



agency for persons with disabilities
State of Florida

Rick Scott,
Governor

LONG RANGE PROGRAM PLAN

Michael Hansen,
Director

Agency for Persons with Disabilities
Tallahassee, FL
September 30, 2011

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Dear Directors:

Pursuant to Chapter 216, Florida Statutes, our 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 our mission, goals, objectives and measures for the Fiscal Year 2012-13 through Fiscal Year 2016-17. This submission has been approved by Michael Hansen, Director of the Agency for Persons with Disabilities.

Sincerely,

Michael P. Hansen
Director



agency for persons with disabilities
State of Florida

Long Range Program Plan

**Fiscal Years 2012-2013
through 2016-2017**



**Michael Hansen,
Director**

**Rick Scott,
Governor**



Mission Statement

Pursuant to statute, the agency is responsible for:

1. Developing community-based residential and treatment programs that enable people with developmental disabilities to achieve their greatest potential for independent and productive living. (s. 393.062, F.S.)
2. Operating developmental disabilities centers and managing Medicaid waiver programs to provide services to people with developmental disabilities as defined in Ch. 393, F.S., including the purchase of services and treatment whenever cost-efficient. (s. 20.197, F.S., and s. 393.062, F.S.)
3. Providing forensic services for individuals who have mental retardation or autism and adjudicated incompetent to proceed due to mental retardation or autism (Chapter 916, Part III, F.S.)

Goals

The agency has three primary goals related to statute and its legislative budget request:

1. Improve the quality of life of all persons with developmental disabilities with the development and implementation of community-based services, treatment, and residential options. (s. 393.062, F.S.)
2. Manage services in a safe, effective, and efficient manner through waivers, public DDCs, MRDP, natural supports, and community resources. (s. 393.062, F.S.; s. 20.197, F.S.; and Chapter 916, Part III, F.S.)
3. Improve the quality of life of people with developmental disabilities living in Developmental Disabilities Centers (DDCs) and the Mentally Retarded Defendant Program (MRDP). (s. 393.062, F.S. and Chapter 916, Part III, F.S.)

Agency Objectives

Home and Community-Based Services

- 1.1 Increase the number of people with developmental disabilities who are actively engaged in their community by providing services and supports to facilitate their independence. (s. 393.13 (2)(b)4, F.S.; and s. 393.064(1), F.S.)
- 1.2 Increase the number of people with developmental disabilities in living as independently as possible in their communities, while staying within legislatively approved appropriations. (s. 393.064, F.S. and s. 393.0651 (5)(a), F.S.; and 2011-2012 Florida General Appropriations Act)

Program Management and Compliance

- 2.1 Manage supports and services in a safe, effective, and efficient manner. (s. 393.062, F.S.; s. 20.197, F.S.; and Ch. 916, Part I, F.S.)
- 2.2 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. (s. 393.13 (3)(a) F.S.; s. 393.13 (2)(b)2, F.S.)

Developmental Disability Centers

- 3.1 Maintain a safe environment for people living in public Developmental Disabilities Centers.
- 3.2 Provide competency restoration and habilitation training in a secure setting to adults found incompetent to proceed to trial on felony charges.

Agency Service Outcomes and Performance Projections Tables

BE 67100100 Home and Community-Based Services

Objective 1.1 Increase the number of people with developmental disabilities who are actively engaged in their community by providing services and supports to facilitate their independence.

Outcome 1.1.1

Percent of people who are employed in integrated settings. *

Standard FY2007/2008	Baseline FY2010/2011	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
31%*	28%*	23%	24%	25%	26%	28%

* The agency is proposing a new baseline and methodology to align with the 2010 starting point of its 5-Year Employment Plan (See Exhibit IV).

Objective 1.2 Increase the number of people with developmental disabilities in living as independently as possible in their communities, while staying within legislatively approved appropriations.

Outcome 1.2.1

Number of persons with disabilities served in supported living.

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
5,066	4,319	4,419	4,519	4,619	4,719

Outcome 2.2.2

Reduce reliance on state-funded services in home or community-based programs.

