

# Florida Quality Council Qlarant Data Presentation

July 2024

**Qlarant** 

Florida Statewide Quality Assurance Program

Best People. Best Solutions. Best Results.™

# Presentation Outline

## Provider Discovery Reviews (PDRs)

- Fiscal Year (FY) 24 Q1-Q3\* Snapshot
- Staff Qualifications and Trainings (Q&T)
- Background Screenings (BGS)
- Service Specific Record Reviews (SSRRs)
- Alerts (A)

## Person Centered Reviews (PCRs)

- FY24 Q1-Q3 Snapshot
- Record Reviews
- Stability
- Health Summary: Preventative Care
- My Life Interview (MLI) Outcomes and Supports by FY and Life Area

## Outcomes for People Living in Licensed Residential Homes (LRH)

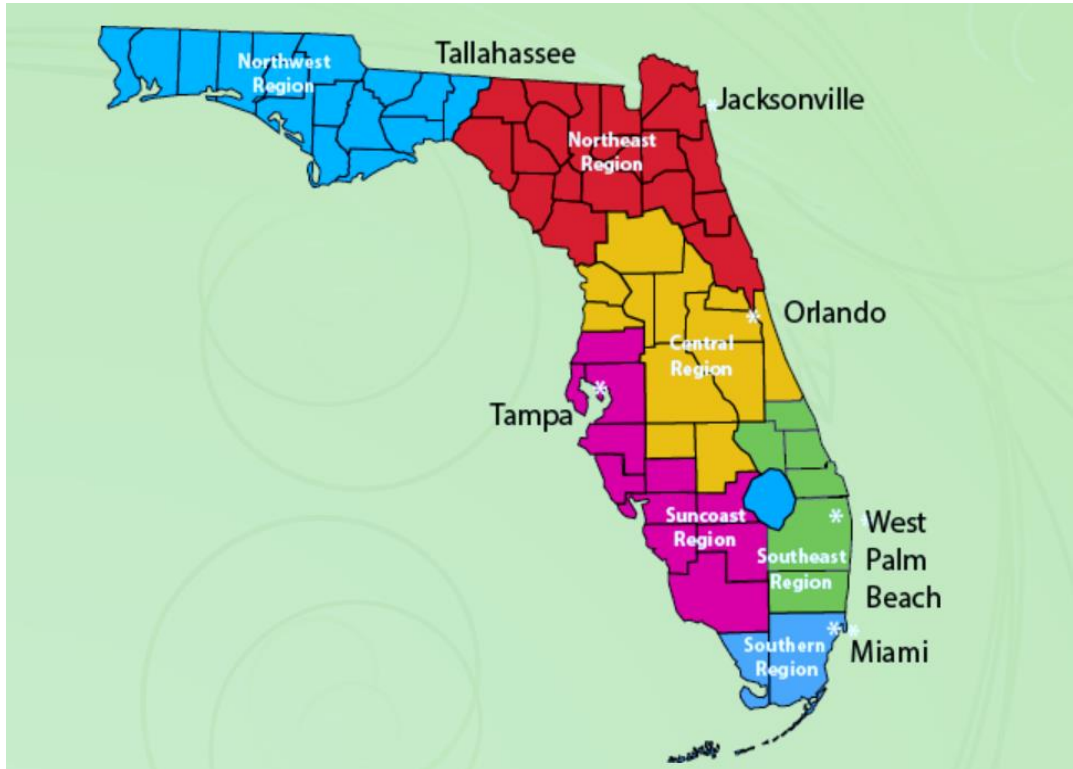
- LRH Outcomes by FY
- LRH Outcomes by Age, Primary Disability and Region
- LRH Outcomes by Indicator

\*FY24 Q1-Q3 includes reviews completed and approved between July 1, 2023 and March 31, 2024.

# Provider Discovery Reviews



# FY24 Q1-Q3 (July 2023 – March 2024)



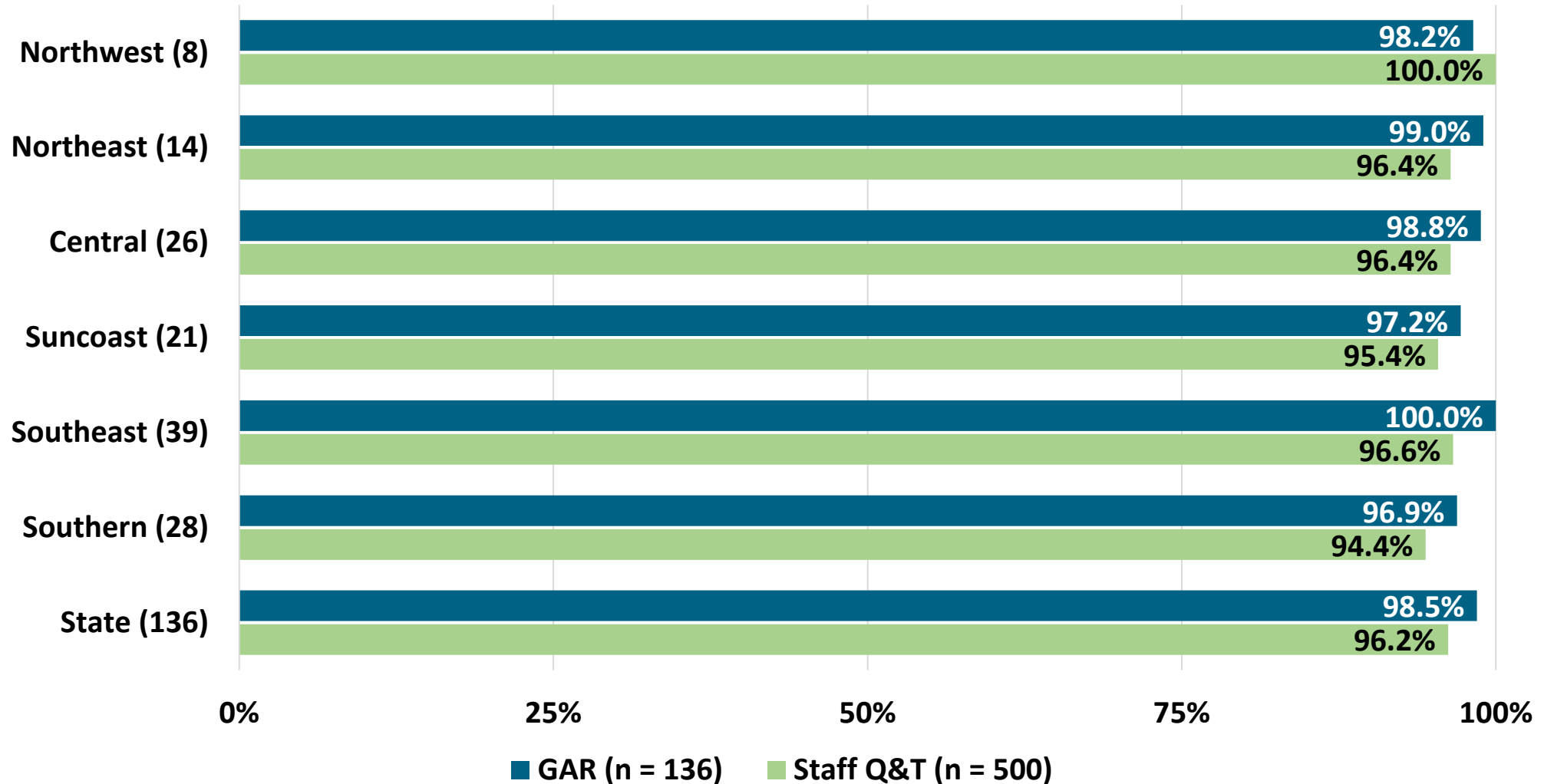
Region	# of PDRs	
	Service Providers	Qualified Organizations (QOs)
Northwest	79	8
Northeast	192	14
Central	214	26
Suncoast	238	21
Southeast	217	39
Southern	142	28
<b>State</b>	<b>1,082</b>	<b>136</b>

# Average Service Provider Scores by Region and PDR Review Component: July 2023 – March 2024

Region (n)	General Administrative Review (GAR)		Staff Q&T (2,823)	SSRR (3,454)	Observations (569)	
	Agencies (N = 944)	Solos (N = 138)			LRH* (N = 760)	ADT* (N = 120)
Northwest (79)	99.1%	100.0%	91.7%	91.4%	99.5%	100.0%
Northeast (192)	98.4%	100.0%	93.6%	93.7%	99.3%	99.7%
Central (214)	97.1%	96.6%	92.9%	91.6%	98.0%	98.8%
Suncoast (238)	93.7%	90.5%	90.8%	88.3%	98.4%	99.2%
Southeast (217)	98.4%	95.0%	92.7%	93.8%	99.7%	99.9%
Southern (142)	98.1%	100.0%	93.4%	94.6%	99.5%	100.0%
<b>State (1,082)</b>	<b>97.0%</b>	<b>97.3%</b>	<b>92.5%</b>	<b>91.9%</b>	<b>99.0%</b>	<b>99.4%</b>

