Florida Quality Council
Qlarant Data Presentation

July 23, 2026

Presentation Outline

Person Centered Reviews (PCRs)

- PCR Demographics
- My Life Interview (MLI) Outcomes and Supports by FY and Life Area
- Significant Health Events
- Record Reviews

Provider Discovery Reviews (PDRs)

- PDR Scores by Region
- Administrative Review Trends
- Service Specific Record Review Trends
- Observations
- Alerts

*FY 2026 Q1-Q3 includes reviews completed and approved between July 1, 2025 and March 31, 2026.
*FY 2025 includes reviews completed and approved between July 1, 2024 and June 30, 2025.
*FY 2024 includes reviews completed and approved between July 1, 2023 and June 30, 2024.

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Person Centered Interviews

FY26 PCR Snapshot: July 2025 - March 2026

Region	Waiver Participants	CDC+ Participants
Northwest	77	10
Northeast	157	38
Central	181	24
Suncoast	219	17
Southeast	188	27
Southern	152	22
Total	**974**	**138**

My Life Interview (MLI) Outcomes

- Waiver: 80.3%
- CDC+: 80.2%

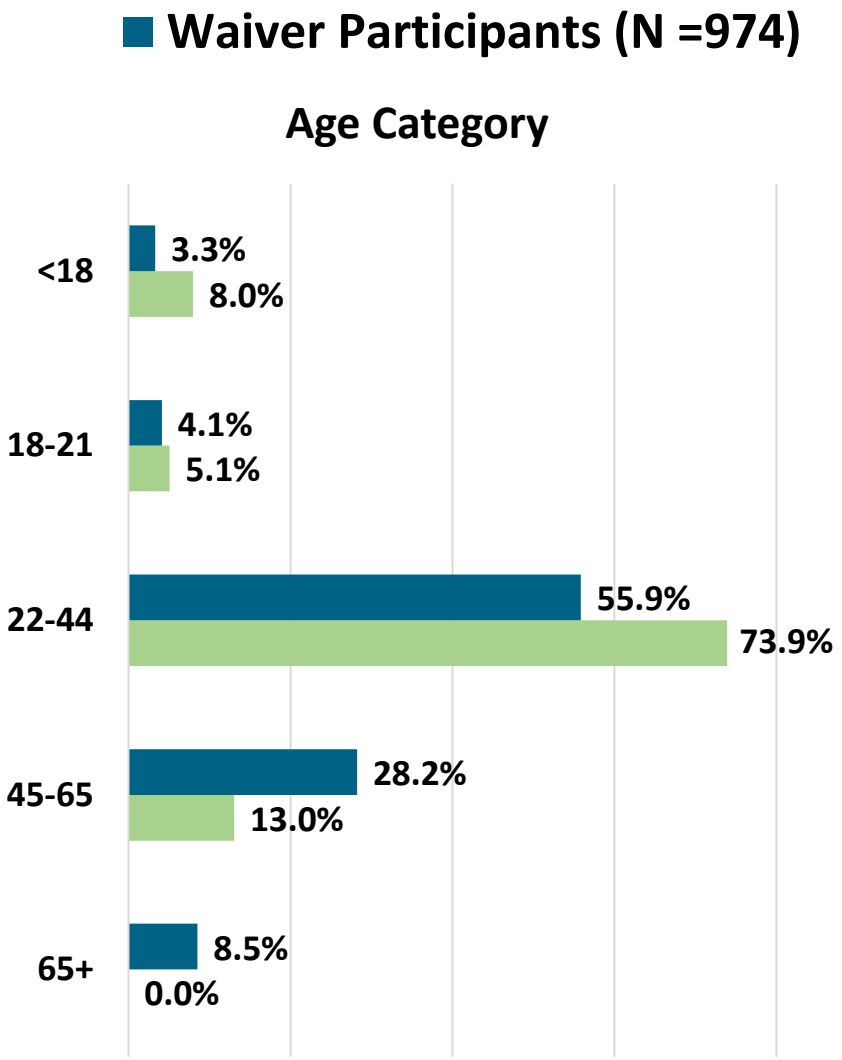
MLI Supports

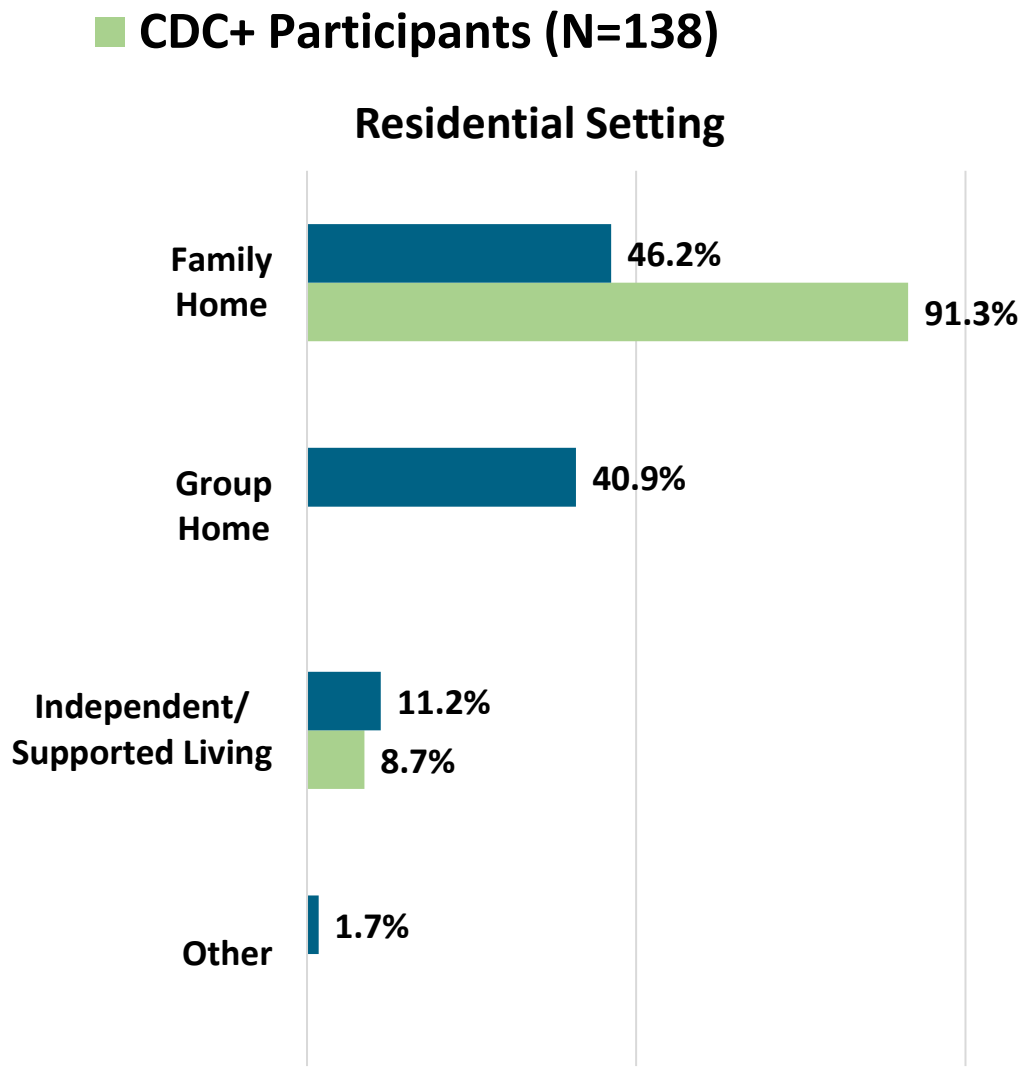
- Waiver: 97.7%
- CDC+: 98.7%

Record Reviews

- Waiver Support Coordinator (WSC): 93.6%
- CDC+ Consultant: 96.4%

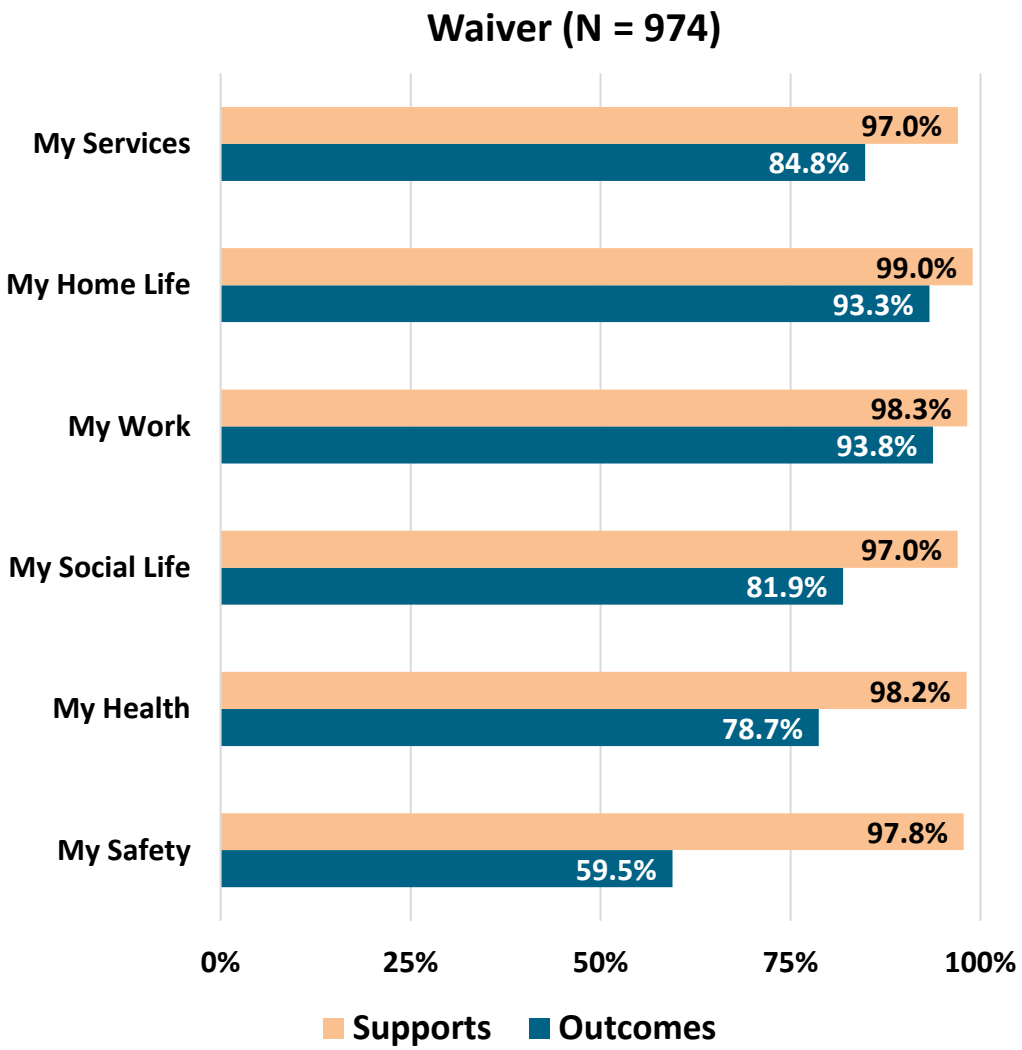
FY 2026 Q1-Q3 PCR Demographics

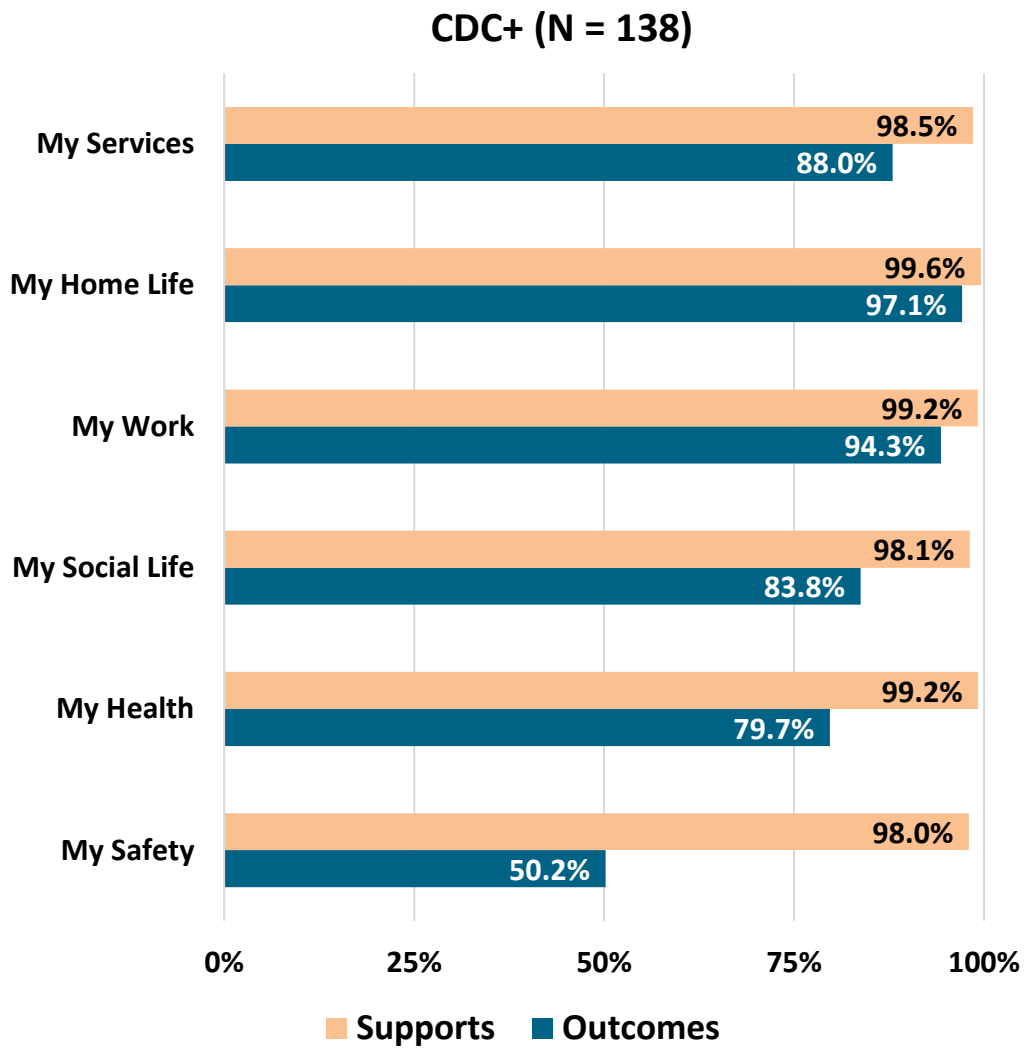




My Life Interview (MLI) Outcomes

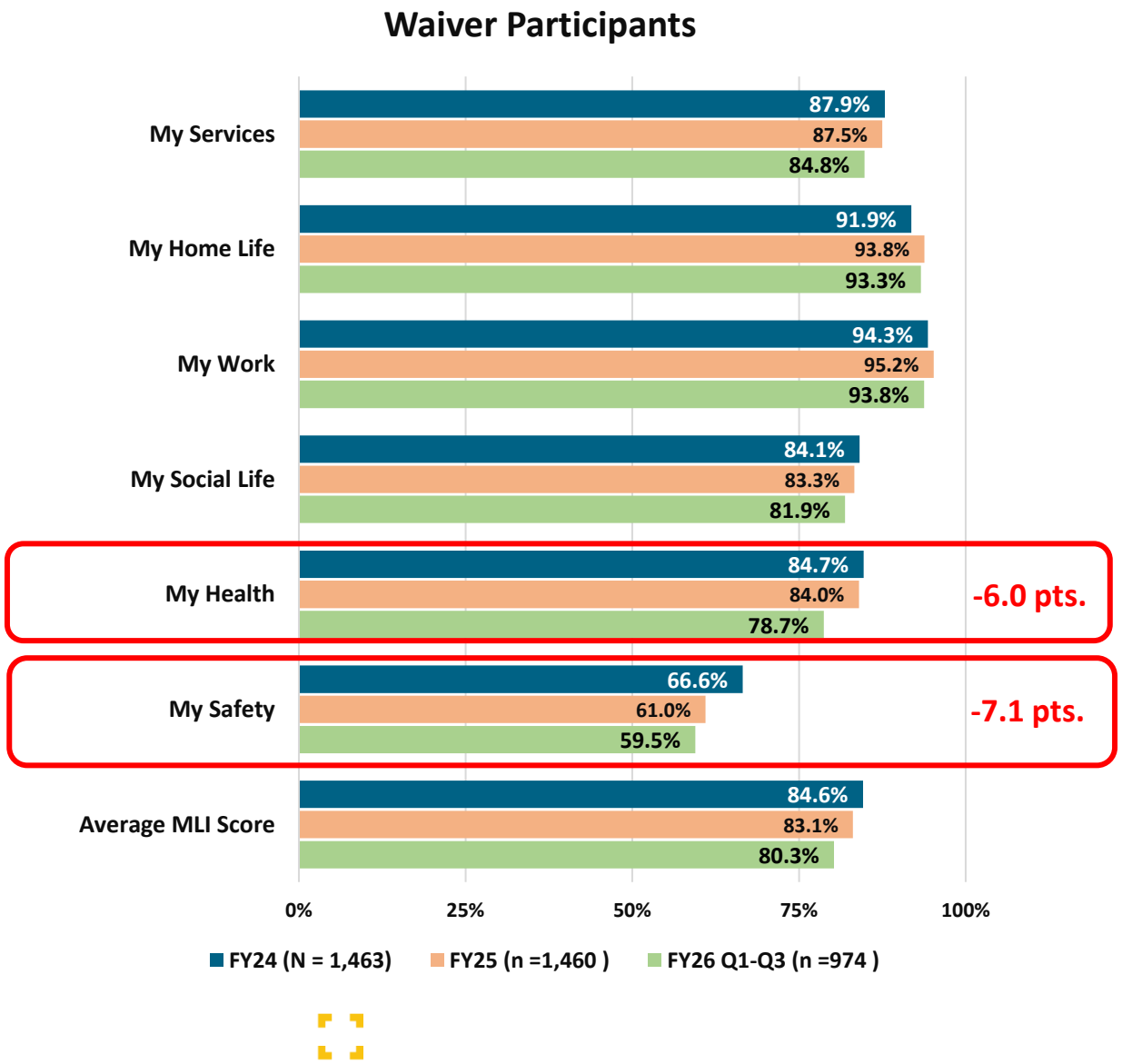
FY 2026 Q1-Q3 MLI Outcomes and Supports by Life Area

