

Interagency Quality Council Meeting

September 26-27, 2007

Jacksonville

Members Present: Beverley DeStories, Idelio Valdez, Scott Barrish, Marsha Vollmar, Ed DeBardleben, Kim Barger, Susan Robertson, Charm Thometz, Pam Kyllonen, Conney Dahn, Wynona Holt, Bob Wessels

Members Absent: Pam Wainwright, Becky Maguire, Linda Mabile, Jarret Stone, Fay Jackson, William Frets

Advisor Group Present: Steve Dunaway, Ed Rousseau, Jean Sherman, Mark Barry, Deborah Linton, Steve Roth, Latarsha Williams, Winnie Gaylor, Martha Martinez, Betty Clements, Suzanne Sewell, Ann Millan, John Burner

Guests: Marion Olivier-Ruelas, Sue Kelly, Beth Townshend, Bob Foley, Janice Sloan, Sally James, Sherndina Moreland, Terry Mothershed-Newman, Carol McDuff, Brenda Baker, Marcia DiGracia, Dylan Gale, Sandra Mills, Marshall Patterson, Kerrie Wimberly, John Hall, Jerry Martin, Julie Tyler

Day 1

Welcome and Introductions

Beverley DeStories

Minutes from the June meeting were approved.

Wynona Holt asked for more time on the agenda. Her presentation was moved to the end of the day.

John Burner asked for a discussion of consumer choice and safety issues be added to the agenda. This topic was added to the end of the day also.

The participants at the meeting introduced themselves.

Report on Quality Symposiums

Ed Rousseau & Steve Dunaway

Ed and Steve provided an overview of the eight quality symposiums that have been held in Florida over the past year. Ed began with an update of the most recent one in Lakeland. Steve followed up with a summary of the Pensacola symposium.

Charm suggested support coordinators be used to market the symposiums and similar activities.

APD General Update

Steve Dunaway

Steve began the update on APD by providing an overview of the agency's activities resulting from the 2007 Florida Legislative session. He provided two handouts, one a "Summary of Actions Related to Statutory Changes and Other Cost Savings," and the other a "Proposal for State Employees to Conduct Needs Assessment." Steve reviewed the highlights from each of these handouts pointing out actions APD is taking with regard to issues including:

- Limitations on Supported Living, Personal Care Assistance and Support Coordination
- Limitations for Residential Habilitation services
- Implementation of a consolidated residential habilitation rate structure
- Planned elimination of Chore, Non-Residential Support Services, Home-Maker, Massage Therapy and Psychological Assessment services
- Rule adoption
- Pending federal approval for extending current support plans
- Development of a 4 tiered waiver system
- Other related activities, and
- Development and implementation of individualized budgets

Several questions were fielded from the discussion by Steve and Ed Rousseau that were to be forwarded to APD Central Office, Linda Mabile for a response. Answers to those questions were to be forwarded to the IQC membership.

Florida ARF – Florida Alliance for Direct Service Professionals **Suzanne Sewell**

Suzanne presented an initiative by Florida ARF that would establish a direct support professionals (see handout). She noted that the purpose of the initiative was to create/develop a skills building network and credentialing process that would enhance the skills and capabilities and valued status of direct care employees in human services. She turned over the presentation to staff for details of the initiative.

Ann Millan noted that the use of a college of direct service professionals appears to be a good investment in both recruitment and retention of employees in the field. FARF acknowledged that the issue of establishing such credentials and the alliance is of interest to them because of the improvements that have been seen in staff retention. They also answered questions about how groups could collaborate in developing such alliances as well as what the credentialing process would mean to valuing professionals. Local community colleges and technical schools are being recruited as a hub of where an alliance of direct support professional could be the administrative structure for professional development direct care staff to serve in human services. Training and responsible implementation of what staff receive as training, use of a professional code of ethics and on-going certification of direct service staff are chief selling points for the adoption of such a system.

ARC Florida – Managed Care Initiative Update **John Hall**

ARC/Florida has been in Florida for 53 years with 42 chapters and additional affiliates with approximately 2,000 members. As background, John pointed out that ARC board made it a point to learn about managed care, knowing the growing trends and issues that are occurring nationally.

Marshall Kelly has been a primary researcher and consultant for this process, as well as Nicki Molton who has been involved for long years in Florida's Medicaid Waiver programs. ARC/Florida decided to ask these individuals to provide a report on national trends, Florida issues and construct recommendations on how such a program could be implemented in Florida for people with developmental disabilities. ARC wanted to ensure that they and others be at the decision making meetings to discuss implementation, alternatives and to discuss the impact on people with developmental disabilities. John said he would provide the full report the IQC membership. ARC asked for participation with them from across stakeholder groups.