The agency is proposing the adoption of a new measure to reflect new initiatives to reduce the cost-of-care for individuals in its Home and Community-Based Waiver Programs. If adopted, data collected in FY 2011/12 will be used to determine a baseline (See Exhibit IV).

BE 67100200 Program Management and Compliance

Objective 2.1 Manage supports and services in a safe, effective, and efficient manner.

Outcome 2.1.1

Administrative cost as a percent of total program costs.

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
4.0%	4.0%	4.0%	4.0%	4.0%	4.0%

Outcome 2.1.2

Increase use of services and opportunities that are not funded by the Medicaid Home and Community-Based waiver or other appropriation.

The Agency proposes adding a new measure for reporting Waiver Support Coordinator performance in the migration away from waiver-funded services to the development of natural and community resources. (See Exhibit IV). If adopted, data collected in FY 2011/12 will be used to determine a baseline (See Exhibit IV).

Objective 2.2 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.

Outcome 2.2.1

Percent of people receiving services who meet key health, safety, and quality of life outcome measures.

The Agency proposes the adoption of a new measure related to standards in its new quality assurance review process for the Home and Community-Based Waiver. The proposed measure would indicate the percent of people achieving

comparable indicators for health, safety, freedom from abuse/neglect/exploitation, connection to family, rights, fair treatment, and privacy. If adopted, available data for FY 2010/2011 would suggest 68.5% as a baseline (See Exhibit IV).

BE 67100300 Developmental Disabilities Public Facilities

Objective 3.1 Maintain a safe environment for people living in public Developmental Disability Centers.

Outcome 3.1.1

Annual number of significant reportable incidents per 100 persons with developmental disabilities living in Developmental Disabilities Centers. *

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
21	30	27	24	22	20

* The agency is proposing to use the word “critical” rather than “significant” for reporting incidents to reflect standardized criteria (See Exhibit IV).

Objective 3.2 Provide competency restoration and habilitation training in a secure setting to adults found incompetent to proceed to trial on felony charges.

Outcome 3.2.1

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

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
310	390	400	410	420	430

Requested Deletions

BE 67100100

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

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
45,521	50,602	51,602	52,602	53,602	54,602

* The Agency is proposing to delete this measure and add a new measure that include budgetary performance (See Exhibit IV).

BE 67100300

Outcome: Number of adults receiving services in Developmental Disabilities Centers. *

Baseline FY 2007/2008	FY 2012/2013	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017
1,088	1,088	1,088	1,088	1,088	1,088

The Agency is proposing to delete this measure in lieu of new measures that will include budgetary performance in the delivery of services.



Linkage to Governor's Priorities

Accountability Budgeting: The Agency has established strategic goals and performance measures for all budget entities. They are part of a results-oriented framework to improve program and organizational effectiveness, public transparency, accountability, eliminate waste, increase efficiencies, and restructure or eliminate ineffective programs.

Reduce Government Spending: The Agency is establishing fiscal controls, and has taken other actions to end the fiscal year within appropriations. It is embarking on a number of activities related to community resource identification, resource development, and other means of providing services and opportunities to persons with development disabilities that are not funded by state appropriations.

Focus on Job Growth and Retention: The Agency for Persons with Disabilities (APD) is aligned with Governor Scott's priority of job growth and retention. APD has created a new 5-year employment plan to help achieve jobs for persons with disabilities and advance their independence. It targets improving the quality of life, and removing government inefficiencies that unnecessarily impede individuals with disabilities from achieving their highest level of independence and self-sufficiency.



Trends and Conditions Statements

OVERVIEW AND RESPONSIBILITIES

Section 393.062, F.S., directs the Agency for Persons with Disabilities (APD) to encourage the development of community-based residential and treatment programs for people with developmental disabilities. These programs enable those served to achieve their greatest potential for independent and productive living. Each month, the Agency for Persons with Disabilities serves approximately 40,000 Floridians with autism, mental retardation, spina bifida, cerebral palsy, and Prader-Willi syndrome, including children ages 3-to-5 that are at high risk of being diagnosed with a developmental disability. On July 1, 2011, people with Down syndrome were added to the list of individuals served.