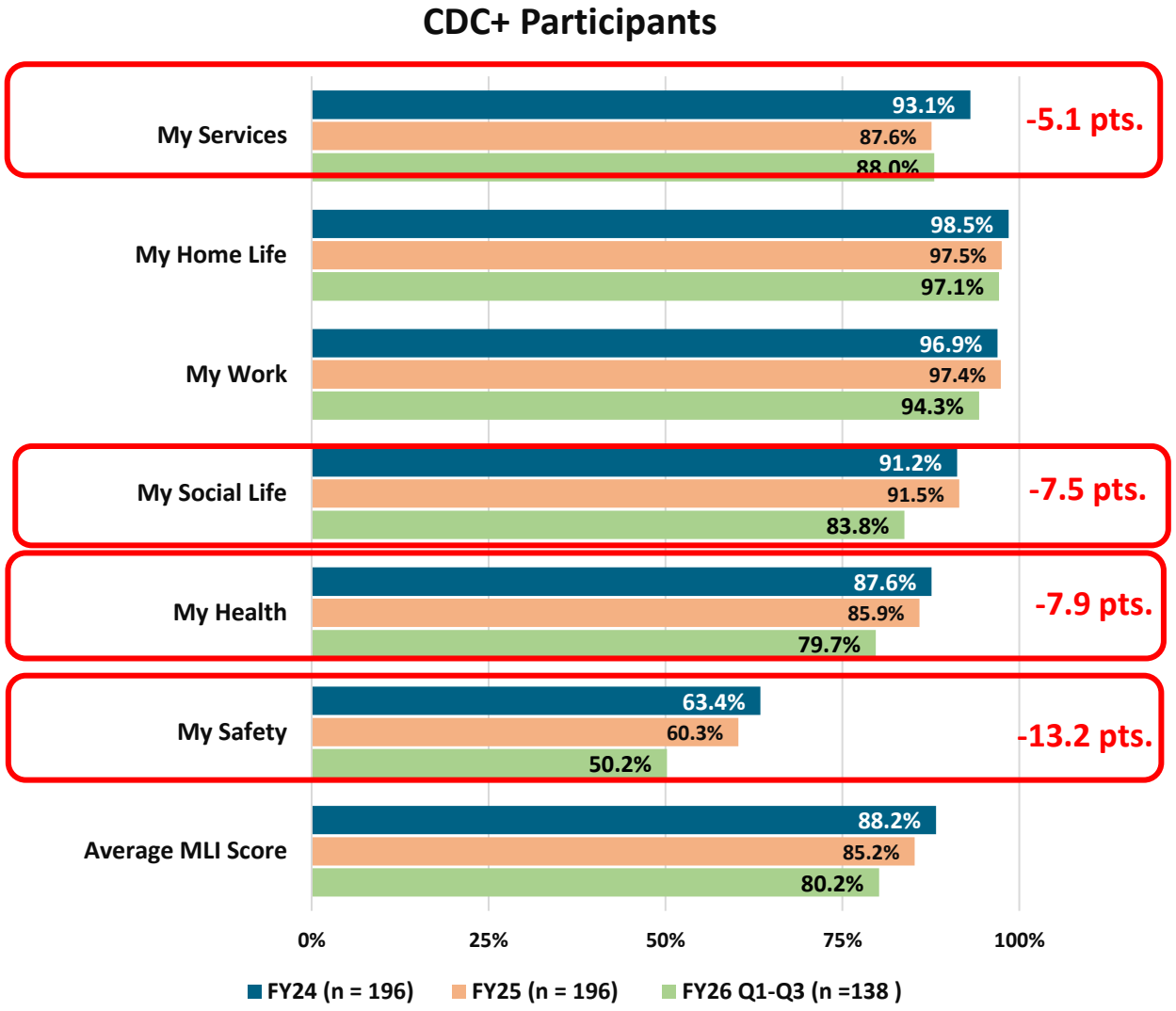




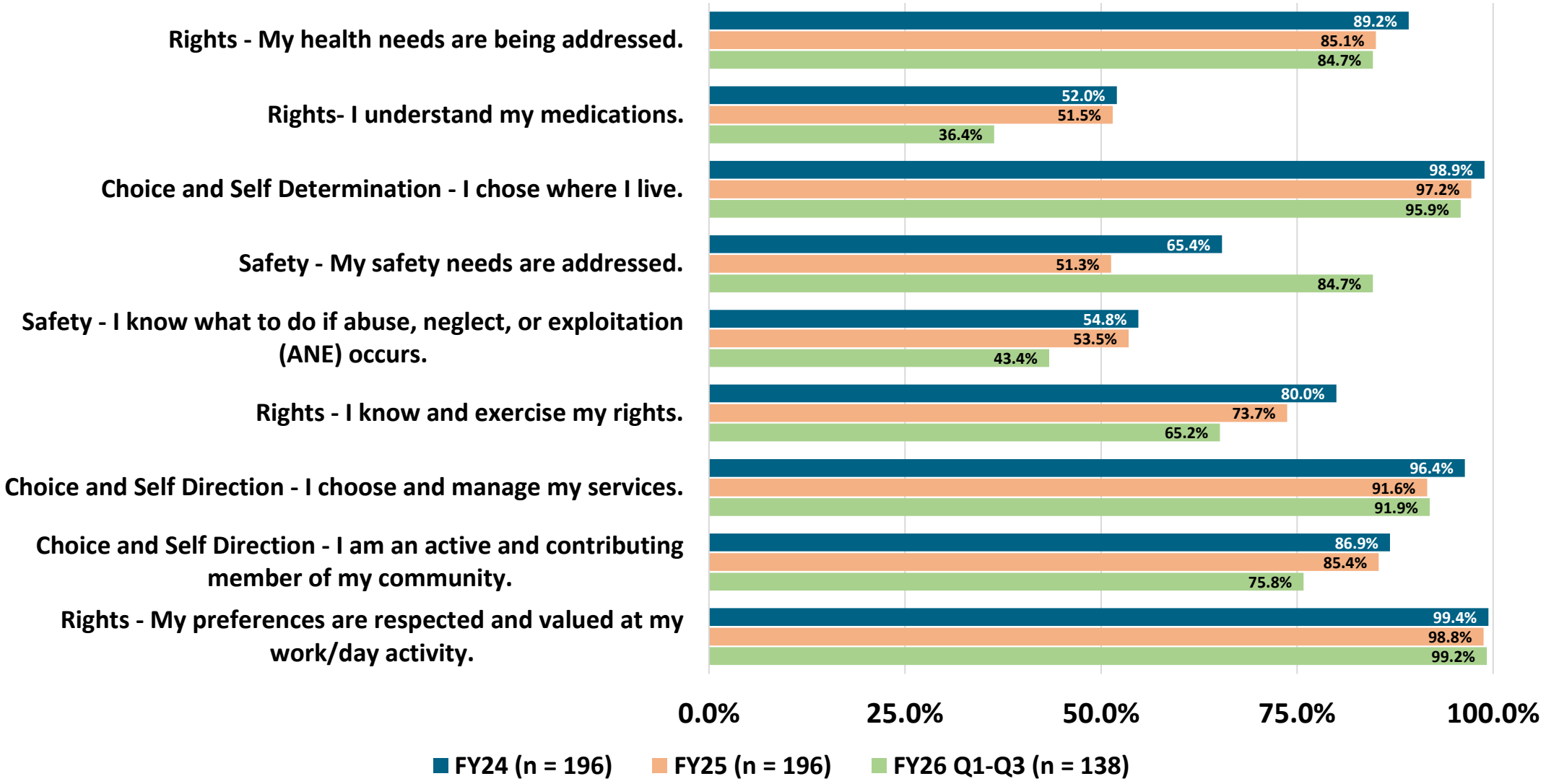
MLI Outcomes by Life Area: FY24 – FY26 Q1-Q3

(Boxes signify 5+ point difference between FY24 and FY26Q1-Q3)





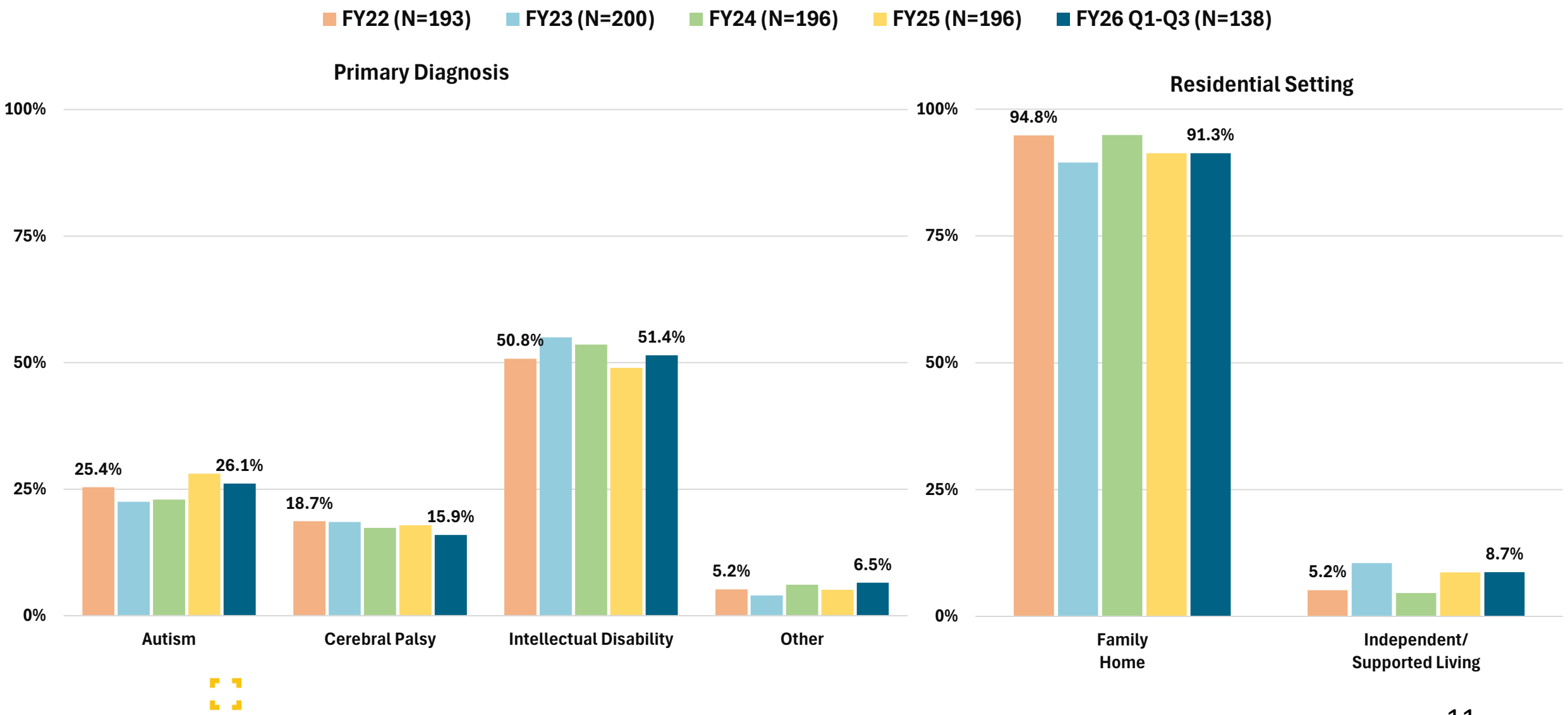
Indicator Level Declines since FY24: CDC+ Outcomes



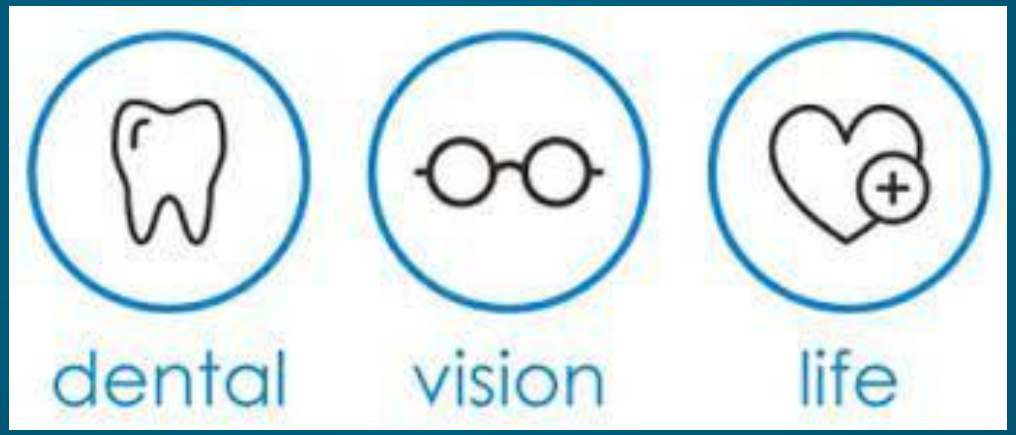
CDC+ Population: Participants' ages over time…

CDC+	N	Mean	Median	Min	Max
FY22	193	32.1	30	9	74
FY23	200	33.2	31	8	74
FY24	196	31.4	30	7	65
FY25	196	32.5	31	8	74
FY26 Q1-Q3	138	32.6	31	12	64