John proposed that some of the positive outcomes from a managed care system, as demonstrated in other states, would include:

- Cost certainty
- Improved access to providers and services
- Required training and potential incentives based on performance
- Enhance care coordination
- Flexibility – services can be configured differently than fee for service arrangement and may offer additional or substitute services
- Accountability – services focused on a single entity

Some of the potential disadvantages that have been seen include:

- Capitation rates may not be sufficient
- Enrolment levels may not be sufficient to make the plan financially viable
- Health plans offering best services may be

Other important considerations:

- Choice counseling must address any unique need of individuals
- Include credentialing of providers
- Include special training
 - Guardianship
 - Person-Centered planning and self direction
 - Support Coordination
 - Special reporting systems
 - Plan for managing grievance and appeals (ombudsman?)
 - Requires extensive network of specialty and traditional providers
 - Capitation should include variety of risk adjustments

John provided a summary of reasons that it would be a positive consideration to take on a managed care system, including: (see handout)

Susanne Sewell provided a perspective from Florida ARF perspective, as something of a rebuttal to John's presentation and assumptions. She first noted that Marshall Kelly presents the report as a way of implementing a managed care system, not as a recommendation that Florida should proceed in this way. She also noted that generally, Florida ARF is supporting the changes being undertaken by APD as opposed to looking for managed care to provide answers. Finally she noted that there is at least the perception that some of the people involved in the managed care research process stand to gain financially and that there is the appearance of impropriety and a conflict of interests.

Charm Thometz asked whether current managed care operators in Florida are involved. She noted that AmeriGroup, in particular, are not providing adequate services and have no local affiliations to answer complaints or grievances. In addition, people are limited in the amount of services they are getting and care givers are not at the discretion or choice of consumers or their families. Choice and control are absent. Ann Millan provided additional concerns from the example of AmeriGroup. Idelio Valdez raised the question over what managed care would mean to people living "as independently as possible." John answered that it is too early to know, but that he would like for Idelio and others to be part of the decision making process to protect their personal interests. Wynona made the suggestion that people getting involved in this issue be asked the question of whether there are any illnesses or disabling conditions that would not be covered for services under such HMO plans. It had been her experience that there are conditions that are excluded from receiving care because it will cost too much. Jean Sherman warned to make sure definitions of services used in comparison of the system advantages and disadvantages. She noted there are definitely differences in basic definitions. Suzanne Sewall made the point that there are major differences between services provided by non-profit and for-profit organizations. Finally, Charm provided a note that most HMOs focus on care of persons at the end of life, rather than providing life-long supports as is needed by people with developmental disabilities.

John stated that ARC/Florida board is looking at the potential of managed care, not that they are on the road to seeking implementation. Betty Kay Clements provided a note that her experience with managed care is full of pitfalls and that the FCC of Florida wants to be on record as not recommending adoption of managed care, but that there be exploration. She wanted it to go on record that the FCCF does not support any managed care program for individuals with developmental disabilities. The FCC wants to continue working with APD to improve and stabilize the present system. APD needs to be given the opportunity to put into action assessments and legislative mandates. FCCF wants to see funding of services not shareholders.

FUTURE

Wynona Holt

Wynona announced that she is now working for ARC/Florida and that John Hall has named her to be the statewide coordinator for their self-advocacy organization. To be part of the group, people need to fill out a survey form and give it/send it to Wynona (2898 Mahan Drive, Suite 1, Tallahassee, 32308). The form is enclosed as part of the 1st

newsletter that has just been sent out statewide. Membership is being developed now. The advocacy group is open to all ages. There has been no decision as to whether to include parents or other family members. Her contact information by email and telephone were also provided.

Ann Millan provided a challenge/opportunity asking Wynona to develop tracks like physical activity, eating well, relationships, etc. on subject that people who are receiving services would find interesting at CAFÉ' and similar conferences. The newsletter is planned to be sent every two months.

On October 9, 2007, from 10:00 to noon, Wynona will be holding a statewide conference call. It will be a long distance call. The phone number is 712-945-1601, pin number 534805. Wynona will send out an agenda via email and will provide copies for the IQC.

Wynona opened another subject and stated that speaking strictly as a self-advocate, not as part of her job. She pointed out that a lesson learned from her mother was to (1) make her own decisions and (2) use common sense. Hearing that APD had sent to the Governor and legislature a proposal to cut the provider rates, she "hit the roof." She noted that she recently found out that this had been done before but the Governor had turned it down. She noted that even before cuts it has been difficult to get decent services for people with developmental disabilities, and if this passes it will be putting people in danger because it will decline services even further. She provided an example of her personal situation as a way of describing how the cuts could negatively impact people who are on the waiting list for services. It is her perception that being on the waitlist costs people money and the ability to save and accumulate wealth.