Florida offers a broad array of services funded through the Developmental Disabilities Home and Community-Based Services Medicaid waiver (DD/HCBS), such as: supported employment, supported living, behavior analysis, medical equipment, physical therapy, and adult day training. Eligible individuals who want to live in their communities select a support coordinator to help plan and arrange their services.

Over 1,700 individuals with DD/HCBS waivers have chosen to create and directly manage their own support system through a program known as Consumer Directed Care Plus (CDC+). They receive a monthly allowance to hire anyone they choose and decide how much to pay for services. The program is the outcome of a national research and demonstration project on offering a cash option in lieu of traditional services. Another 2,000 people that qualify for APD services, but not the waiver, live in private community intermediate care facilities.

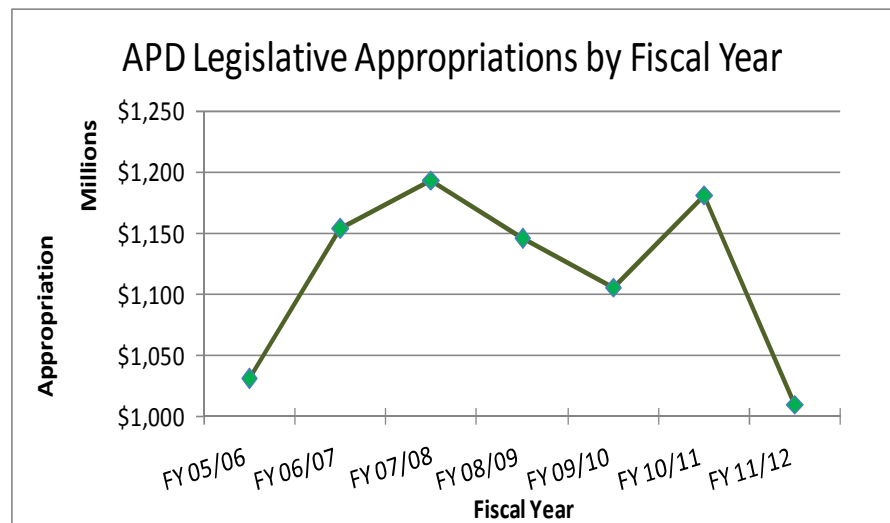
At the other end of the service delivery spectrum, are nearly 1,000 Floridians that reside in the state's two Developmental Disability Centers (DDCs) and the Mentally Retarded Defendant Program (MRDP). DDCs are Florida's institutional care facilities. They serve the most vulnerable citizens that need 24 hour care and supervision. The latter is a secure forensic facility for individuals the courts have determined incompetent to proceed to trial and ordered into secure placement.

Also involved with the agency are the approximately 20,000 people waiting to enroll in the DD/HCBS waiver program. State support for these individuals is extremely limited. In the first quarter of 2011, an average of 1,200 people on the waiting list received state-funded services through APD. More than 10,000 received some assistance through the Medicaid State Plan. The agency intends to find a means of getting more help for those waiting, even as it works to hold spending within legislative appropriations.

CURRENT SITUATION

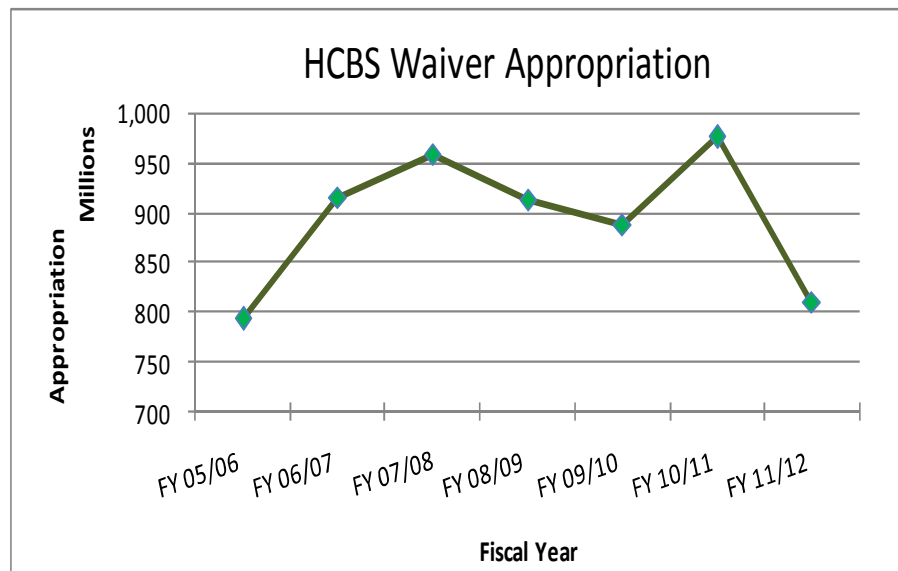
Since the creation of APD in 2004, and its separation from the Department of Children and Families in FY 2005/06, total appropriations for the agency have remained around \$1billion.

