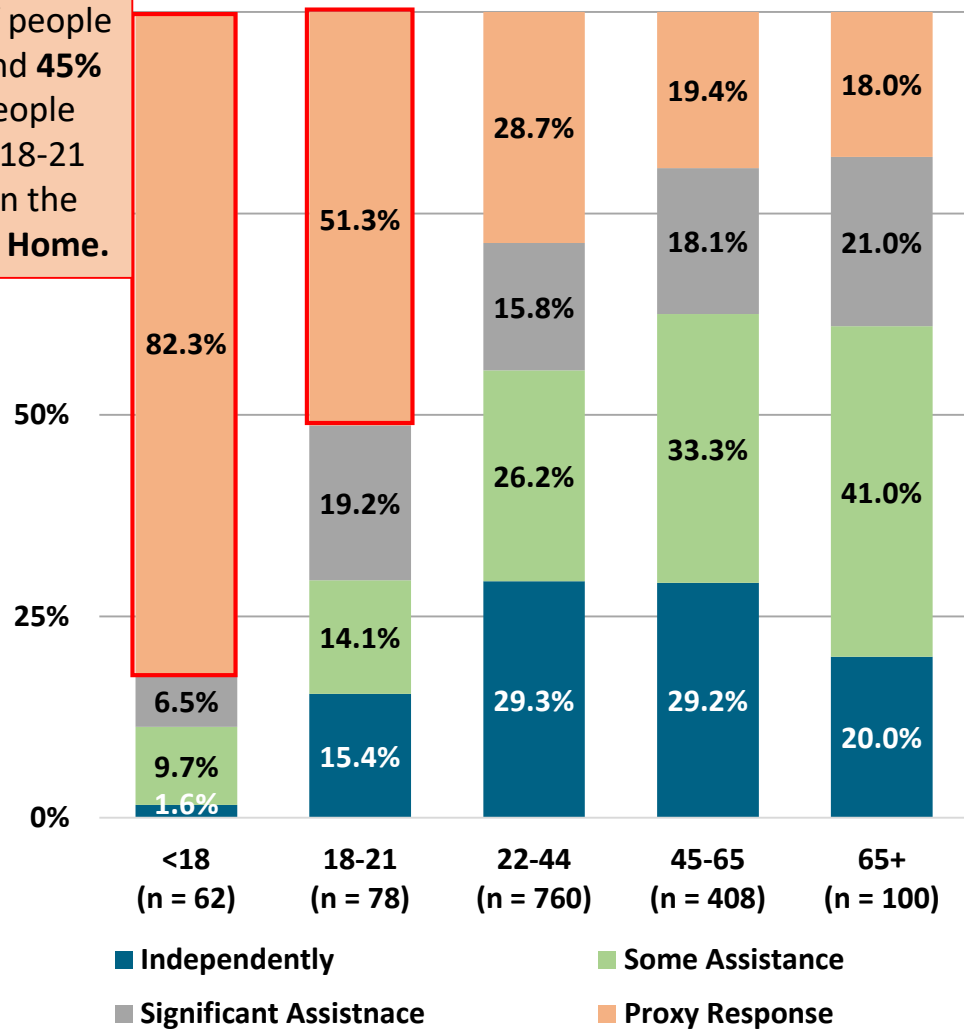


\*LRH: Licensed Residential Home

# Interview Response Ability by Age Category

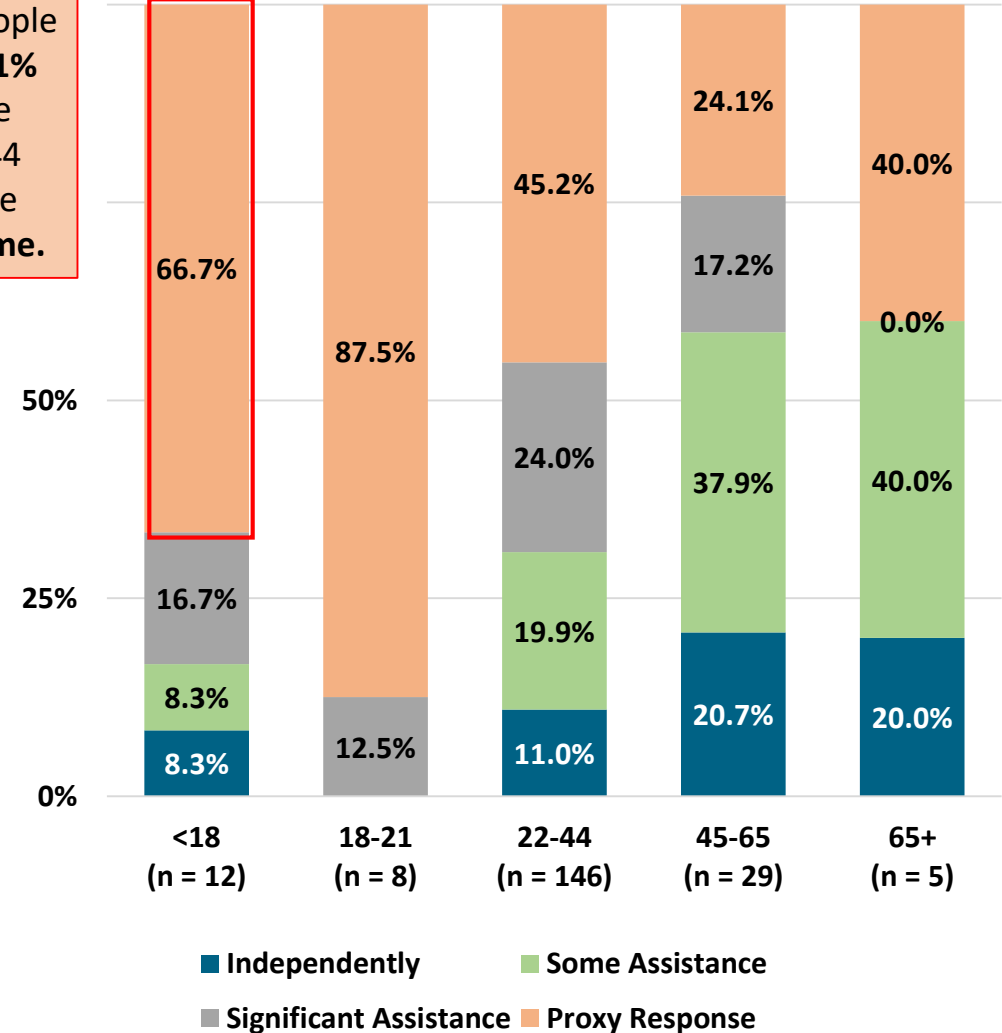
FY23 Waiver Participants (N = 1,408)

84% of people <18 and 45% of people ages 18-21 live in the Family Home.



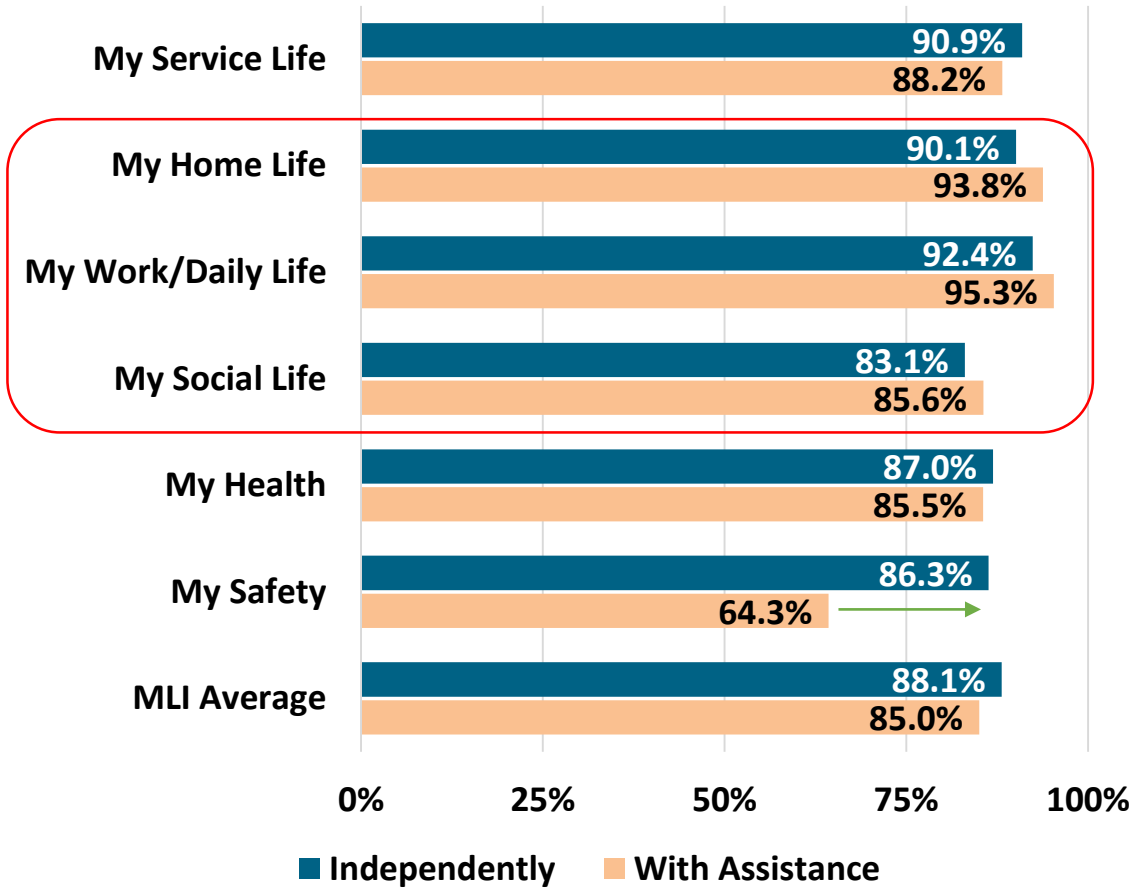
100% of people <21 and 91% of people ages 22-44 live in the Family Home.