Wynona asked Delmarva to pay attention to indicators of people in distress if and when the cuts go into effect and people are unable to find the supports to meet their needs. She believes people will remove themselves from the waitlist, as she intends to do, and to move out of state.

Wynona states she sees a way for APD to "win this battle." That would be teamwork. If the agency would team up and listen to advocates and work with them then it may work out. She stated that if we join together we will stand.

Delmarva General Update

Bob Foley & Sue Kelly

Bob Foley provided an update on Delmarva activities, much of which is data from the past year. (see handout)

As a beginning, Bob noted that Delmarva is currently fully staffed. Their staff had their annual training recently and staff are rejuvenated and ready for another year.

WiSCC updates were provided, noting that the new tool is going into effect October 1, 2007. The tool and procedures are changed to provide greater clarification. CORE updates noted

A data review provided a view of the 2006-07 contract year (year 6) activities and all review types as well as training sessions. Bob provided year 6 production results across Desk reviews, CORE consults, CORE TA, WiSCC Consults, Person Centered Interviews, WiSCC TA, and training and education numbers that were conducted across the year (see handout). Bob noted that the Desk Review scores have stayed fairly constant over the years, with a dip this year slightly that was probably due to focusing on fewer reviews of this type but choosing to review those providers showing lower results and/or Alerts or Recoupments in past years.

The CORE tool has changed during the year. The data is divided into (a) and (b) so the data can be seen in distinct categories (see handout).

Marcy DiGrazia noted that there are some safety related issues that Area Offices may want to have included in Alerts. Delmarva posed that it would be an easy change. Bob asked for input on what changes should be considered as raising their importance to the level of an Alert.

Bob also provided an update on the Waiver Support Coordination review and consult results (WiSCC). He provided data showing positive growth in the number of WSC providers who are attaining higher review scores. The data also shows some difference between agency and solo providers. Again, the same positive growth trend is seen in WSCs moving toward achieving and implementing scores. Bob raised the issue that the system challenge is to get providers at the “emerging” scoring range and below to be motivated to improve their overall scores. The group discussed best practices and training routinely offered to providers to assist them gain tools needed to improve.

Bob provided a slide showing the comparison of Achieving, Implementing, Emerging, and Not Emerging scores with the outcomes attained. Achieving = 16.1, Implementing 12.2, Emerging 9.5 and Not Emerging = 6.6. The question raised again is how to get the WSCs to attain skill sets to move to higher scores and therefore impact growth in outcomes for people.

Sue Kelly provided an overview of the Quality Improvement Study on Impact of Waiver Services on Personal Outcomes. She noted that we see the data that SE, SL and In-Home Supports all tend to produce the best outcome results, but that we did not know what other factors might be impacting the outcome results. This study was designed to control for other factors and determine what variables may be making an impact other than simply the provision of a specific type of service. (See handout)

The study used a regression analysis to show a close tie to the same WSC results noted above as higher scores equate to higher achievement of outcomes. The provision of better supports are related to achieving better outcomes. Supported employment tends to be the service that is positively associated with the achievement of the most overall outcomes or highest level of quality of life. Supported Living also is highly associated with creating better outcomes in 5 specific quality of life measures. Supported

employment and supported living is a particularly strong combination of services that together dramatically improves the achievement of overall outcomes in people's lives.

Recommendations that Sue presented included:

- (see handout)

Sue offered the IQC membership the opportunity to send her ideas for studies, either expanding existing studies or new ideas, to her for consideration for inclusion in this year's quality improvement studies.

Day 2

Welcome Back

Beverley DeStories

Beverley DeStories started the second day by asking people to sign in. She also noted there has been a request to study HMOs and managed care. She felt the IQC needs to be further informed so that members can advocate to the legislature on the issue. Winnie Gaylor said she had read the AHCA language and rather than a study it sounds as though they are being asked to put forth a proposal. Ann Millan noted the report from Arc of Florida has good information as a starting place. The IQC committee for this purpose: Sue Kelly, Bob Wessels, Suzanne, Patty Houghland, Julie Tyler (Delmarva), and Charm Thometz. Beverley asked that we have this as a lead agenda item for our next meeting.

