

**Florida Statewide Quality Assurance Program  
Year 9 Report  
July – December 2009  
Appendix 1**

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## Attachment 1 Internal Quality Assurance Report July - December 2009

The Florida Statewide Quality Assurance Program continues to implement internal quality assurance processes. The Quality Assurance plan involves many activities, some of which occur simultaneously.

### IT Initiatives

The Easton IT group continues to participate in the bi-weekly managers' meetings that address on going needs and issues for the WiSCC and CORE processes. They attend status meetings when appropriate.

### Bi-Weekly Conference Calls

Conference calls with all consultants on a bi-weekly schedule have continued throughout the six month extension period. Through this venue, Regional Managers ensure consultants receive consistent information regarding procedures, interpretations, and system updates. Managers reinforce and supplement this information through telephone and face-to-face contact with the QICs. Consultants are also provided with any additional information or changes related to the CORE, WiSCC, and Desk Review processes and, if necessary, clarification on different elements. The Florida Vice President of Disability Programs participates in the calls and provides any information from AHCA or APD relevant to the QA/QI processes. Feedback is solicited from consultants on any system or process modifications—possible impacts to them in the field.

Scenarios continued through the first two months of the expansion period to enhance the reliability of QICs. A scenario that is focused on one or two elements is distributed prior to the call. Each QIC “scores” the element and sends results to the Quality Assurance Regional Manager. Results are discussed on the call. However, these have been replaced with “trivia” questions emailed periodically to each consultant. Consultants send in answers and if incorrect, managers follow up with feedback.

The conference calls are also used as an avenue to update consultants on key Delmarva initiatives at the corporate level. This may include policy clarification and interpretation, when appropriate. Mandatory corporate training may also be accomplished at these times. Guest speakers are invited when possible. During a call in July, Steve Dunaway discuss the statewide Person Centered training that is part of the Real Choice Systems Grant.

In addition, when questions arise from analyzing the data, the conference calls are often used to gather anecdotal information from the QICs in an attempt to explain what we may be seeing in the data. Feedback from the consultants in this area has been very valuable in interpreting results from analysis of data for reports and studies. Information from the data is provided during these calls that can also be used during Quarterly meetings to guide Local APD initiatives.

Consultants continue to share Best Practices, which are ultimately posted to the FSQAP web site so the positive experiences/processes identified by consultants can be viewed by the public.

### **Reliability Assurances**

During the six month expansion period, Personal Outcome Measures (POM) reliability for QICs and managers continued to be maintained through The Council on Quality and Leadership (CQL). This occurs formally through the reliability process and through on site monitoring of five percent of the consults throughout the year. All consultants scheduled for formal reliability testing during the contract extension period went through and passed the reliability process.

Moving into the new FSQAP contract in January 2010, POM interviews will no longer be completed. Therefore, several consultants due for reliability in December did not go through the process and did not conduct POM interviews subsequent to their final date for valid reliability. This impacted fewer than 10 WiSCC interviews. However, the health and safety component of the WiSCC interview was completed.

Reliability activities for the CORE and WiSCC processes consist of two parts. First, the Regional Managers observe consultants while they are conducting consultations periodically throughout the year. They accompany each consultant to an onsite visit, attending all onsite activities. Second, formal reliability testing is to be completed once per year for each consultant. Delmarva's formal reliability procedures include the individual CORE interview, scoring the CORE tool (12 elements), and scoring the WiSCC tool (11 elements). During the extension period, seven consultants due for reliability were tested and passed.

### **Manager Review (Gold Standard)**

Delmarva Foundation managers continued to review and approve 100 percent of all WiSCC, CORE and PPR Desk Review reports prior to distribution. They ensure adequate documentation is present to justify scores. Direct feedback is provided to individual QICs as questions or concerns are identified, and more general concerns are addressed on the bi-weekly conference calls. Managers also continue the approved report reliability process where each manager reviews a sample of reports another manager has already approved in order to ensure the inter-rater reliability of the report

approval process. All reports reviewed this quarter were determined to have proper documentation to support determinations.

Another internal system related to this area is the Medical Peer Review system. Linda Tupper, the Nurse Reviewer, has the opportunity to correct any medical errors or issues identified with the content or data included in the report.