CDC+ Population over time…



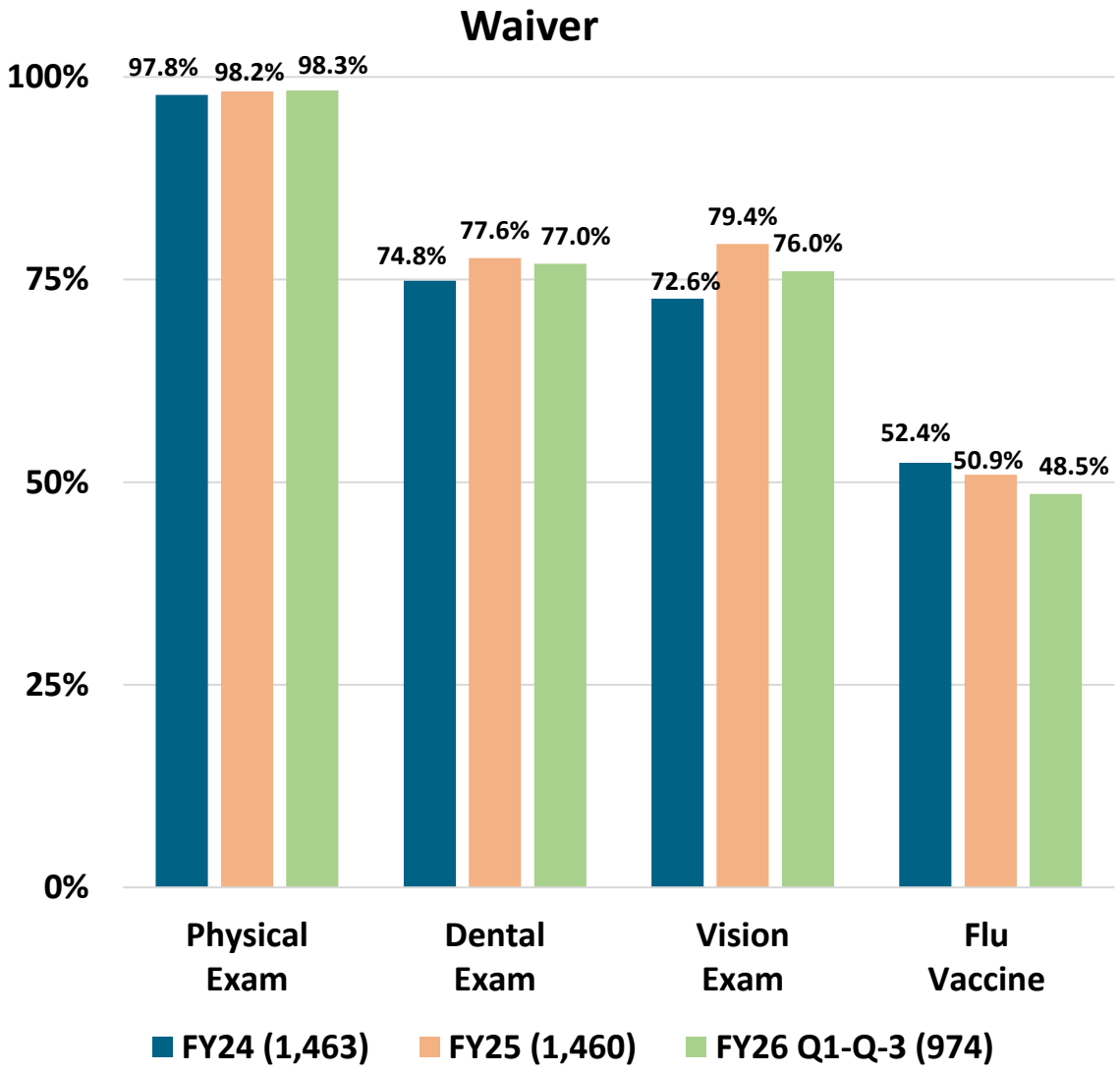
Health Summary

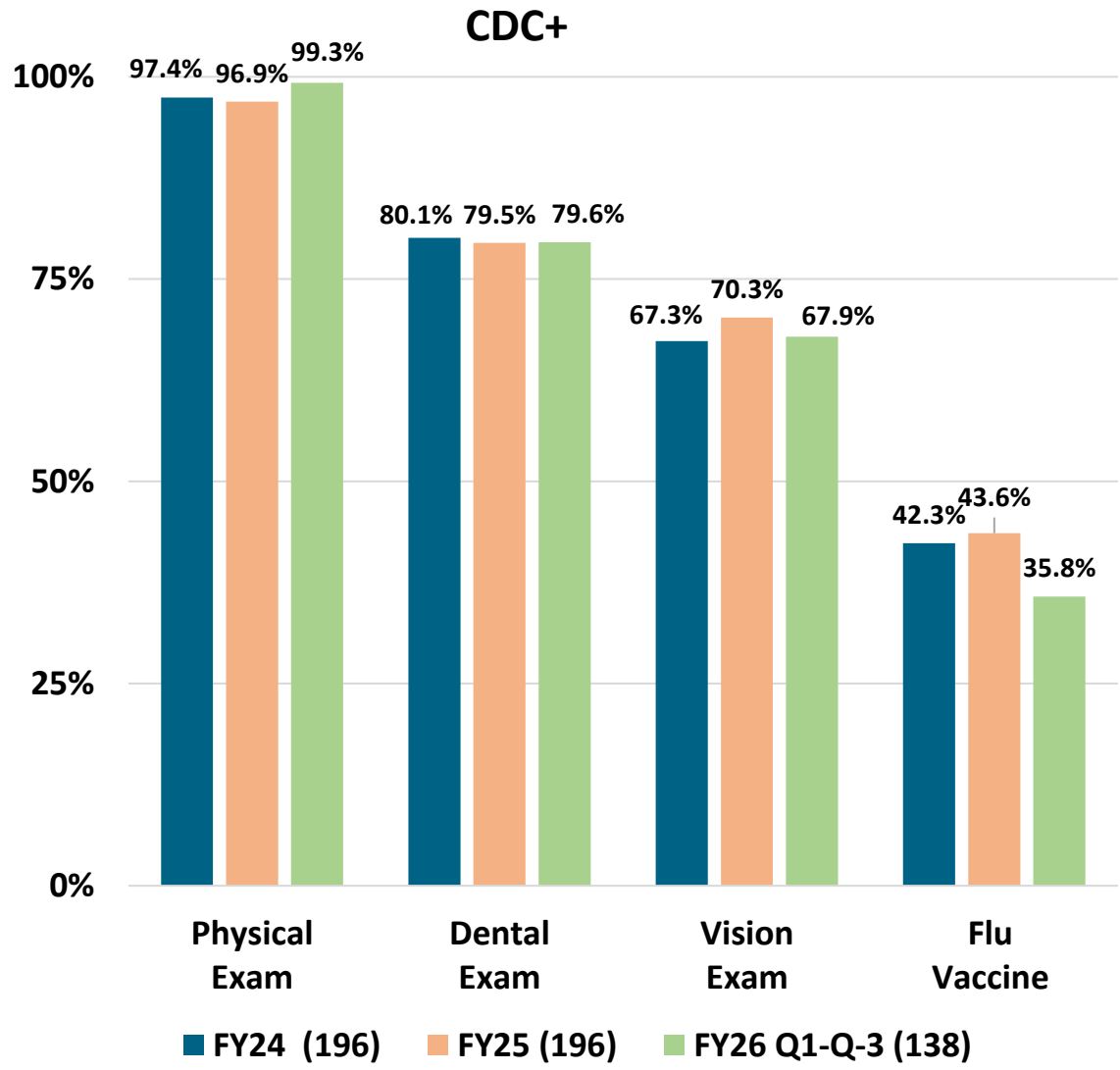


Percent of Individuals with a Significant Health Event by Waiver Type (% Yes)

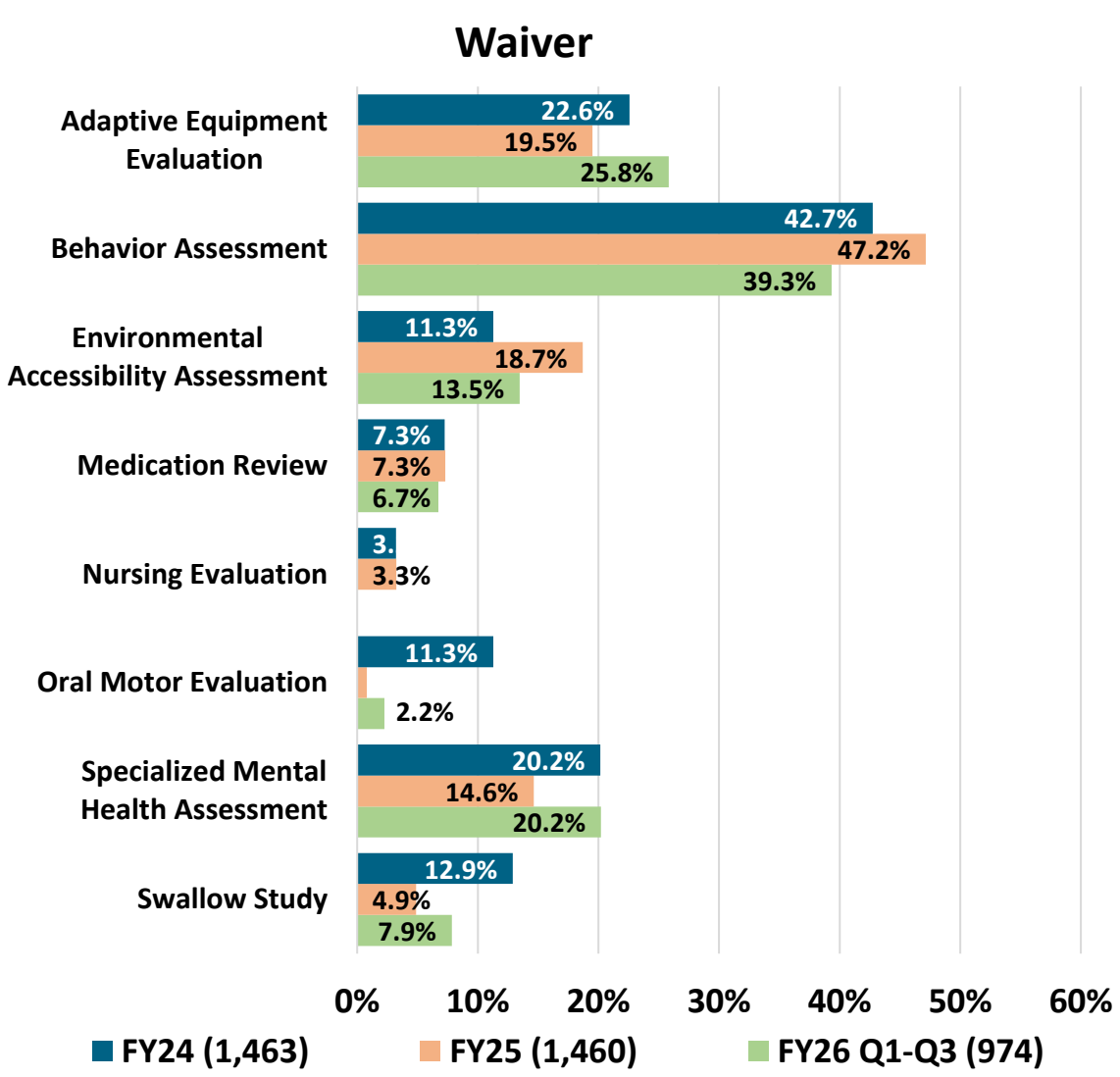
In the previous 12 months:	Waiver			CDC+		
	FY24 (N = 1,463)	FY25 (N = 1,460)	FY26 Q1-Q3 (n = 974)	FY24 (N = 196)	FY25 (N = 196)	FY26 Q1-Q3 (n = 138)
Has the Abuse Hotline been contacted by you or others to report abuse, neglect, or exploitation?	2.2%	2.0%	1.3%	0.5%	0.0%	0.7%
Have Reactive Strategies under 65G-8 been used due to behavioral concerns?	4.5%	4.3%	5.0%	1.0%	0.0%	0.7%
Have you been Baker Acted?	2.8%	2.7%	1.6%	0.0%	1.0%	0.7%
Have you been admitted to the hospital?	11.0%	10.6%	11.6%	10.7%	13.8%	8.7%
Have you been to an Emergency Room?	19.5%	17.9%	20.3%	18.4%	23.0%	18.8%
Have you been to an Urgent Care Center?	5.9%	6.6%	6.4%	6.5%	5.6%	6.3%

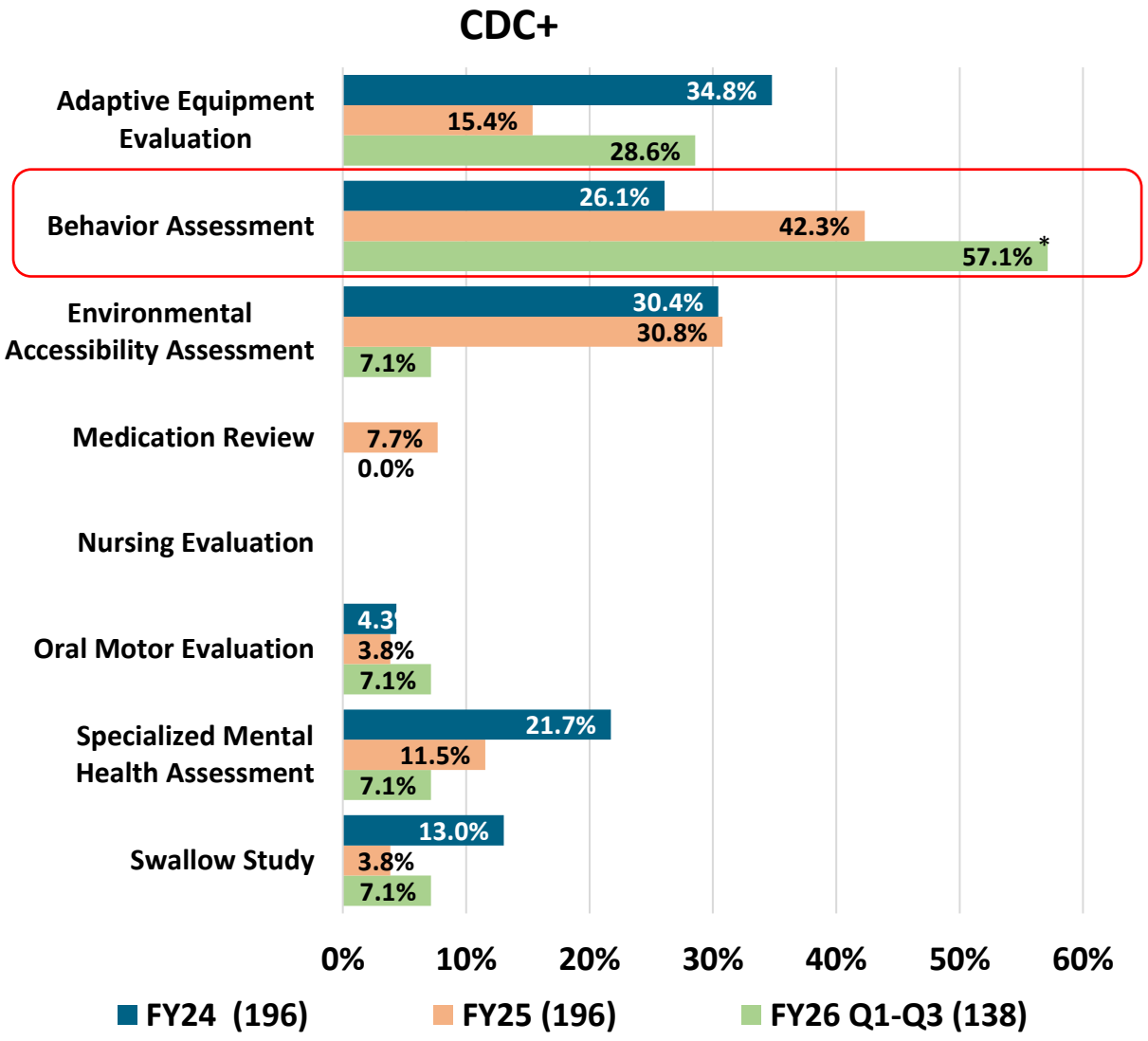
Preventative Care





Do you need any additional therapies or assessments?

