

LONG RANGE PROGRAM PLAN

Charlie Crist,
Governor
..
Jim DeBeaugrine,
Director
..
4030 Esplanade
Way,
Suite 380
Tallahassee,
Florida
32399-0950
..

Agency for Persons with Disabilities
Tallahassee, FL
September 30, 2010

Jerry L. McDaniel, Director
Office of Policy and Budget
Executive Office of the Governor
1701 Capitol
Tallahassee, Florida 32399-0001

JoAnne Leznoff, Council Director
House Full Appropriations Council
221 Capitol
Tallahassee, Florida 32399-1300

(850) 488-4257
Fax:
(850) 922-6456
Toll Free:

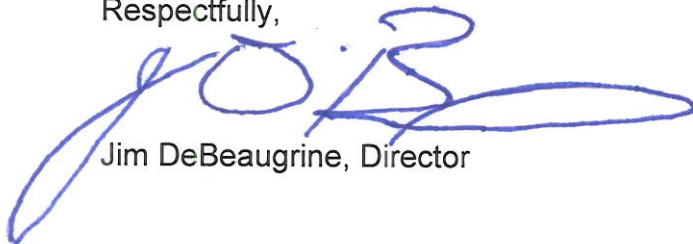
David Coburn, Staff Director
Senate Policy and Steering Committee on Ways and Means
201 Capitol
Tallahassee, Florida 32399-1300

(866) APD-CARES
(866-273-2273)

Dear Directors:

Pursuant to Chapter 216, Florida Statutes, the Long Range Program Plan (LRPP) for the Agency for Persons with Disabilities is submitted in the format prescribed in the budget instructions. The information provided electronically and contained herein is a true and accurate presentation of the Agency's mission, goals, objectives and measures for the Fiscal Year 2011-12 through Fiscal Year 2015-2016. This submission has been approved by Jim DeBeaugrine, Director of the Agency for Persons with Disabilities.

Respectfully,



Jim DeBeaugrine, Director



agency for persons with disabilities
State of Florida

Long Range Program Plan

**Fiscal Years 2011-2012
through 2015-2016**



**Jim DeBeaugrine,
Director**

**Charlie Crist,
Governor**



Mission Statement

The Agency supports persons with developmental disabilities in living, learning and working in their community.

Goals

1. Improve the quality of life of all persons with developmental disabilities by the development and implementation of community-based residential placements, services, and treatments.
2. Improve the quality of life of people with developmental disabilities living in Developmental Disabilities Centers.



Agency Objectives

Home and Community-Based Services

1. Ensure that persons with developmental disabilities receiving services are free from abuse, neglect and exploitation, connected to natural support networks, treated fairly, have access to community resources, are able to exercise their rights, and have the best possible health.
2. Increase the number of people with developmental disabilities who are actively employed in their community by providing services and supports to facilitate their employment.
3. Increase the number of people served in community settings through the Developmental Disabilities Home and Community-Based Services Waivers and reduce the number of people on the wait list for waiver services through the continued implementation of utilization review and cost control measures.
4. Increase the number of people with developmental disabilities that live independently in homes of their own within their communities.



Agency Objectives

Developmental Disabilities Public Facilities

5. Maintain a safe environment for people living in Developmental Disabilities Centers.
6. Ensure that individuals with developmental disabilities receiving services in Developmental Disabilities Centers are free from abuse, neglect and exploitation, connected to natural support networks, treated fairly, have access to community resources, are able to exercise their rights, and have the best possible health.
7. Provide competency restoration and habilitative training in a secure setting to adults found incompetent to proceed to trial on felony charges.
8. Reduce reliance on public institutions for Long-Term Care services.

Agency Service Outcomes and Performance Projections Tables

Home and Community-Based Services

Outcome: Percent of persons receiving services who meet the seven foundational outcomes of the Personal Outcome Measures.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
15%	NA	NA	NA	NA	NA

This measure is specific to individuals served by the Agency for Persons with Disabilities (APD) who live in community settings. The Agency eliminated the use of the *Personal Outcome Measures* in 2009 as part of improvements to quality management systems and data for this outcome is unavailable. The Agency joined more than 30 other states in the nation by adopting the *National Core Indicators*.¹ This change enables APD to compare Florida's performance with national trends. The Agency intends to select elements from this tool as measures of the health, safety and well being of individuals served by the Agency. Therefore, new performance projections are not applicable until new measures are established.

Outcome: Percent of people who are employed in integrated settings.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
31%	25%	29%	33%	36%	39%

Outcome: Number of people served in the community (not in private ICF/DDs).*

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
45,521	56,891	60,304	63,923	67,758	71,823

*Data reflects individuals who meet the criteria for APD services under Ch. 393, F.S., but may not necessarily be eligible for Medicaid. This number also includes individuals on the wait list.

Outcome: Number of persons with disabilities served in supported living.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
5,066	4,351	4,743	5,170	5,635	6,172

¹ Defined on page 14 of the Trends and Conditions Statement document

Developmental Disabilities Public Facilities

Outcome: Annual number of significant reportable incidents per 100 persons with developmental disabilities living in developmental services institutions.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
21	21	21	21	21	21

Outcome: Percent of persons receiving services who meet the seven (7) foundational outcomes of the Personal Outcome Measures.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
15%	NA	NA	NA	NA	NA

This measure is specific to individuals living in Developmental Disability Centers (DDCs). The Agency eliminated the use of the *Personal Outcome Measures* in 2009 as part of improvements to quality management systems and data for this outcome is unavailable. The Agency joined more than 30 other states in the nation by adopting the *National Core Indicators*. This change enables APD to compare Florida's performance with national trends. The Agency intends to select elements from this tool as measures of the health, safety and well being of individuals served by the Agency. Therefore, new performance projections are not applicable until new measures are established.

Outcome: Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
368	380	390	400	410	420

Outcome: Number of adults receiving services in developmental services institutions.

Baseline FY 2007/2008	FY 2011/2012	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016
1,088	1,000	1,000	1,000	1,000	1,000



Linkage to Governor's Priorities

Protecting Our Communities: Facility-based services provided by APD contribute to community safety by treating, training, and caring for individuals who could potentially be a danger to themselves and others.

Strengthening Florida's Families: The Agency strengthens families through person-centered supports that allow individuals with developmental disabilities to remain in their communities or live with their families. This enhances their quality of life and ability to participate in meaningful activities. In addition, with the closure of the Gulf Coast Developmental Disabilities Center on June 30, 2010, APD assisted in the transition of a large number of residents from an institutionalized setting into living and participating in their surrounding communities.

Keeping Florida's Economy Vibrant: The Agency keeps the economy vibrant by providing individuals with developmental disabilities access to supports to obtain competitive employment. APD also recruits organizations and businesses to create job opportunities for individuals with developmental disabilities, which improves their living situation and increases the number of working Floridians generating economic activity in the state.

Success for Every Student: The Agency contributes to the success of students with developmental disabilities by providing access to supports not available from the state school system. Meeting these special needs allows these students to focus on acquiring skills and knowledge to reach their full potential.

Keeping Floridians Healthy: The Agency helps keep Floridians healthy by providing access to quality medical services and specialized care for individuals with developmental disabilities. The Agency's Zero Tolerance Initiative provides a means to combat sexual violence, abuse, neglect, and exploitation of individuals with developmental disabilities. Additionally, APD is implementing a variety of activities to improve the dental health of people with developmental disabilities.

Protecting Florida's Natural Resources: The Recycling Program at Marianna Sunland, one of APD's two remaining Developmental Disabilities Centers, handles recycling for APD's Central Office as well as several other businesses in the Marianna area. This not only benefits the environment, but also provides Sunland residents with skills they may use to gain employment once they are placed in a community setting.

Trends and Conditions Statements

Agency Primary Responsibilities and Current Priorities

Pursuant to Chapter 393 and Part III of Chapter 916, Florida Statutes, the Agency for Persons with Disabilities (APD) works in partnership with local communities to support Floridians with autism, cerebral palsy, mental retardation, spina bifida, and Prader-Willi Syndrome. The Agency serves approximately 30,000 individuals each month through programs that support community living and serves another 1,000 at the Agency's two developmental disabilities centers that provide around-the-clock care and supervision. Approximately 19,000 individuals also receive limited supports while on the wait list for waiver enrollment.

Since being confirmed by the Senate as the Director of the Agency for Persons with Disabilities during the 2009 Legislative Session, Director Jim DeBeaugrine has focused on program sustainability, as rising demands for services continue to strain the State budget in a difficult economic climate. The following information provides an overview of APD's program services and activities that have been approved by the Florida Legislature for cost containment, as well as the implementation of a new model to better match service needs to available funding.

What Led the Agency to Select Its Priorities

In late 2009, APD developed a team of professional executives to lead the Agency. This change has provided the Agency with the opportunity for a fresh perspective and focus on priorities. The Deputy Director of Operations has established developing service alternatives by creating partnerships with community organizations and businesses as a priority. The Deputy Director of Budget and Planning is engaged in building technological capacity to enhance program services and improve efficiency. Additionally, the General Counsel is streamlining legal and hearing processes to quickly resolve client issues.