Beverley also asked for discussion and a possible work group on the future of IQC. She noted the expensive nature of the meetings and suggested the possibility of holding all meetings in Tallahassee. Bob Wessels asked that we look at it from a budget standpoint and determine what would be the best financial choice. Jean Sherman agreed with the cost analysis. Ann Millan noted that people not able to be in attendance, particularly from AHCA, is too important not to have those people in attendance. She also noted the original reasoning for round robin meetings around the state was to allow people from around the state who are not IQC members to attend when in their area. This may have less value now than when IQC began. Beverley made the point that it is crucial for IQC continue as an organization. Work group members: Pamela Kyllonen, Ed Rousseau, will ask Wynona Holt, Bob Foley, the new chair of IQC (who is on all committees), Connie Dahn, Winnie Gaylor and Ann Millan.

A final issue discussed was the future of the PSA contracts. It was requested that this item be on the agenda for the next IQC and have Lorena Fulcher present on the subject. As part of the discussion Ann Millan asked that the piloted Support Planning process and David Alexander's work on the WSC revised training be addressed on the agenda. The discussion also evolved to the need for capturing the number of hours families/non-paid supports are provided to people receiving services. It was felt that this information is needed the legislature to see the full financial picture. Ann noted this information would be vital to knowing if families members passed away and dramatic changes were needed re: new financial need to support people now needing more paid supports.

Tabled for later date.

One Year Later

Conney Dahn

Conney told her story over the course of the last year as Florida's Teacher of the Year. She began by telling about her daughter, her life growing up and that she now benefits from supported employment, working in a department store.

Conney told of events across the past year, from meeting the President to going to space camp and learning new skills herself and talking to new and future teachers. She also has new technologies for her classroom. She has served on a variety of statewide committees. The best was sharing about her students and telling of raised expectations. She believes every person can work and gave examples of creating and meeting higher expectations. Conney is expanding inclusive environments (class, community, leadership, and disability awareness week through having students who are non-disabled working with students from her class). Developing better self-management, greater informed choices, growing parental involvement, are major points of her new emphasis. She provided stories from some of her students with examples of ways in which they have been included in everyday life as high school students and expectations for thereafter. Future projects focus on jobs and college opportunities for students with developmental disabilities for typical life experience post high school. Conney plans to make similar presentations across the coming year to try and raise expectations statewide.

Charm Thometz noted that transportation needs to be expanded to provide service to and from college. Ann Millan raised the issue that there is a drawback with students not receiving a regular diploma is a limitation/barrier to employment opportunities.

AHCA Updates

Pamela Kyllonen

Pam provided an update of statute requirements on limitations and elimination of services and on the status of implementing new tiers in the APD Waivers. Those issues have been sent to CMS for approval. CMS has contacted AHCA for more information about the assessment process and how services being eliminated would be covered by other services to meet people's needs. Pam gave the example of expanding companion services that would cover some of the support needs met by NRSS. Regarding loss of PCA Florida answered that it is working on a comprehensive assessment and how to ensure meeting people's needs identified through the assessment. Some of these issues related to PCA were explained, others are related to the lawsuit and not able to be answered. These and other answers were submitted to CMS for approximately 60 days, and they have 90 days to respond with approval or disapproval. Pamela explained that what is likely is CMS will approve, but that Florida must ensure we comply with federal guidelines to ensure approval.

Scott Barrish asked how long Florida's current Medicaid Waiver for developmental disabilities is in effect. Pam noted that it is effective until June '09 and will be extended for a year through June 2010. Pam went on to explain the planned tier system, noting that assessments will determine what level/tier a person would be included. A new service agreement will not be required for providers who will be providing services under one of the new tiers.

There have been changes to the FSL Waiver to allow flexibility for where people live and be eligible for services. Pam noted that the FSL Waiver will be expanded and that this had been announced by Jane Johnson, APD director. Pam noted that there are rule hearings coming up and urged people to watch for announcements if they would like to participate. Ann Millan raised a question over the recent rule workshop regarding changes that would limit contract providers for therapies to children. It is anticipated there will be a single handbook for all Waivers operated by APD and will include the FSL waiver. CDC+ will continue to be a separate waiver program. Pam noted it is planned to open the CDC+ waiver to additional people since achieving budget neutrality. No timetable is set for this to open.

Charm Thometz raised the question regarding changes to the handbook noting that "delay" of people with a developmental disability to move to institutions (page 1-9). She has asked this language to be struck and the IQC agreed that it is inconsistent with the vision of APD.

Florida received a "glowing report" from CMS on the Quality Management process for the APD program. Pam thanked the Delmarva team for their part in providing the quality assurance activities, technical assistance, reporting data and similar activities supporting quality management of the APD program. She noted the importance of the IQC as a stakeholder group providing input in to the quality management process. IQC members requested the CMS report be put on the AHCA and APD Website.