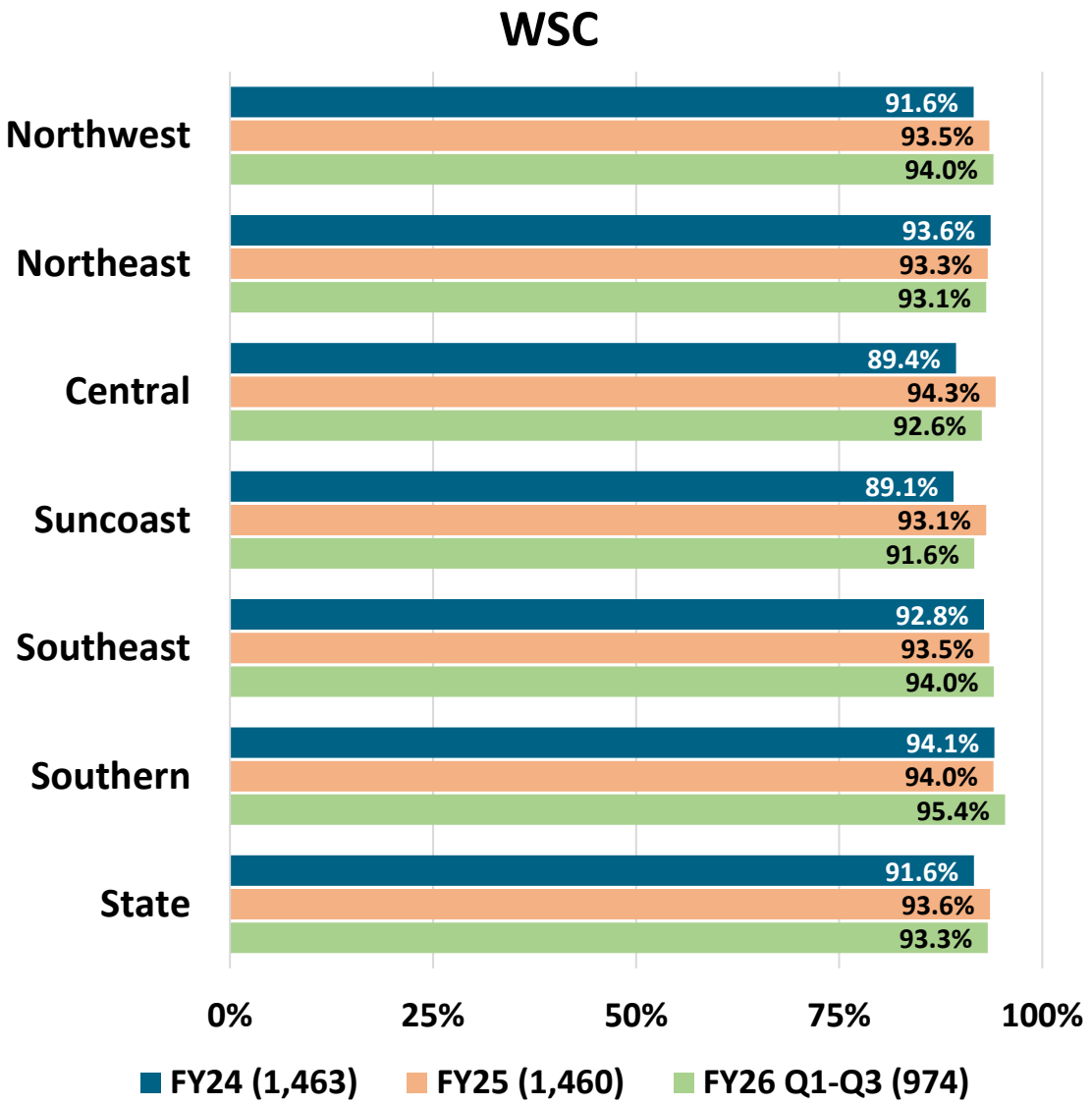


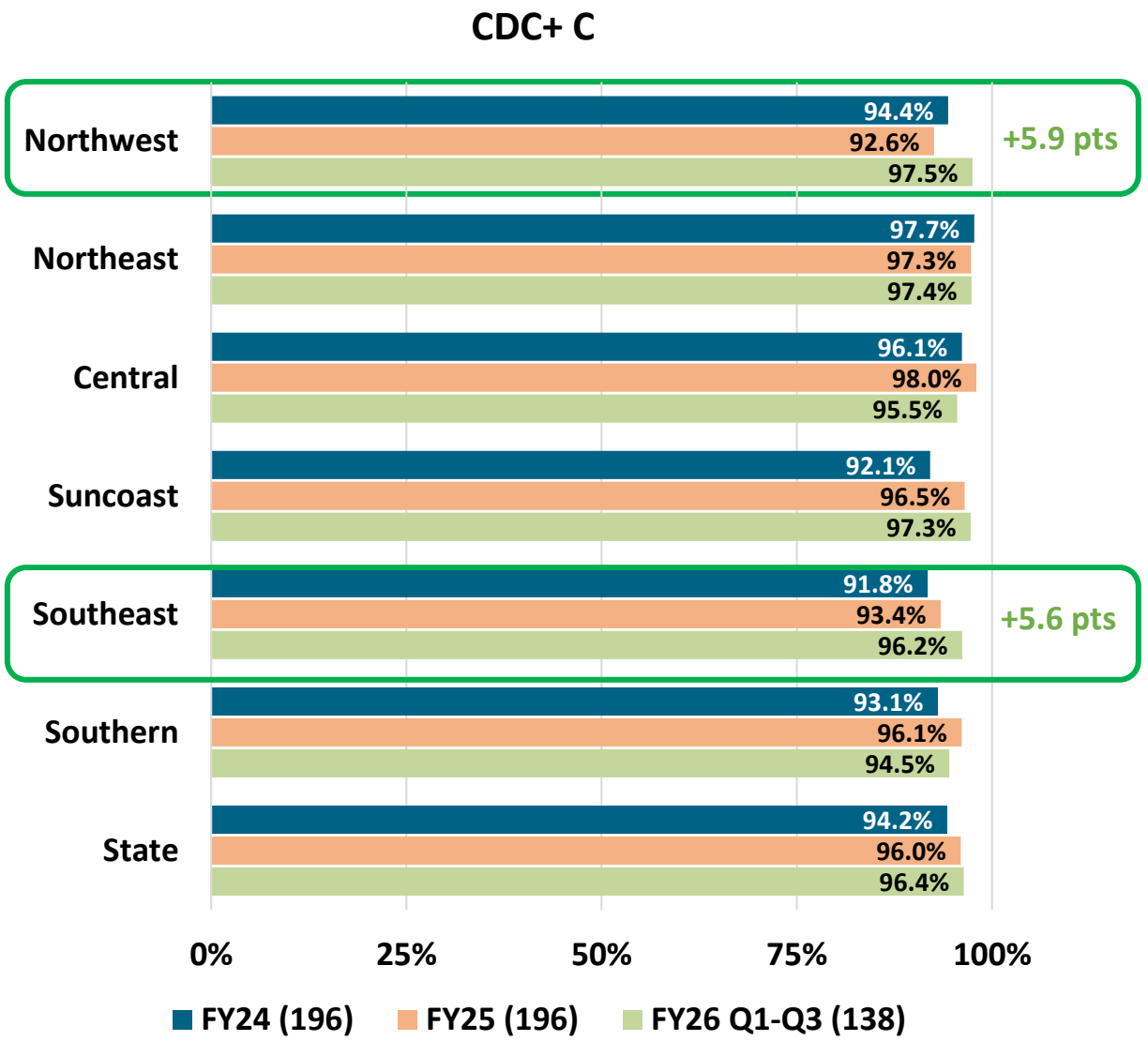


*Low n size: 8 out of 14 CDC+ participates needed BH Assessments

WSC/CDC+ Consultant Record Reviews

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





Historically Lower Scoring Record Review Indicators: WSCs FY24→FY25 →FY26 Q1&Q3

The Support Plan reflects support and services necessary to **address assessed risks**.	• **76.1% (1,453) → 82.5% (1,458) → <u>83.1% (973)</u>**
The Support Plan includes supports and services consistent with **assessed needs.**	• **77.9% (1,454) →82.1% (1,460) → <u>85.4% (974)</u>**
Level of care is completed accurately using **the correct instrument/form**.	• **82.3% (1,456) → 86.7% (1,449) → <u>85.9% (962)</u>**
Support Coordinator Progress Notes demonstrate pre-Support Plan planning activities were conducted.	• **82.0% (1,412) → 84.0% (1,427) → <u>82.3% (957)</u>**

Lowest Scoring WSC and CDC+ Consultants Standard: FY26 Q1-Q3

The Support Plan has all required components complete.

- **WSC: 74.5% (968)**
  - 247 Not Mets
- **CDC+ C: 84.1% (138)**
  - 22 Not Mets

Health section had components not present on the Plan: 26.8% 72/269 Not Mets

Section including Person-Centered Information did not change from one Support Plan to the next.: 23.0% 62/269 Not Mets

section including Future Goals did not change from one Support Plan to the next.: 19.0% 51/269 Not Mets

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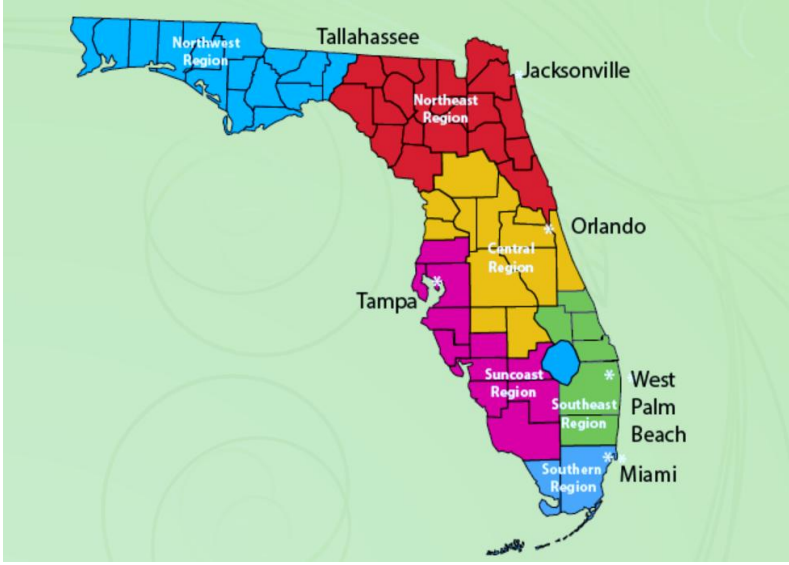
Provider Discovery Reviews

FY26 Q1-Q3 (July 2025 – March 2026)