Subsequent to the change in leadership, the Agency also turned its focus to creating a shared vision with stakeholders. A "Living the Mission" Leadership meeting was held in May of 2010 and consisted of breakout-sessions with consumers, providers, and staff. The goal of this meeting was to listen, identify, and discuss issues affecting the lives of individuals with developmental disabilities. Comments from these sessions were compared to an earlier analysis of strengths, weaknesses, opportunities and threats. These comments are summarized below:

Strengths and Opportunities

- Florida provides a comprehensive array of services and a high ratio of providers to individuals with developmental disabilities compared to other states.
- A newly launched web-based system could serve as the basis for streamlining business processes.
- Information collected in the Allocation, Budget and Contract Control (ABC) system, and through other sources, creates the potential to data mine for more informed decision-making.
- Dedicated, team-spirited employees have built strong relationships with individuals served, their families, and other governmental agencies.
- Ongoing stakeholder participation in the iBudget Florida program has been informative in developing a system to better calculate client funding needs.
- The Agency has staff skilled in developing public-private partnerships that can be used to create service alternatives in communities and help reduce over reliance on Medicaid-funded services.

Weaknesses and Threats

- The current service delivery system is not financially sustainable in the present economic climate.
- Increasing demands for services continue to contribute to the number of individuals waiting for services, strain financial resources, and overtax a dwindling workforce.
- Inherent weaknesses in the design of community-based services and Medicaid's on-demand provider invoicing are overwhelming to clients.
- The Agency would benefit from an increase in authority, infrastructure, and technology in order to improve customer service and accountability.

How the Agency Will Generally Address the Priorities Over a Five-Year Period

The Agency has already begun to use its strengths to reduce threats, address weaknesses and seek opportunities to act on stakeholder recommendations. To that end, the web-based APD Management System (AMS), launched in July 2010, is tracking activities related to four strategic priorities for the 2010 – 2011 fiscal year. These strategic priorities are listed as follows:

1. Improve client satisfaction through better customer service.
2. Foster sustainability through reform of the Medicaid waiver finance structure, and through supports and service systems for clients through public-private partnerships and community development.
3. Increase accountability through better data systems and close matching between budget and programs.

4. Serve individuals on the wait list as funds become available, through information and education on existing community and other resources.

The APD Management System also functions as a monitoring tool for the implementation of recommendations by service recipients, providers, advocates and employees to achieve the following:

1. Create a directory of community resources and service alternatives. This directory will provide individuals with information on how to access these resources and training in how to use alternative supports to supplement paid services.
2. Encourage more businesses, organizations, and governmental entities to hire individuals with developmental disabilities.
3. Continue to communicate, educate, and collaborate in the development of iBudget.
4. Build on the LENS (Learning, Exploring & Experiencing, Networking, Strategizing, and Sharing) workshops. This project encourages communities to pursue grants to fund plans that improve neighborhood supports for residents with developmental disabilities.

Justification of Revised or Proposed New Programs and Services

Home and Community-Based Waiver Services

The Home and Community-Based Waiver Services Program (HCBS) is a complex system involving multiple agencies in the public sector, working in tandem with thousands of vendors and service providers in the private sector. It offers a comprehensive array of services as an alternative to an institutional-based care system with services ranging from personal and therapeutic supports, such as companionship and behavior assistance, to residential services and supplies, such as nursing and feeding tubes. Thousands of service providers are employed each year by Floridians with developmental disabilities to aid with their daily living and employment.

Florida Statutes emphasize providing services that give individuals the opportunity to achieve their greatest potential for an independent and productive life. To achieve this goal, the majority of APD's budget is spent on HCBS and most service recipients reside in family home settings.

In 2008, the Florida Legislature established a four-tiered system in an effort to contain service costs. Individuals enrolled on the waiver were assigned to a tier, based on criteria established in Chapter 393.0061, F.S. and subsequently, in Rules 65G-4.0021 - G65-4.0024, F.A.C.

1. Tier one is limited to clients who have service needs that cannot be met in tier two, three, or four for intensive medical or adaptive needs and that are essential for avoiding institutionalization, or who possess behavioral

problems that are exceptional in intensity, duration, or frequency and present a substantial risk of harm to themselves or others. Total annual expenditures under tier one may not exceed \$150,000 per client each year, provided that expenditures for clients in tier one with a documented medical necessity requiring intensive behavioral residential habilitation services, intensive behavioral residential habilitation services with medical needs, or special medical home care, as provided in the Developmental Disabilities Waiver Services Coverage and Limitations Handbook, are not subject to the \$150,000 limit on annual expenditures.

2. Tier two is limited to clients whose service needs include a licensed residential facility and who are authorized to receive a moderate level of support for standard residential habilitation services or a minimal level of support for behavior focus residential habilitation services, or clients in supported living who receive more than 6 hours a day of in-home support services. Total annual expenditures under tier two may not exceed \$53,625 per client each year.
3. Tier three includes, but is not limited to, clients requiring residential placements, clients in independent or supported living situations, and clients who live in their family home. Total annual expenditures under tier three may not exceed \$34,125 per client each year.
4. Tier four includes individuals who were enrolled in the family and supported living waiver on July 1, 2007, who shall be assigned to this tier without the assessments required by this section. Tier four also includes, but is not limited to, clients in independent or supported living situations and clients who live in their family home. Total annual expenditures under tier four may not exceed \$14,422 per client each year.

The Agency is currently in the process of completing approximately 5,000 individual hearing requests that resulted from the implementation of the tier system. Consequently, any savings associated with these tier assignments will not be realized until a ruling is made for each case.

Intensive services are also provided 24-hours a day by the Mentally Retarded Defendant Program (MRDP) located on the campus of Florida State Hospital and two state-owned Developmental Disabilities Centers (DDCs). Privately-owned Intermediate Care Facilities for Developmental Disabilities (ICF/DDs) are licensed by the Agency for Health Care Administration (AHCA) with APD involved in central admissions, to ensure that residents in these facilities are Medicaid eligible.

The Gulf Coast Center, a DDC in Ft. Myers, was closed on June 30, 2010 in fulfillment of the court's *Brown v. Bush* settlement agreement. This closure completes a five-year plan to move residents to a less restrictive, more community-integrated and cost-effective setting.

iBudget Florida

Increasing costs, falling revenues, and budget constraints remain among the top issues for the Agency. Efforts over the last two years to control the state deficit have necessitated changes to remain responsive to consumer needs.

On February 1, 2010, APD submitted a plan for individual budgeting as required by proviso language from the 2009 General Appropriations Act.¹ Individual budgeting, or iBudget Florida, is an approach to allocating funds within existing financial resources for services. A mathematical formula, also known as an algorithm, is developed through statistical analysis to equitably distribute available funds based on historical funding patterns. This formula considers individual consumer characteristics that are statistically proven to correlate with costs, and generates a budget amount for each person prior to support planning.

By determining a budget up front, many system controls that add complexity or generate frustration for individuals receiving services can be drastically reduced or eliminated. For instance, the existing prior service authorization process can be eliminated. There will be less need to intervene in the fine details of which services an individual chooses to purchase, because individual budgets would be predetermined to fit APD's legislative appropriation.

With the enactment of law by the 2010 Florida Legislature, the Agency is targeting Fall 2010 or Winter 2011 for iBudget implementation. The exact implementation date will depend on federal Centers for Medicare and Medicaid Services (CMS) approval of the new waiver program application.

An initial phase-in, similar to a pilot, will test iBudget processes. Data will be collected and refinements made to the iBudget systems. A broader phase-in, modeled after an approach used by Georgia, will follow. In that model, initial iBudget was 20% of the algorithm-determined amount and 80% of the previous year's budget. The algorithm-determined percentage would increase the second year, until it was 100% of the budget by the third year. Individuals will be transitioned from the four-tier system to the iBudget Florida waiver. Upon full implementation of iBudget, the tier system will cease to exist.

Such a move would fit well with other APD initiatives, to simplify processes and improve efficiency. These initiatives should dramatically reduce paperwork required from waiver support coordinators, allowing them to spend more time directly serving consumers. Consumers will then benefit from the waiver support coordinator's enhanced ability to provide person-centered services and help consumers access the array of supports available outside of the waiver program.

¹ Available on the Agency's website at <http://apd.myflorida.com/ibudget/>.

Dental Care Expansion

Medical researchers have long recognized that maintaining good oral health is an essential part of sustaining good overall health. Adults enrolled in Tiers 1, 2, and 3 may receive dental care as a HCBS service. However, many individuals report difficulty in receiving these services due to a lack of dentists or sedation services. A total of 18,037 clients were eligible to receive dental services last year, yet only 3,639 or about 20%, made use of these services. Individuals enrolled in Tier 4, totaling 11,934, as well as those on the wait list face financial barriers and must use State Plan Medicaid, private insurance, or pay out-of-pocket for dental care.

The Agency has taken several steps to make oral health care more accessible. In collaboration with the University of Florida, APD operates a community dental clinic at the Tacachale Developmental Disabilities Center. Last fiscal year, this clinic served 604 people at an average cost of \$69.00 per person. A plan for expansion of dental services at Tacachale is under consideration. If approved, this expansion could provide over 900 people a year with dental services at a significantly reduced cost.

The Agency is also working with dentists in Miami to open a clinic in the Fall of 2010. This clinic will focus on providing services to individuals on the wait list for reduced fees. A sliding scale for APD clients and their families will be used to ensure that dental services can be provided at a reasonable cost.

Additionally, dental equipment from the closed Gulf Coast Center was donated to a federally qualified health clinic that operates a number of facilities throughout the Tampa Bay area. In return, the dental group has agreed to provide services to 400 individuals with developmental disabilities. The Agency has finalized a Memorandum of Understanding (MOU) with the group to extend services to individuals on the wait list and others who would have difficulty making full payment.