FY 05-06	\$1,030,146,158
FY 06-07	\$1,153,427,684
FY 07-08	\$1,193,262,301
FY 08-09	\$1,145,708,570
FY 09-10	\$1,105,477,819
FY 10-11	\$1,181,363,434
FY 11-12	\$1,009,499,581



Although the Developmental Disabilities Home and Community-Based Services (HCBS) Waiver received substantial increases in FY 2006/07 and FY 2007/08, the downturn in the economy and the resulting affect on state revenues have reduced waiver funding to its present level.

FY 05-06	\$792,432,607
FY 06-07	\$915,085,032
FY 07-08	\$958,015,748
FY 08-09	\$913,272,509
FY 09-10	\$887,647,385
FY 10-11	\$975,208,918
FY 11-12	\$810,437,372



Revenue limitations and the inability to grow the waiver program with state funds have created challenges for APD. It must manage dwindling resources to serve a continuously growing and aging population.

State services to persons with developmental disabilities are closely tied to policy decisions made at the federal level. The de-population of institutions nationwide in the 1970s, led Florida to create positions for assisting individuals that returned to their communities. These employees served as field representatives who worked with cities

and counties to develop support systems and resources for services. This changed in the 1980s, when the Medicaid program began allowing states to pay for services for people with developmental disabilities who wanted to live at home or other residential setting. As Florida shifted its attention to implementing its Home and Community-Based Waiver Program, the focus on harnessing community resources began to fade, and institutional knowledge about the development of alternatives to paid services was lost.

The Developmental Disabilities Home and Community-Based Services (HCBS) Waiver Program reflects societal changes that value choice, community integration, self-determination and self-advocacy for individuals with developmental disabilities. The ability to decide what services are needed to maintain well-being and achieve personal goals, as well as, who will coordinate and provide them, has wide appeal. Today, more than 80 percent of the agency's legislative appropriation is budgeted for waiver services. The waiver has proved so popular with individuals and their families that it has become the victim of its own success. Waiver expenditures have strained the service delivery system, and the waiting list has been growing faster than capacity. The agency has struggled to keep spending on waiver services within appropriations for four consecutive years. It faces the same challenge in FY 2011/12, as the agency is projecting \$930 million in community-based expenditures that must be managed within its \$810 million legislative appropriation.

The agency also faces many external pressures from stakeholders with competing agendas. These pressures have resulted in:

- Rising dissatisfaction about the level of waiver funding from clients and families that desire additional resources;
- Provider alienation and anger over lowering rates for services to contain costs;
- Loss of credibility with policy makers, advocates, and stakeholders from constant programmatic and leadership changes;
- Legal and administrative challenges whenever there are service, cost plan, or rate reductions;
- Increased competition for scarce state revenues;
- A growing and seemingly insurmountable number of people waiting for services; and
- An aging population with aging caretakers that require additional resources.

In response to identified needs and recent actions by the Legislative and Executive branches of government, the agency has selected the following priorities:

- Managing cost and expenditures to end the fiscal year within appropriations;

- Supporting community resource identification, and resource development to increase or enhance the availability of services; and
- Increasing services and opportunities to persons with developmental disabilities that are not funded by the Medicaid Home and Community-Based Waiver or other state appropriations through community partnerships and collaboration.