Region	# of PDRs		
	Service Providers (SPs)	Qualified Organizations (QOs)	CDC+ Representatives (Reps)
Northwest	72	11	18
Northeast	142	17	37
Central	234	24	45
Suncoast	268	23	42
Southeast	188	37	39
Southern	115	27	28
State	**1,019**	**139**	**209**



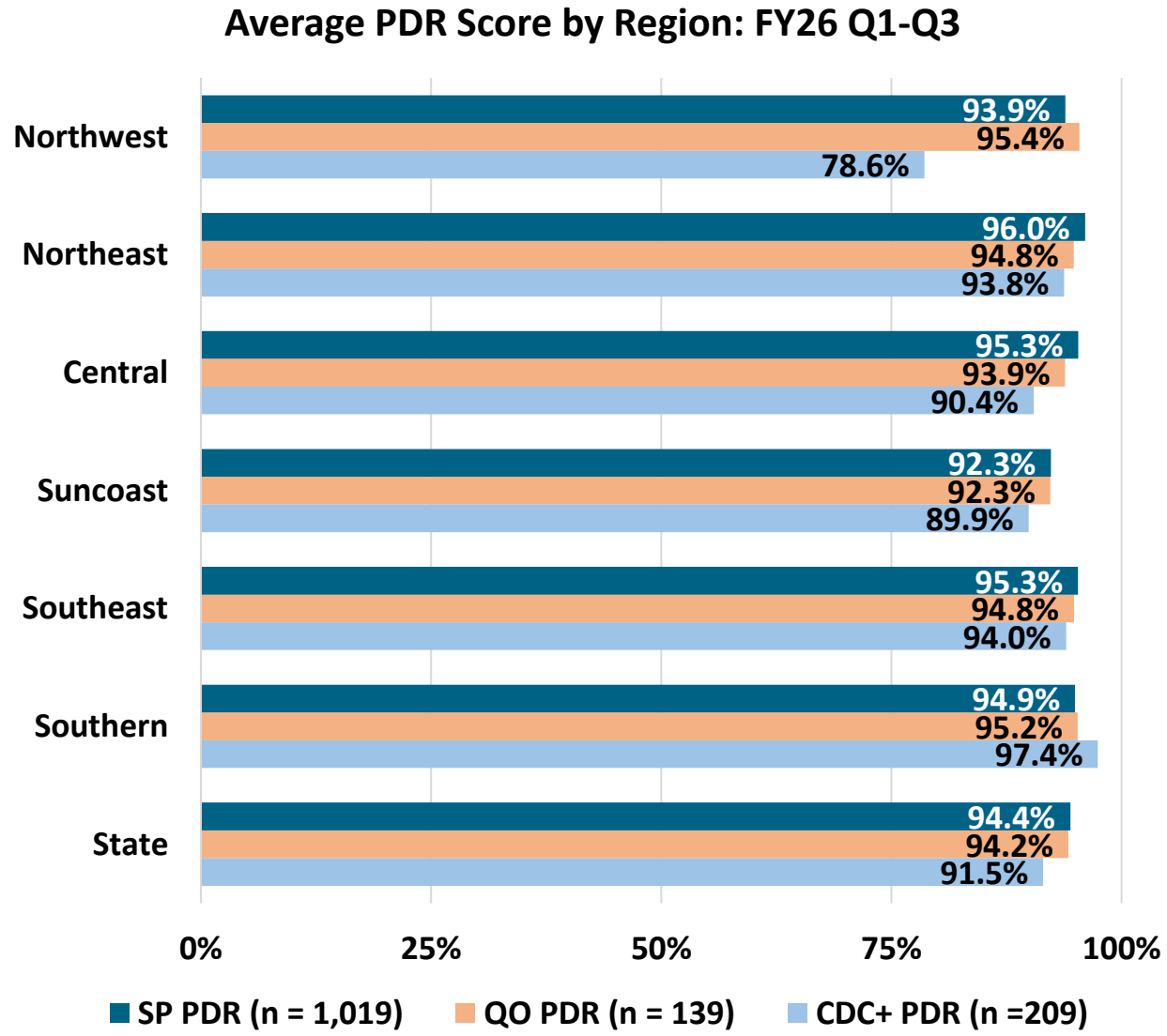
Average PDR Score by Region: FY26 Q1&Q3

Calculating PDR Scores

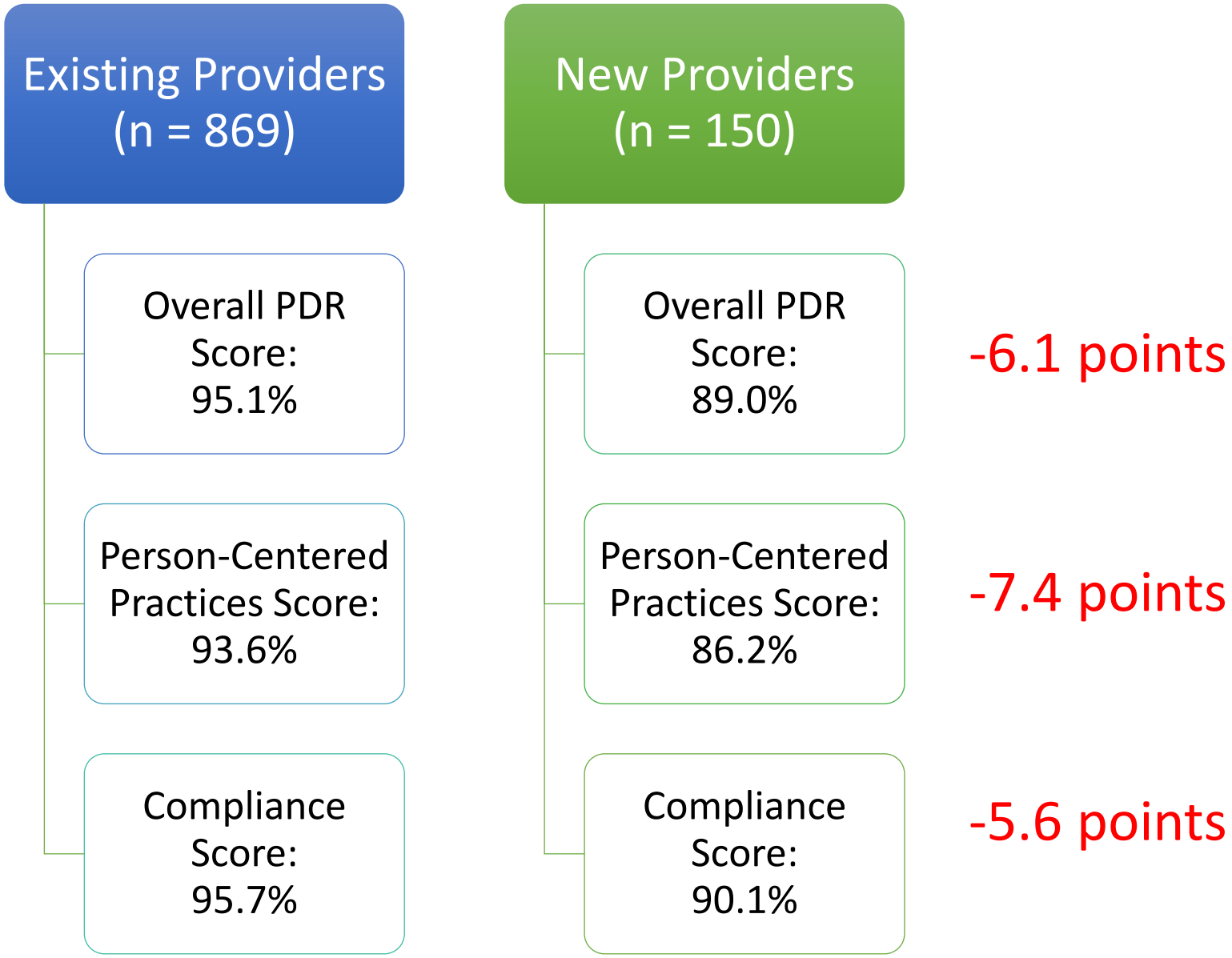
1. **Administrative Review**
   - Applies to SPs and QOs
     - General Administrative Review (GAR)
     - Staff Qualifications and Training (Q&T)
2. **Service Record Reviews (SSRR)**
   - Applies to SPs, QOs, and CDC+ Reps
3. **Observations (OBS)**
   - Applies to SPs with Adult Day Training (ADT) facilities or Licensed Residential Homes (LRH)

Notes:

1. *Individual Interviews are also conducted during the SP PDR; however, they are not included in the provider's score.*
2. *Scores do not factor in Alerts which deduct 5 points for every Alert Type with a maximum of 15 pts. total.*

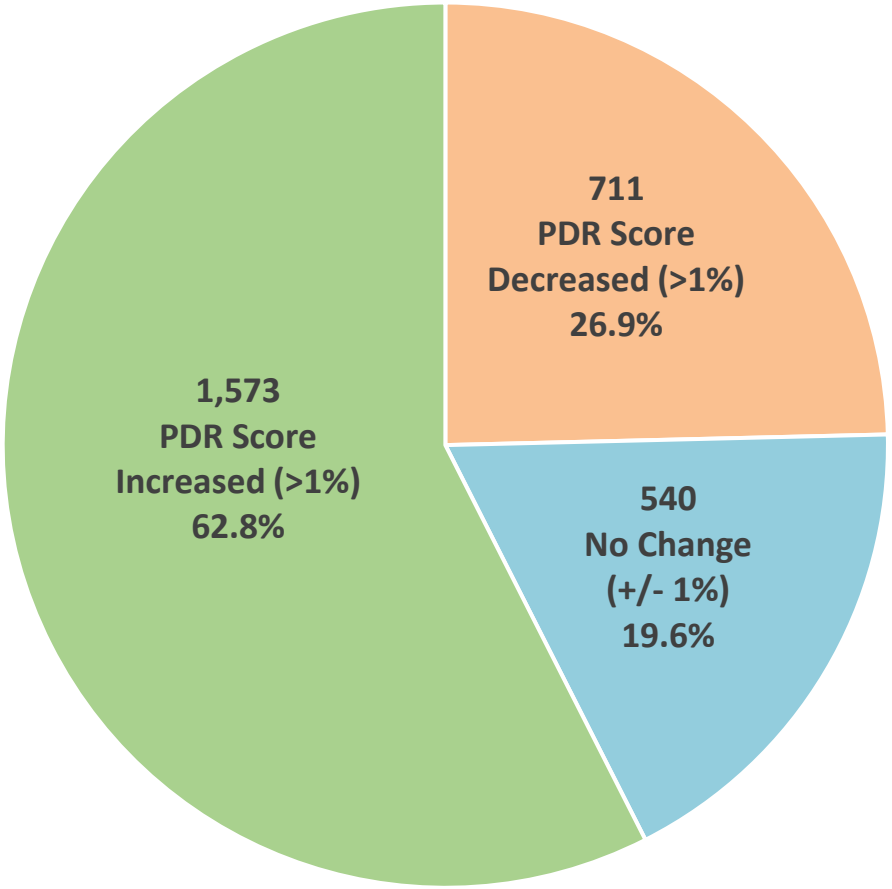


FY26 Q1-Q3: Existing versus New Service Provider PDR Scores



Existing Provider PDR Scores: Improvements Over Time

- Between June 2020 and March 2026, Qlarant has conducted 8,869 PDRs across 3,293 providers.[1]
- During this time, 2,644 providers received more than one PDR review.
- Among providers whose PDR score improved, the average increase was 10.6 points.



[1] Not including non-compliant providers.