APD is also exploring the possibility of utilizing a mobile dental unit that would function to provide basic dental care to people at convenient locations. This would require the purchase of a modified bus or Recreational Vehicle, equipment, supplies, dentists and dental staff. The Association for Retarded Citizens (ARC) of Florida is willing to assist with logistics for this unit in scheduling, parking, and fundraising. APD would be responsible for staffing and billing for services.

Transportation

The Agency is committed to the welfare of Florida's most vulnerable citizens. To that end, APD utilizes a number of federal, state, and community resources to advance independent living, employment, and self-sufficiency. One service that is a priority of service recipients is transportation. With reliable, dependable and

affordable transportation, people with developmental disabilities are able to exercise choice, community living, and self reliance.

The Agency spent approximately \$39 million through its various waiver programs on transportation providers in 2009. To maximize individual and agency goals, APD has initiated community hearings, research, and action to standardize rates to match the existing transportation disadvantaged carrier system.

APD transportation representatives work with the independent Commission for the Transportation Disadvantaged (CTD) to ensure the availability of efficient, cost-effective, and quality transportation services for transportation disadvantaged persons. This Commission was created to manage and facilitate all human service transportation in Florida. Based on CTD's 2008 Return on Investment Study, there is an 1108% return on investment per \$1.00 spent on a Medical trip investment.² Therefore, APD would be able to demonstrate an estimated \$300 million of economic return from a \$39 million transportation investment.

Employment

The downturn in the economy took a heavy toll on Floridians in the workplace; including those with developmental disabilities. APD is beginning a new five-year employment initiative to encourage partnerships, grants, marketing, and training to raise the number of individuals with developmental disabilities in the laborforce. For data consistency, the Agency is developing a new performance matrix that will integrate field data into all Agency reporting mechanisms to enhance accuracy and timeliness.

Flexible Service Benefit

Proviso language in the 2009 General Appropriations Act added flexibility to the HCBS Waiver. The "flexible service benefit" is optional and is determined by adding an individual's total approved cost plan amount for the following services: supported living, in-home support, companion, respite, adult day training and supported employment. Next, an 8% discount is applied to the total. An individual who uses the flexible benefit option must agree to spend within the remaining 92% of their cost plan. In return, they will be excluded from service limitations and prior approval requirements that are outlined in the DD/HCBS Coverage and Limitations Handbook. AHCA has submitted waiver amendments for approval of the flexible service option to the Centers for Medicare and Medicaid Services (CMS).

CDC+ Expansion

Consumer Directed Care Plus (CDC+) is a Medicaid State Plan option program that allows maximum flexibility and personal control of funds. Individuals have

² Florida Transportation Disadvantaged Programs, Return On Investment Study http://tmi.cob.fsu.edu/roi_final_report_0308.pdf

the opportunity to create, purchase, and manage their own supports. This includes establishing a budget, hiring, negotiating, and making payments to family members, friends, or vendors for services.

On October 16, 2009, the Agency sent a letter to more than 25,000 HCBS waiver recipients about an expansion of the Consumer Directed Care Plus (CDC+) Program. Approximately 2,100 requests for application were received. The annual projected savings for those who completed the application process, completed training, and started managing their own budgets (January - August 2010) is \$1,443,602.05.

Quality Assurance

Quality assurance for Medicaid Waiver-funded services is Legislatively required to be performed by an independent quality improvement organization, under contract through AHCA. This arrangement maximizes federal funding available to match state revenues for this purpose.

For the past eight-and-a-half years, the Delmarva Foundation has conducted quality assurance monitoring using Personal Outcome Measures (POM) developed by the Council on Quality and Leadership. Delmarva bid and was awarded a new contract in late 2009 to implement a system modeled after a new quality assurance framework issued by the Centers of Medicare and Medicaid Services (CMS). The new contract requires the use of the National Core Indicators (NCI), instead of POM, to align standards and data collection with the CMS framework.

NCI uses a combination of individual, family and provider interviews and data to measure the well-being of people receiving services and agencies managing the service delivery system. Indicators include individual, family, system, cost, health, and safety outcomes. Unlike POM, NCI allows organizations to compare performance against national benchmarks with 30 other states. Baseline data for Florida will be available by June 30, 2011.

APD is also undertaking internal improvements to its quality management processes by developing data systems to track and report activities to AHCA. Additional efforts are also in place to identify specific issues to measure service delivery system improvement. A systematic approach to discovery, remediation and advancement will identify which service providers are out of compliance with law, rule, or regulations, and not meeting service expectations.

Wait List

The wait list consists of individuals who meet eligibility criteria, but are not in a Medicaid Waiver tier due to a lack of funding. Approximately 19,000 people are currently on the wait list receive limited assistance from APD, the Medicaid State Plan, or community organizations.

In 2009, the Legislature passed a law that requires APD to assign each person on the wait list effective July 1, 2010 to a category on the basis of priority, as defined by law. Upon promulgation of rule, the categories will be as follows:

Category 1: includes clients deemed to be in crisis as described in rule.

Category 2: includes children on the wait list who are from the child welfare system with an open case in the Department of Children and Families' (DCF) statewide automated child welfare information system.

Category 3: includes individuals who fall into several subcategories:

- Clients whose caregiver has a documented condition that is expected to render them unable to provide care within the next year and for whom a caregiver is required but no alternate caregiver is available;
- At substantial risk of incarceration or court commitment without supports;
- Whose documented behaviors or physical needs place them or their caregiver at risk of serious harm and other supports are not currently available to alleviate the situation; or
- Who are identified as ready for discharge within the next year from a state mental health hospital or skilled nursing facility and who require a caregiver but for whom no caregiver is available.

Category 4: includes, but is not required to be limited to, clients whose caregivers are 70+ years of age and for whom a caregiver is required but no alternative caregiver is available.

Category 5: includes, but is not required to be limited to, clients who are expected to graduate within the next year from secondary school, and need support to obtain or maintain competitive employment, or to pursue an accredited program of postsecondary education to which they have been accepted.

Category 6: includes clients 21+ years of age who do not meet the criteria for categories 1, 2, 3, 4, or 5.

Category 7: includes clients younger than 21 years of age who do not meet the criteria for categories 1, 2, 3, or 4.

Justification of the Final Projection for Each Outcome with Impact Statements Relating to Demand and Fiscal Implications

The 2007 Legislature approved the following outcome measures for determining effectiveness in the Home and Community-Based Services Program:

- Objective: Percent of persons receiving services who meet the seven foundation outcomes from the Personal Outcome Measures.

The seven foundational outcomes measure the extent to which a person is free from abuse and neglect, is connected to family and natural support networks, is safe, has the best security, exercises his or her rights, and has the best possible health. These measures, developed by the Council on Quality Leadership, are considered foundational in a set of 25 measures for people's quality of life. Data is not available for future reports on this measure as the contracted quality assurance processes were revised and the use of the Personal Outcome Measures in quality management activities ceased as of December 2009. The National Core Indicators have been selected as the alternative measurement tool and were implemented January 2010.

The outcome-measured data, gathered for the existing objective, used sampling techniques valid for statewide interpretation. Personal Outcome Measures (POM) were used routinely by support coordinators in the field as they developed support plans with individual consumers. The standard set by the Legislature for this outcome was 15% of the individuals being served in the community to have achieved the seven foundation outcomes. FY 2004/2005 performance for this measure was 8.5%. FY 2005/2006 performance for this measure rose to 11%. Data from 2009 show performance for this measure to have increased to 13.5%.

Each APD Area Office has a quality improvement team working in conjunction with the private quality assurance entity. The objective of this team is to improve the outcomes related to health, safety and general welfare of people served by APD. The Agency's quality management system has emphasized the inclusion of Personal Outcome information in service planning to enhance the achievement of individual outcomes. In addition, stakeholders from the Interagency Quality Council have asked APD for specific attention on improving the foundational outcome focused on assuring that people are free of abuse, neglect and exploitation.

The trend line of the combined result of these activities shows an increase from the 8.5% actual in FY 2004/2005 to 13.5% by the end of 2009. This trend shows substantial improvement over the last 5 years for this objective.

The distribution of outcomes is represented in a scale of 0 to 7. A score of 0 indicates that the measure has not been met. A score of 7 indicates that the measure has been met. Since FY 2004/2005, APD has also shown a 12.4% increase in the distribution of outcomes achieved in the upper range of 5, 6 or 7.

The Agency's efforts toward protecting the health, safety and wellbeing of people receiving services are demonstrated by continuous improvement. Items from the National Core Indicators will be implemented as new measures of protecting health, safety and well being.

- Objective: Percent of people who are employed in integrated settings.

This objective measures the performance of APD in assisting individuals with disabilities with employment in normal work settings that are not exclusive to people with developmental disabilities (integrated settings.) The standard set by the Legislature for this measure is 31% of individuals with developmental disabilities who are employed will be in integrated settings. Performance data for this measure indicates that 31% of people employed are working in integrated settings. Employment in integrated settings is an individual choice, that may be facilitated by program services. The Agency's new 5-Year Employment Plan was formed to specifically address the economic challenges within the economy and has a target for the Agency to achieve 39% employment by FY 2015-2016.