ASSUMPTIONS AND CONSTRAINTS

The primary focus of state policy in recent years has been controlling cost. Strategies that APD has employed in an attempt to achieve this goal have included: a standardized rate structure, prior service authorization, pre-payment review, and a tiered system. Results have been mixed. APD was immediately challenged in court when it sought federal approval of a four-tiered waiver system that had been authorized by the 2007 Florida Legislature. As a result of protracted litigation, and automatic stays of execution for hearing requests, APD did not realize all of the projected savings from the implementation of tiers.

The Florida Legislature gave the agency approval in 2010 to pursue the development of a new tool to combat deficit spending. Individual budgeting, known as iBudget Florida, involves giving each waiver service recipient an annual budget that is based on legislative appropriation and factors that include individual abilities, disability, needs, and living situation. APD developed iBudget Florida cooperatively with stakeholders. The waiver received federal approval in March 2011, has commenced implementation in North Florida, and will be implemented statewide. Although iBudget is not expected to solve everyone's service needs, it will allow people maximum flexibility in managing their care, and give APD a tool in future years to stay within appropriations.

During the 2011 legislative session, lawmakers approved two actions to help the agency remain within budget; a four percent service provider rate reduction is projected to result in \$36.3 million in savings. A cost plan freeze enacted for the current fiscal year is expected to yield another \$6.8 million.

APD has implemented other cost containment measures to comply with statute. At the suggestion of stakeholders, and in consultation with the Agency for Health Care Administration, APD has undertaken the following:

- Changing Companion Services ratio and rate for a projected \$17 million in savings;
- Migrating people from \$15 an hour Personal Care Assistance to lower cost In-Home Support Services to keep costs down another \$1.6 million;
- Redirecting people to existing modes of transportation, such as those managed by the Florida Commission for the Transportation for the Disadvantaged;

- Developing group respite and respite pools as lower cost options for families that need temporary relief from caretaking;
- Encouraging voluntary service reductions; and
- Focusing internal resources on developing technology to generate greater system efficiencies and minimize adverse impact on citizens served.

Other options identified that will be explored with stakeholders include redefining core services, developing incentives for spending reductions and redesigning recouplement.

OUTLOOK AND EXPECTATIONS

The agency believes that certain assumptions can be made about the future that provide context for its long-range plan.

- State revenues will not grow as fast as the demand for long-term care services.
- Individuals with developmental disabilities will continue to prefer receiving services in their homes and communities.
- The waiting list for services will significantly increase with the addition of Down syndrome for service eligibility, and the increasing prevalence of autism spectrum disorders.
- The agency will remain under pressure to stay within appropriation, resulting in an increased need for family support and community services.

TECHNOLOGY IMPROVEMENTS

The agency has launched major technology improvements that align with the Governor's priority to improve accountability. An electronic recordkeeping system, the Client Central Record (CCR) System is being implemented concurrently with iBudget. Whereas iBudget focuses on individual cost plans, CCR initially will focus on support plans with shared data base information.

The new system is being constructed in phases. Conversion of forms used by waiver support coordinators and service providers is underway. The next phase will involve integrating quality assurance business processes and giving the agency's quality assurance contractor access. Microsoft's InfoPath will provide the conduit for APD to share information with the contractor, and the contractor to report results. One immediate outcome will be timely health and safety alerts.

CCR was developed in response to external and internal issues related to the processing of information. Service providers complained about the amount of time

spent on recordkeeping. An APD stakeholder review concluded that the agency's provider business processes involved a substantial amount of paperwork. Documentation of client eligibility, disability, health, safety, treatment, and services on paper forms was antiquated and time consuming. APD's decentralized filing system required waiver support coordinators to maintain bulky records in a secure location, and physically return files to their area office when discharged by their clients.

The agency also has been dependant on its Allocation, Budget and Control (ABC) System, antiquated technology that is neither user-friendly nor easily adaptable to today's workplace needs. Cost constraints have delayed replacing ABC with newer technology and resulted in multiple stand-alone systems as solutions for various business process issues.