FY23 CDC+ Participants (N = 200)

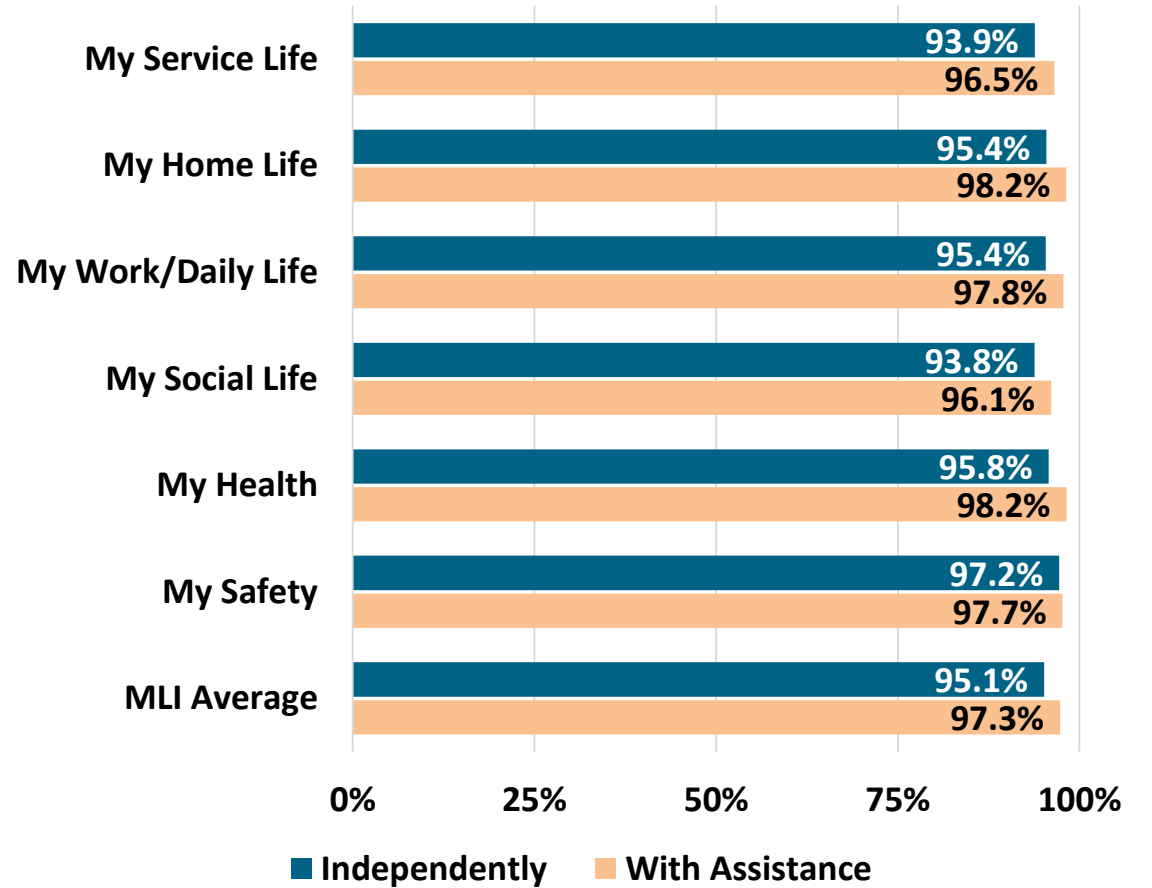


# MLI Outcomes and Supports by Life Area and Need for Assistance: FY23 Waiver Participants (N = 1,408)

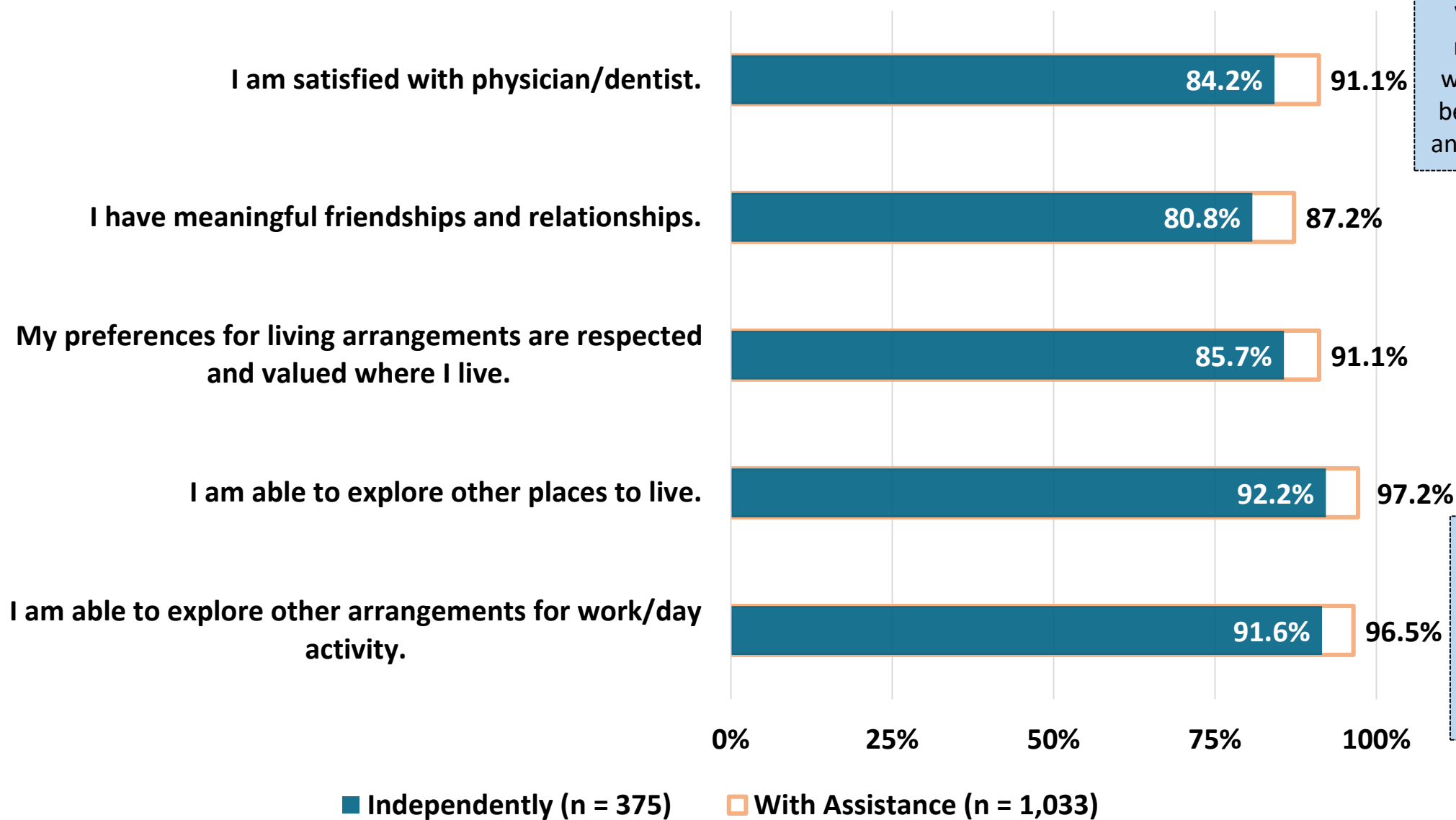
## Outcomes



## Supports



# Outcomes that are Lower for Waiver Participants who Answered Independently than for those who had Assistance



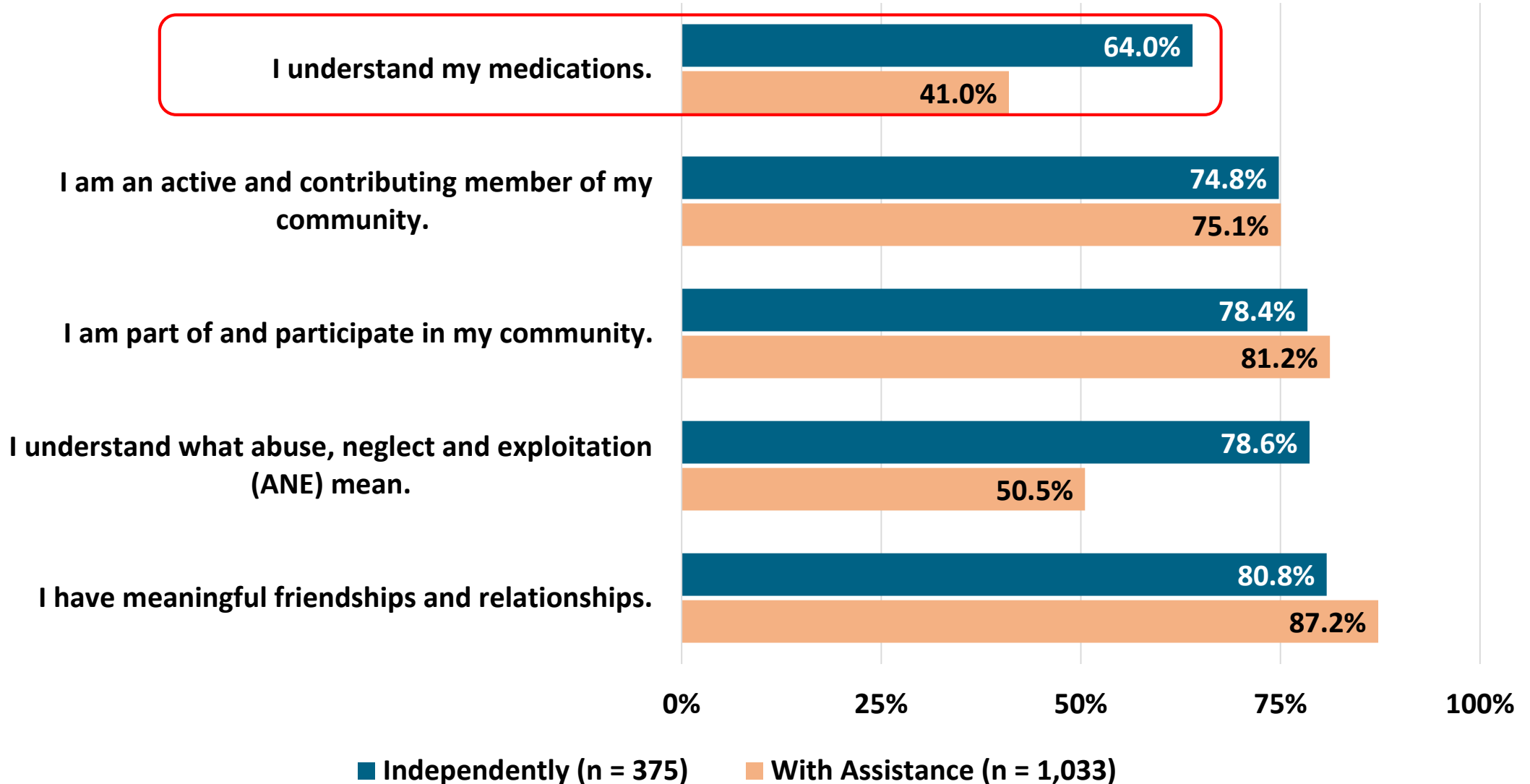
Why might Outcomes related to satisfaction with physicians/dentists be lower for people who answered independently?

Why might Outcomes related to friendships be lower for people who answered independently?

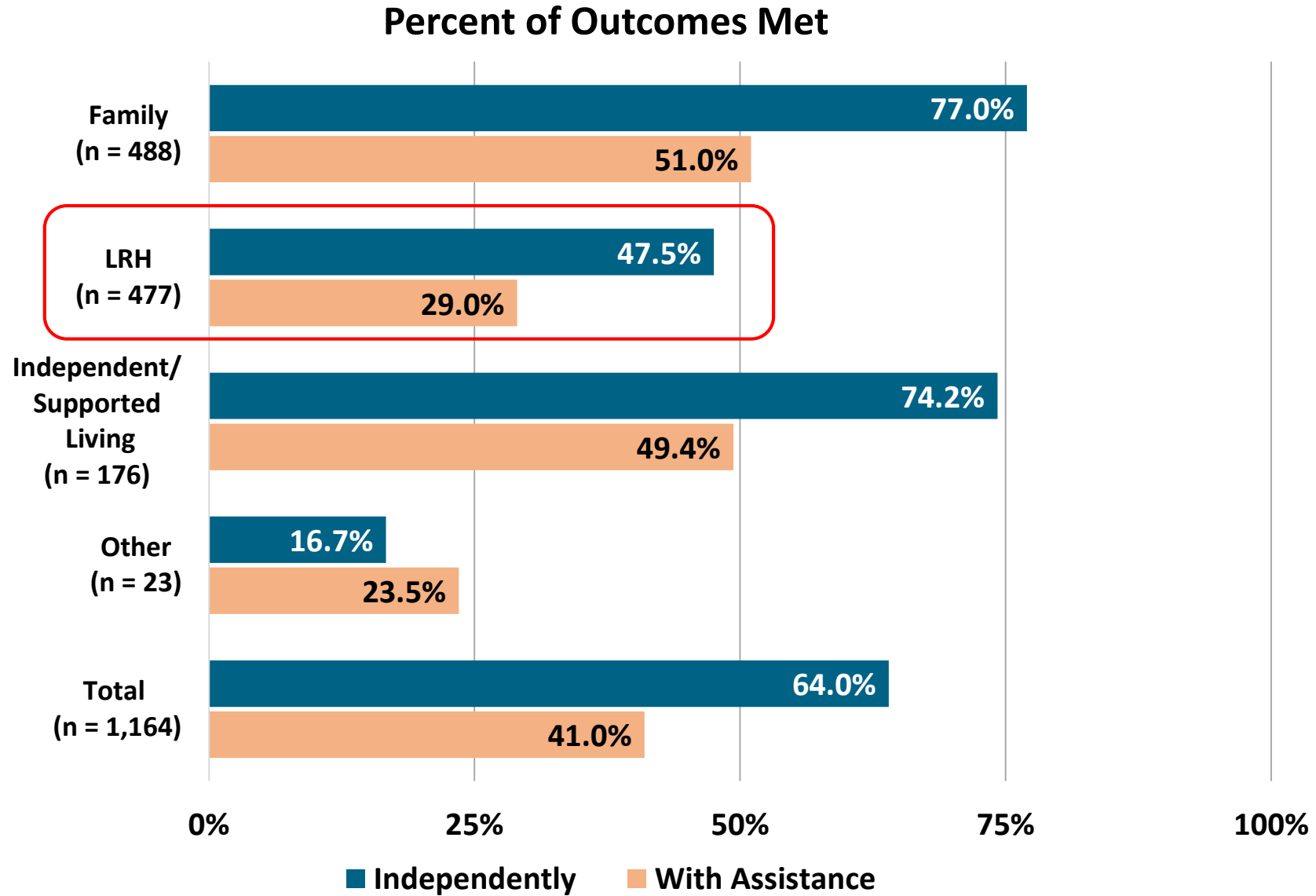
Why might Outcomes related to living arrangements be lower for people who answered independently?