It should be noted that developmental disabilities programs in other states have recently witnessed a decline in the number of people served in supported employment illustrating the ongoing challenges faced by supported employment initiatives in the United States. Florida has managed to stay ahead of this national decline and APD is beginning a new five-year employment initiative designed to encourage consumer choice of integrated employment.

The Agency will continue to implement this initiative, including setting employment goals for APD Area Offices and requiring monthly reporting of employment data. For data consistency, APD is also developing a new performance matrix that will integrate field data into all Agency reporting mechanisms to ensure accuracy and timeliness of this endeavor. The new employment matrix is an integrated part of the overall APD performance tracking system.

- Objective: Number of people served in the community (not in private ICF/DDs).

This output measure is a count of unique eligible program participants living in a community setting, including wait list individuals. The number of people served in the community includes those individuals who meet criteria for Agency services under Chapter 393, F.S., but may not necessarily be eligible for

Medicaid. This number does not include those individuals that are served in public or private Intermediate Care Facilities (ICF/DDs).

The standard set by the Legislature for this measure is that 45,521 people should be served in the community. FY 2009/2010 performance data for this measure reflects that 53,671 people were served in the community. Prior years' growth rates were used to project performance.

- Objective: Number of persons with disabilities served in supported living.

Supported living is a service that provides supports to individuals who live independently in their own homes. This service helps integrate individuals into their community, enabling them to become full participants in community life. The standard for this measure is that 5,066 people should be in supported living. FY 2009/2010 performance on this standard reflects that 3,991 people received supported living services.

Performance for this measure was below the approved standard and may have been influenced by the implementation of the four-tiered waiver system. Supported living is a desirable outcome for many program participants as it is the most independent residential setting. National research has consistently found that people living in supported living settings enjoy a higher quality of life.

- Objective: Administrative cost as a percent of total program costs.

This objective measures APD's administrative costs in relation to total program costs. Administrative costs were defined as all costs captured within the Program Management and Compliance budget entity. Total program costs were defined as the Agency's total operating budget as approved by the Governor and Legislature in the General Appropriations Act (GAA). The standard set by the legislature for this measure is 4% administrative costs.

For FY 2009/2010, APD's administrative costs were 3.3%. This measure decreased by 0.5% from the previously reported fiscal year. The decline in administrative costs was caused by two significant impacts to the Agency's appropriations: continued Legislative reductions in administrative funding, and nonrecurring appropriations for APD programs. In FY 2009/2010, the Agency received nonrecurring appropriations for home and community based waiver services and developmental disability centers.

- Objective: Annual number of significant reportable incidents per 100 persons with developmental disabilities living in developmental services institutions.

This measure counts the number of significant reportable incidents per 100 people living in developmental services institutions that occur in one year. It should be noted that the nomenclature for developmental services institutions

has changed to Developmental Disabilities Centers (DDC). Significant reportable incidents include unauthorized absences, injuries requiring medical care, attempted suicides, resident deaths, non-consensual sexual intercourse, etc.

The standard for this measure is no more than 21 significant reportable incidents per 100 people served in developmental service institutions should occur per year. FY 2009/2010 performance on this standard indicates that 20.44 significant reportable incidents per 100 people occurred.

The Gulf Coast Center facility closed its doors on June 30, 2010 which was the target date for the five-year closure plan. The Agency is implementing a reduction in population of state facilities consistent with the *Brown v. Bush* settlement agreement and is moving residents to less restrictive, more integrated and cost effective settings.

Increasing the frequency of off-campus activity and community integration also provides greater opportunity for personal growth; however, many of these same activities provide exposure to additional risk. For example, engaging in intramural softball in a community league increases the risk of being hit by a ball resulting in an injury. While this may result in an increased number of reportable events, the risk is far outweighed by the benefit of the activity and associated opportunities.

- Objective: Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures.

This objective is specific to the Agency's DDCs. The Agency no longer uses the Personal Outcome Measures as performance indicators for the extent to which a person is free from abuse and neglect, is connected to natural support networks, is safe, has the best security, exercises his or her rights, and has the best possible health. This outcome measure is similar to its counterpart in the HCBS program described in the first objective of this section. As noted, the Personal Outcome Measures are no longer used in quality management processes, terminating use in the DDCs as of June 2009. The National Core Indicators has been selected as an alternative measurement tool, implemented January 2010. Baseline data will be available by June 30, 2011.

- Objective: Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program.

This output measure represents the number of adults with mental retardation that are determined incompetent to proceed to trial after allegedly committing and being charged with a felony offense. These individuals are ordered by the judicial system to receive competency training and custodial care through the

Mentally Retarded Defendant Program (MRDP). The standard set by the Legislature for this measure is that 368 people should be served through MRDP. Performance for this measure for FY 2009/2010 was 327. The number of adults determined incompetent to proceed to trial and committed to secure custody is a factor not within the Agency's control.

- Objective: Number adults receiving services in Developmental Disabilities Institutions

This measure represents the number of individuals served in Developmental Disabilities Institutions (DSIs). The FY 2007/2008 standard set by the Legislature for this measure is that 1,088 should be served through state institutions. FY 2009/2010 performance for this measure indicates that 714 people were served through state institutions. The five-year plan to close the Gulf Coast Center facility was completed on June 30, 2010. This closure was completed as part of reducing the number of persons living in state facilities, in concurrence with the *Brown v. Bush* settlement agreement. The closure of the Gulf Coast Center facility affected the FY 2009/2010 performance for this measure.

List of Potential Policy Changes Affecting APD's Budget Request or the Governor's Recommended Budget

The Agency for Persons with Disabilities intends to continue its current efforts on priority initiatives such as serving additional individuals from the wait list and in crisis, implementing the legislatively mandated redesign of the service delivery system known as iBudget, and maintaining and improving the physical and technological infrastructure of the Agency.

The Agency has adopted new measures, called National Core Indicators (NCI), that include individual, family, system, cost, and health and safety outcomes important to understanding the overall health of persons with developmental disabilities and the agencies that serve them. Unlike POM, NCI allows states to compare its performance against national benchmarks with 30 other states. The National Core Indicators has been selected as an alternative measurement tool, implemented January 2010. Baseline data will be available by June 30, 2011.

List of Policy Changes That Would Require Legislative Action Including the Elimination of Programs, Services and Activities

The Agency has submitted a legislative package for the 2011 Session that focuses on the health and safety of individuals with developmental disabilities. Proposals include the clarification of the environmental health inspection process for APD-licensed facilities, the creation of a direct-support organization for APD, and adding final order language to APD's hearings process.

List of All Task Force and Workgroups In Progress

Taskforce / Workgroup Name

- 1 1915j Waiver State Plan
- 2 Advisory Board Member of the Florida Disability and Health Program
- 3 Agency for Persons with Disabilities / Agency for Health Care Administration Policy Group
- 4 Big Bend Chapter, Florida State Guardianship Association
- 5 Blue Ribbon Committee on Rapid Response
- 6 Child Abuse Prevention and Permanency Planning Advisory Council
- 7 Community Residential Roundtable
- 8 Waiver Crisis Committee
- 9 Database Quality Management Committee
- 10 Delmarva / Agency for Health Care Administration Quality Improvement Workgroup
- 11 Disability Mentoring Day Committee
- 12 Department of Education Stakeholder's Workgroup
- 13 Department of Elder Affairs - Aging and Disability Resource Centers Expansion
- 14 Department of Health - Agency for Persons with Disabilities Oral Health Collaboration
- 15 Emergency Operations and Developmental Disability Centers Development
- 16 Florida Association of Behavior Analysts
- 17 Family Care Council of Florida
- 18 Fetal Alcohol Syndrome with the Department of Health
- 19 Florida Able Trust
- 20 Florida Cabinet on Children and Youth
- 21 Florida Center for Inclusive Communities, Community Advisory Council
- 22 Florida Commission for the Transportation Disabled
- 23 Florida Developmental Disabilities Council
- 24 Florida Disabled Outdoors Association
- 25 Florida Genetics and Newborn Screening Advisory Council
- 26 Florida Independent Living Council
- 27 Florida Rehabilitation Council
- 28 Florida State Guardianship Association
- 29 Forensic Workgroup
- 30 Foundation for Indigent Guardianship
- 31 Governor's Commission on Disabilities
- 32 iBudget Florida Stakeholders' Group
- 33 Interagency Agreement Workgroup for Educational Services to Children
- 34 Inter-agency Medical Director's Committee
- 35 Inter-agency Medical Fraud Committee
- 36 Lighting the Way to Guardian
- 37 Local Review Committee

- 38 Medicaid Infrastructure Grant
- 39 Medical Necessity Continuation Project with the Agency for Health Care Administration and Children's Medical Services
- 40 Northwood Shared Resource Center (NSRC) Data Center Board
- 41 Oral Health Florida Special Needs Work Group
- 42 Person Centered Planning Initiative
- 43 Psychotropic Medication Monitoring
- 44 Questionnaire for Situational Information Workgroup
- 45 Residential Services Roundtable
- 46 Select Advisory Panel on Adult Protective Services
- 47 Services for Children with Developmental Disabilities Task Force
- 48 Special Needs Shelter Committee - Department of Health
- 49 State Secondary Transition Interagency Committee (SSTIC) Family Involvement
- 50 Taskforce on Fostering Success
- 51 United States Access Board
- 52 Utilization Review and Psychotropic Medication Monitoring
- 53 Volunteers of Florida, Inclusion Council