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

# QO Average Administrative Review Scores by Region July 2023 – March 2024



# Provider Discovery Review Trends

FY22: July 2021 – June 2022

FY23: July 2022 – June 2023

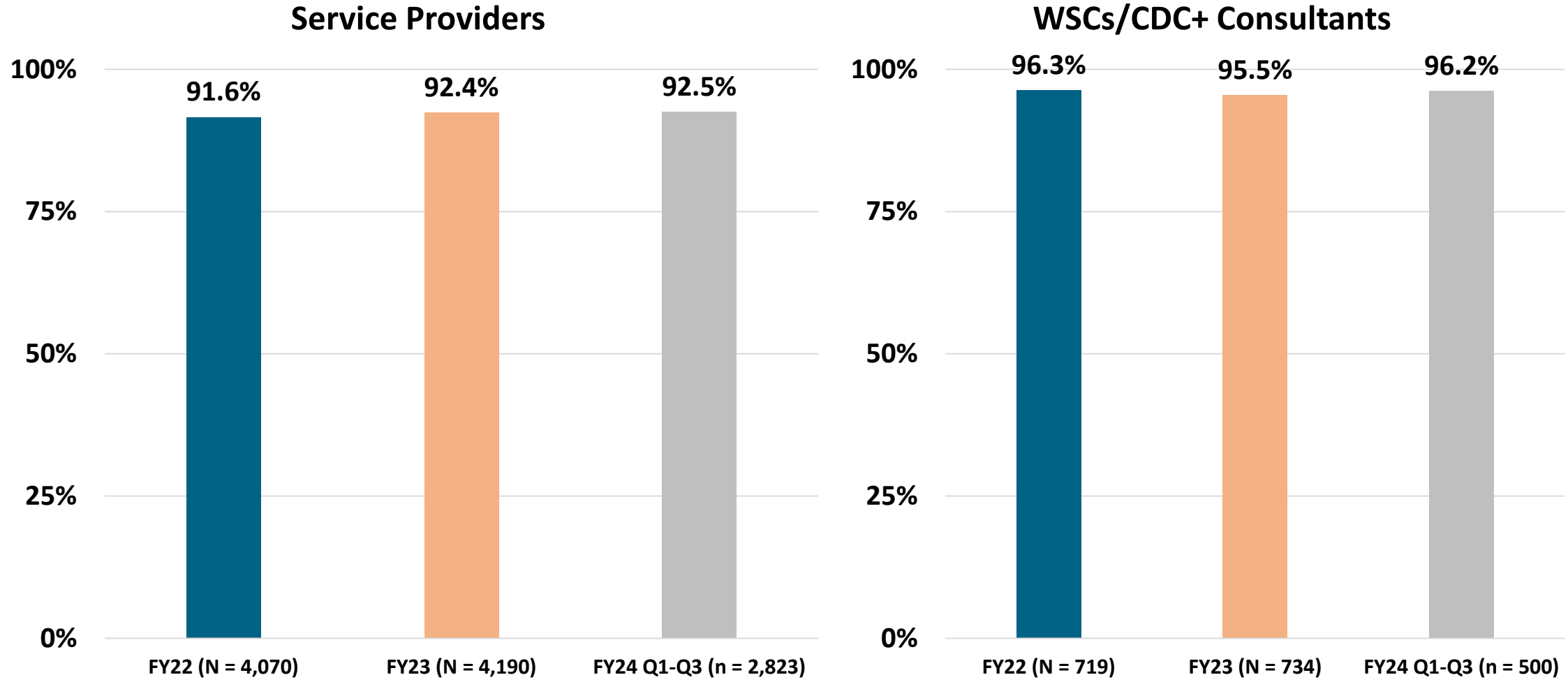
FY24 Q1-Q3: July 2023 – March 2024

# Staff Qualifications and Training (Q&T)

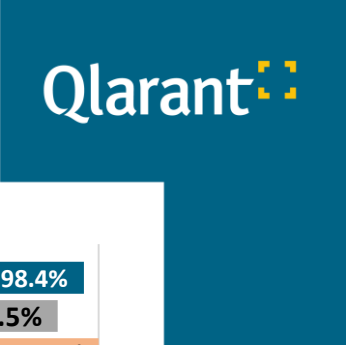




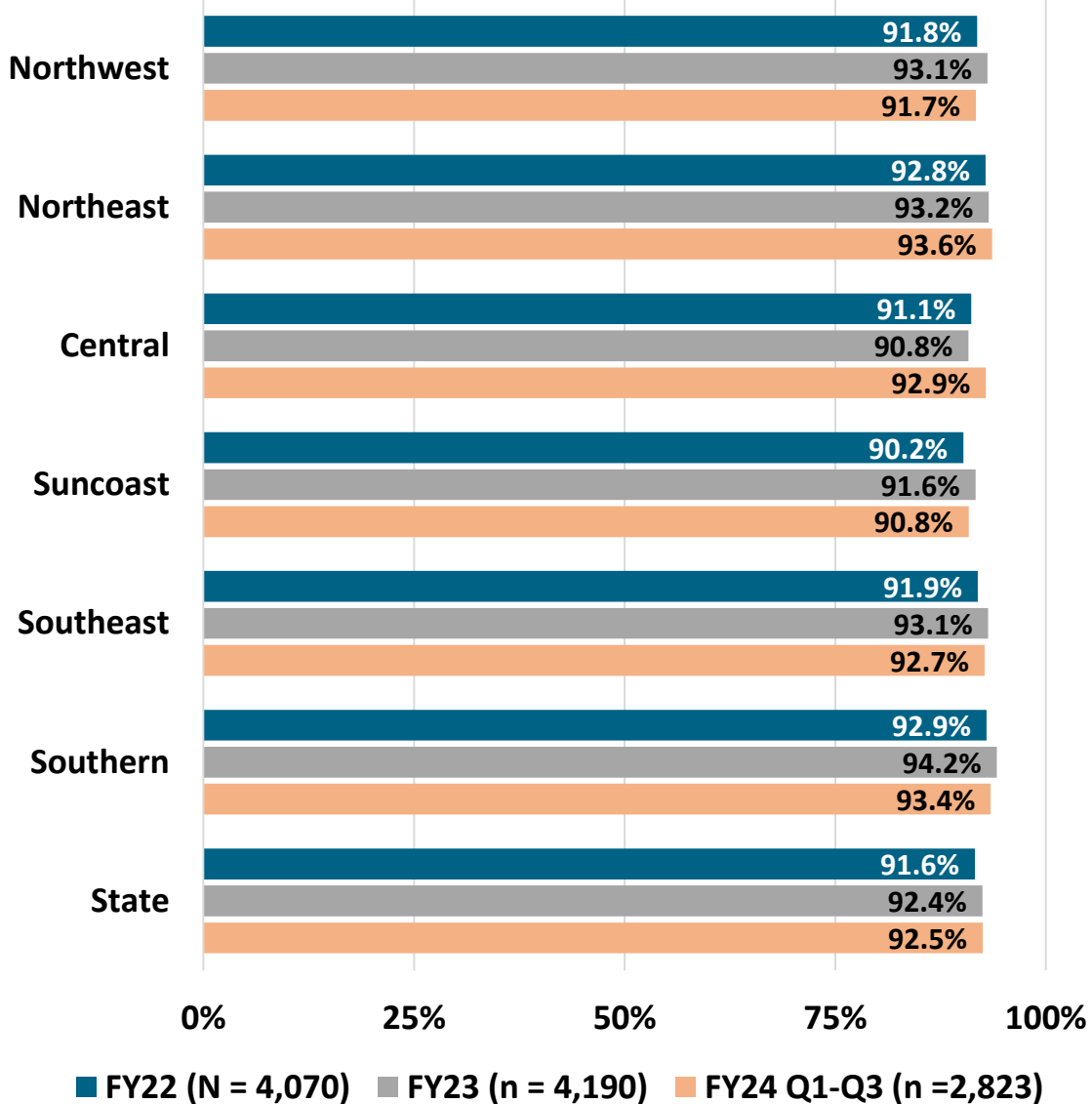
# Average Staff Q&T Scores by FY



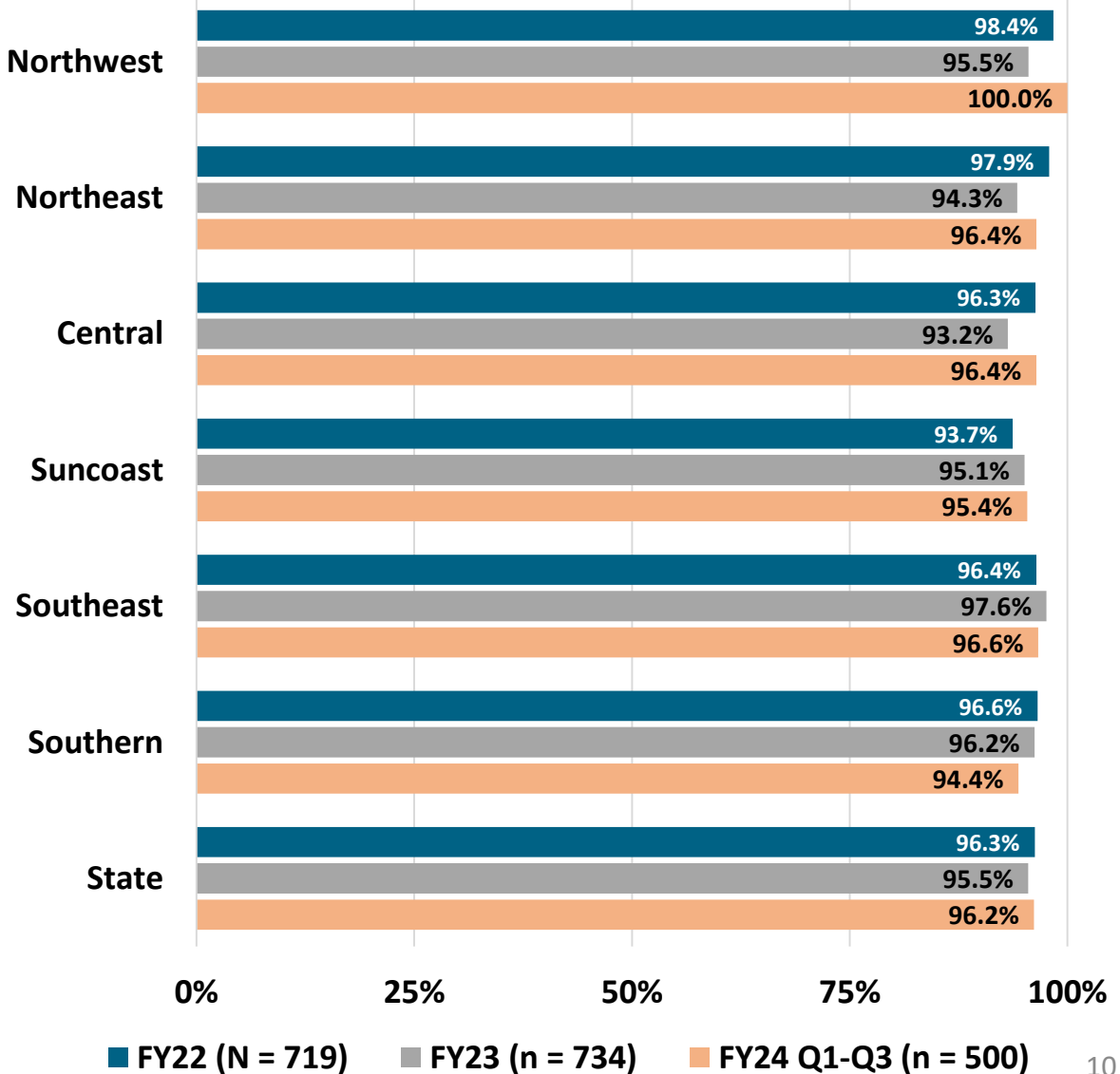
# Qualifications and Training Scores by Region and FY



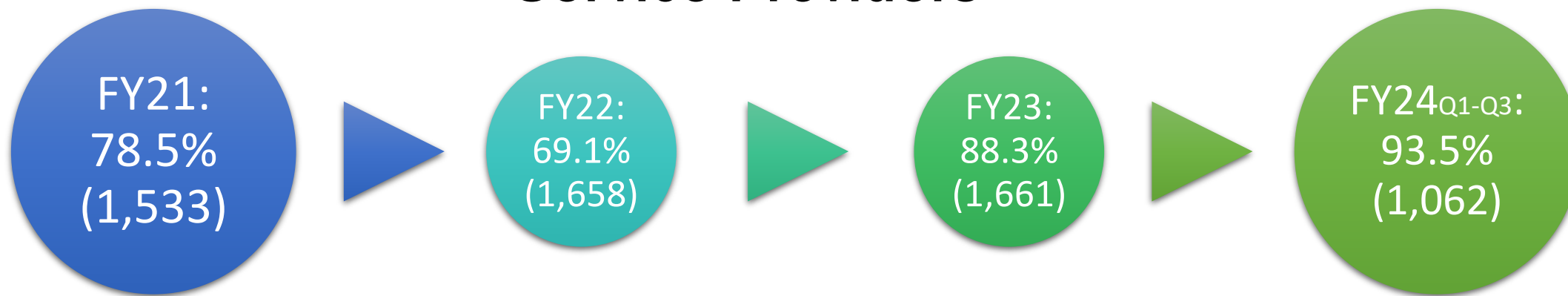
Service Provider



WSC/CDC+



## Basic Medication Administration Validation: Service Providers



In FY24 Q1-Q3, 69 Basic Medication Administration Validation Certificates were deemed out of compliance.

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

- Not having the Established Primary Route circled (22 noted times)
- Missing or incorrect Validation Expiration Date (15 noted times)
- Missing or incorrect Validation Effective Date (10 noted times)
- Missing documented evidence of Basic Medication Administration Validation Certificates (10 noted times)

# Compliance: 100% of Staff Meet Requirements

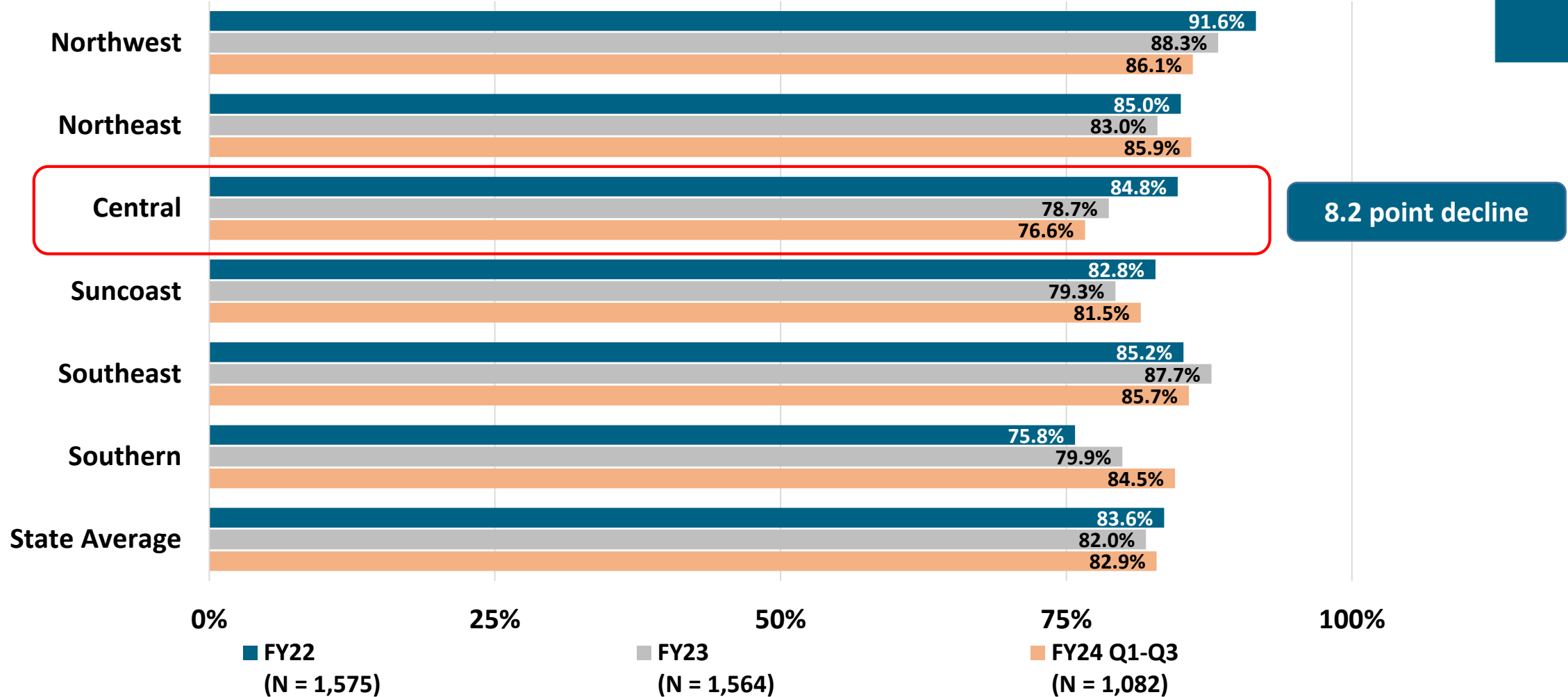
Fewer than 85% of **Service Providers** were in compliance with the following requirements:

- 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

# 279 Staff across 196 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)

- 48.1% (128) 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.