### **Manager Meetings**

Delmarva managers meet bi-weekly to discuss new or on going issues related to the FSQAP. IT staff from the Easton office also participates, enhancing communications between managers and staff in Easton who provide vital technical and database management support. These meetings provide a valuable forum for managers to track productivity, monitor contractual obligations, discuss any concerns or issues that have developed, and generally share information from across the state.

### **Florida Production Tracking Tool**

The Florida Production Tracing Tool (FPTT) was developed to help each consultant manage his/her own review volume projections and production, and to help managers monitor review activities of their consultants. The tool is maintained on the FSQAP web site and is available to consultants, managers, the Director, and the Vice President of Disability Related Programs. Each consultant has a page which lists monthly projections for each review type, as well as a list of specific reviews to be completed that month and the status of each review. The data are live and updated by the consultants on a regular basis, e.g., when the consultant schedules the dates for the review or marks the report as complete. Color coding helps managers identify when updates have been made and when reviews are off-schedule. Using this tracking tool has helped keep managers more up to date on the status of activity among the QICs and also helps the FSQAP Director compare projections to completed reviews in the context of final target numbers.

### **Provider Feedback Surveys**

Distribution of the revised Provider Feedback Survey began in March 2008. Providers can complete the survey online, with a link from the FSQAP website. Or they can download a hard copy of the survey, complete it, and mail or fax it to Delmarva. Consultants also have a copy they hand to the provider. The Quality Assurance Manager reviews comments and results from the survey on a quarterly basis, providing feedback to consultants when and if necessary. Overall results have consistently been extremely positive. A copy of the survey and summary of results from Year 8 are included as Attachments 6 and 7 to this Appendix.

### **Medical Peer Review**

The Medical Director completes a quality assurance review on a random selection of five percent of individuals who received a Personal Outcome Interview. The Medical Director reviews the claims data, summary comments of the consultants, and the decisions of the nurse reviewer. Results of these reviews continue to be 100 percent in accord with the decisions of the nurse reviewer.

### **Sampling Reports for Billing**

Processes are followed to ensure no consults or reviews are billed in error. The database manager searches the Health elements in the POM interviews to ensure all seven have been completed and the Regional Manager with IQAP responsibility samples five percent of reports to ensure that reports for which the program has billed are being posted as required. During the Year 9 extension period all billed reports had been appropriately posted.

## Attachment 2: CORE Results and Minimum Service Requirement Elements

**(These descriptions are summaries. Please go to the Delmarva website and review the CORE tools for a complete description of each element ([http://www.dfmc-florida.org/provider/resources/core\\_wiscc\\_tools.htm](http://www.dfmc-florida.org/provider/resources/core_wiscc_tools.htm))**

### CORE (Implemented March 13, 2007)

#### CORE Results Elements

1. Person Directed Planning
2. Health and Safety
3. Free from Abuse, Neglect and Exploitation
4. Rights
5. Choice
6. Community Life
7. Collaboration
8. Achieving Results

#### Minimum Service Requirements

9. Level II Background Screening
10. Provider/staff Training
11. Service Authorization/Billing as Authorized
12. Maintains Billing Documentation

### Attachment 3: WiSCC Results and Minimum Service Requirement Elements

**(These descriptions are summaries. Please go to the Delmarva website and review the CORE tools for a complete description of each element ([http://www.dfmc-florida.org/provider/resources/core\\_wiscc\\_tools.htm](http://www.dfmc-florida.org/provider/resources/core_wiscc_tools.htm)))**

#### WiSCC Results Elements

1. Waiver Support Coordinators (WSC) have an effective method for learning about the people who are receiving their supports and services.
2. The WSCs are aware of the health, safety and well-being of the people they serve and advocate and coordinate in concert with them to support and address identified needs or issues.
3. The support plan is developed with the person and is reflective of the communicated choices and preferences that matter most to the individual.
4. The WSCs have evaluated the effectiveness of all supports for each person they serve and have implemented strategies to address any barriers that have been identified.
5. The WSC have facilitated educational opportunities, practical experiences, and exposure to ideas (EEE) to increase opportunities for choice and promote self-determination.
6. The WSCs have facilitated the accomplishment of positive results that reflect communicated choices and preferences that matter most to the person.