Performance Measures and Standards

LRPP Exhibit II

LRPP Exhibit II - Performance Measures and Standards

Department: Agency for Persons with Disabilities Department No.: 6700000

Program: Services to Disabled	Code: 67100000
Service/Budget Entity: Home and Community Services	Code: 67100100

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2010-11 (Words)	Approved Prior Year Standard FY 2009-10 (Numbers)	Prior Year Actual FY 2009-10 (Numbers)	Approved Standards for FY 2010-11 (Numbers)	Requested FY 2011-12 Standard (Numbers)
Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.)	15.0%	13.5%	15.0%	NA
Percent of people who are employed in integrated settings	31.0%	31.0%	31.0%	25.0%
Number of people served in the community (not in private ICF/DDs)	45,521	53,671	45,521	45,521
Number of persons with disabilities served in supported living	5,066	3,991	5,066	5,066
New Measure- Percentage of individuals with developmental disabilities served by APD that report the services they receive assist them in meeting their stated life goals				71.0%
New Measure- Percentage of providers monitored that are in compliance with all standards related to health and safety				78.0%
New Measure- Percentage of providers monitored that meet all service standards for training				63.0%
New Measure- Percentage of providers that meet all service standards in provision of direct consumer services				71.0%
New Measure- Percentage of individuals with developmental disabilities living in non-institutional settings who are employed in competitive community integrated settings				20.0%
New Measure- Percentage of individuals with developmental disabilities that reside in an institutional setting that earn minimum wage				3.0%
New Measure- Percentage of service coordinators that are accessible, responsive and supportive of the individual's participation in service planning				76.0%
New Measure- Percentage of individuals with developmental disabilities served by APD reporting they have sufficient choice of services and providers				55.0%
New Measure- Percentage of individuals served by APD who reside in their own home or family home				74.0%
New Measure- Percentage of individuals served by APD who have an annual physical exam				87.0%
New Measure- Percentage of individuals served by APD who have an annual dental exam				51.0%
New Measure- Percentage of individuals served by APD that do not experience difficulties or delays in obtaining needed health services				88.0%

New Measure- Percentage of individuals served by third party providers who do not have verified abuse and serious injury reports				95.0%
New Measure- Percentage of providers and their employees who have undergone required criminal history background screenings				90.0%

Program: Services to Disabled	Code: 67100000
Service/Budget Entity: Program Management and Compliance	Code: 67100200

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2010-11 (Words)	Approved Prior Year Standard FY 2009-10 (Numbers)	Prior Year Actual FY 2009-10 (Numbers)	Approved Standards for FY 2010-11 (Numbers)	Requested FY 2011-12 Standard (Numbers)
Administrative cost as a percent of total program costs	4.0%	3.3%	4.0%	4.0%

Program: Services to Disabled	Code: 67100000
Service/Budget Entity: Developmental Services Public Facilities	Code: 67100300

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2010-11 (Words)	Approved Prior Year Standard FY 2009-10 (Numbers)	Prior Year Actual FY 2009-10 (Numbers)	Approved Standards for FY 2010-11 (Numbers)	Requested FY 2011-12 Standard (Numbers)
Annual number of significant reportable incidents per 100 persons with developmental disabilities living in developmental services institutions	21	20.44	21	21
Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.)	15.0%	NA	15.0%	NA
Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program	368	327	310	310
Number of adults receiving services in developmental services institutions	1,088	714	1,088	1,088
New Measure- Percentage of individuals served in state-run facilities who do not have verified abuse and serious injury reports				97.0%
New Measure- Percentage of individuals that are placed in an appropriate competency restoration program within statutorily required time limits				75.0%
New Measure- Percentage of individuals that were not arrested or charged with a crime while in the Mentally Retarded Defendant Program				97.0%
New Measure- Percentage of individuals that remain in APD care after they complete the Mentally Retarded Defendant Program that are not subsequently arrested or charged with a crime				97.0%



Assessment of Performance for Approved Performance Measures

LRPP Exhibit III

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
15.0%	13.5%	(1.5%)	(10%)

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Personnel Factors
<input type="checkbox"/> Competing Priorities
<input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Staff Capacity
<input type="checkbox"/> Level of Training
<input type="checkbox"/> Other (Identify) |
|---|--|

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable
<input type="checkbox"/> Legal/Legislative Change
<input type="checkbox"/> Target Population Change
<input type="checkbox"/> This Program/Service Cannot Fix the Problem
<input type="checkbox"/> Current Laws Are Working Against the Agency Mission | <input type="checkbox"/> Technological Problems
<input type="checkbox"/> Natural Disaster
<input checked="" type="checkbox"/> Other (Identify) |
|--|--|

Explanation: The Agency has put in place an array of supports and services that encourage achievement of all seven of these outcomes. However, factors such as personal choice, family dynamics, or resource limitations can affect achievement of individual outcomes.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Training
<input type="checkbox"/> Personnel | <input type="checkbox"/> Technology
<input checked="" type="checkbox"/> Other (Identify) |
|---|---|

Recommendations: Each APD Area Office has a quality improvement team working with quality assurance contractors to improve outcomes related to health, safety, and general well-being. The Agency's quality management system encourages the consideration of personal outcomes in service planning to help individuals achieve their preferred outcomes. It is recommended that this outcome measure be deleted and replaced with measures that will individually measure the quality, access and need standards that services received meet based on the National Core Indicators.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of people who are employed in integrated settings.

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
31.0%	31.0%	0.0%	0.0%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: APD exceeded the outcome with a total of 4,844 individuals employed and will continue to build upon innovated workforce models such as Project Search.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: APD has embarked on a new 5 year plan to build upon the success of the last five years. This plan emphasizes volunteerism, non-competitive and competitive work efforts with the overarching goal to give every individual the opportunity to explore integrated environments and find areas of interest to make meaningful contributions to their highest level of self-sufficiency. It is recommended that this measure be revised with more specific language in two separate measures: "Percentage of individuals with developmental disabilities living in non-institutional settings who are employed in competitive community integrated settings." and, "Percentage of individuals with developmental disabilities that reside in an institutional setting that earn minimum wage."

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100200
Measure: Administrative cost as a percent of total program costs

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
4%	3.3%	(0.7)	(17.5%)

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Personnel Factors
<input type="checkbox"/> Competing Priorities
<input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Staff Capacity
<input type="checkbox"/> Level of Training
<input type="checkbox"/> Other (Identify) |
|---|--|

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable
<input type="checkbox"/> Legal/Legislative Change
<input type="checkbox"/> Target Population Change
<input type="checkbox"/> This Program/Service Cannot Fix the Problem
<input type="checkbox"/> Current Laws Are Working Against the Agency Mission | <input type="checkbox"/> Technological Problems
<input type="checkbox"/> Natural Disaster
<input checked="" type="checkbox"/> Other (Identify) |
|--|--|

Explanation: The Agency has been impacted by reductions in administrative funding. Performance results were influenced by nonrecurring appropriations in the 2009-10 General Appropriations Act for APD programs. Results for FY 2010-11 are expected to return to a value more representative of expected trends; although, will remain lower than previously reported.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Training
<input type="checkbox"/> Personnel | <input type="checkbox"/> Technology
<input checked="" type="checkbox"/> Other (Identify) |
|---|---|

Recommendations: Performance for this measure exceeded the approved standard; therefore, no action is needed.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
15%	NA	NA	NA

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation: The use of Personal Outcome Measures has been discontinued.

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: The Agency has put in place an array of supports and services that encourage achievement of all seven of these outcomes. However, factors such as personal choice, family dynamics, or resource limitations can affect achievement of individual outcomes.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: Continue practices that have led to major improvement in this area within the DDCs and implementation of Zero Tolerance of abuse, neglect and exploitation will positively affect this outcome as a priority. It is recommended that this outcome measure be deleted and replaced with measures that will individually measure the quality, access and need standards that services received meet based on the National Core Indicators.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the Mentally Retarded Defendant Program

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
368	327	17	5%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: This measure is a count of adults with mental retardation that are determined incompetent to proceed to trial after being charged with a felony offense. The number of adults found incompetent to proceed to trial is a factor not within the Agency's control.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: Performance for this measure exceeded the approved standard; therefore, no action is needed.



Performance Measure Validity and Reliability

LRPP Exhibit IV

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of persons receiving services who meet the seven foundation outcomes of the Personal Outcome Measures

Action:

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: Propose to replace with measures that will individually measure the quality, access and need standards that services received meet.

Data Sources and Methodology: Since the establishment of legislatively approved performance measures, many programmatic and structural changes have occurred at APD, as well as the national landscape for public agencies serving individuals with developmental disabilities. The Agency is requesting a change in methodology for performance measures this year, and has been reviewing National Core Indicators (NCI) used in a quality assurance system it is developing to comply with Centers of Medicare and Medicaid Services (CMS) service standards.

Proposed Standard/Target:

Validity: NCI is a systematic approach to measuring individual, family, system, cost, health and safety outcomes that will allow Florida to compare its performance against a national standard, as well as 30 other states.

Reliability:

Discussion:

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of people who are employed in integrated settings

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: Propose to replace this measure with two separate measures that contain more specific language: "Percentage of individuals with developmental disabilities living in non-institutional settings who are employed in competitive community integrated settings." And, "Percentage of individuals with developmental disabilities that reside in an institutional setting that earn minimum wage."