# Lowest Scoring Outcomes for Waiver Participants who Answered Independently Compared with People who had Assistance

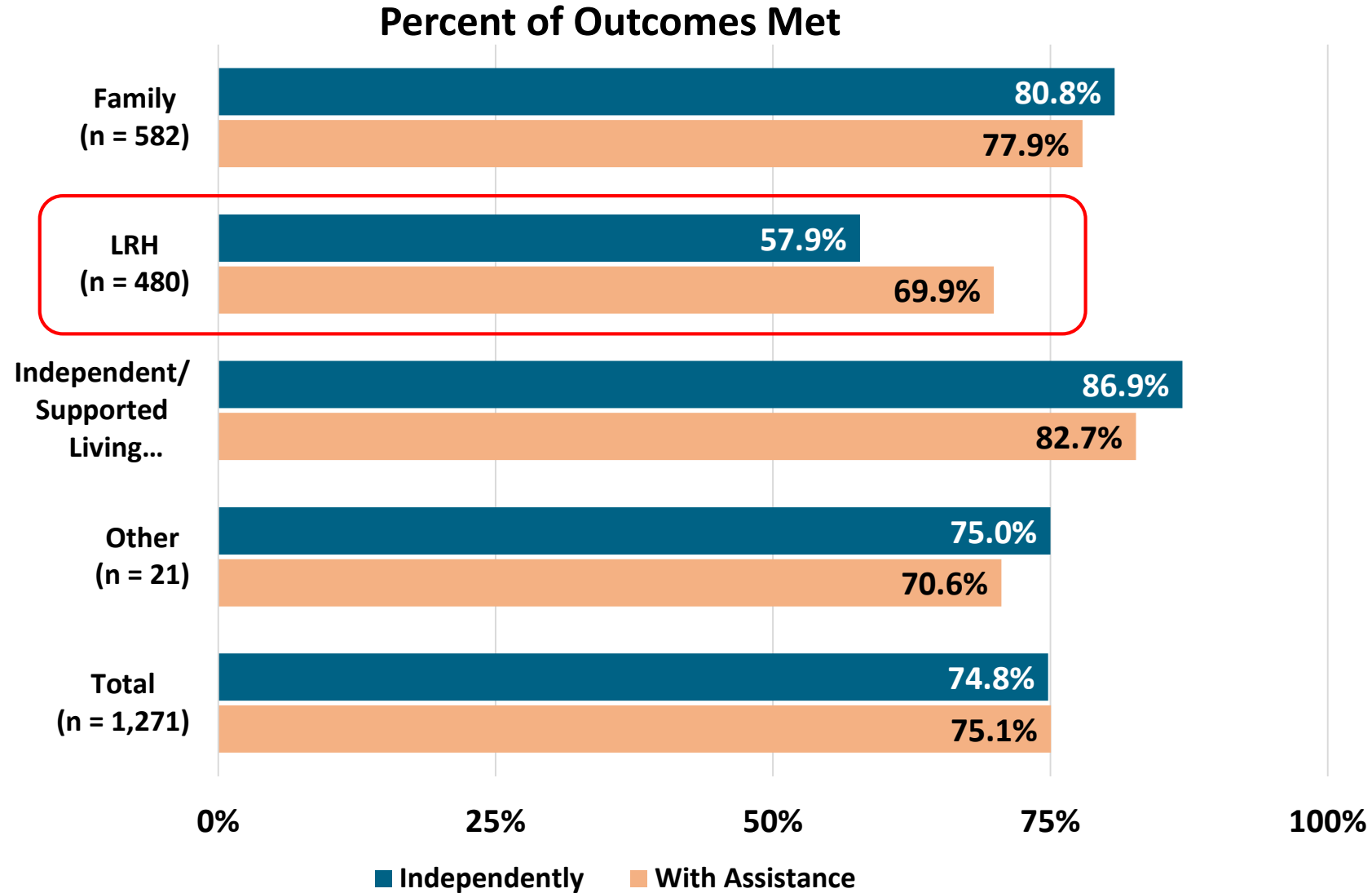


# “ I Understand My Medications ”



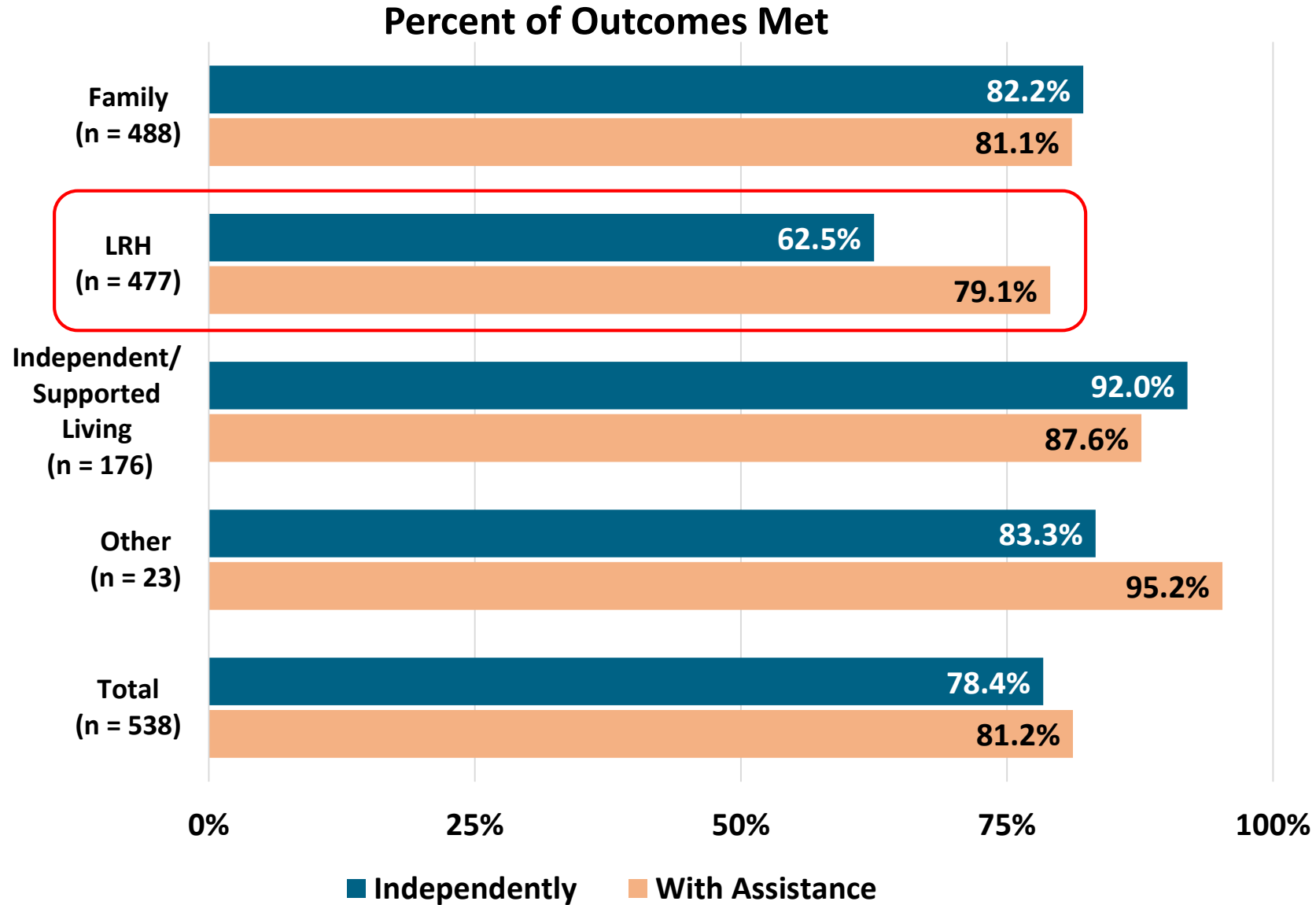
\*LRH: Licensed Residential Home

# “I am an active and contributing member of my community”



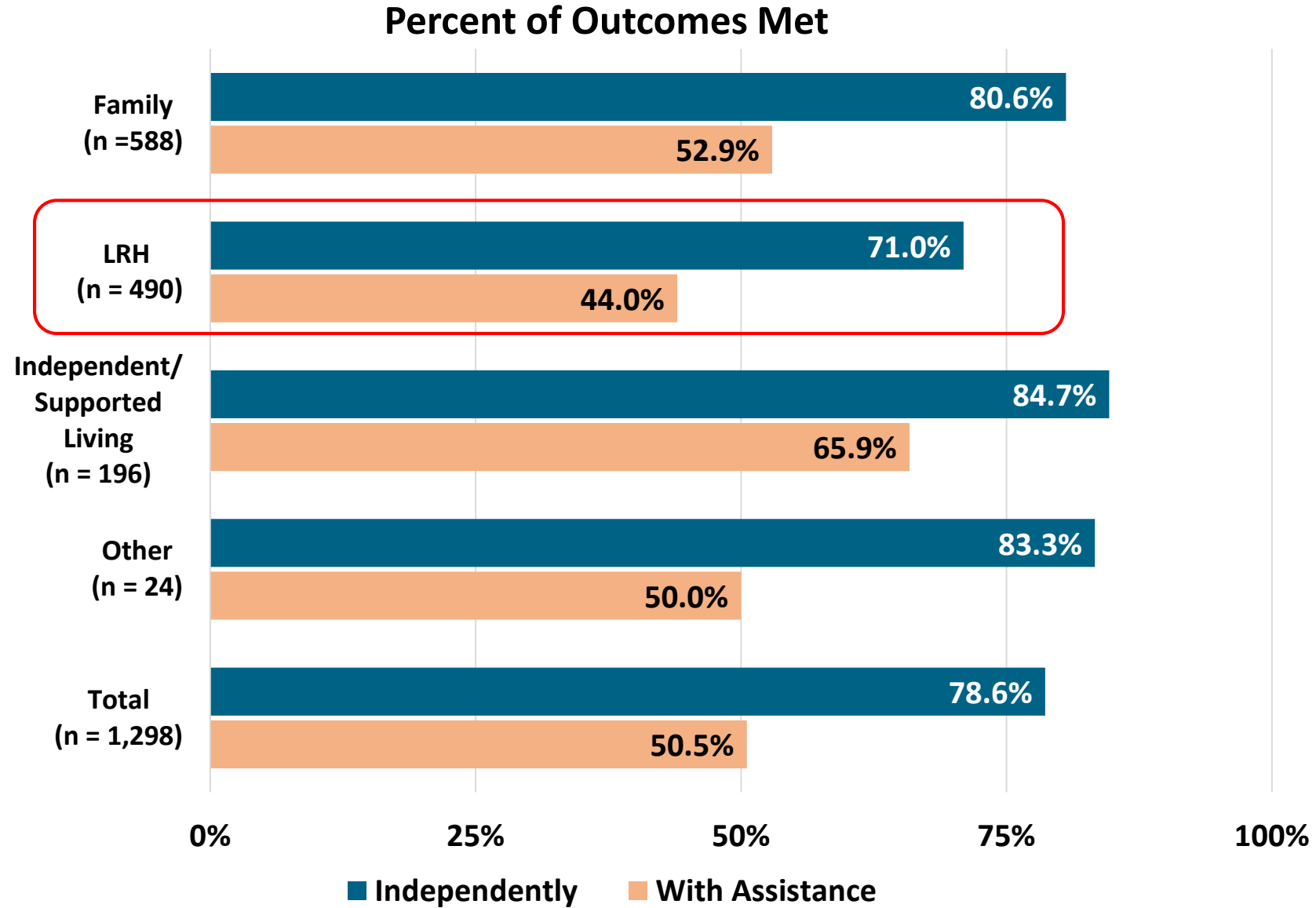
\*LRH: Licensed Residential Home

# “I am part of and participate in my community”



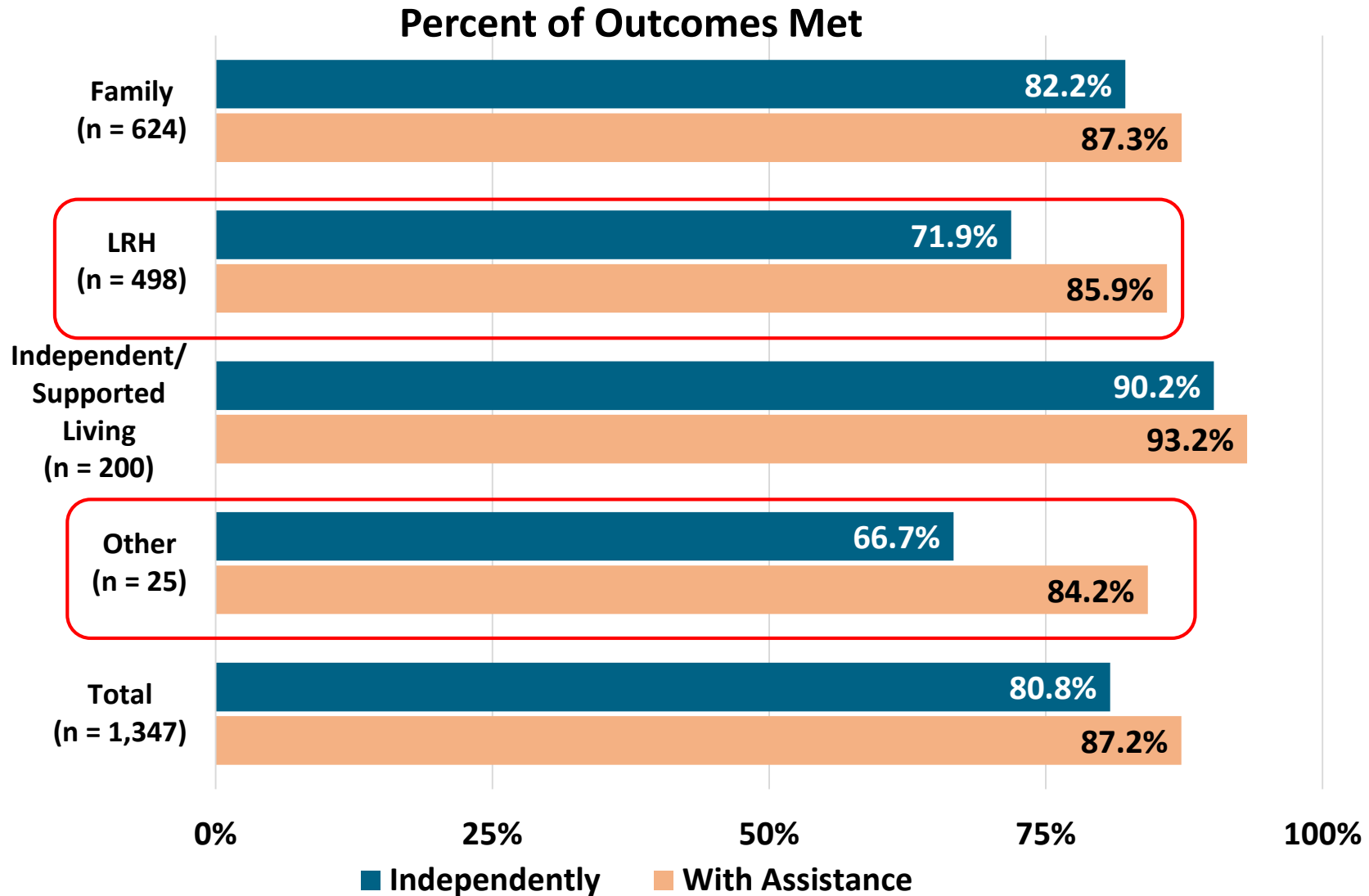
\*LRH: Licensed Residential Home

# “I understand what ANE means”:



\*LRH: Licensed Residential Home

# “I have meaningful friendships and relationships”:



\*LRH: Licensed Residential Home

# Discussion Questions

- What **barriers** do people living in **LRHs** face that keep them from meeting outcomes related to **medications, ANE, and community life**?
- What **actions**, if any, can the **Quality Council** take to help people living in LRHs meet these Outcomes?
- Should interview results be analyzed by the individual's ability to answer independently more regularly?
  - Why or Why not?



# Thank you!

Questions? Comments?