#### Minimum Service Requirement Elements

7. Level 2 background screenings, and five-year re-screenings, are completed for all direct service employees.
8. The WSC has attended required training.
9. WSC services and all other service providers are authorized by an approved cost plan and service authorization (or purchasing plan for individuals on CDC Plus).
10. The provider bills for the service at the authorized rate.
11. The provider maintains documentation required for billing.

**Attachment 4**  
Training, Education, and Liaison  
Contacts and Meetings  
July - December 2009

Begin Date	End Date	Description of Activity	Area	Participants and Topic
07/01/09		MCM Conference Call	All	Statewide Nursing Conference Call attended by Linda Tupper
07/10/09		Quarterly Meeting	7	Nicole Francis, Chris Crusciel, Sherndina Moreland, Terry Mothershed Neuman, Kerrie Wimberly Pledger, Gary Baird, Janice Newman, Beth Townsend; Delmarva contract extension for 6 months; collaboration between MFCU and MPI and Area 4 office; provider updates; data/trends; Steering Committee update; training update
07/14/09		Quarterly Meeting	9	Meeting with Frank Houston, with APD, Michelle Ceville, Noeline Coore, and Carol McDuff with Delmarva. Discussed APD activities, WiSCC and CORE trends as well as Area data.
07/16/09		Status Meeting	Tallahassee	Delmarva staff met with APD and AHCA to provide an update to the status of the contract.
7/17/2009		Quarterly Meeting	12	Sharon Jennings, Jeff Coleman, Merari Perez, Andrea Currence, Rosario Taylor, Carol Solomon, Mary Martin, Cheryl King, Francie Young, Beth Townsend; Delmarva contract extension for six months; QSI update; provider changes; data/trends
07/20/09		Quarterly Meeting	4	Charlene Henry, Gary Baird, Diveka Anderson, Sandra Mills, Linda Basbagill, Patrick Burwell, Vanessa Carter, Ed deBardeleben, Sheila Butler, Beth Townsend, Linda Cleary; Delmarva contract extension; APD office personnel changes; provider changes; data/trends; training
08/05/09		MCM Conference Call	All	Statewide Nursing Conference Call attended by Linda Tupper
8/9/2009		Quarterly Meeting	15	Peter Karlan, Sandra McCain, Brad Gradske and various APD staff. Michelle Ceville, Noeline Coore, and Carol McDuff with Delmarva. Discussed APD and Delmarva updates; WiSCC and CORE trends; data trends; and training.
8/20/2009	08/24/09	National DDNA Board Meeting		Attended by Linda Tupper

8/20/2009		Status meeting	Tallahassee	Delmarva staff met with APD and AHCA to provide an update to the status of the contract.
9/2/2009		MCM Conference Call	All	Statewide Nursing Conference Call attended by Linda Tupper.
09/02/09		Quarterly Meeting	14	Delmarva attendees included Christie Gentry. APD attendees included Melody Taylor, Connie Miller, Carla Bettis and Eric Olsen (AA). Topics discussed included Delmarva Staffing updates, Delmarva contract status, APD staffing updates, follow-up from previous meeting, CORE and WiSCC updates, Data, etc.
09/09/09		Quarterly Meeting	23	Delmarva attendees included Kristin Allen, Chris Kulaga, Trudy Acevedo, Robyn Moorman, Andrea Thornley and Steve Baylis. APD attendees included Brenda Porter, Harold Gross, Marcia DeGrazia, Anne Hendon, David Lepere, Kim Wojick and Kathleen Cisek-Freeman. The Area Administrator was not present. Topics discussed included Delmarva and APD Staffing updates, follow-up from previous meeting, FBI Clearance vs. Exemption, Desk review BGS reporting protocol, Incident Reports Reporting and CORE and WiSCC updates.
09/09/09		Quarterly Meeting	10	Martha Martinez, David Gillis, Bonnie Florom, Heidi Torro, and several more staff with APD. Avril Wilson, Jose Navarro, Anna Quintyne, Noeline Coore, and Carol McDuff with Delmarva. Discussed APD and Delmarva updates; WiSCC and CORE trends; data trends; and training.
9/10/2009		Mid-Florida DDNA Meeting		Area 7, 23, and 8 nurses participated in this training on "Aging with Developmental Disabilities" provided by Elizabeth Perkins, ARNP, PhD. Linda Tupper attended.
09/16/09		DD programs inter rater reliability call	All	Christine Stevenson, Menorca Collazo, Beth Townsend; sharing ideas for promoting inter rater reliability among the DD programs in Delmarva
09/20/09	09/23/09	HCBS Conference		Bob Foley and Diane McComb attended the HCBS Conference in Denver, attending sessions on a number of quality related topics.