- 30.8% (82) of Not Mets

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

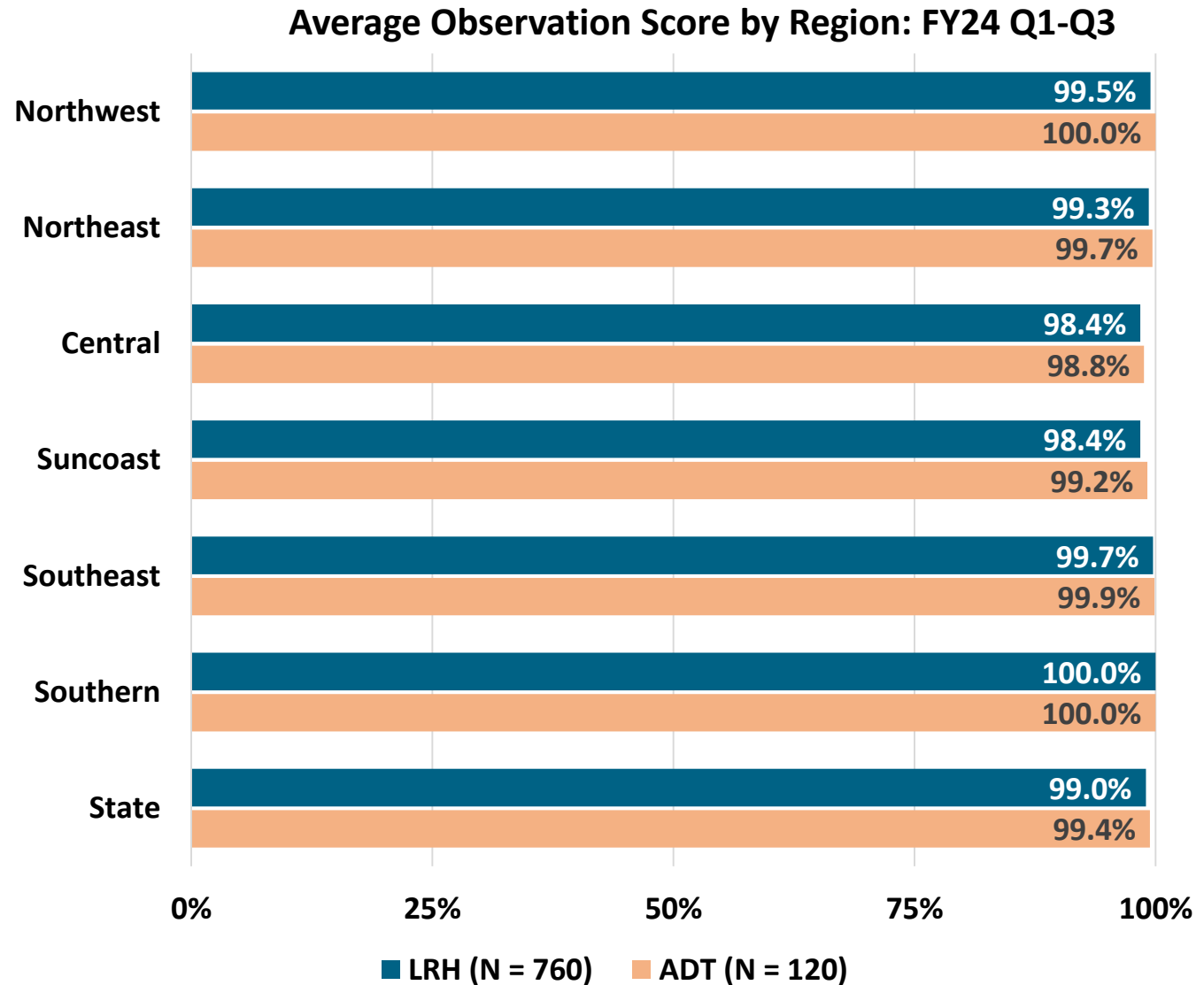
- 29.8% (78) of Not Mets

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

- 30.5% (81) Not Mets

# Observations: LRH and ADTs by Region

Region (n)	LRH (760)	ADT (120)
Northwest	17	7
Northeast	125	24
Central	168	23
Suncoast	151	39
Southeast	195	18
Southern	104	9
<b>State</b>	<b>760</b>	<b>120</b>

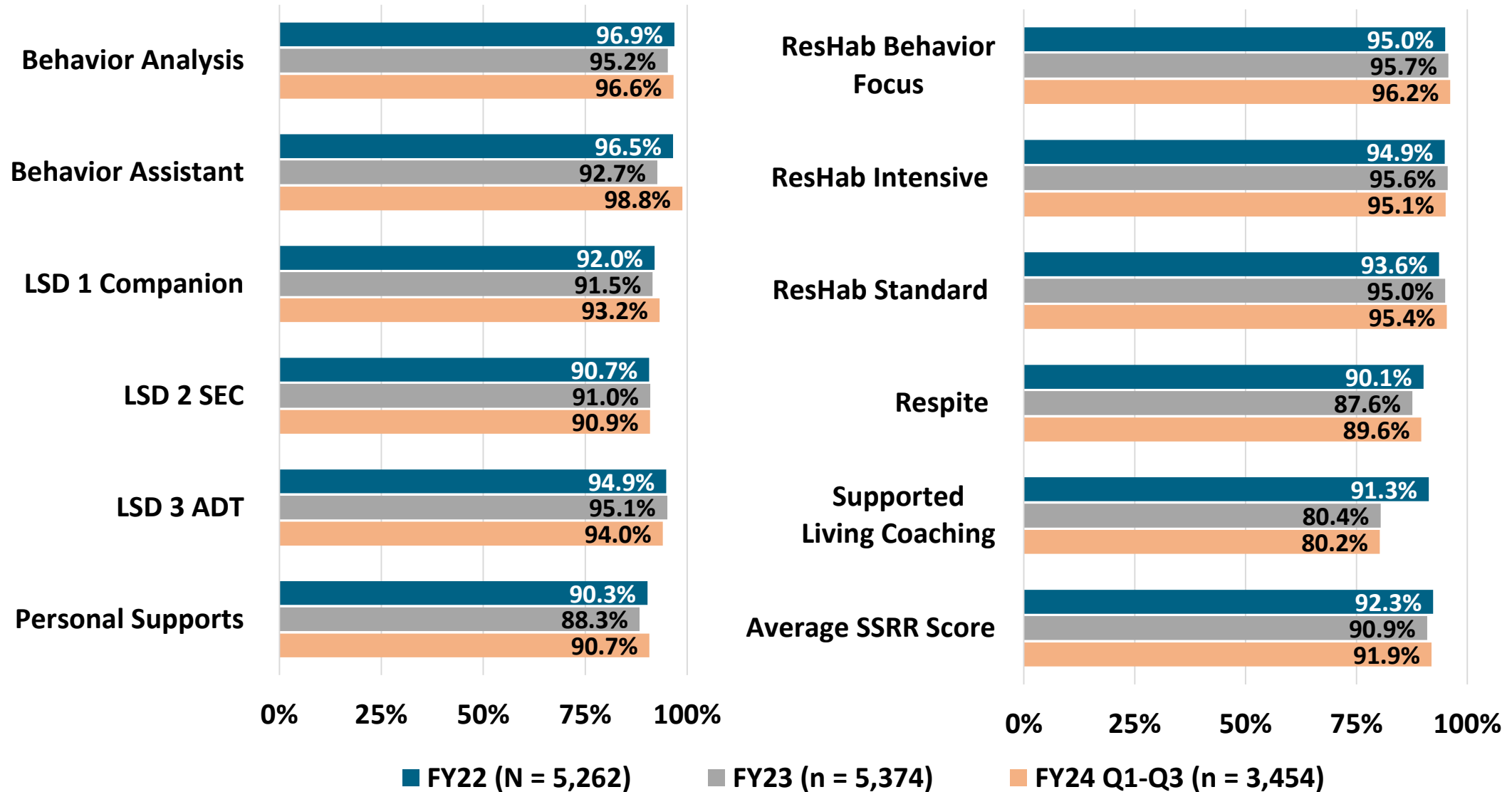


# Service Specific Record Reviews





# Weighted SSRR Scores by Service and FY



## 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-Q3: 48.1% (n = 233)

## 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-Q3: 55.7% (n = 280)

## 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)
- FY24Q3: 57.3% (n = 178)

## 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-Q3: 57.5% (n = 1,968)

# Alerts by FY

Alert Type	FY22 (608)	FY23 (533)	FY24 Q1-Q3 (273)
Abuse/Neglect/Exploitation	0.0%	1.1%	0.4%
Background Screening	31.9%	39.2%	50.2% 
Clearinghouse Roster	16.8%	22.0%	16.5% 
Driver's License/Insurance	4.3%	3.8%	4.0%
Health & Safety	1.2%	1.8%	2.2%
Medication Admin/Training	37.3%	15.0%	12.1%
Medication Storage*	6.1%	12.9%	11.4%
Rights	2.1%	4.5%	2.9% 
Vehicle Insurance	0.3%	0.0%	0.4%

\*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-Q3 Snapshot

## July 2023 - March 2024

Region	Waiver	CDC+
Northwest	66	6
Northeast	125	35
Central	229	20
Suncoast	231	26
Southeast	256	27
Southern	179	15
<b>Total</b>	<b>1,086</b>	<b>129</b>