Contact:

Dr. Katherine Glasgow ([glasgowk@qlarant.com](mailto:glasgowk@qlarant.com))

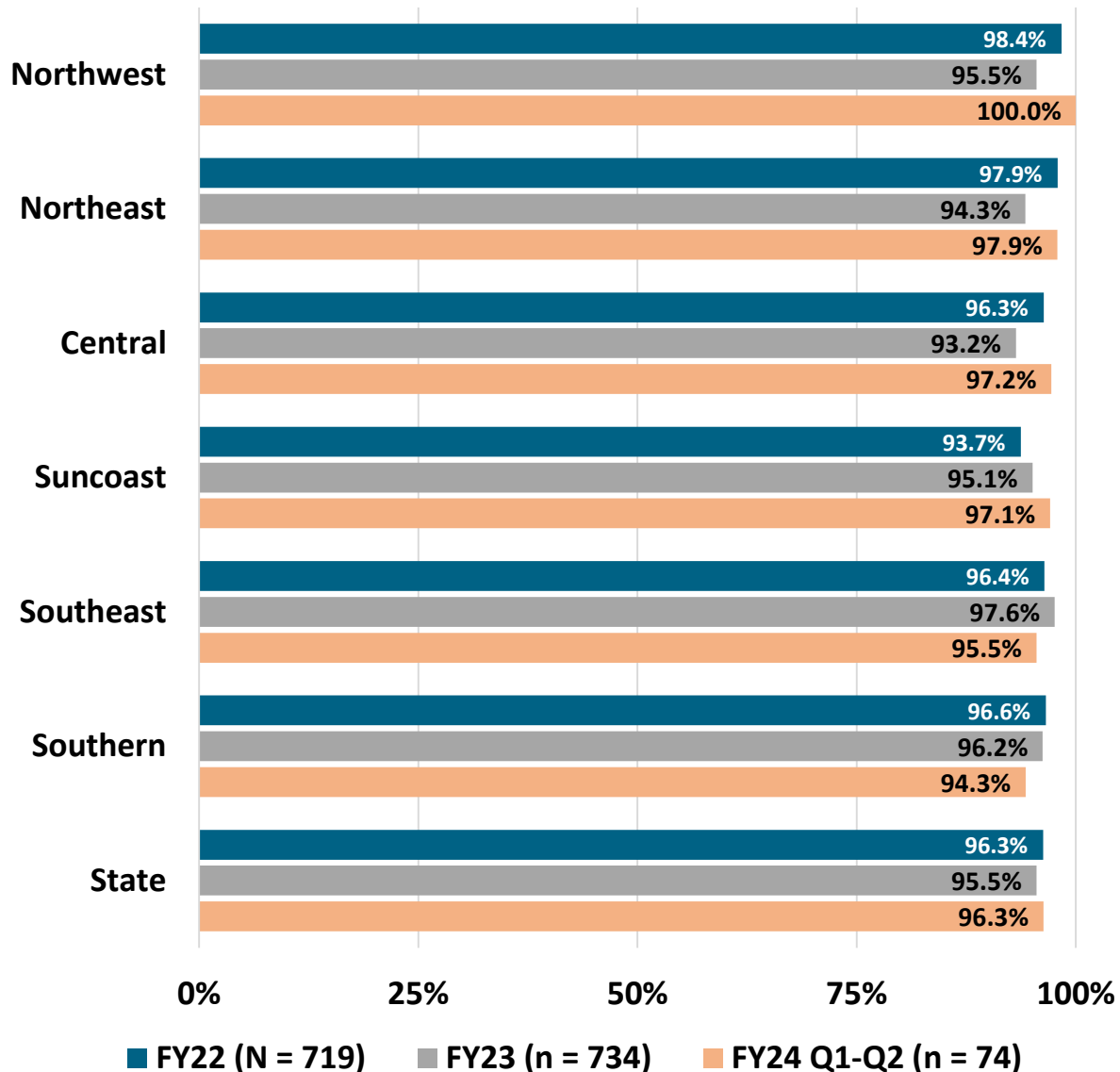
Dr. Shubhangi Vasudeo ([vasudeos@qlarant.com](mailto:vasudeos@qlarant.com))