AOL & Steering Committee Presentations

Area 4

Terry Mothershed-Newman began by introducing Sherndina Moreland and Kerrie Wimberly as her cohorts as AQLs. She noted that University of North Florida has a program similar to the hopes that Conney Dahn described in her presentation. The program description she provided noted that the President of UNF has set aside 6 dorms for students with developmental disabilities (OCT program) and providing BLN links to OCT students to gain job experience, connections and potential jobs.

The AQL gang passed out handouts of data, forms and other materials from the Area 4 steering committee. Terry noted the steering committee is very invested and she pointed out that they see things changing as a result of their efforts and that this is very motivating. Terry explained the use of the data from Delmarva as a means of understanding what was not going well and why. The workgroups from the steering committees (3) did data analysis and prioritized what issues should be addressed first, etc. She provided examples and described dividing into groups and starting to ATAC.

One of the first things was to meet with providers and Delmarva and “get over” the adversarial relationships. A step toward this end was developing and posting newsletters, including an “Ask Delmarva” column. Another effort is a constant update of mailing/emaling lists to ensure that anybody and everybody gets the information. Another beginning place was to address People First Language – sometimes a very unpopular topic. Sherndina provided a personal point of reference as to why this is such an important, noting her son has a developmental disability and he and labels have accosted their family across time. Now that she works for APD she has written a letter on the importance of language – and received a response in 5 minutes acknowledging the need for our APD systems language to change. Jerry Martin has written an Area 4 newsletter addressing “Being Respectful of People with Developmental Disabilities.” Sherndina underscored the need to start using people’s names and stop using labels as consumer, client, and the disabled.

Terry showed an example of a health record that has begun to be used throughout Area 4, which started from the steering committee initiative. The purpose is to capture information on current and historical health related information that has never been available. The information is important for a variety of reasons and Terry pointed out some of those, noting how frequently people are ‘dropped off’ or move from one setting to another without anyone knowing this vital information – let alone a person’s nickname/what he/she likes to be called. This short format provides vital information from a quick reference format. It has been field tested and revised several times. Delmarva reviewers in Area 4 have been asked to look for this information in the person’s record across all providers. Regarding a question over whether it was passed through legal, Area 4 did pass through their legal counsel. She noted that re: confidentiality, this information is handled in the same way as support plans, implementation plans, etc., and noted the sensitivity to HIPAA regulations.

The steering committee has initiated a draft policy aimed at ensuring new provider enrollment includes sufficient information and competence. This has moved the Area from a one-day training to a four-day training. The next step may be competency based testing that requires a provider to attain a base level score before being approved to provide services. The Area is also addressing those provider reports that demonstrate given issues which are not being met. She noted that some of this would likely require decertification. Charm Thometz proposed that one answer would be to teach self-advocates and families to manage their own quality expectations for the services they receive. Terry noted that they are talking about doing just that by training people how to evaluate the services being received. Charm stated she would provide Area 4 with the materials she and others have developed.

Terry finished by providing the Area 4 new training guideline and a set of materials that dissects, by service, what training is needed. She gave credit to Kerrie Wimberly for having pulled these materials together.

APD Workgroup Updates

**Steve Dunaway, Jean Sherman, Charm Thometz,
& Charmaine Pillay**

Steve noted that we have received a data run from the Abuse Hot Line. He will send data and ask for questions by which to further sort the data.

Sue followed up with comments and recommendations from the Delmarva Quality Improvement Study on Abuse, Neglect and Exploitation. Her review of recommendations noted the need to address issues of past abuse, focus on women and children's abuse levels, to continue a drill down into data from Areas (as just discussed by Steve), include a formal validation process of people having competencies, skills and everyday implementation to reduce and prevent Abuse, Neglect and Exploitation.

Election of Vice Chair and Chair

Ed Rousseau

Ed read the bylaws related to electing a new chair. Elections were taken from the floor and Bob Wessels, Conney Dahn and Wynona Holt were nominated. Bob Wessels was elected. Conney and Wynona ran for Vice-Chair. Wynona was elected.

Pamela Kyllonen asked that the by-laws be considered for revision by the committee who will be reviewing the future of the IQC. Both Bob and Wynona will be on this workgroup as the new Chair and Vice-Chair.

Wrap Up

Beverley DeStories & Ed Rousseau

Ed reported that the next meeting of the IQC, December 12 and 13, may not be held in person, depending on available funding. The following meeting, will be in Tallahassee on March 19-20.