### MLI Outcomes

**Waiver:**  
84.4%

**CDC+:**  
88.8%

### MLI Supports

**Waiver:**  
97.2%

**CDC+:**  
99.2%

### Record Reviews

**Waiver Support Coordinators (WSC):**  
93.1%

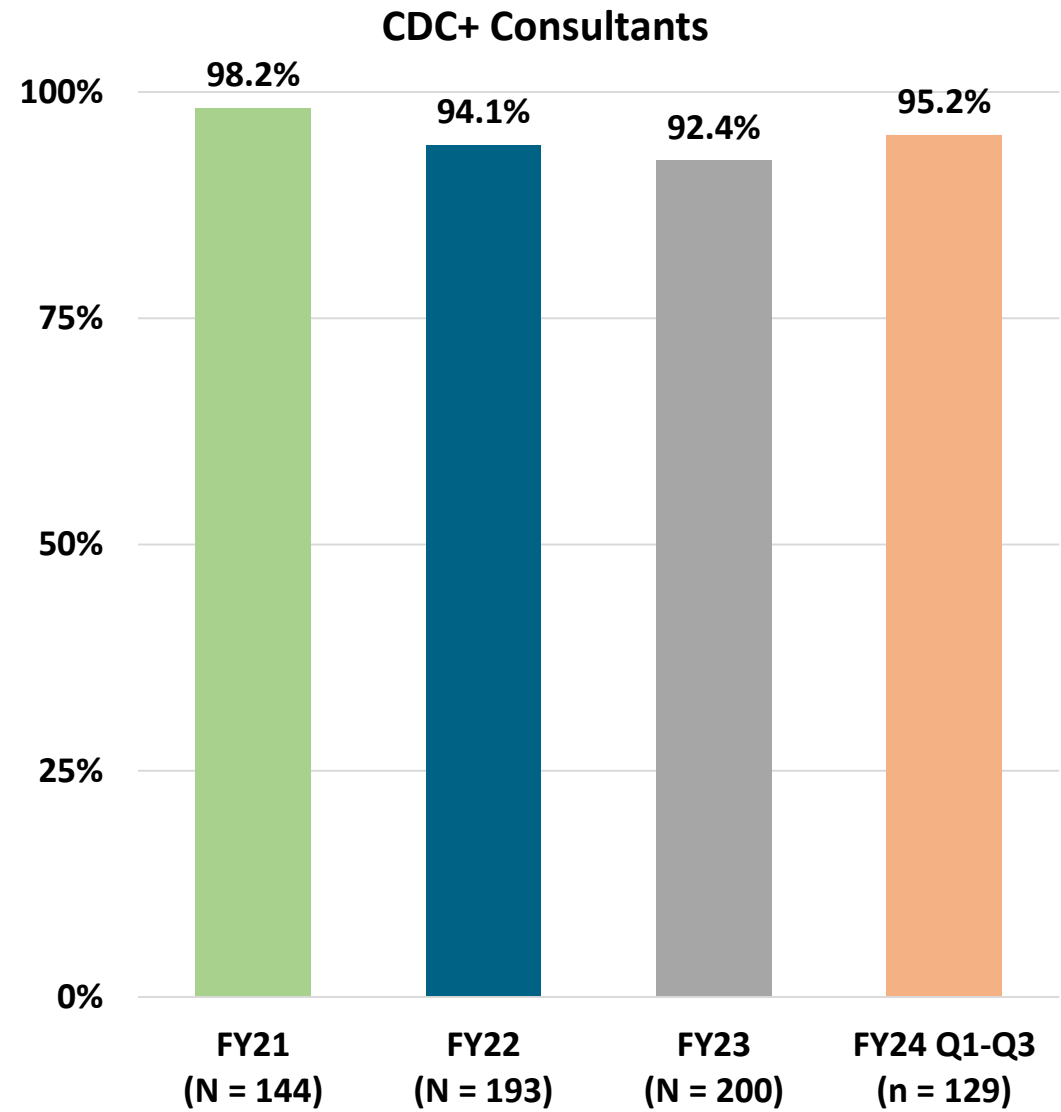
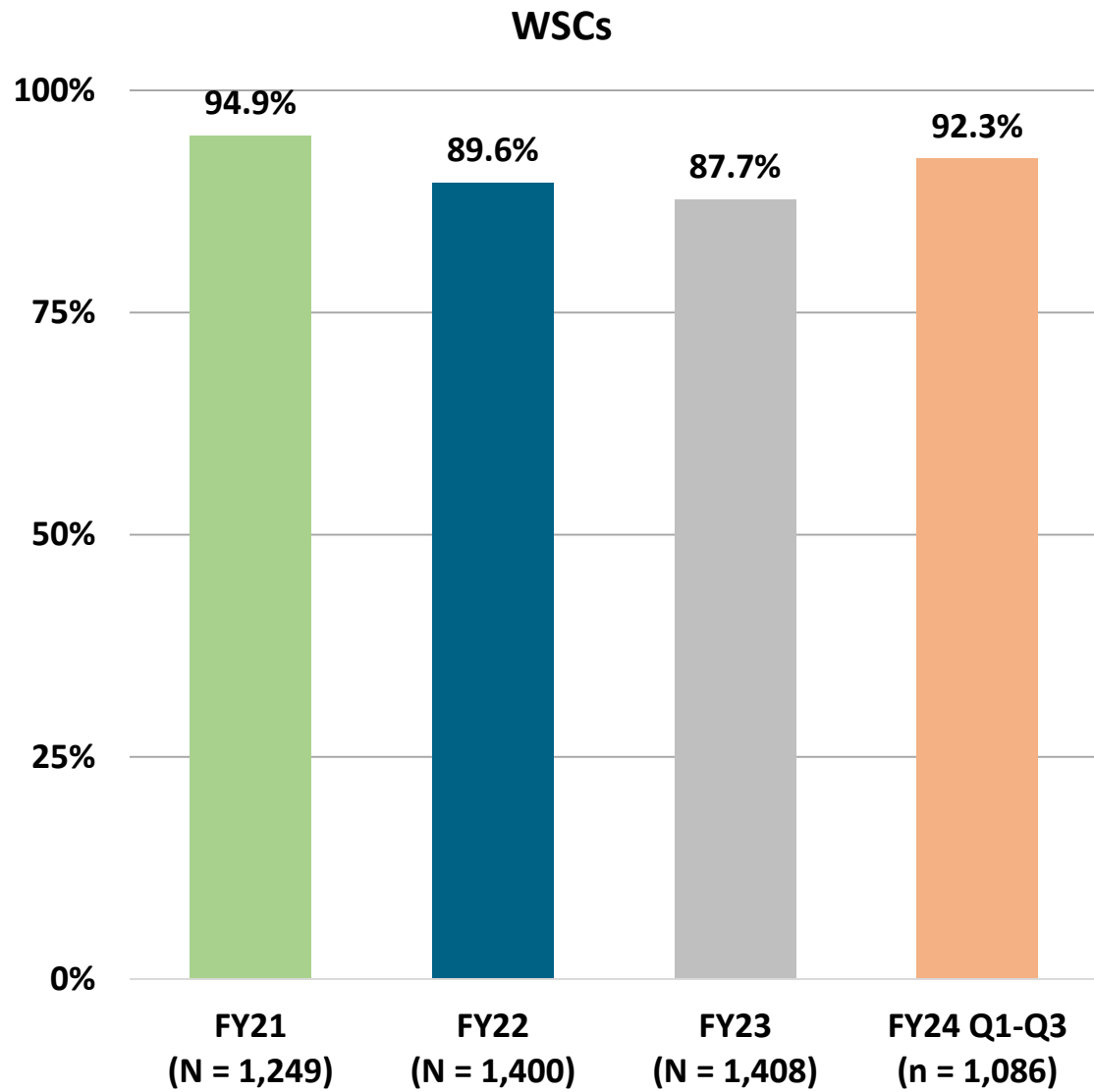
**CDC+ Consultants (C):**  
95.5%

**CDC+ Representatives (R):**  
93.5%

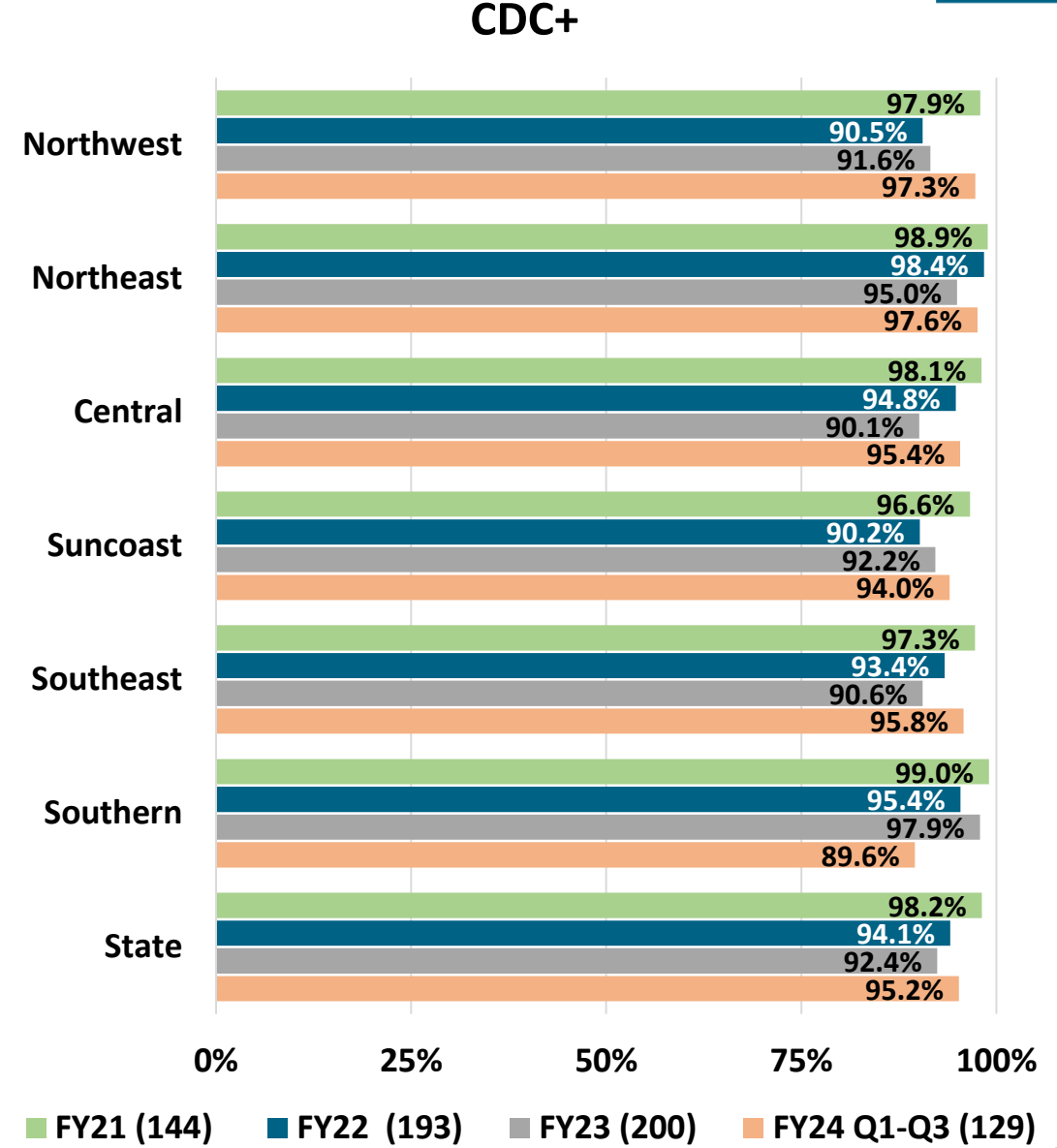
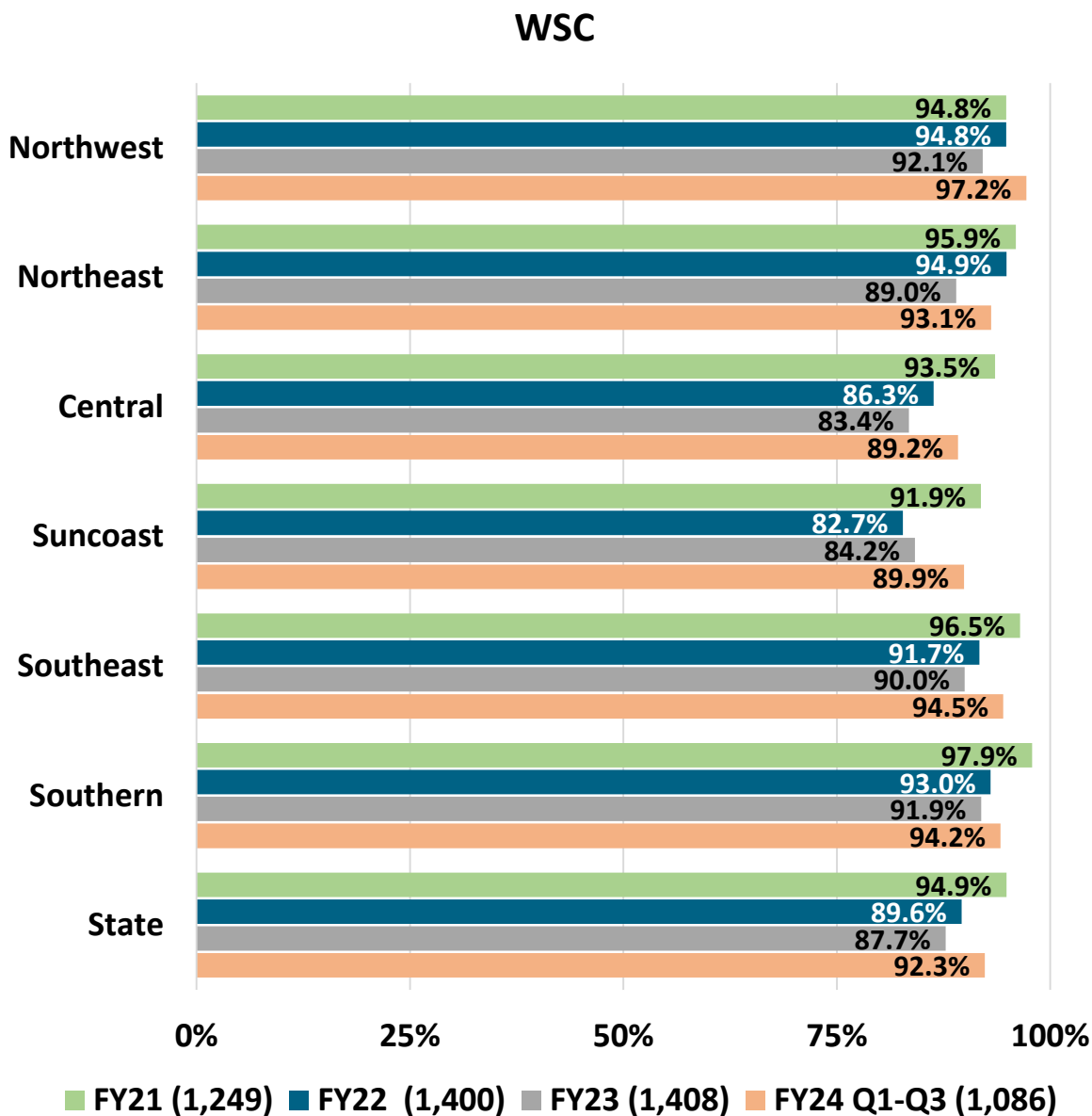
# WSC/CDC+ Consultant Record Reviews