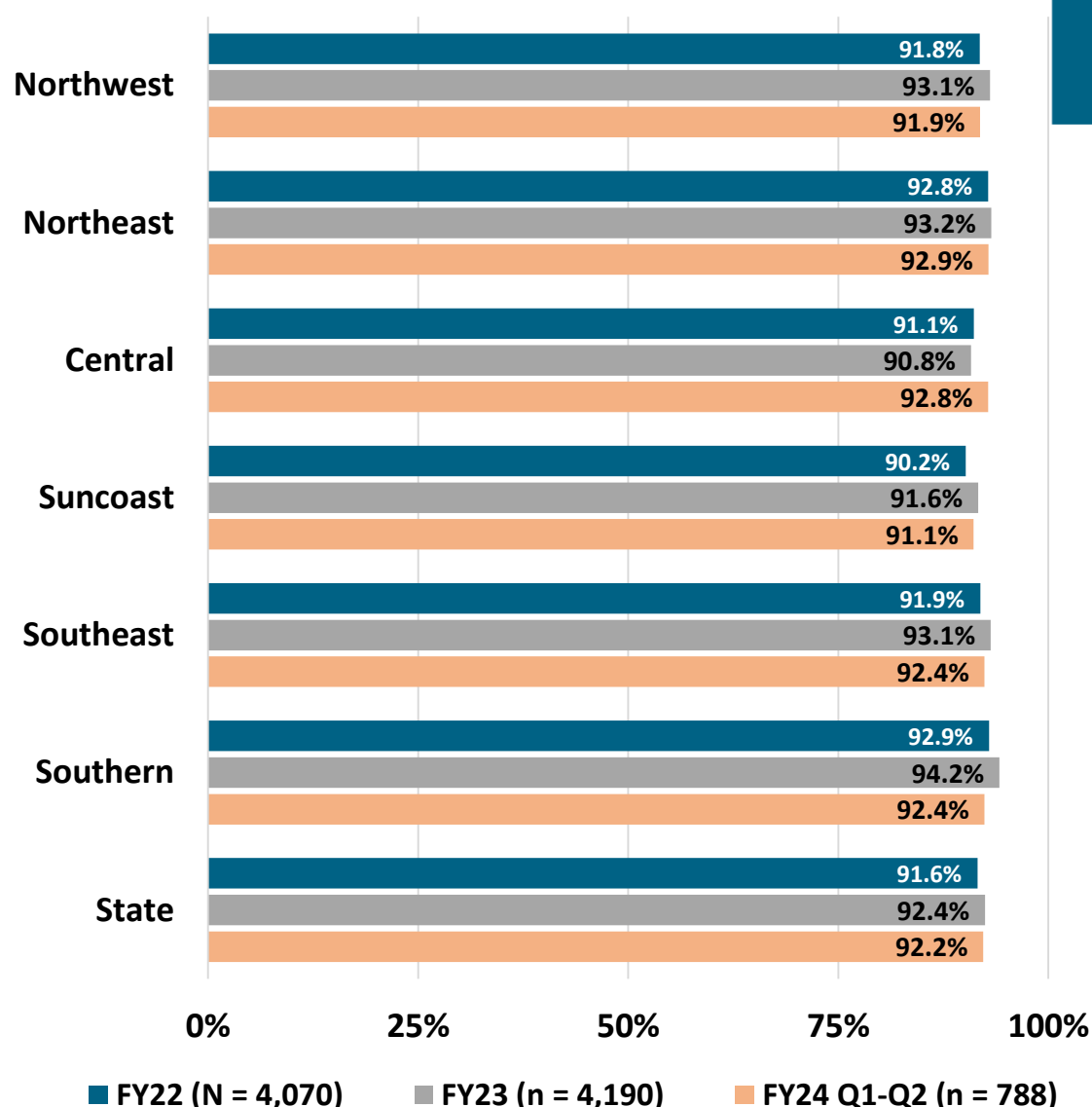
# Addendum

# Qualifications and Training Scores by Region and FY

## WSC/CDC+



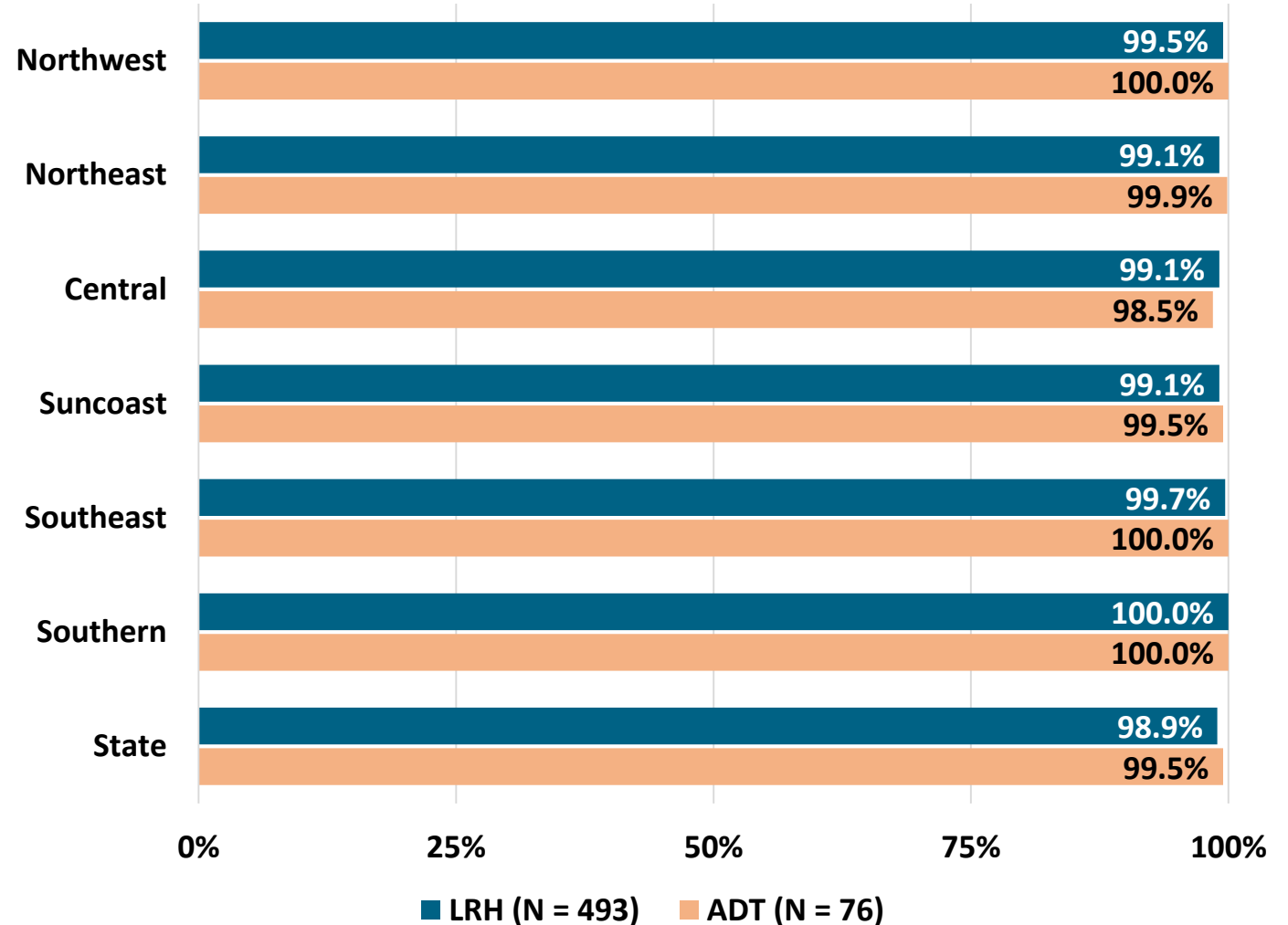
## Service Provider



# Observations: LRH and ADTs by Region

Region (n)	LRH (493)	ADT (76)
Northwest	17	3
Northeast	93	19
Central	109	16
Suncoast	95	23
Southeast	124	10
Southern	55	5
<b>State</b>	<b>493</b>	<b>76</b>

Average Observation Score by Region: FY24 Q1-Q2



## Supported Living Coaching:

A **Quarterly Summary** covering services provided and billed during the period under review is in the record.