Data Sources and Methodology:

Proposed Standard/Target:

Validity:

Reliability:

Discussion: By separating this measure into two more specific measures, the outcomes will more accurately illustrate employment in integrated settings for those individuals in the HCBS Program and those individuals who reside in the Developmental Disabilities Centers and earn minimum wage. This will also allow for examination between the two budget entities in which these settings are placed.

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals with developmental disabilities served by APD that report the services they receive assist them in meeting their stated life goals

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed new measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 71%

Validity:

Reliability:

Discussion: There is currently no measure reporting that services and supports received from APD are responsive and flexible to meet individuals' needs.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of providers monitored that are in compliance with all standards related to health and safety

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 78%

Validity:

Reliability:

Discussion: Currently, there is no measure indicating provider compliance with health and safety standards. These standards are essential in providing quality services to the unique population that the Agency serves.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of providers monitored that meet all service standards for training

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 63%

Validity:

Reliability:

Discussion: Providing access to high quality supports and services for individuals with developmental disabilities from qualified and experienced providers is an Agency priority. Currently there is no measure indicating the percentage of providers that meet all services standards for training. Meeting these standards, as well as the health and safety standards being proposed in the Home and Community Services Budget Entity, are essential in providing quality services to the unique population that the Agency serves.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of providers that meet all service standards in provision of direct services

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 71%

Validity:

Reliability:

Discussion: There is currently no measure indicating the percentage of providers that meet all services standards in provision of direct consumer services. Meeting these standards, as well as the other service standards being proposed in the Home and Community Services Budget Entity, are essential in providing quality services to the unique population that the Agency serves.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals with developmental disabilities living in non-institutional settings who are employed in competitive community integrated settings

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure would report individuals aged 22-65, making above minimum wage and working in an integrated setting.

Proposed Standard/Target: 20%

Validity:

Reliability:

Discussion: The Agency strives to provide services and supports to facilitate individuals who are actively employed in their community and are able to maintain that community integrated employment. This proposed measure would replace the current measure of "Percent of people who are employed in integrated settings" with more specific language.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of service coordinators that are accessible, responsive and supportive of the individual's participation in service planning

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 76%

Validity:

Reliability:

Discussion: There is currently no measure reporting that services and supports received from the Agency are responsive and flexible to meet individuals' needs.

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals with developmental disabilities served by APD reporting they have sufficient choice of services and providers

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 55%

Validity:

Reliability:

Discussion: There is currently no measure reporting that services and supports received from the Agency are responsive and flexible to meet individuals' needs.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals served by APD who reside in their own home or family home

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 74%

Validity:

Reliability:

Discussion: This new outcome enhances the output measure which reads, "Number of people served in the community (not in private ICF/DDs)." By gathering a percentage of individuals who reside "in their own home or family home" this new outcome measure will clearly illustrate the performance that is associated with the output of the measure listed above.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals served by APD who have an annual physical exam

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 87%

Validity:

Reliability:

Discussion: Ensuring the health, safety and well-being of individuals with developmental disabilities is an Agency priority. Currently, there are no measures reporting that individuals served by APD have access to the quality health services they need.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals served by APD who have an annual dental exam

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 51%

Validity:

Reliability:

Discussion: Currently, there are no measures reporting that individuals served by APD have access to the quality health services they need.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals served by APD that do not experience difficulties or delays in obtaining needed health services

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure is a National Core Indicator. The National Core Indicators (NCIs) for Developmental Disability Services create a systematic approach to performance and outcome measurement. Indicators include consumer, family, systemic, cost, and health and safety outcomes that are important to understanding the overall health of public developmental disabilities agencies.

Proposed Standard/Target: 88%

Validity:

Reliability:

Discussion: Currently, there are no measures reporting that individuals served by APD have access to the quality health services they need.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of individuals served by third party providers who do not have verified abuse and serious injury reports

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 95%

Validity:

Reliability:

Discussion: Protecting individuals with developmental disabilities from violence, injury, neglect and abuse is an Agency priority. Currently there are no measures reporting data related to violence, injury, neglect or abuse.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Percent of providers and their employees who have undergone required criminal history background screenings

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 90%

Validity:

Reliability:

Discussion: In protecting individuals with developmental disabilities it is essential that the providers providing services to this vulnerable population have been thoroughly screened. Currently, there is no measure related to background screenings.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of persons receiving services who meet the seven foundation outcome of the Personal Outcome Measures

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: Propose to replace with measures that will individually measure the quality, access and need standards that services received meet.

Data Sources and Methodology: Since the establishment of legislatively approved performance measures, many programmatic and structural changes have occurred at APD, as well as the national landscape for public agencies serving individuals with developmental disabilities. The Agency is requesting a change in methodology for performance measures this year, and has been reviewing National Core Indicators (NCI) used in a quality assurance system it is developing to comply with Centers of Medicare and Medicaid Services (CMS) service standards.

Proposed Standard/Target:

Validity: NCI is a systematic approach to measuring individual, family, system, cost, health and safety outcomes that will allow Florida to compare its performance against a national standard, as well as 30 other states.

Reliability:

Discussion:

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of individuals served in state-run facilities who do not have verified abuse and serious injury reports

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 97%

Validity:

Reliability:

Discussion: Protecting individuals with developmental disabilities from violence, injury, neglect and abuse is an Agency priority. Currently there are no measures reporting data related to violence, injury, neglect or abuse.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of individuals that are placed in an appropriate competency restoration program within statutorily required time limits

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 75%

Validity:

Reliability:

Discussion: This proposed measure reports on statutorily required time limits that are not currently being measured.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of individuals that were not arrested or charged with a crime while in the Mentally Retarded Defendant Program

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 97%

Validity:

Reliability:

Discussion: Providing forensic services that are delivered in an efficient and safe manner to individuals found incompetent to proceed to trial on felony charges is an Agency priority. Currently, there is no measurement for crimes relating to individuals that are in MRDP.

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of individuals that remain in APD care after they complete the Mentally Retarded Defendant Program that are not subsequently arrested or charged with a crime

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology:

Proposed Standard/Target: 97%

Validity:

Reliability:

Discussion: This proposed measure reports on forensic services as well. Currently, there is no measure related to the individuals that remain in APD care after they complete MRDP.

Note: This measure may not apply to those who are deemed competent to stand trial and serve a sentence, if imposed.

Office of Policy and Budget – July 2010

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Percent of individuals with developmental disabilities that reside in an institutional setting that earn minimum wage

Action (check one):

- Requesting revision to approved performance measure.
- Change in data sources or measurement methodologies.
- Requesting new measure.
- Backup for performance measure.
- Requesting deletion.

Proposed Change to Measure: This is a proposed new measure.

Data Sources and Methodology: This proposed measure, would replace the measure, "Percent of people who are employed in integrated settings", with more specific language pertaining to individuals that reside in an institutional setting.

Proposed Standard/Target: 3%

Validity:

Reliability:

Discussion: The Agency strives to provide services and supports to facilitate individuals who are actively employed in their community and are able to maintain that community integrated employment. This proposed measure would replace the current measure of "Percent of people who are employed in integrated settings" with more specific language.

Office of Policy and Budget – July 2010



**Associated Activities Contributing to
Performance Measures**

LRPP Exhibit V

LRPP Exhibit V: Identification of Associated Activity Contributing to Performance Measures

Measure Number	Approved Performance Measures for FY 2009-10 (Words)	Associated Activities Title
1	Percent of Persons receiving services who meet the seven foundational outcomes of the Personal Outcome Measures, (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.)	Adult Daily Living, Adult Day Service, Adult Medical/Dental, Adult Respite Services, Adult Residential Habilitation, Adult Specialized Therapies/ Assessments, Adult Supported Employment, Adult Supported Living, Adult Transportation, Children Daily Living, Children Day Services, Children Medical/Dental, Children Respite Services, Children Residential Habilitation, Children Specialized Therapies/ Assessments, Children Support Employment, Children Supported Living, Children Transportation
2	Percent of people who are employed in integrated settings	Adult Supported Employment, Children Supported Employment
3	Number of people served in the community (not including those private ICF/DDs)	Support Coordination
4	Number of persons served in supported living	Adult Supported Living, Children Supported Living
5	Annual number of significant reportable incidents per 100 persons with developmental disabilities living in Developmental Disabilities Centers	DDC Intermediate Care Facilities for the Developmentally Disabled
6	Percent of people receiving services who meet the seven foundational outcomes of the Personal Outcome Measures, (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.), (Public Facilities)	DDC Intermediate Care Facilities for the Developmentally Disabled
7	Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the Mentally Retarded Defendant Program	DDC - Forensic Care
8	Number of adults receiving services in DDCs	DDC Intermediate Care Facilities for the Developmentally Disabled, Forensic Care