09/21/09		Quarterly Meeting	3	Theresa Skidmore, Gwen Williams and six APD staff members from Area 3 were in attendance. APD reported on provider changes and concerns in the Area. Data for FY 08/09 were reviewed in detail, trends, strengths and areas for improvement were discussed. Additional agenda items included upcoming CORE & WiSCC consults, training opportunities for 6 month extension period and AQL activities.
09/21/09		Quarterly Meeting	13	Theresa Skidmore, Kathy Haydt and three APD staff members from Area 13 were in attendance. APD reported on provider changes and concerns in the Area. Data for FY 08/09 were reviewed in detail, trends, strengths and areas for improvement were discussed. Additional agenda items included upcoming CORE & WiSCC consults, training opportunities for 6 month extension period and AQL activities.
09/22/09		Quarterly Meeting	1	Delmarva staff Charmaine Pillay and Kathy Harkleroad met with APD staff and provided an overview of consult activities for the previous quarter. Data were reviewed and best practices discussed.
09/23/09		Quarterly Meeting	11	This meeting had to be rescheduled from 7/15/09. Kirk Ryon with APD. Janet Tynes, Jose Navarro, Berta Santos, Wanda Nitiss, and Carol McDuff with Delmarva. Discussed APD and Delmarva updates; WiSCC and CORE trends; data trends; emerging/not emerging provider list; the Galleria; and training.
09/25/09		Quarterly Meeting	2	Delmarva Staff Charmaine Pillay, Sandra Rowe and Kara Cowart met with APD staff. Best and ineffective practices were discussed. Data were reviewed and recommendations made for assisting providers to render improved services.
09/30/09		Quarterly Meeting	8	Delmarva staff attendees: Krista McCracken and Kristin Allen. APD attendees included Todd Ryan, Jeff Smith, Marcia Vollmer (AA) and Diane Whisman. Topics discussed included Delmarva and APD Staffing updates, follow-up from previous meeting, Issues with AHCA Provider monitoring and CORE/WiSCC updates. The current PPR to do list was reviewed and the Area identified which providers they see as a priority for review.
10/07/09		MCM Conference Call	All	Statewide Nursing Conference Call attended by Linda Tupper

10/07/09		Transition Meeting	2	Delmarva Staff met with AHCA staff, Kelly Hensley, to discuss the transition process if the contract should be awarded to another entity.
10/09/09		Quarterly Meeting	7	Merari Perez, Brenda McConnell, Grisela Hernandez, Andrea Currence, Cheryl King, Beth Townsend, Carol Solomon, Sharon Jennings, Mary Martin; QSI update; provider changes; FDDC examination of definitions for living situations; data/trends; waitlist update; Area 7 sharing Delmarva reports with MPI and MFCU
10/13/09		Status Meeting	2	Delmarva staff met with AHCA and APD to discuss the quality assurance activities..
10/16/09		Quarterly Meeting	12	Ed deBardeleben, Dylan Gale, Sandra Mills, Diveka Anderson, Charlene Henry, Shiela Butler, Beth Townsend; provider update; data/trends; training; quarterly waiting list meetings
10/22/2009		Training	23	Training and education was provided to Area 23. The title of the training was "How to Prepare for Your Consultation". Kristin Allen and Beth Townsend.
10/23/09		Quarterly Meeting	2	Delmarva staff, Charmaine Pillay, attended the I-Budget meeting along with individuals receiving services, family members, providers, and APD and AHCA staff.
10/28/2009		Training	14	Training and education was provided to Area 14. Per Area 14's request the training topic was "Functional Documentation". Kristin Allen presented the training.
11/04/09		MCM Conference Call	All	Statewide Nursing Conference Call Linda Tupper attended
11/05/09		Training	8	Training and education was provided to Area 8 on Quality Management Systems. Kristin Allen and Beth Townsend presented the training. Other Delmarva staff in attendance included Robyn Moorman and Krista McCracken.
11/09/09	11/11/09	NASDDDS Annual Conference		Bob Foley and Diane McComb attended the NASDDDS Conference in Alexandria to stay current on issues impacting state DD programs.
11/19/09		Status Meeting		Meeting with AHCA and APD representatives to review the status of the Florida contract.
11/20/09		Training	12	Training and education was provided to Area 12. Per Area 12's request the training topic was "Functional Documentation". Kristin Allen and Beth Townsend presented the training. Also in attendance was Sheila Butler.