- FY22: 71.7% (n = 420)
- FY23: 37.9% (n = 390)
- FY24 Q1-Q2: 46.5% (n = 170)

## Respite:

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

- FY22: 66.4% (n = 259)
- FY23: 57.7% (n = 246)
- FY24 Q1-Q2: 60.0% (n = 115)

## Personal Supports:

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

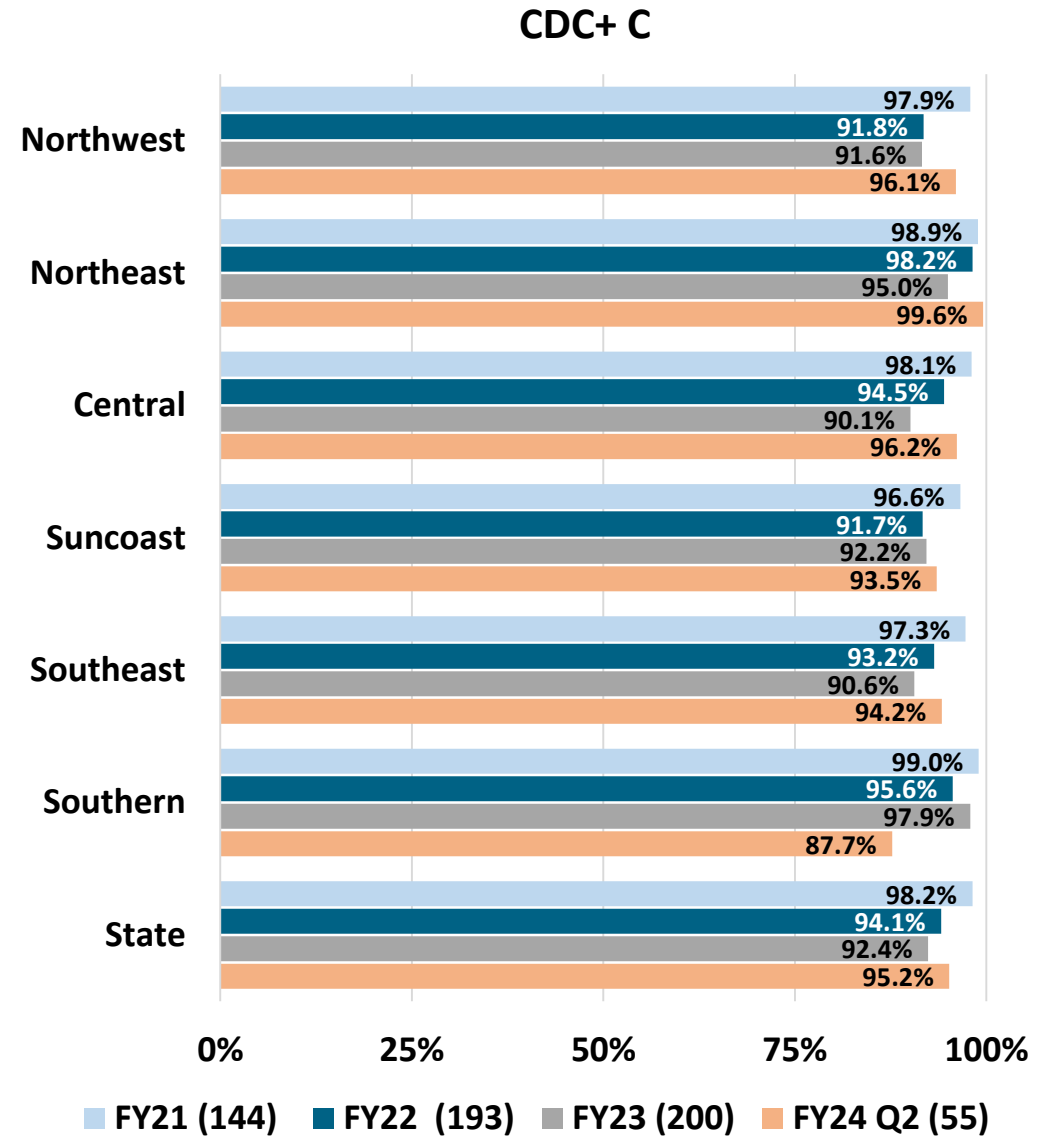
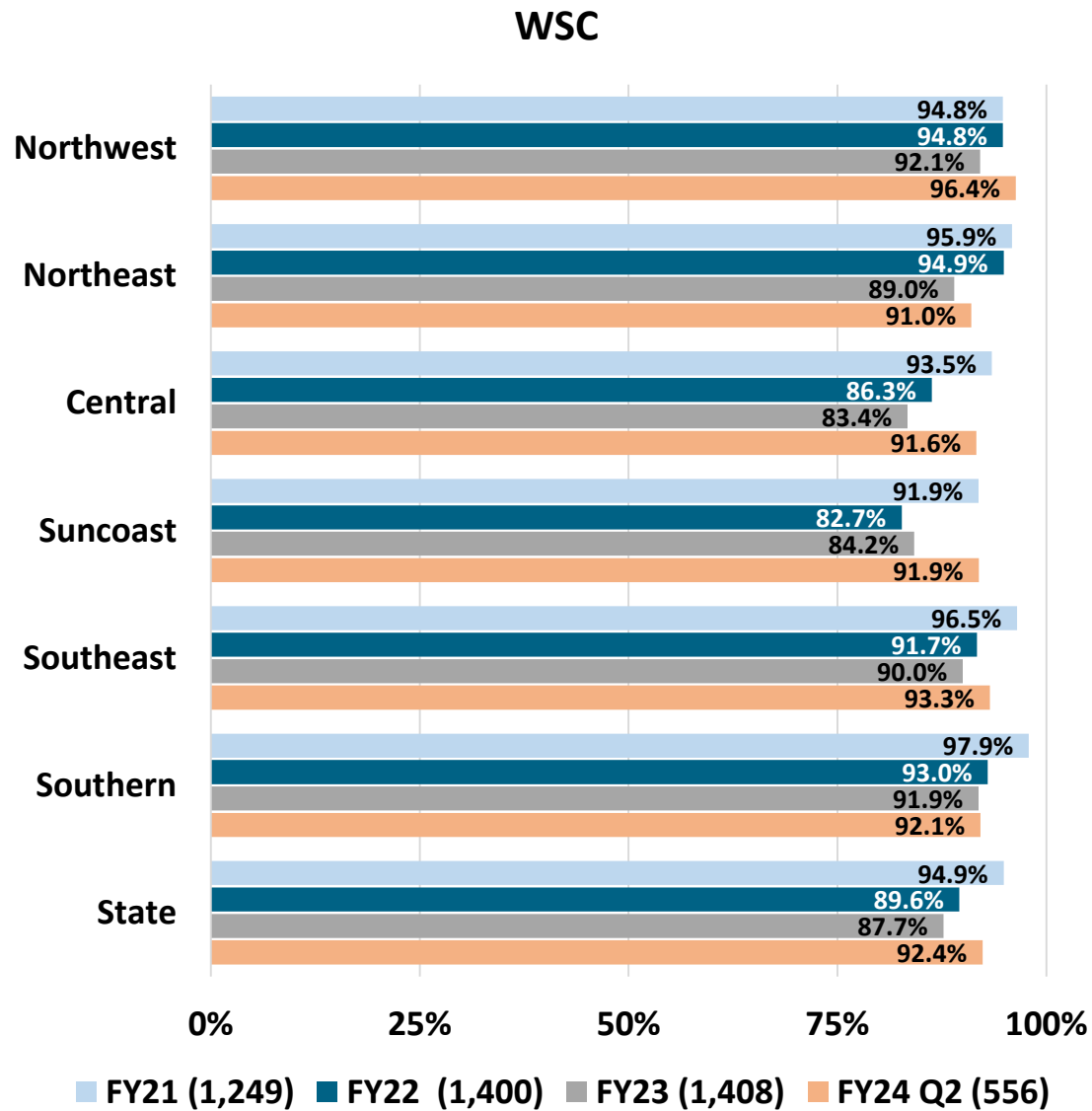
- FY22: 65.0% (n = 1,510)
- FY23: 51.2% (n = 1,472)
- FY24 Q1-Q2: 58.4% (n = 741)