# WSC/CDC+ Consultant Record Review Scores by d FY



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





# Historically Lower Scoring Record Review Indicators: WSCs FY21 → FY22 → FY23 → FY24 Q1-Q3

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

• 97.5% (1,188) → 78.2% (1,323) → 68.4% (1,375) → **77.3% (1,076)**

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

• 98.0% (1,248) → 68.4% (1,375) → 68.2% (1,397) → **78.2% (1,077)**

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

• 86.7% (1,207) → 75.6% (1,388) → 73.7% (1,402) → **84.7% (1,080)**

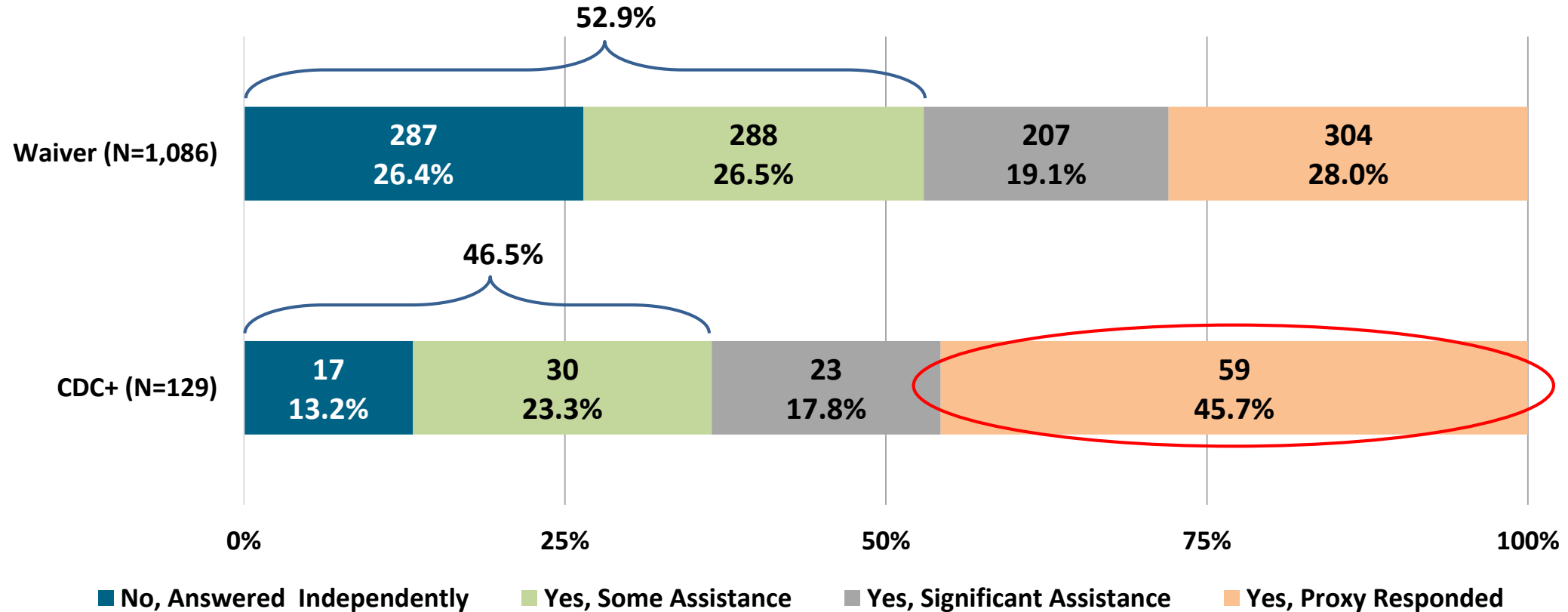
Support Coordinator Progress Notes demonstrate pre-Support Plan planning activities were conducted.

• 83.4% (1,241) → 87.0% (1,332) → 67.7% (1,389) → **82.7% (1,049)**

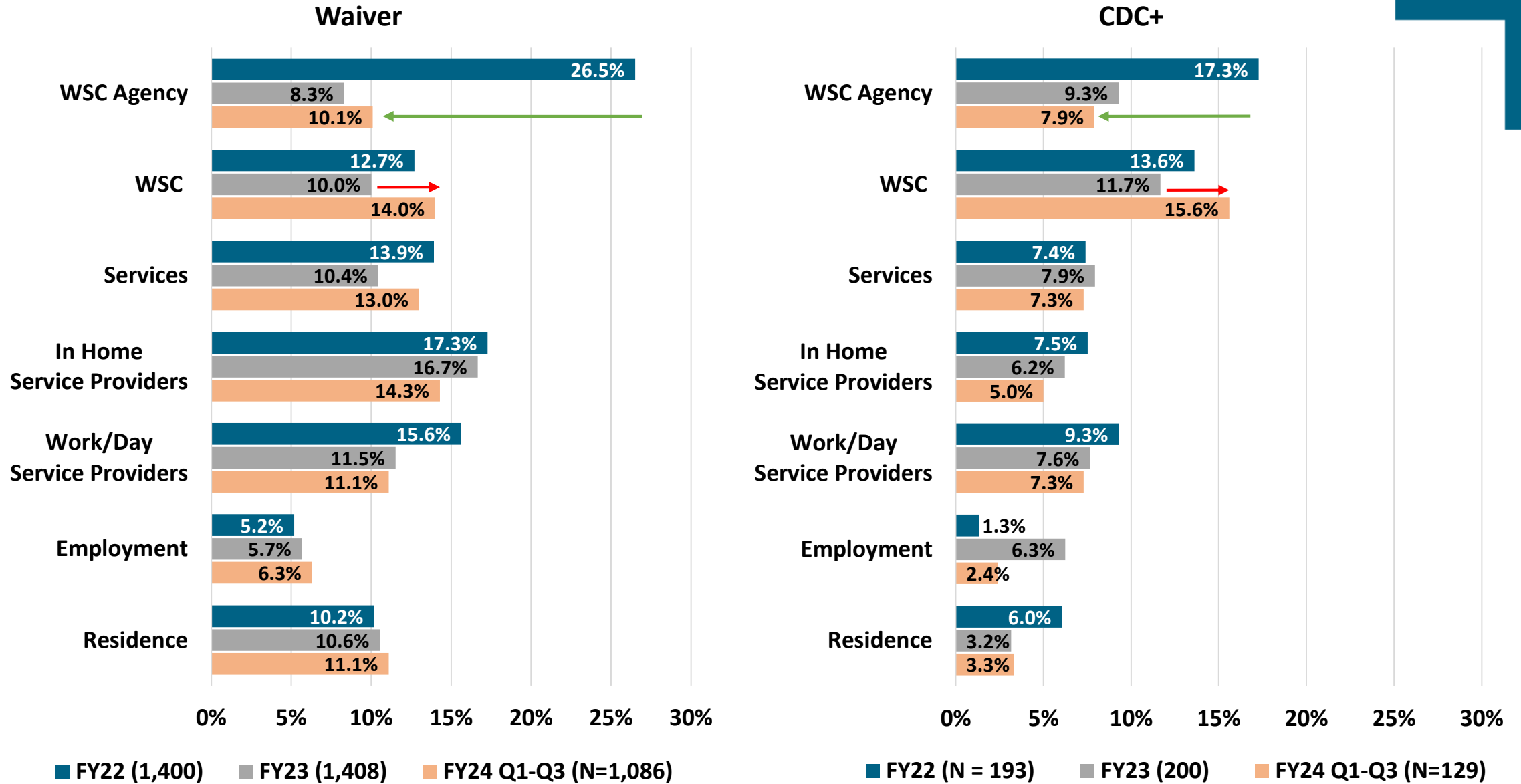
# My Life Interview (MLI)



# Proxy Use: Did anyone assist the person with answering interview questions?



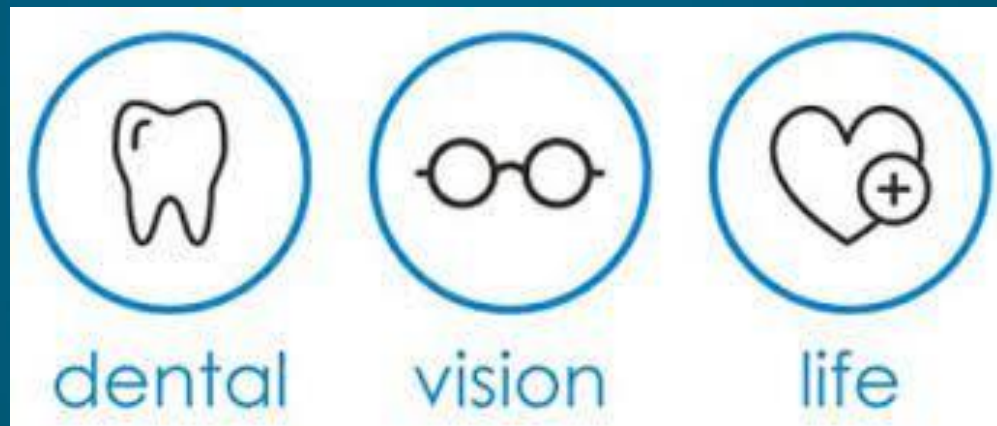
# Stability: Percent with 1 or more changes in past year



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

Source of Change	Reason for Change	Waiver	
		n	%
<b>WSC (n = 148)</b>	<b>My WSC was no longer rendering services</b>	<b>60</b>	<b>40.5%</b>
	Change in WSC was made by my natural supports.	37	25.0%
	Change in WSC was made by my choice.	26	17.6%
	Change in WSC was made by my paid supports.	23	15.5%
	The WSC agency changed my WSC without asking my choice.	7	4.7%
	I moved to an area where my WSC did not render services.	7	4.7%
<b>In Home service providers (n = 134)</b>	<b>Change in service providers in my home was made by my paid supports.</b>	<b>52</b>	<b>38.8%</b>
	Change in service providers in my home was made by my choice.	43	32.1%
	Change in service providers in my home was made by my natural supports.	30	22.4%
	My service providers were no longer rendering services.	20	14.9%