Provider Discovery Review Trends by Review Component

FY24: July 2023 – June 2024
FY25: July 2024 – June 2025
FY26 Q1-Q3: July 2025 – March 2026

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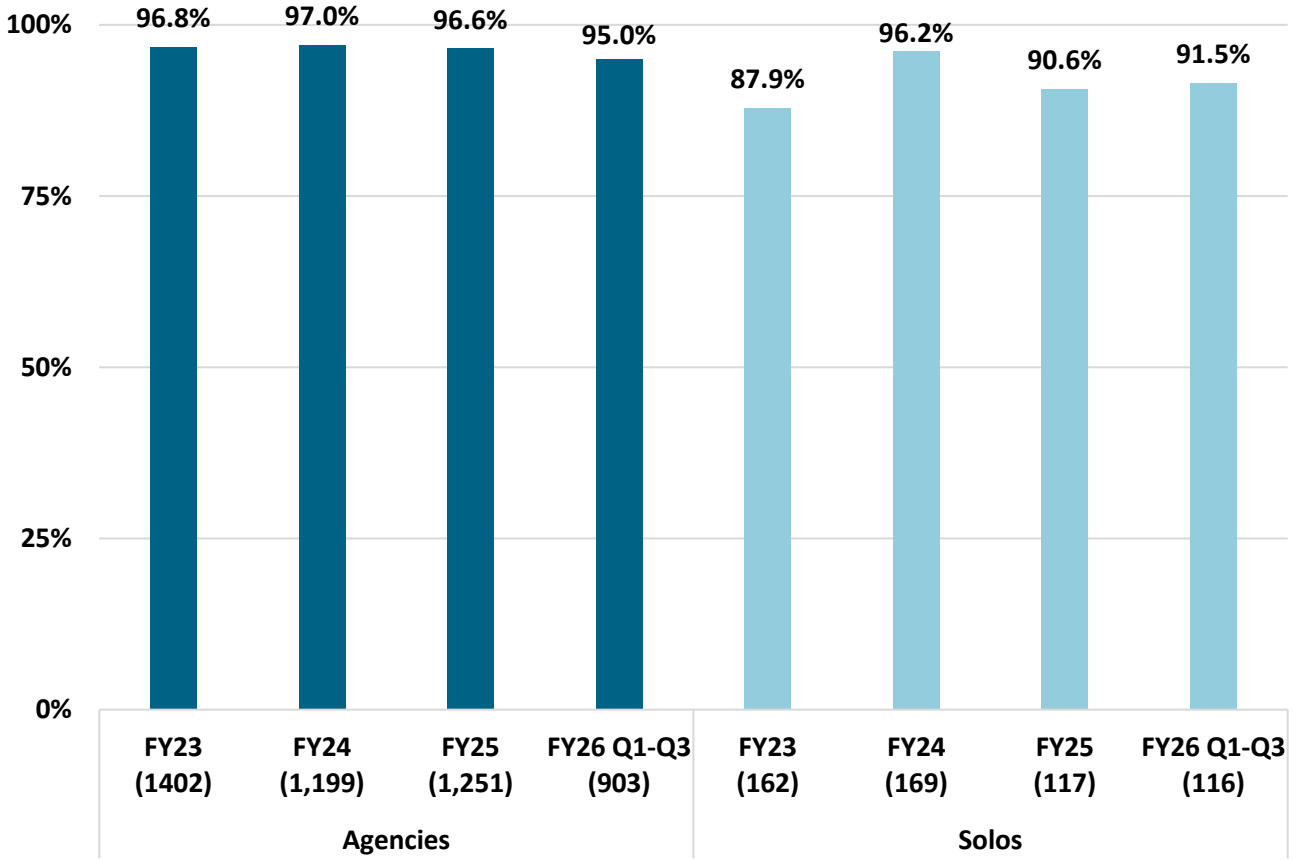
Administrative Review

GAR/Staff Q&T

General Administrative Reviews by FY: Agency and Solo Service Providers



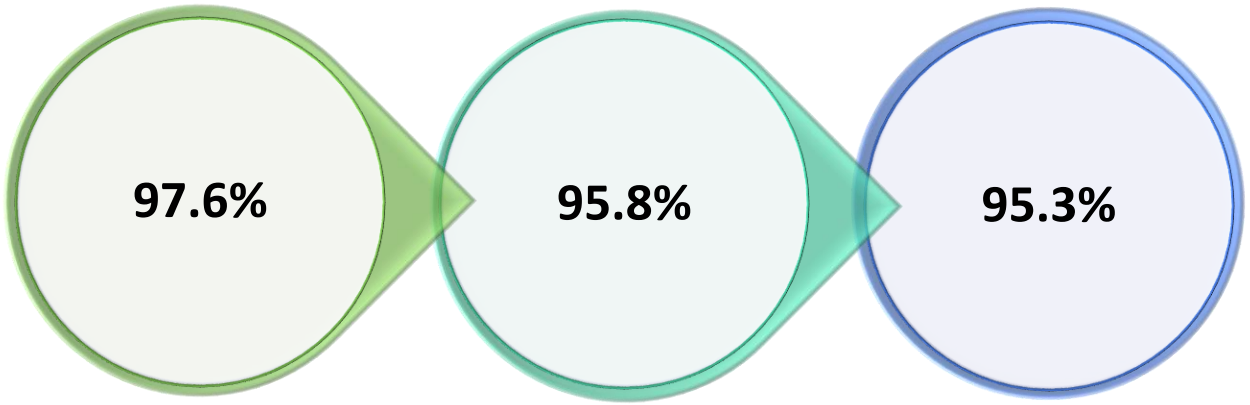
Lowest Scoring Indicator:
FY24 → FY25 → FY26 Q1-Q3

Agency: Agency vehicles used for transportation are properly registered.

94.9% (475)→92.4% (516) →89.3%(363)

in parenthesis represents the # of SPs reviewed.

General Administrative Reviews by Region and FY: QOs



- **FY24 (N = 184)**
- **FY25 (n = 177)**
- **FY26 Q1-Q3 (n= 139)**

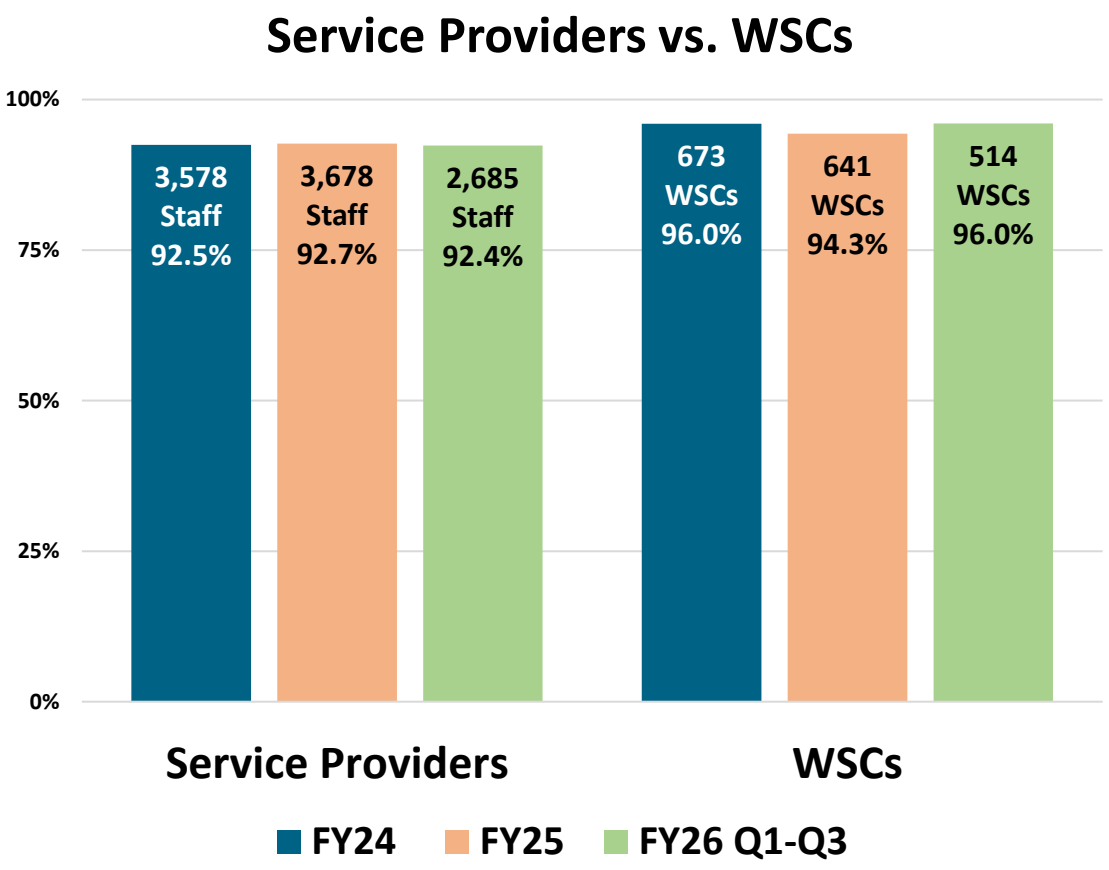
Lowest Scoring Indicators: FY24 → FY25 → FY26Q1-Q3

- The provider maintains a Table of Organization.
  96.7% (184) → 93.2% (177) → 95.0% (139)

- **The Mentee completed all mentoring program requirements.**
  95.4% (119) →100% (61) → 97.7% (43)

in parenthesis represents the # of QOs reviewed.

Staff Qualifications and Training Scores by FY



Lowest Scoring Indicator: FY24 → FY25→ FY26 Q1-Q3

- **Service Providers: The service provider completes eight hours of annual in-service training**
  - **Supported Employment Coaching (LSD 3)**
    83.7% (178) → 83.9% (180) → 88.8% (134)
  - **Supported Living Coaching (SLC)**
    79.0% (276) → 77.6% (254)→ 76.8% (194)
  - **Personal Supports (4 Hours)**
    77.1% (1,304)→79.8% (1,299)→76.7% (1,015)
- **WSCs: The provider received training in HIV/AIDS/Infection Control.**
  92.4% (671) → 92.0% (640) → 95.7% (514)

in parenthesis represents the # staff/WSCs reviewed.

Existing versus New Service Provider Staff Q&T Scores: FY 2026 Q1-Q3

Existing Providers

- 6 standards scored below 85%:
  - **In-Service Training for Supported Living Coaching (79.8%), Personal Supports (80.6%), LSD 1 (84.5%), and LSD (84.6%)**
  - **Prescribed Enteral Formula Administration Annual Update (84.6%) and completed training (80.0%)**