## LSD 2 SEC:

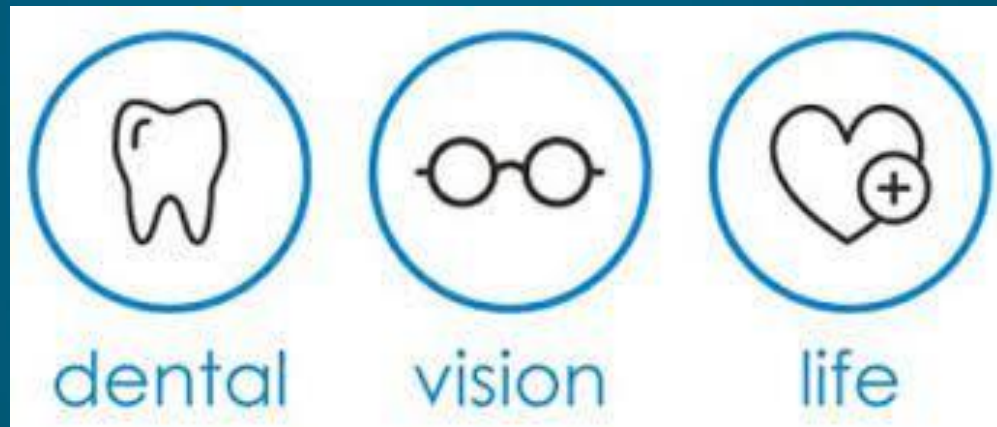
• The current **Employment Stability Plan** covering services provided and billed during the period under review contains all required components.

- FY22: 55.3% (n = 141)
- FY23: 68.5% (n = 146)
- FY24Q2: 55.1% (n = 69)

# WSC/CDC+ Consultant Record Review Scores by Region and FY

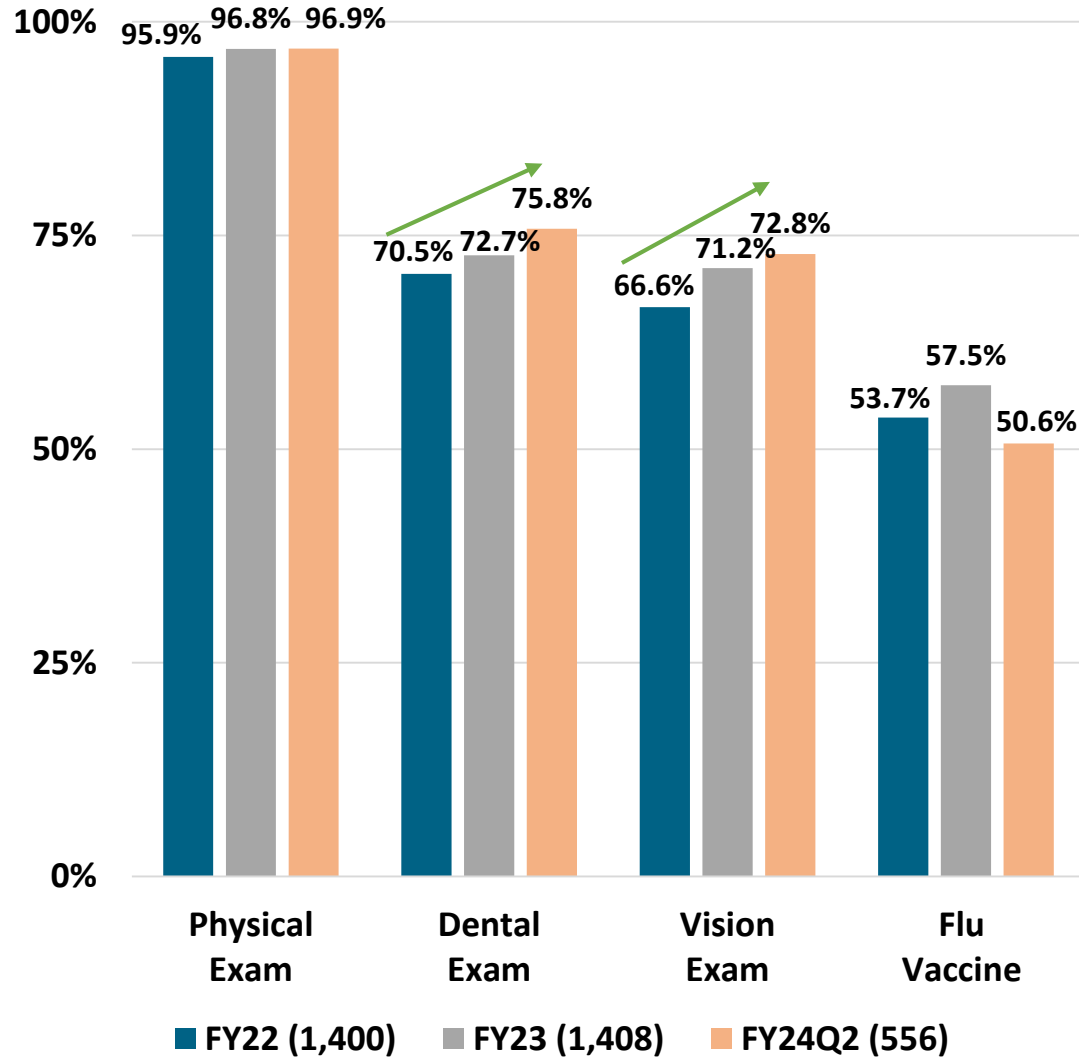


# Preventative Health Care



# Percent of people who received preventative care by FY

## Waiver



## CDC+