Office of Policy and Budget – July 2009

AGENCY FOR PERSONS WITH DISABILITIES		FISCAL YEAR 2009-10			
SECTION I: BUDGET		OPERATING		FIXED CAPITAL OUTLAY	
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT				1,085,118,117	
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)				20,359,702	
FINAL BUDGET FOR AGENCY				1,105,477,819	
SECTION II: ACTIVITIES * MEASURES		Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
Executive Direction, Administrative Support and Information Technology (2)					0
Home And Community Services Administration * Number of Medicaid Waiver clients enrolled		29,971	189.12	5,668,076	
Support Coordination * Number of people receiving support coordination		30,186	1,228.92	37,096,087	
Private Intermediate Care Facilities For The Developmentally Disabled * Number of adults receiving services in Developmental Service Public Facilities		714	152,602.38	108,958,098	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings		53,671	494.14	26,520,892	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living		8,633	5,464.09	47,171,498	
Adult Day Service * Number of persons with disabilities served in Adult Day Training Service		12,318	1,949.17	24,009,870	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental		11,958	869.04	10,392,026	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services		3,856	1,010.35	3,895,918	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation		7,269	13,317.49	96,804,835	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies		6,627	1,650.28	10,936,432	
Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment		3,013	1,412.64	4,256,279	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies		7,737	5,603.25	43,352,333	
Adult Transportation * Number of persons with disabilities served in Adult Transportation		10,927	1,043.57	11,403,088	
Children Daily Living * Number of persons with disabilities served in Children Daily Living		2,106	6,321.44	13,312,962	
Children Day Services * Number of persons with disabilities served in Children Day Training Services		10	1,023.90	10,239	
Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental		3,222	749.33	2,414,356	
Children Respite Services * Number of persons with disabilities served in Children Respite Services		2,432	1,144.41	2,783,216	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation		970	16,450.08	15,956,577	
Children Specialized Therapies/ Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies		1,781	1,316.43	2,344,556	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment		1	1,626.00	1,626	
Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies		1,984	2,033.39	4,034,237	
Children Transportation * Number of persons with disabilities served in Children Transportation		44	1,260.41	55,458	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program		280	92,596.48	25,927,015	
TOTAL				497,305,674	
SECTION III: RECONCILIATION TO BUDGET					
PASS THROUGHS					
TRANSFER - STATE AGENCIES					
AID TO LOCAL GOVERNMENTS					
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS					
OTHER					1,260,660
REVERSIONS					606,911,505
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)					1,105,477,839

SCHEDULE XI/EXHIBIT VI: AGENCY-LEVEL UNIT COST SUMMARY

- (1) Some activity unit costs may be overstated due to the allocation of double budgeted items.
- (2) Expenditures associated with Executive Direction, Administrative Support and Information Technology have been allocated based on FTE. Other allocation methodologies could result in significantly different unit costs per activity.
- (3) Information for FCO depicts amounts for current year appropriations only. Additional information and systems are needed to develop meaningful FCO unit costs.
- (4) Final Budget for Agency and Total Budget for Agency may not equal due to rounding.



Agency Glossary of Terms and Acronyms

Allocation, Budget and Contract Control System (ABC): An agency sub-system used to track specific consumer information and process invoices.

Activity: A unit of work, which has identifiable starting and ending points, has purpose, consumes resources, and produces outputs. Unit cost information is determined by using the outputs of activities.

Actual Expenditures: Includes prior year actual disbursements, payables, and encumbrances. The payables and encumbrances are certified forward at the end of the fiscal year. They may be disbursed between July 1 and September 30 of the subsequent fiscal year. Certified forward amounts are included in the year in which the funds are committed and not shown in the year the funds are disbursed.

Adult Day Training (ADT): Daytime programs for adults with developmental disabilities to learn particular life skills and activities.

AHCA: Agency for Health Care Administration

APD Management System (AMS): A web-based application designed to monitor the progress of tasks formulated to meet APD's strategic objectives. Each strategic objective has a set of measurable tasks, which allows the system to compile meaningful data in a reportable format.

APD: Agency for Persons with Disabilities

Appropriation Category: The lowest level line item of funding in the General Appropriations Act (GAA), which represents a major expenditure classification of the budget entity. Within budget entities, these categories may include: salaries and benefits, other personal services (OPS), expense, operating capital outlay (OCO), data processing services, fixed capital outlay, etc. These categories are listed and defined within this glossary.

Autism: Pervasive, neurologically based developmental disability of extended duration which causes severe learning, communication and behavior disorders with age of onset during infancy or childhood. Individuals with autism exhibit impairment in reciprocal social interaction, impairment in verbal and nonverbal communication and imaginative ability, and a markedly restricted repertoire of activities and interests.

Baseline Data: Indicators of a state agency's current performance level, pursuant to guidelines established by the Executive Office of the Governor in consultation with the Florida Legislature.

Budget Entity: A unit or function at the lowest level to which funds are specifically appropriated in the General Appropriations Act. "Budget entity" and "service" have the same meaning. A budget entity can be a department, division, program, or service and have one or more program components.

Consumer Directed Care Plus (CDC+): A Medicaid State Plan Option Program that gives an eligible person the opportunity to hire workers and vendors to help with daily care needs, such as personal care, respite, and transportation. Workers may be family members or others familiar to the consumer. In order to be eligible for CDC+, an individual must be receiving services from APD through one of the four Medicaid waivers or tiers. CDC+ provides the opportunity to improve quality of life, by giving the power to the consumer to make choices about the kinds of supports and services that are needed. Together with the assistance of a trained CDC+ consultant, who is also a waiver support coordinator, the consumer and consultant help plan consumer supports, manage an established budget, and make decisions regarding care, and staff hiring.

Cerebral palsy (CP): A group of disabling symptoms of extended duration with results from damage to the developing brain that may occur before, during or after birth and that result in the loss of impairment of control over voluntary muscles. For the purposes of this definition, cerebral palsy does not include those symptoms or impairments resulting solely from a stroke.

CIO: Chief Information Officer

CIP: Capital Improvements Program Plan

Client: Any person determined eligible by the agency for services as defined in Chapter 393, Florida Statutes (statute covering developmental disabilities).

CMS: Federal agency of Centers for Medicare and Medicaid Services. CMS is the federal agency with oversight of Medicaid State Plan and Medicaid Waiver services.

D3-A: A legislative budget request (LBR) exhibit, showing expenditures by budget entity, appropriation category and program component, and presents a narrative explanation and justification of specific issues for requested years.

Data Processing Services: The electronic data processing services provided by or to state agencies or the judicial branch which include, but are not limited to, systems design, software development, or time sharing by other governmental units or budget entities.

DCF: Florida Department of Children and Families

Demand: The number of output units, which are eligible to benefit from a service or activity.

Developmental Disability: A disorder or syndrome that is attributable to spina bifida, autism, cerebral palsy, Prader-Willi syndrome, and mental retardation, that manifests before the age of 18, and that constitutes a substantial handicap that can be expected to continue indefinitely. (See individual definitions).

Developmental Disabilities Centers (DDCs): State owned and operated facilities, formerly known as developmental disabilities institutions, for the treatment and care of individuals with developmental disabilities.

EOG: Executive Office of the Governor

Estimated Expenditures: Includes the amount estimated to be expended during the current fiscal year. These amounts will be computer generated based on current year appropriations adjusted for vetoes and special appropriations bills.

Expense: The usual, ordinary, and incidental expenditures by an agency or the judicial branch, including, but not limited to, such items as commodities and supplies of a consumable nature, current obligations, and fixed charges, and excluding expenditures classified as operating capital outlay. Payments to other funds or local, state, or federal agencies are included in this budget classification of expenditures.

Family and Supported Living Waiver (FSL): A specific Medicaid waiver no longer in use by the agency. The FSL waiver was discontinued with the implementation of the 4 tier waiver system (see Waivers). Consumers previously receiving services under the FSL waiver are now being served under Tier 4.

FFMIS: Florida Financial Management Information System

Fixed Capital Outlay (FCO): Real property (land, buildings, fixtures, etc.), including additions, replacements, major repairs, and renovations which extend useful life, materially improve or change its functional use. Furniture and equipment necessary to furnish and operate a new or improved facility are included in the definition.

FLAIR: Florida Accounting Information Resource Subsystem

Forensic: Programs that are supported by state funds and provide a secure setting for persons who are alleged to have committed a felony and who are court ordered into such a facility (See MRDP).

F.S.: Florida Statutes

FTE: Full-Time Equivalent

GAA: General Appropriations Act

GR: General Revenue Fund

Group Home Facility: A residential facility licensed under Chapter 393, F.S., which provides a family living environment including supervision and care necessary to meet the physical, emotional, and social needs of its residents.

HCBS: Home and Community-Based Services

iBudget (Individual Budgeting): Individual Budgeting is an agency initiative and current legislative requirement to enhance and improve the method by which a budget is derived for all individuals enrolled on the Home and Community-Based Services waivers and Consumer Directed Care Plus (CDC+) waivers (see Waiver). Individual budgeting is an approach to allocating funding within existing agency resources for those services used by a consumer with a developmental disability. A mathematical formula (also known as an algorithm) is developed through statistical analysis to equitably distribute available funds based on historical funding patterns. This formula considers individual consumer characteristics which are statistically proven to correlate with costs and generates a budget amount for each person prior to the support planning process.

Intermediate Care Facility/Developmental Disabilities (ICF/DD): Residential facilities for the treatment and care of individuals with developmental disabilities.

Indicator: A marker or sign expressed in a quantitative or qualitative statement used to gauge the nature, presence, or progress of a condition, entity, or activity. This term is used commonly as a synonym for the word “measure.”

Information Technology Resources: Includes data processing-related equipment, software, materials, services, telecommunications, personnel, facilities, maintenance and training.

Input: See Performance Measure.

IOE: Itemization of Expenditure

IT: Information Technology

Judicial Branch: All officers, employees, and offices of the Supreme Court, district courts of appeal, circuit courts, county courts, and the Judicial Qualifications Commission.

LAN: Local Area Network

LAS/PBS: Legislative Appropriations System/Planning and Budgeting Subsystem. The statewide appropriations and budgeting system owned and maintained by the Executive Office of the Governor.