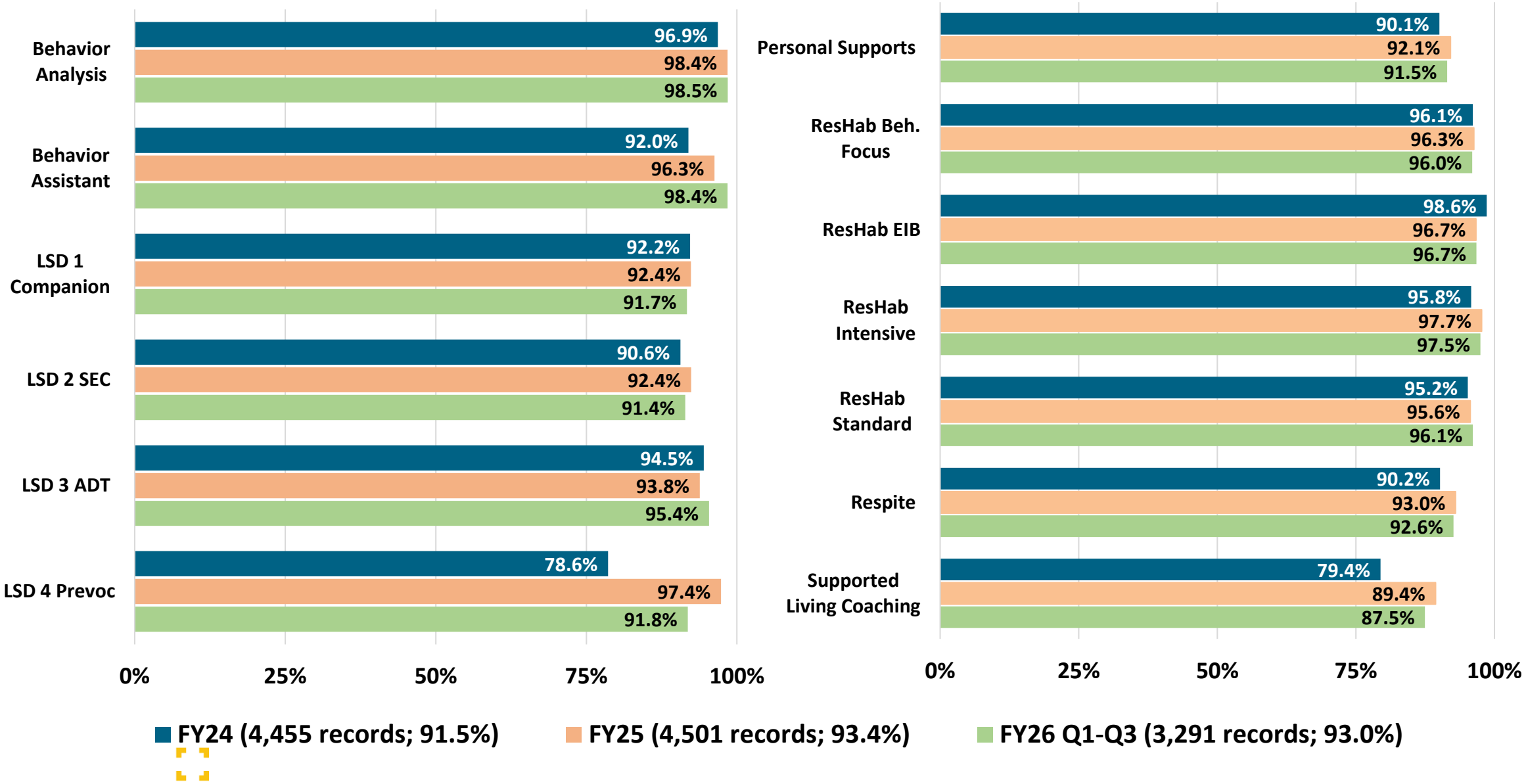
New Providers

- 15 standards scored below 85%, including:
  - **In-Service Training requirements for:**
    - Personal Supports – 51.1%
    - Supported Living Coaching – 52.4%
    - LSD 1 – 65.0%
    - LSD 2 – 33.3%
    - LSD 3 – 80.0%
    - ResHab Standard – 83.3%
  - **Received Training in**
    - **Basic Person-Centered Planning – 50.0%**
    - **Individual Choices, Rights and Responsibilities – 50.0%**
    - **First Aid – 75.7%**
  - **Social Security Work Incentive – 77.3%**
  - **HIV/AIDS/Infection Control – 79.6%**
  - **Waiver Provider Requirements – 81.0%**
  - **HIPAA – 81.3%**
  - **Curriculum for Reactive Strategies – 82.1%**
  - **Level II Background Screening – 82.6%**

Service Specific Review Reviews

Note: QO Record Reviews are presented above in the PCR Section

Weighted SSRR Scores by Service and FY



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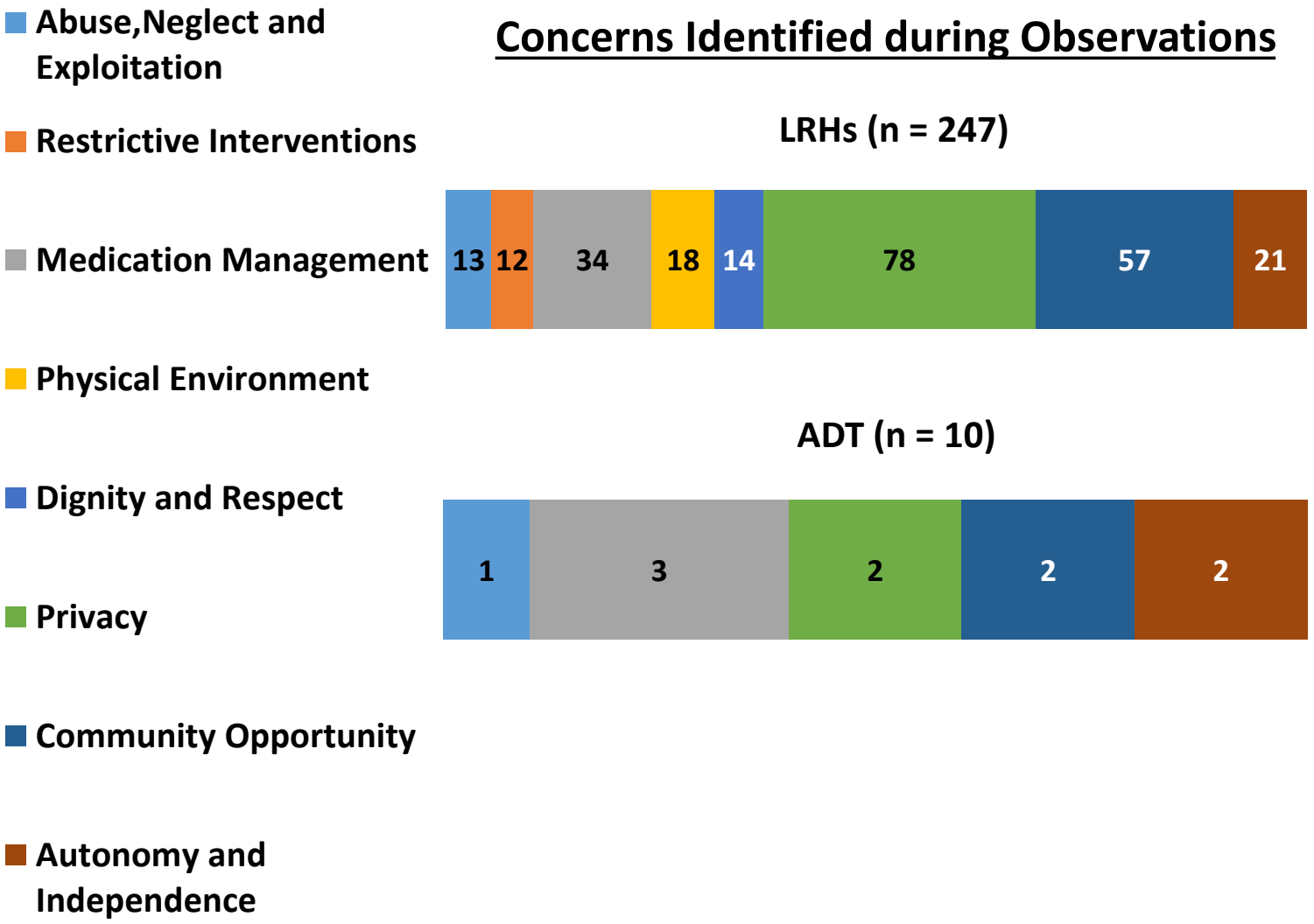
Observations

Observations: LRH and ADTs
FY26 Q1-Q3 (n = 796)

Region	LRH	ADT
Northwest	21	6
Northeast	107	25
Central	180	20
Suncoast	177	33
Southeast	125	12
Southern	78	12
State	**688**	**108**

Concerns Identified during Observations



The most common concerns observed: LRHs

- **Privacy:**
  - Individuals do not have a key to their bedroom doors (18 Concerns)
  - Bedroom doors do not lock (8 Concerns)
  - Bathroom doors do not lock (15 Concerns)
  - Individuals cannot lock the bathroom door (10 Concerns)
- **Community Opportunity:**
  - Training in the use of public transportation is not available and/or facilitated (36 Concerns)
- **Medication Management:**
  - Non-controlled medications are not centrally stored in a locked container in a secured enclosure (19 Concerns)
  - Controlled medications are not stored separately from other prescription and OTC medications in a locked container within a locked enclosure (15 Concerns)

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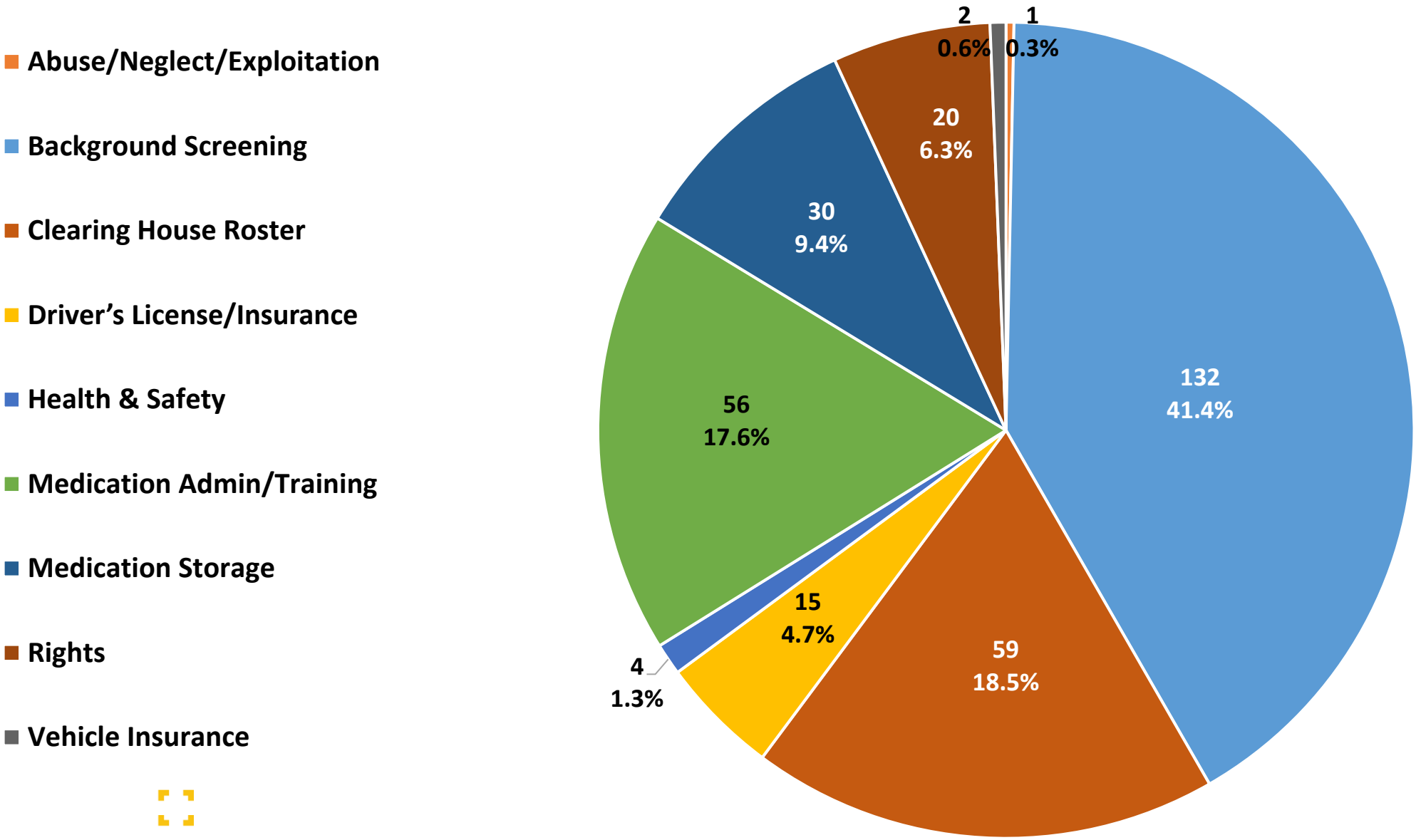
Alerts

FY 2026 Q1 - Q3 Alerts (n = 319)



Thank you!
Questions? Comments?

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