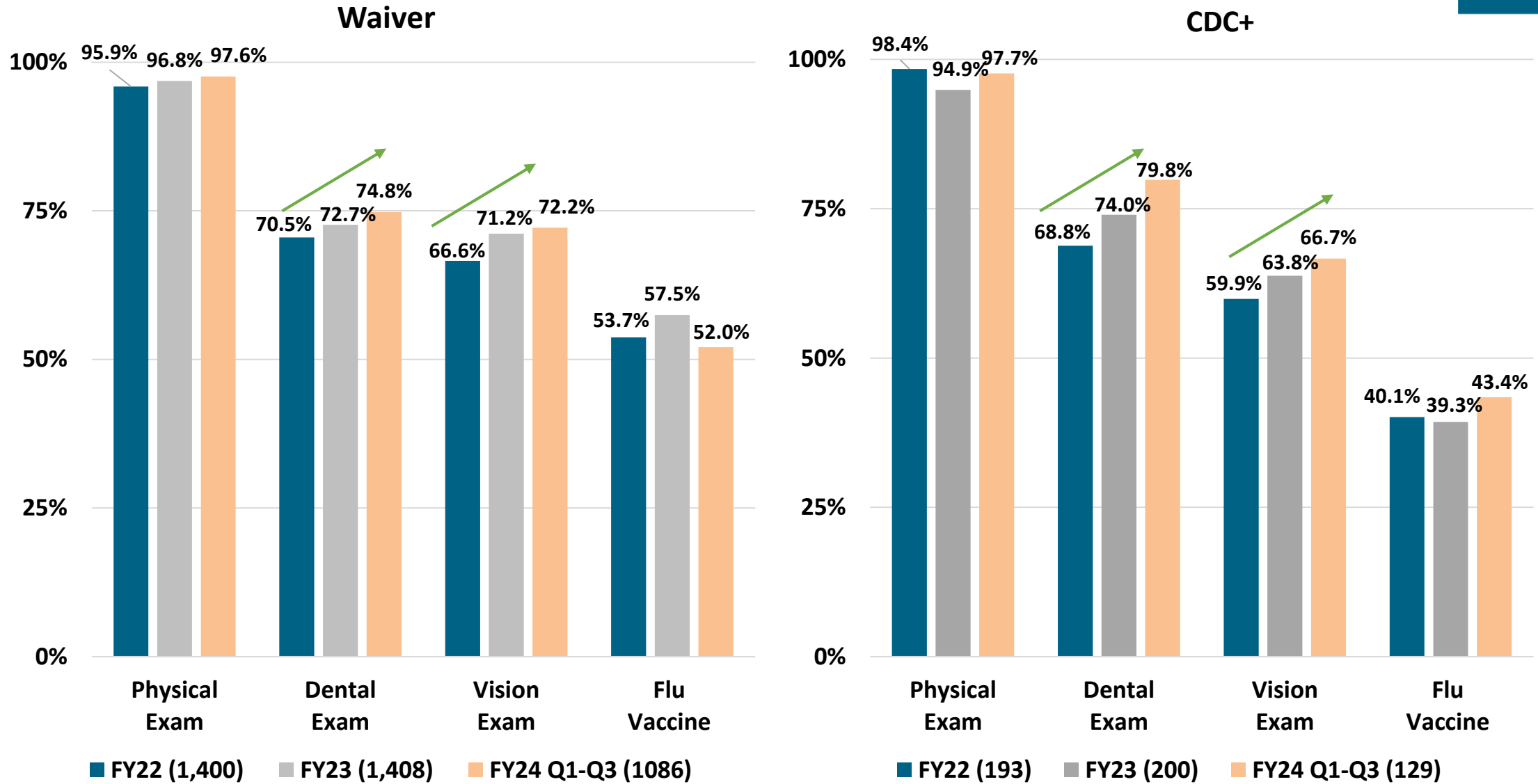
# Health Summary



# Percent of Individuals with a Significant Health Event by Waiver Type (% Yes)

In the previous 12 months:	Waiver		CDC+	
	FY23 (N = 1,408)	FY24 Q1-Q3 (n = 1,086)	FY23 (N = 200)	FY24 Q1-Q3 (n = 129)
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	1.2%	2.6%	0.0%	0.8%
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	3.6%	3.8%	3.0%	0.8%
Have you been Baker Acted?	2.8%	3.0%	1.0%	0.0%
Have you been admitted to the hospital?	10.7%	11.0%	12.5%	13.2%
Have you been to an Emergency Room?	17.1%	19.8%	17.5%	23.3%
Have you been to an Urgent Care Center?	7.1%	5.7%	6.5%	7.8%