11/23/09		Quarterly Meeting	4	Sherndina Moreland, Nicole Francis, Conchetta Wilcox, Chris Crusciel, Cathy Guiry, Janice Newman, Beth Townsend; ABC data checks by Delmarva implemented; FSQAP claims data including units billed; APD Connects to be piloted; CDC +; Cost Plan Rebasing; Tranquil Pines proposed; data/trends
11/23/09		Training	11	Training and education was provided to Area 11 on A Personal Preventive Health Plan. Linda Tupper presented the training.
12/01/09		Training	13	Training and education was provided to Area 13. The training topic was "The Wide World of Training". Kristin Allen, Theresa Skidmore and Robyn Moorman presented the training.
12/02/09		Quarterly Meeting	14	Delmarva attendees included Kristin Allen and Christie Gentry. APD attendees included Melody Taylor, Connie Miller, Carla Bettis, Linda Gibson, Kathleen Rossetter and Eric Olsen (AA). Topics discussed included Delmarva Staffing updates, APD staffing updates, follow-up from previous meeting, CORE and WiSCC updates, Data, etc.
12/03/09		Quarterly Meeting	15`	Peter Karlan, Sandra McCain, Brad Gradske and various APD staff and Carol McDuff with Delmarva. Discussed APD and Delmarva updates; data trends; and training.
12/03/09		Training	15	Training and education was provided to Area 15 on Mastering the Minimum Service Requirements". Kristin Allen and Carol McDuff presented the training.
12/07/09		Quarterly Meeting	8	
12/09/09		Quarterly Meeting	23	

## Attachment 5 Health and Behavioral Questionnaire

Have you seen a doctor in the past year? Y/N  
What kind of doctor?

- |                     |                                    |
|---------------------|------------------------------------|
| 1. neurology        | 11. podiatry                       |
| 2. psychiatry       | 12. dermatology                    |
| 3. primary care     | 13. gynecology                     |
| 4. gastroenterology | 14. urology                        |
| 5. cardiology       | 15. orthopedics                    |
| 6. endocrinology    | 16. neurosurgery                   |
| 7. pediatrician     | 17. ear/nose/throat                |
| 8. hematology       | 18. oncology                       |
| 9. rheumatology     | 19. optometry/ophthalmology        |
| 10. allergy         | Add all others to the health notes |

2a. Do you currently have a dentist? Y/N

2b. Have you been to the dentist in the past year? Y/N

3. Have you been treated in the emergency room this past year? Y/N  
If yes, add when and why to the health note

4. Have you been admitted to the hospital this past year? Y/N

If yes, add when and why to the health notes

5. Do you take any medicines? Y/N

If yes, what ones?

- |                                |                               |
|--------------------------------|-------------------------------|
| 1. Abilify (Aripiprazole)      | 26. Lopressor (Metoprolol)    |
| 2. Adderall                    | 27. Mellaril (Thioridazine)   |
| 3. Anafranil (Clomipramine)    | 28. Metformin (Glucophage)    |
| 4. Ativan (Lorazepam)          | 29. Mysoline (Primidone)      |
| 5. Baclofen (Liorasal)         | 30. Neurontin (Gabapentin)    |
| 6. Buspar (Buspirone)          | 31. Norvasc (Amlodipine)      |
| 7. Catapres (Clonidine)        | 32. Paxil (Paroxetine)        |
| 8. Celexa (Citalopram)         | 33. Phenobarbital             |
| 9. Cogentin (Benztropine)      | 34. Pravachol (Pravastatin)   |
| 10. Concerta (Methylphenidate) | 35. Prevacid (Lansoprazole)   |
| 11. Depakote (Divalproex)      | 36. Prinivil (Lisinopril)     |
| 12. Desyrel (Trazadone)        | 37. Prozac (Fluoxetine)       |
| 13. Detrol (Tolterodine)       | 38. Risperdal (Risperidone)   |
| 14. Dilantin (Phenytoin)       | 39. Ritalin (Methylphenidate) |
| 15. Effexor (Venlafaxine)      | 40. Seroquel (Quetiapine)     |
| 16. Geodon (Ziprasidone)       | 41. Symmetrel (Amantadine)    |