The agency is planning to migrate from various stand-alone record systems to a single web-based portal that provides access based on a user's profile. This will allow APD to reduce spending and manpower spent on maintaining multiple systems. It will generate savings through greater efficiency, and eventually create a database from which information can be used to measure productivity, increase accountability, and improve performance. As APD is in the midst of a leadership change, the phase-in of CCR will allow the agency's new executive team time to evaluate the organization and the efficiency of its business processes.

FISCAL PERFORMANCE

APD also is making changes to improve fiscal accountability. Data reports and business processes are being developed to measure performance. Baselines will be established and control charts used to monitor, track, and report spending. Performance will be reported monthly at both the area and agency level. This will include performance reviews to discuss variance from baselines and spending anomalies. Responsibility for policy, programmatic and fiscal decisions will be transferred to area offices. Area Administrators and program managers will be held accountable for their budgets.

The agency is requesting changes to several long-range program plan measures to better reflect and report on its initiatives and new direction. Among the recommended metrics is a measure of performance in the cost of care as noted in Exhibit III and Exhibit IV. The agency's existing LRPP measures were developed from various initiatives launched while APD was still a program within the Department of Children and Families.

COMMUNITY DEVELOPMENT

A long-term tactic to reduce spending is the concept of community development. Over reliance on the waiver has over taxed existing resources, and has led to a two-pronged service delivery system: individuals with waivers receiving services (approximately 30,000) and people on the waiting list receiving limited or no services (approximately 20,000). Further, total reliance on Medicaid waivers has diverted attention away from other possible strategies that could have been developed to meet the needs of individuals with developmental disabilities residing in their communities.

Communities provide a diverse, naturally occurring ecology of activities, resources, services, support, and cultural perspectives that can impact and enhance the quality of people's lives. Families, friends, schools, not-for-profit agencies, places of worship, community organizations, foundations, associations, private businesses and local government can provide access to innumerable opportunities for people with developmental disabilities to live, learn, and work in their communities.

A catalyst is needed to ignite communities to take a more proactive approach to improving the quality of life for residents with developmental disabilities. Positions, similar to field representatives from times past, may provide the spark. So-called Community Resource Developers (CRDs) could build upon the series of Learning, Exploring and Experiencing, Networking, and Strategizing (LENS) workshops that the agency held around the state in 2008 and 2009. Participants explored their communities to learn about the priorities of its residents and their vision of changes that would improve the quality of life for all citizens. They were taught strategies to tap into the diverse networks in their area to identify resources, and assemble them into a dynamic system for addressing community issues.

The model envisions at least one resource developer in every area office to work collaboratively with their communities to bring about change and expand the universe of services and activities available to people with developmental disabilities. Community resource developers could revisit, re-assess, and re-focus LENS communities on support systems for individuals with developmental disabilities. They also could provide leadership to all sectors of a community to develop strategies to address the needs of people on the waiting list.

As a former program within the former Department of Health and Rehabilitative Services and its predecessors, APD has a long history of service to the citizens of Florida. The agency still has remnants of its community resource development legacy -- General Revenue (GR) support coordinators. These employees serve other individuals that are not eligible for waivers and people on the waiting list. GR support coordinators could be trained and redirected to focus on community development. Alternatively, this function could be performed through partnerships with the numerous community organizations, nonprofit agencies, and advocacy groups that are imbedded in the framework of laws and regulations enacted over time to support individuals with developmental disabilities.

The agency currently is exploring a partnership with the Florida Developmental Disability Council (DD Council) to develop capacity in targeted counties to facilitate community resource development, networks and alliances. The DD Council has entered into a three-to-four year contract with the Ounce of Prevention Fund of Florida to develop community networks that can eventually support the development of coalitions capable of identifying and increasing access to community resources. In the context of limited state funding, future strategies should focus on shared resources, community development, partnerships, and collaboration. Care, however, must be taken to develop alternative resources, rather than shift cost to municipalities, cities, and counties.