Legislative Budget Commission (LBC): A standing joint committee of the Legislature. The Commission was created to: review and approve/disapprove agency requests to amend original approved budgets; review agency spending plans; and take other actions related to the fiscal matters of the state, as authorized in statute. It is composed of 14 members appointed by the President of the Senate and by the Speaker of the House of Representatives to two-year terms.

Legislative Budget Request (LBR): A request to the Legislature, filed pursuant to s. 216.023, F. S., or supplemental detailed requests filed with the Legislature, for the amounts of money an agency or branch of government believes will be needed to perform the functions that it is authorized, or it is requesting authorization by law, to perform.

LENS: Learning, Exploring & Experiencing, Networking, Strategizing & Sharing workshops.

L.O.F.: Laws of Florida

Long-Range Program Plan (LRPP): A plan developed on an annual basis by each state agency that is policy-based, priority-driven, accountable, and developed through careful examination and justification of all programs and their associated costs. Each plan is developed by examining the needs of people served and proposing programs and associated costs to address those needs, as established by law, the agency mission, and legislative authorization. The plan provides the framework and context for preparing an agency's legislative budget request and includes performance indicators for evaluating the impact of programs and agency performance.

Long Term Care: Those services provided on an ongoing basis to people with developmental disabilities in a residential setting such as a developmental disabilities center.

MAN: Metropolitan Area Network

MSP: Medicaid State Plan

Medicaid Waiver: See Waiver

Mental Retardation: A term used when a person has certain limitations in mental functioning and in skills such as communicating, taking care of him or herself, and social skills. These limitations will cause a person to learn and develop more slowly. People with mental retardation may take longer to learn to speak, walk, and take care of their personal needs such as dressing or eating. They are likely to have trouble learning in school. They will learn, but it will take them longer. As defined in Chapter 393, F.S. Retardation is defined by a significantly sub average general intellectual functioning existing concurrently with deficits in adaptive behavior that manifests before the age of 18 and can reasonably be expected to continue indefinitely. Significantly sub average general intellectual function for the purposes of this definition means performance which is two or more standard deviations from the mean score on a standardized intelligence test specified in the rules of the agency. Adaptive behavior for the purpose of this definition means the effectiveness or degree with which an individual meets the standards of personal independence and social responsibility expected of his or her age, cultural group, and community.

MRDP: Mentally Retarded Defendant Program (MRDP) is a secure residential service for criminal defendants found incompetent to proceed to trial. Services include competency training and testing. (See Forensic Programs.)

NASBO: National Association of State Budget Officers

Narrative: Justification for each service and activity required at the program component detail level for the agency's budget request. Explanation, in many instances, will be required to provide a full understanding of how dollar requirements were computed.

National Core Indicators (NCI): Nationally standardized performance indicators that include approximately 100 outcomes related to consumer, family, systemic, cost, and health and safety – outcomes that are important to understanding the overall health of public developmental disabilities agencies. Associated with each core indicator is a source from which the data is collected. Sources of information include consumer survey (e.g., empowerment and choice issues), family surveys (e.g., satisfaction with supports), provider survey (e.g., staff turnover), and state systems data (e.g., expenditures, mortality, etc.). (Source: *Human Services Research Institute*.) Florida has joined over 30 states that are using the National Core Indicators, gaining the capacity to compare Florida among other states and with national trends.

Nonrecurring: Expenditure or revenue limited to a fiscal year, or not expected to be needed or available after the current fiscal year.

OPB: Office of Policy and Budget, Executive Office of the Governor

Operating Capital Outlay (OCO): Equipment, fixtures and other tangible personal property of a nonconsumable and nonexpendable nature, the value or cost of which is \$1,000 or more and the normal expected life of which is one year or more; hardback-covered bound books that are circulated to students or the general public, the value or cost of which is \$25 or more; and hardback-covered bound books the value or cost of which is \$250 or more.

Other Personal Services (OPS): The compensation for services rendered by a person who is not a regular or full-time employee filling an established position. This shall include but not be limited to, temporary employees, student or graduate assistants, fellowships, part time academic employment, board members, consultants, and other services specifically budgeted by each agency in this category.

Outcome: See Performance Measure.

Output: See Performance Measure.

Outsourcing: The act of contracting with a vendor for the delivery of a service or item. There is a transfer of management responsibility for the delivery of resources and the performance of those resources. Outsourcing includes everything from contracting for minor administration tasks to contracting for major portions of activities or services, which support the agency mission.

PBPB/PB2: Performance-Based Program Budgeting

Pass Through: A situation in which funds flow through an agency's budget to other entities (e.g. local governments) without the agency having discretion on how the funds are spent. The activities (outputs) associated with the expenditure of the funds are not measured at the state level. NOTE: This definition of "pass through" applies ONLY for the purposes of long-range program planning.

Performance Ledger: The official compilation of information about state agency performance-based programs and measures, including approved programs, approved outputs and outcomes, baseline data, approved standards for each performance measure and any approved adjustments thereto, as well as actual agency performance for each measure.

Performance Measure: A quantitative or qualitative indicator used to assess state agency performance. Input means the quantities of resources used to produce goods or services and the demand for those goods and services. Outcome means an indicator of the actual impact or public benefit of a service. Output means the actual service or product delivered by a state agency.

Personal Outcome Measures: The Personal Outcome Measures were developed by the Council on Quality and Leadership (CQL) in 1991. Personal interviews with people with intellectual disabilities, people with mental illness, or people with other conditions are the foundation of the data gathering process. The measures are applied and evaluated based on the unique characteristics, needs, and desires of each individual.

Policy Area: A grouping of related activities that reflects major statewide priorities. Policy areas summarize data at a statewide level by using the first two digits of the ten-digit LAS/PBS program component code. Data collection will sum across state agencies when using this statewide code.

Prader-Willi syndrome: A complex genetic condition that affects many parts of the body. In infancy, this condition is characterized by weak muscle tone, feeding difficulties, poor growth, and delayed development. Beginning in childhood, affected individuals develop an insatiable appetite and chronic overeating. As a result, most experience rapid weight gain leading to obesity. People with Prader-Willi syndrome, typically have mental retardation or learning disabilities and behavioral problems.

Primary Service Outcome Measure: The service outcome measure, which is approved as the performance measure, which best reflects and measures the intended outcome of a service. Generally, there is only one primary service outcome measure for each agency service.

Privatization: Occurs when the state relinquishes a function, service, or responsibility, or reduces its role in the delivery of a service or specific activity.

Program: A set of services and activities undertaken in accordance with a plan of action organized to achieve agency mission, goals, and objectives based on legislative authorization. Programs are identified in the General Appropriations Act by a title that begins with the word "Program". In some instances, a program consists of several services, or in other cases the program represents one service. The LAS/PBS code is used for purposes of both program identification and service identification. "Service" is a "budget entity" for purposes of the LRPP.

Program Purpose Statement: A brief description of approved program responsibilities and policy goals. The purpose statement relates directly to the agency mission and reflects essential services needed to accomplish the agency's mission.

Program Component: An aggregation of generally related objectives. Because of their special character, related workload and interrelated output, these objectives could logically be considered an entity for purposes of organization, management, accounting, reporting, and budgeting.

Questionnaire for Situational Information QSI: This questionnaire is the approved method or tool utilized by the agency for evidence-based client assessments. It is designed to gather key information (physical, behavioral and functional areas) about an individual's life and need for supports from APD. The QSI is administered by APD employees who are certified in its use.

Reliability: The extent to which the measuring procedure yields the same results on repeated trials, and data are complete and sufficiently error free for the intended use.

Salary & Benefits: The cash compensation for services rendered to state employees for a specific period of time, and the corresponding state sponsored benefits (retirement, health insurance, etc.) or federally required taxes (Social Security, FICA, etc.) paid on behalf of the employee.

Service: See Budget Entity

Spina bifida: A birth defect (a congenital malformation) in which there is a bony defect in the vertebral column so that part of the spinal cord, which is normally protected within the vertebral column, is exposed. People with Spina bifida can have difficulty with bladder and bowel incontinence, cognitive (learning) problems and limited mobility. Spina bifida is caused by the failure of the neural tube to close during embryonic development. The neural tube is the embryonal structure that gives rise to the brain and spinal cord.

SSI: Supplemental Security Income (through the Social Security Administration)

Standard: The level of performance of an outcome or output.

STO: State Technology Office

SWOT: Strengths, Weaknesses, Opportunities and Threats

TCS: Trends and Conditions Statement

TF: Trust Fund

Tier: A term used to describe specific waivers that consumers are assigned, based on criteria defining service needs.

TRW: Technology Review Workgroup

Unit Cost: The average total cost of producing a single component, item, service, or unit of output for a specific agency activity.

Validity: The appropriateness of the measuring instrument in relation to the purpose for which it is used.

WAGES: Work and Gain Economic Stability (Agency for Workforce Innovation)

Waiver: A home and community based services waiver is authorized under Title IX of the Social Security Act and is an alternative program to institutional care. The waiver is funded by state and federal matching funds and is designed to provide services to individuals to live in their community rather than live in an institutional setting. The agency currently operates four home and community based services waivers, Tiers 1, 2, 3, and 4. The waivers are approved by the federal government as specific, individual waivers. Clients enrolled in any of the four waivers can choose to enroll in the CDC+ program (see CDC+) and self direct services.

WAN: Wide Area Network (Information Technology)