- |                            |                                |
|----------------------------|--------------------------------|
| 17. Haldol (Haloperidol)   | 42. Synthroid (Levothyroxin)   |
| 18. Inderal (Propranolol)  | 43. Tegretol (Carbamazepine)   |
| 19. Keppra (Levetiracetam) | 44. Thorazine (Chlorpromazine) |
| 20. Klonopin (Clonazepam)  | 45. Topamax (Topiramate)       |
| 21. Lamictal (Lamotragine) | 46. Vasotec (Enalapril)        |
| 22. Lasix (Furosemide)     | 47. Wellbutrin (Bupropion)     |
| 23. Lexapro (Escitalopram) | 48. Xanax (Alprazolam)         |
| 24. Lipitor (Atorvastin)   | 49. Zoloft (Sertraline)        |
| 25. Lithium (Eskalith)     | 50. Zyprexa (Olanzapine)       |

Add all others to the health notes

6. Do you have any problems with your health? Y/N  
If yes, add what to the health notes
7. In the past year is your health (better / worse / the same)?
8. Do you currently receive the following?
- |                          |     |
|--------------------------|-----|
| a. Speech therapy?       | Y/N |
| b. Occupational therapy? | Y/N |
| c. Physical therapy?     | Y/N |
| d. Nutritional supports? | Y/N |
| e. Respiratory therapy?  | Y/N |
| f. Massage therapy?      | Y/N |
9. Does the individual state a need for additional services/supports from?
- |                            |     |
|----------------------------|-----|
| a. Speech therapy?         | Y/N |
| b. Occupational therapy?   | Y/N |
| c. Physical therapy?       | Y/N |
| d. Nutritional evaluation? | Y/N |
| e. Respiratory therapy?    | Y/N |
| f. Massage therapy?        | Y/N |
10. Does the individual appear to need or state the need for:
- |                                     |     |
|-------------------------------------|-----|
| a. Speech therapy evaluation?       | Y/N |
| b. Occupational therapy evaluation? | Y/N |
| c. Physical therapy evaluation?     | Y/N |
| d. Nutritional evaluation?          | Y/N |
| e. Respiratory therapy evaluation?  | Y/N |
| f. Massage therapy evaluation?      | Y/N |
| g. Oral motor evaluation?           | Y/N |
11. Does the individual appear to need or state the need for:
- |                                   |     |
|-----------------------------------|-----|
| a. Adaptive equipment evaluation? | Y/N |
| b. Environmental modifications?   | Y/N |

12. Does the individual appear to need or state the need for:
- a. Male preventative health care? Y/N
  - b. Female preventative health care? Y/N
  - c. Vision exam? Y/N
  - d. Hearing exam? Y/N
- 13a. Does the individual take seizure medication?
- 13b. Is this medication prescribed by the primary care physician?
- 14a. Does the individual take behavior/psychiatric medication?
- 14b. Is this medication prescribed by the primary care physician?
15. Does the individual take medication for chronic conditions such as: diabetes, hypertension, thyroid, heart, gastrointestinal disorders, blood disorders, or respiratory disorders?
16. Does the individual appear to require or state the need for additional information/education about medications?
- 17a. Do behaviors exist that have not been addressed with a behavior review?
- 17b. Does the individual reside in a behavioral home without a current behavior review on file?
- 17c. Does the family/etc. indicate that a behavior review is needed?
- 18a. Has a behavior review recommended behavioral services that are not in place?
- 18b. Do behaviors currently exist that are not addressed in a behavior plan?
- 18c. Does a behavior plan exist without appropriate professional oversight?
- 18d. Does the family/etc. indicate that behavioral services or supports are needed?
19. Does any implemented behavior plan require a level of approval that it has not yet been received?
- 20a. Does the individual have unresolved issues from abuse, grief, interpersonal relationships?
- 20b. Does the individual/supports indicate the need for mental health counseling/support?
- 21a. Does the individual have Medicare?
- 21b. Does the individual have private insurance?
- 21c. Does the individual private pay?