COST SHARING

One long-term tactic that was suggested at a stakeholder meeting the agency hosted earlier this year is cost-sharing. This idea was endorsed by lawmakers in the 2011 legislative session with passage of House Bill 7109, which directed APD to work with the Agency for Health Care Administration (AHCA) to develop a system of co-payments and premiums. Payments and fees only would apply to families with adjusted household incomes greater than 100% of the federal poverty level whose children received waiver-funded services. Implementation would require federal approval and the development of processes to collect income data and payments.

HOST HOMES

A similar strategy to decrease reliance on waiver services is the development of host homes. Such homes would give individuals that do not need intensive supervision more housing options. In the host home model, homeowners would receive licenses for up to three-beds and be required to comply with standards established in 65G-2.011 F.A.C. Individuals would be matched with host families according to the needs and desires of both parties.

Host families and their residents would sign a detailed agreement specifying living arrangements. Hosts would be responsible for maintaining a monthly attendance log, providing supervision, providing any necessary assistance with day-to-day functions, providing access to medical treatment, and facilitating community integration. In return, residents would pay a rate of \$543.42 per month, an amount that matches the current room and board rate for residential group homes.

Residents in such homes would be provided waiver-funded services only in case of emergency, but could receive comparable non-waiver support. Host homes would be well suited for:

- Persons on the wait list
- Persons who wish to live in a family-like environment
- Children in, or exiting, foster care
- Persons who have received the maximum benefit from training in a residential habilitation facility
- Persons who do not require the level of care provided in a group home
- Persons without enough waiver funding for supported living or residential habilitation

Payment to live in a host home would come from an individual's Social Security Insurance (SSI). If a person's SSI was less than the monthly fee, area offices would pay the difference with General Revenue (GR) fund. The rate for children would be paid with an area office's room and board allocation.

OTHER STRATEGIES

The agency is exploring other long-term strategies to reduce spending, as articulated in its FY2011/12 Cost Containment Plan submitted to the Governor and Legislature this September. They include:

- Waiver support coordinator (WSC) role change – WSCs would reserve the waiver as a fund of last resort, and focus on existing resources and other options for services. This approach would complement the concept of community development.
- Community-Based Care/Developmental Disabilities (CBC/DD) - The agency would contract with CBC/DD agencies to serve as focal points for resources and services available in the community. Florida outsourced in-home and out-of-home child welfare services statewide to private, non-profit entities in 2004, as a strategy to reduce cost and increase the extent to which communities managed service delivery.
- Managed care – This service delivery approach would be contracted like community-based care, and would require major program restructuring. This approach would be aided by observation and lessons learned from the migration of other long-term care population groups to services managed by the private sector.

The agency will be focusing on fiscal controls that are within its authority and does not anticipate needing a legislative budget request for implementation.

TASKFORCES AND WORKGROUPS

- 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 United States Access Board
- 51 Utilization Review and Psychotropic Medication Monitoring
- 52 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
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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 2011-12	Approved Prior Year Standard FY 2010-11	Prior Year Actual FY 2010- 11	Approved Standards for FY 2011-12	Requested FY 2012-13 Standard
Percent of people who are employed in integrated settings*	31%	28%	31%	23%
Number of persons with disabilities served in supported living	5,066	4,069	5,066	4,319
Number of people served in the community (not in private ICF/DDs)*	45,521	49,602	45,521	50,602
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%	N/A	N/A	N/A
New Measure: Reduce reliance on state-funded services in home or community-based programs.	N/A	N/A	N/A	N/A

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 2011-12	Approved Prior Year Standard FY 2010-11	Prior Year Actual FY 2010- 11	Approved Standards for FY 2011-12	Requested FY 2012-13 Standard
Administrative cost as a percent of total program costs	4.0%	3.6%	4.0%	4.0%
New Measure: Increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation	N/A	N/A	N/A	N/A
New Measure: Percent of people receiving services who meet key health, safety and quality of life outcome measures	N/A	N/A	N/A	68.5%

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 2011-12	Approved Prior Year Standard FY 2010-11	Prior Year Actual FY 2010- 11	Approved Standards for FY 2011-12	Requested FY 2012-13 Standard
Annual number of significant reportable incidents per 100 persons with developmental disabilities living in developmental disabilities centers*	21	20	21	30
Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program	310	305	310	390
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%	N/A	N/A	N/A
Number of adults receiving services in developmental disabilities centers*	1,088	883	1,088	1,088

* Indicates measure for revision or deletion



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 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%*	28%	(3%)	(3%)

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 checked="" type="checkbox"/> Other (Identify) |

Explanation: The current standard was set in the 1990s, while APD was still a program within the Dept. of Children & Families, and neither reflects the goals of the APD nor the downturn in the economy. *APD is proposing a new baseline.