# Percent of people who received preventative care by FY



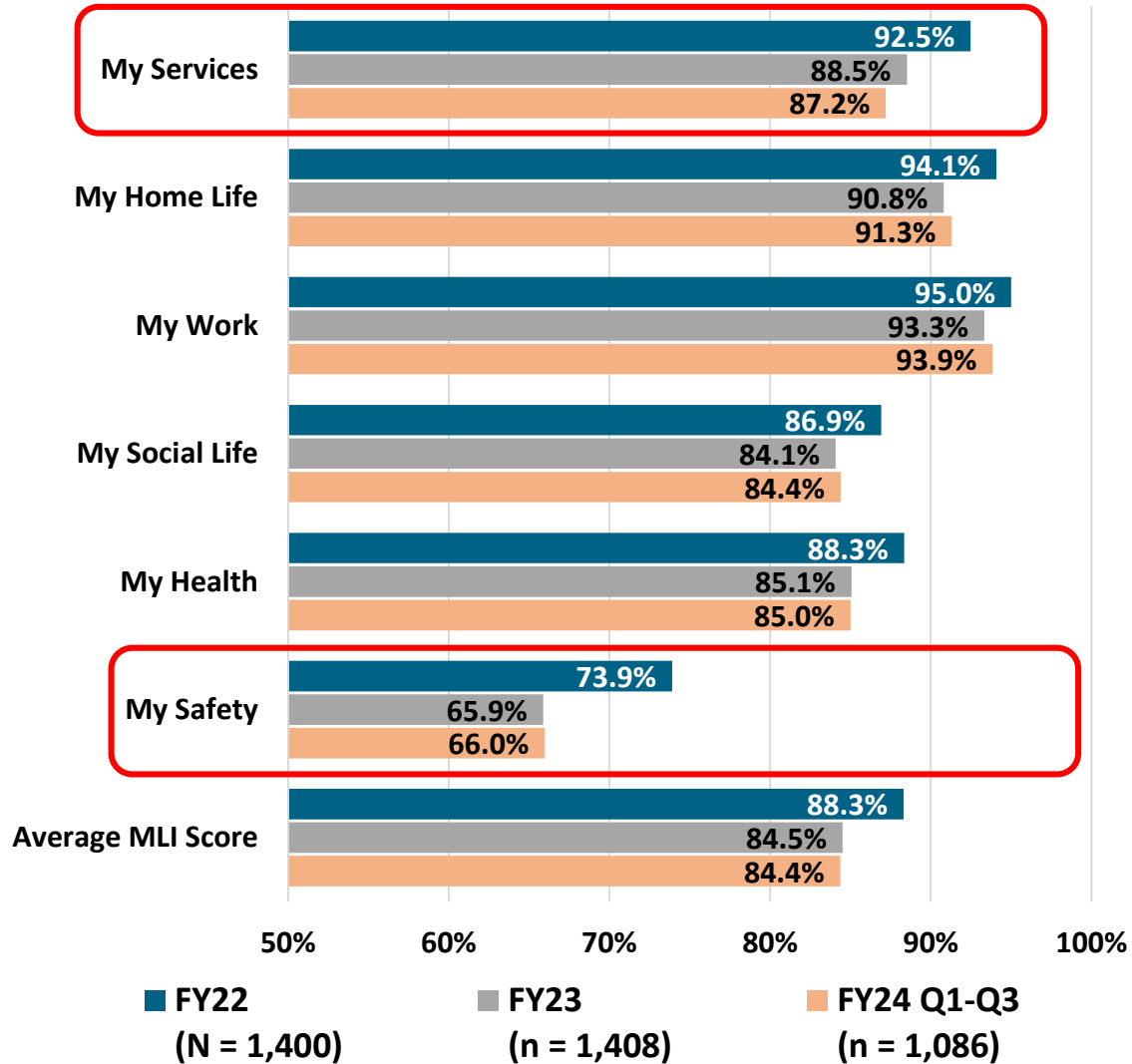


# My Life Interview

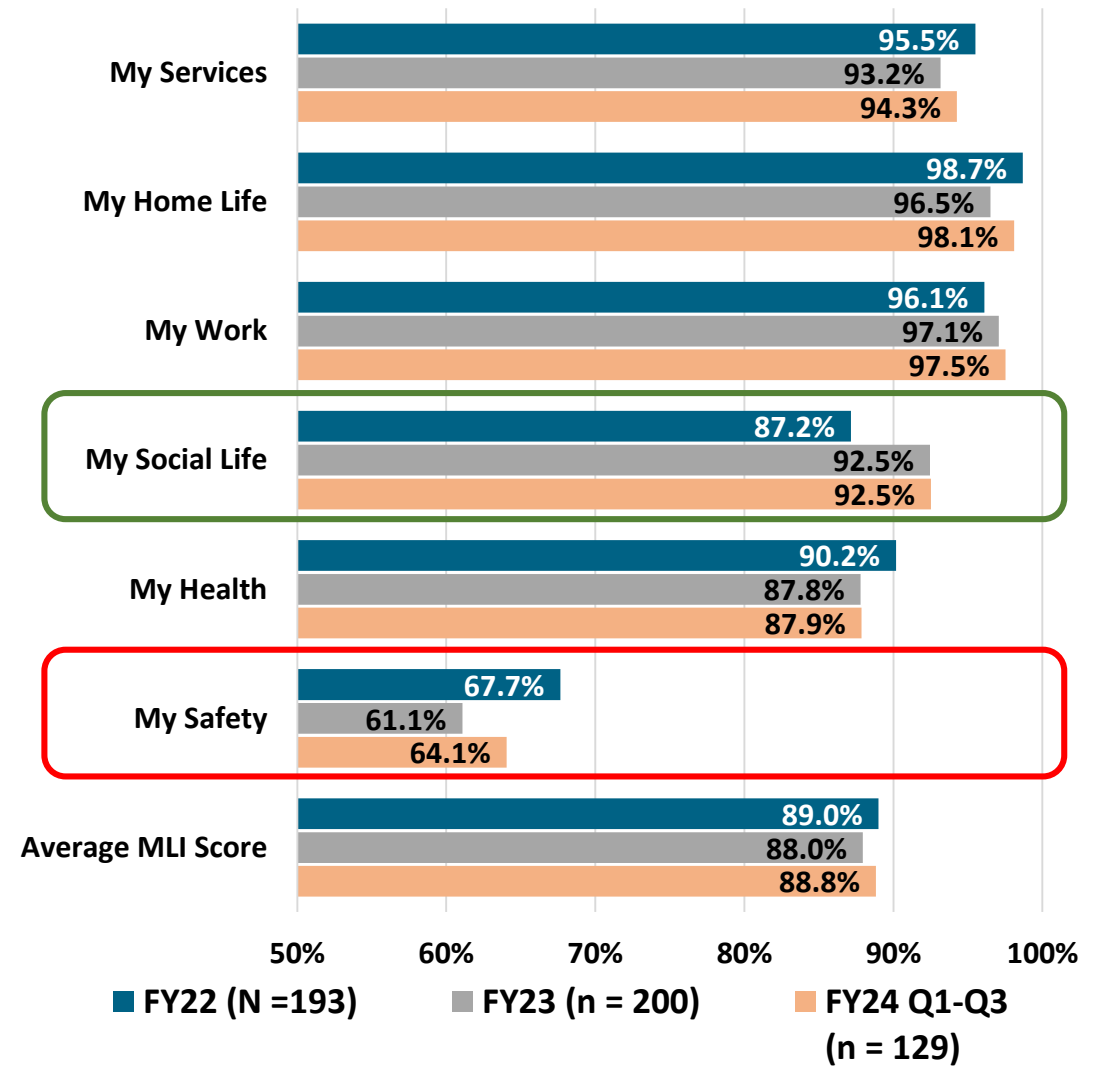


# MLI Outcomes by Life Area and FY: FY22 – FY24 Q1-Q3

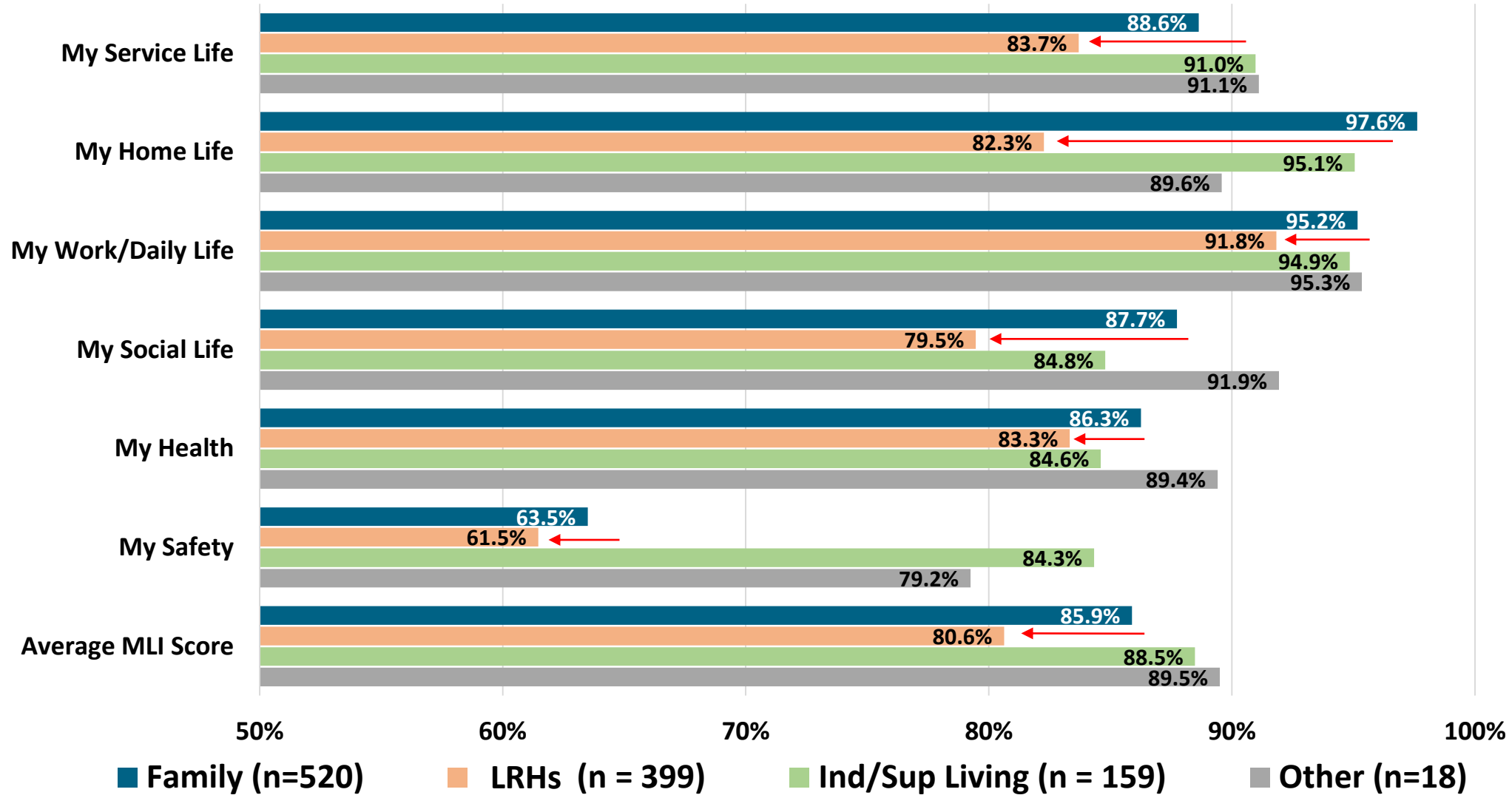
## Waiver



## CDC+



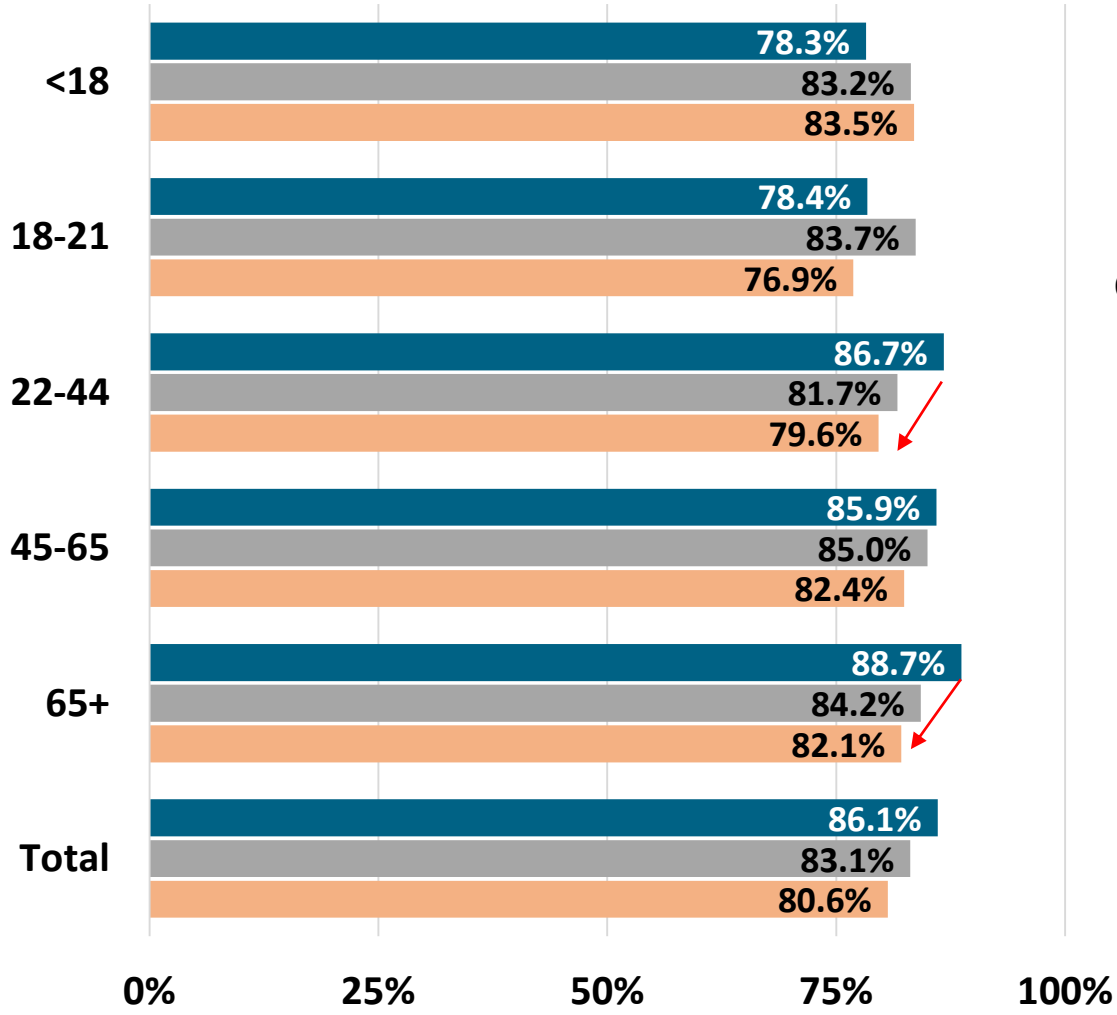
# MLI Outcomes by Life Area and Residential Settings: Waiver (FY24 Q1-Q3)



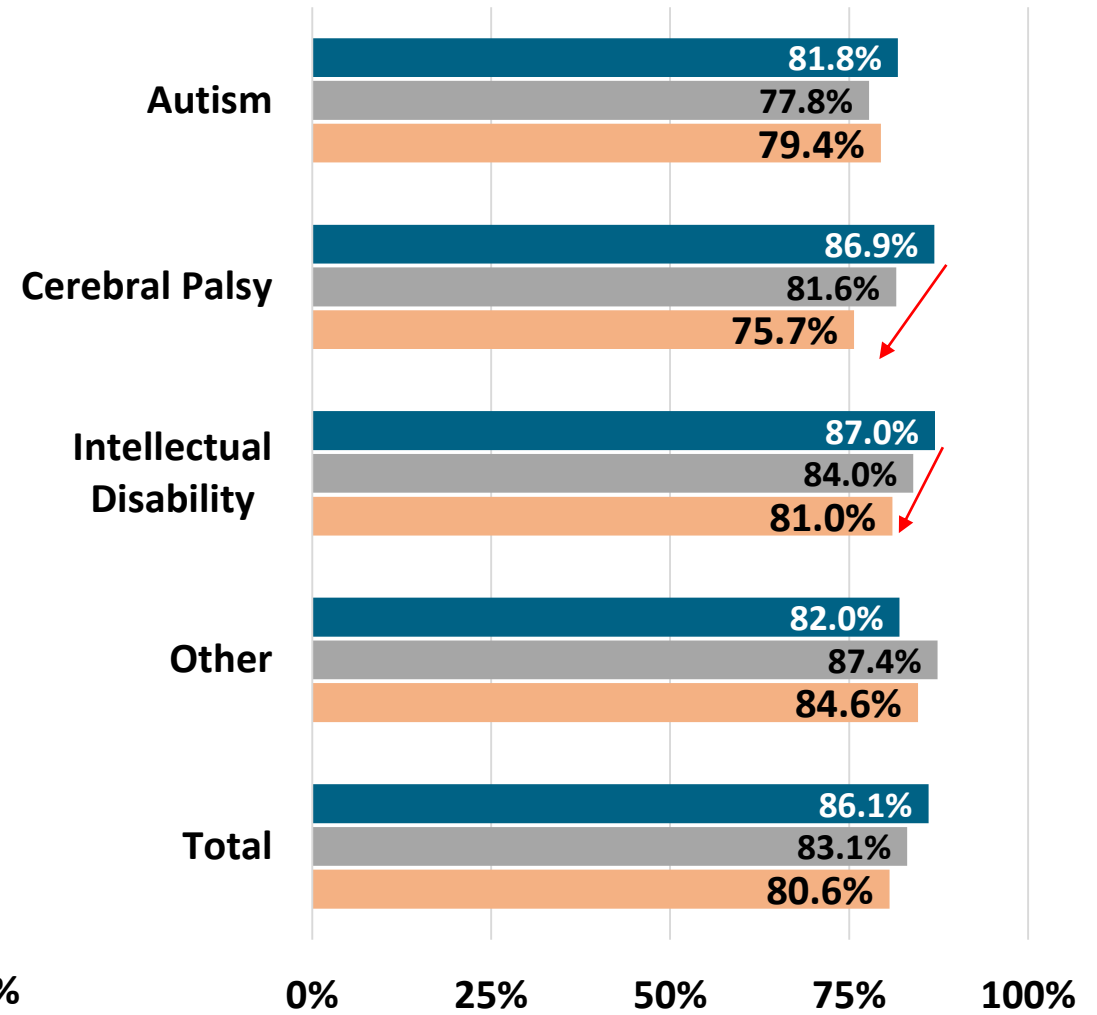
Note: Other residential setting includes APD Foster Home (1-3) (n=6) and AHCA Assisted Living Facility (n=12)