**NOTE: For any additional health concerns or questions please call Linda in the Tampa office 1-866-254-2075 or on her cell 813-495-0147.**

### Attachment 6: Provider Feedback Survey

#### CORE/WiSCC FEEDBACK SURVEY

This survey seeks your feedback on Delmarva’s CORE and WiSCC Consultation process. Your feedback is very important to us. Thank you for participating.

Type of Provider (Chose One): Solo  Agency   
 Waiver (Choose all that apply): DD  FSL  Both   
 Type of Consultation (Chose One): CORE  WiSCC   
 Event Type (Chose One): Annual  Follow Up with Technical Assistance

APD Area \_\_\_\_\_ Month/Year of Consultation (MM/YYYY) \_\_\_\_\_

<b>Please check the box that best defines your agreement with the statements below.</b>	Strongly Agree	Somewhat Agree	Neither	Somewhat Disagree	Strongly Disagree
1. The consultation identified the strengths of your organization.					
2. Feedback you received will help you provide supports and services that meet the desired outcomes of the individuals you serve.					
3. The consultation addressed the barriers, challenges, and/or needs of your organization.					
4. The consultant interacted with you (and your staff) in a professional and collaborative manner.					
5. The consultant interacted with the people you serve in a professional manner.					
6. You and your consultant brainstormed ways to enhance your services.					
7. Would you feel comfortable contacting the consultant for more brainstorming and technical assistance?	<b>Yes</b>		<b>No</b>		
Do you want someone to contact you? If yes, please indicate phone number or email and the subject.					
Phone # _____ Email _____ Subject _____					
<b>Comments:</b>   					

Return your Survey using one of the following methods:

Mail: Delmarva Foundation 2039 Centre Pointe Blvd., Suite 202 Tallahassee, Fl. 32308	Fax: Re: Provider Survey Delmarva Foundation (850) 878-2958	Email: Re: Provider Survey <a href="mailto:florida@dfmc.org">florida@dfmc.org</a>
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February 2008

**Attachment 7: Provider Feedback Survey Results**

<b>Results Provider Feedback Survey</b>							
<b>July 2008 - June 2009</b>							
<b>Average Results by Consult Type</b>				<b>Consultant interacted with you/staff in professional/collaborative manner.</b>			
<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>	<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>
<b>CORE</b>	93.9%	6.1%	919	<b>CORE</b>	97.7%	2.3%	133
<b>WiSCC</b>	91.1%	8.9%	744	<b>WiSCC</b>	96.3%	3.7%	107
<b>Total</b>	92.7%	7.3%	1,663	<b>Total</b>	97.1%	2.9%	240
<b>Consultation identified strengths of your organization.</b>				<b>Consultant interacted with people you serve in professional manner.</b>			
<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>	<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>
<b>CORE</b>	93.9%	6.1%	132	<b>CORE</b>	97.7%	2.3%	132
<b>WiSCC</b>	94.2%	5.8%	104	<b>WiSCC</b>	96.3%	3.7%	108
<b>Total</b>	94.1%	5.9%	236	<b>Total</b>	97.1%	2.9%	240
<b>Feedback will help you provide supports and services that meet desired outcomes of individuals you serve.</b>				<b>You and your consultant brainstormed ways to enhance your services.</b>			
<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>	<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>
<b>CORE</b>	96.2%	3.8%	130	<b>CORE</b>	93.8%	6.2%	130
<b>WiSCC</b>	91.4%	8.6%	105	<b>WiSCC</b>	91.5%	8.5%	106
<b>Total</b>	94.0%	6.0%	235	<b>Total</b>	92.8%	7.2%	236
<b>Consultation addressed barriers, challenges, and needs of your organization.</b>				<b>Would you feel comfortable contacting the consultant for more brainstorming and Technical Assistance?</b>			
<b>Consult Type</b>	<b>Strongly Agree/ Agree</b>	<b>Strongly Disagree/ Disagree</b>	<b>Total</b>	<b>Consult Type</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>CORE</b>	93.8%	6.3%	128	<b>CORE</b>	84.3%	15.7%	134
<b>WiSCC</b>	93.4%	6.6%	106	<b>WiSCC</b>	75.0%	25.0%	108
<b>Total</b>	93.6%	6.4%	234	<b>Total</b>	80.2%	19.8%	242