# Since FY22, Outcomes have Declined by nearly 6 points for People Living in LRH

### Age groups



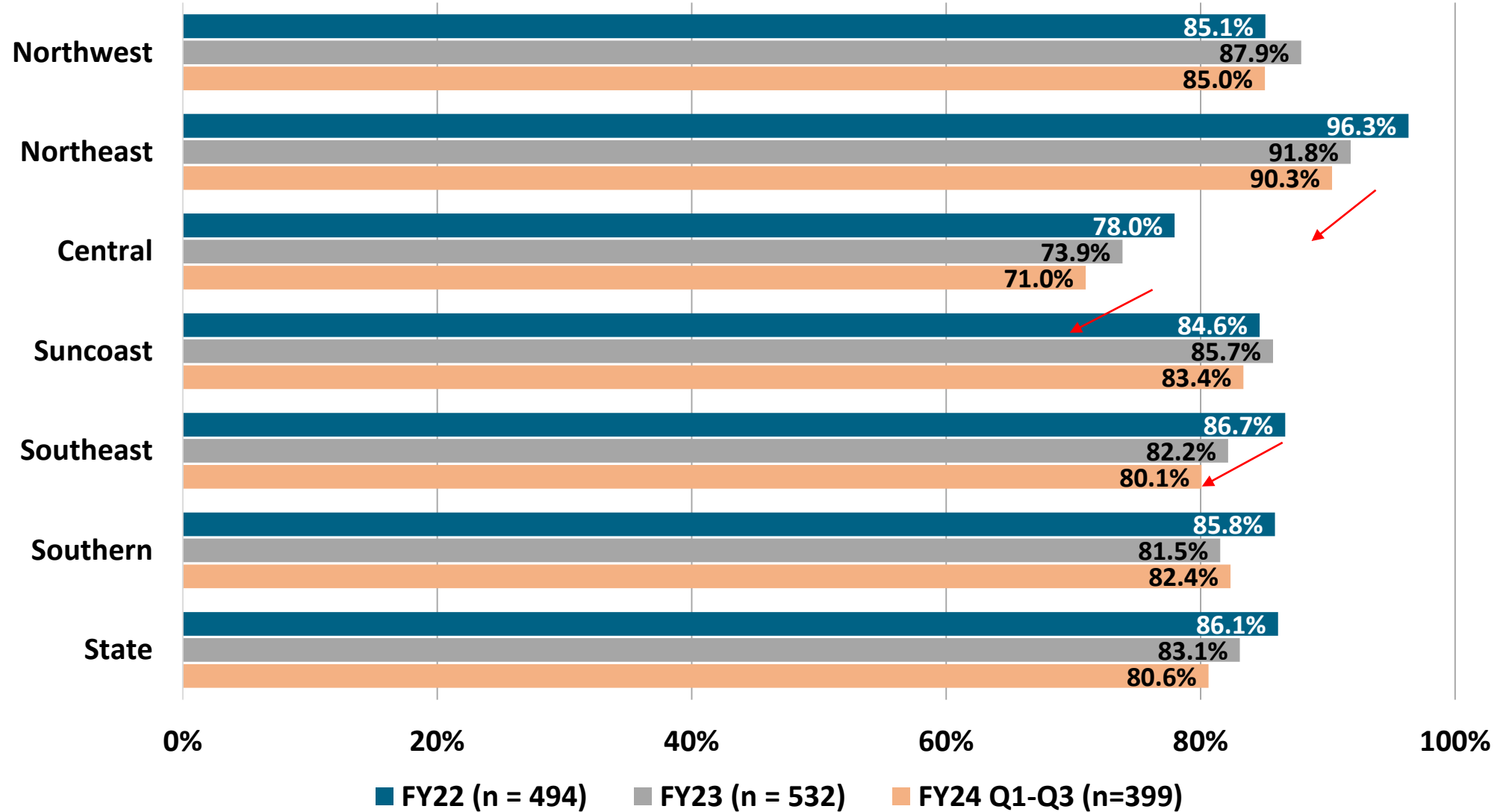
### Disability Type



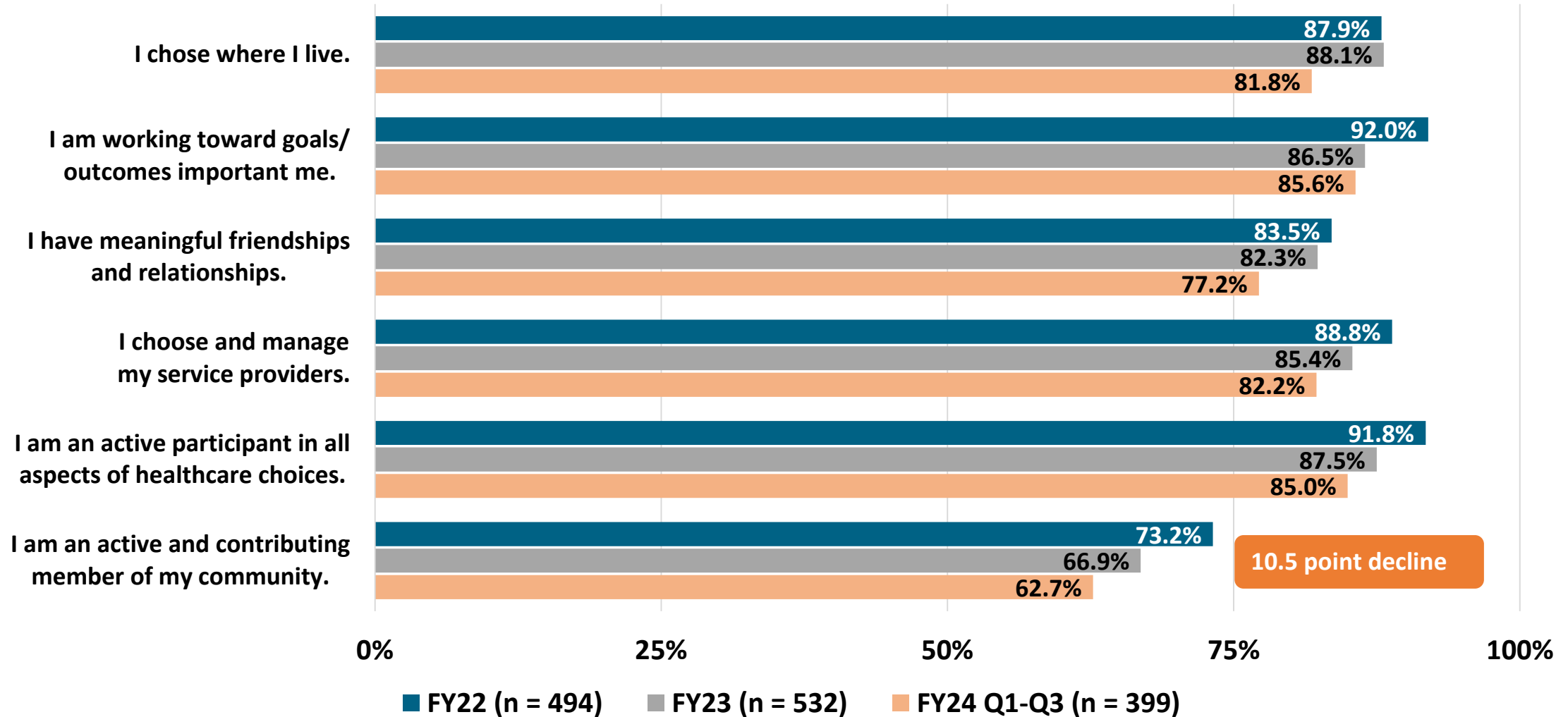
■ FY22 (n = 494) ■ FY23 (n = 532) ■ FY24 Q1-Q3 (n=399)

Note: Other Disability type includes Down syndrome (n=36), Spina Bifida (n=16), Prader-Willi Syndrome (n=7) and Phelan-McDermid Syndrome (n=2)

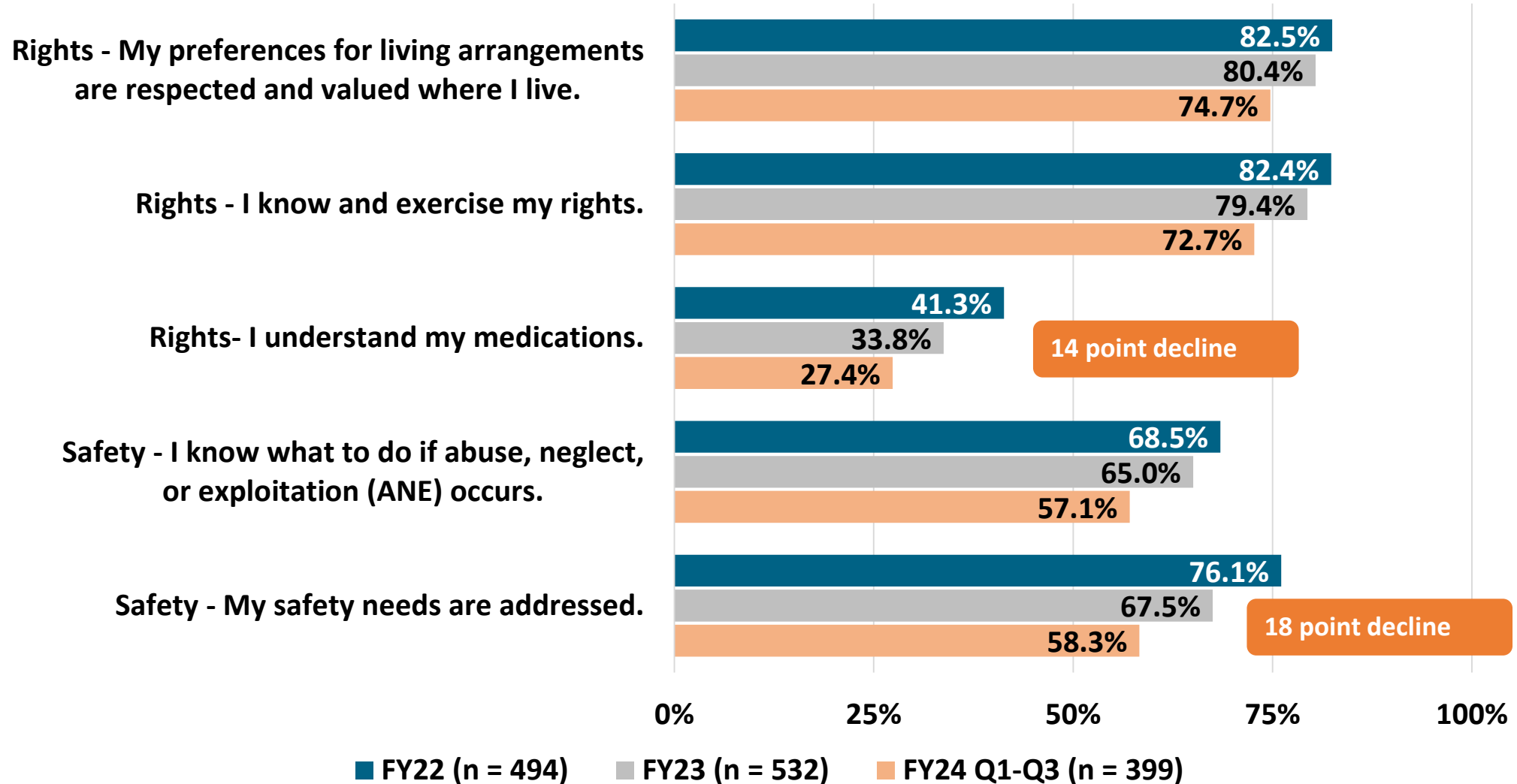
# LRHs: MLI Outcomes by FY



# LRHs: Choice and Self-Direction



# LRHs: Rights and Safety



# Discussion

- What might be causing outcomes to decline for individuals living in LRHs?
- What can be done to help increase outcomes related to Rights and Safety?
- What can be done to help increase outcomes related to Choice?



# Thank you!

Questions? Comments?

Contact:

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# Addendum

# FY24 Q1-Q3 Lowest Scoring Outcomes

**I understand my medications.**  
**Waiver: 42.3%**  
**CDC+: 53.0%**

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

**potential side effects of my medications.**  
 83.1% of Not Mets  
 (471/567)

**the medications I take.**  
 71.8% of Not Mets  
 (407/567)

**why my medications are prescribed.**  
 63.0% of Not Mets  
 (357/567)

**I understand what abuse, neglect, and exploitation (ANE) mean.**  
**Waiver: 56.7%**  
**CDC+: 52.2%**

**I do not understand...**

**what exploitation means.**  
 76.2% of Not Mets  
 (365/479)

**what neglect means.**  
 68.3% of Not Mets  
 (327/479)

**all the different types of abuse.**  
 65.3% of Not Mets  
 (313/479)

**I know what to do if ANE occurs.**  
**Waiver: 61.0%**  
**CDC+: 56.0%**

**I do not know...**

**what the Abuse Hotline is.**  
 72.1% of Not Mets  
 (313/434)

**where to find the Abuse Hotline number.**  
 71.0% of Not Mets  
 (308/434)

**what to do/who to go to if ANE occurs.**  
 38.5% of Not Mets  
 (167/434)

**My safety needs are addressed.**  
**Waiver: 64.9%**  
**CDC+: 68.3%**

**I do not know...**

**how or when to call 911.**  
 72.9% of Not Mets  
 (298/409)

**how to keep myself safe when out in my community.**  
 52.8% of Not Mets  
 (216/409)

**what to do in the event of a fire.**  
 51.6% of Not Mets  
 (211/409)