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 checked="" type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input checked="" type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: Individuals with disabilities have been impacted more adversely with unemployment (15.9% w/ disabilities vs. 9.5 % w/out disabilities). Services alone cannot overcome current economic conditions. Social Security and CMS policies create employment barriers for APD customers. APD also will be losing its Medicaid Infrastructure Grant (employment specific) in December 2011.

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

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

Recommendations: The agency is engaged in multiple activities, including developing partnerships and collaborating with community organizations to advance employment for APD customers.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Number of people served in the community (not in private ICF/DDs)

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
45,521	49,602	4,081	9.0%

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 checked="" type="checkbox"/> Other (Identify) |

Explanation: The waitlist for APD has grown to over 20,000 and most of these individuals live with their family.

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 is a count of unique eligible program participants living in a community setting, including individuals waiting for services. Prior year growth rates were used to project performance. Eligible program participants are those who meet criteria for Agency services under Ch. 393 F.S., but may not necessarily be Medicaid eligible or potential waiver enrollees.

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. The Agency requests that this measure be replaced with: Reduce reliance on state-funded services in home or community-based programs.

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 (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.)

Action:

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

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

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 checked="" type="checkbox"/> Other (Identify) |

Explanation: The Personal Outcome Measure data collection instrument is no longer available, as it was eliminated in the contracted quality assurance process. Agency proposed deletion of the current measure in last year's Long Range Program Plan. An alternative method is proposed: Percent of persons receiving services who meet key health, safety and quality of life outcome measures. Had this new measure been adopted, performance would have been as follows:

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
15%	18.4%	3.4%	3.4%

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 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:

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

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

Recommendations: Delete measure.

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
4.0%	3.6%	(0.4)%	(0.4)%

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: Performance results were influenced by appropriations in the 2010-11 General Appropriations Act for APD programs.

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: Annual number of significant reportable incidents per 100 persons with developmental disabilities living in developmental disability centers

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
21	20	(1)	(4.8)%

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 checked="" type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation: The measure falls under the benchmark based on internal protocols for Patient Safety, Incident Reporting and the utilization of pro-active behavior management strategies. Residents that may be on the verge of acting out toward staff or another resident are given verbal coaching or redirection which allows them to deal with stressful situations without incident. In addition, our facilities are working very closely with AHCA and APS to communicate more effectively regarding incident reporting which has led to better identification.

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 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:

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: Revise measure to “Annual number of critical reportable events per 100 persons with developmental disabilities living in developmental disability centers” to better reflect the quality assurance reporting process.

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 who are provided competency training and custodial care in the Mentally Retarded Defendant Program

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" 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
310	305	(5)	(1.6)%

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 checked="" type="checkbox"/> Other (Identify) |

Explanation: Admissions down from previous years.

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: Areas are providing more competency training. 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: No action required.

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 (free from abuse and neglect, safe, connected to natural support networks, treated fairly, etc.)

Action:

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

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

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 Personal Outcome Measure data collection instrument is no longer available, as it has been eliminated in the contracted quality assurance process. An alternative method is proposed.

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 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:

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

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

Recommendations: Delete measure.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Number of adults receiving services in developmental disability centers

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
1,088	883	(205)	(18.8)%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input checked="" 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 DDCs are funded at staffing levels consistent with the projected census.

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 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:

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: Requesting deletion of the measure.



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 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: The current standard was set while APD was still a program within the Dept. of Children and Families (DCF). APD inherited this standard and its employment initiative from DCF. The agency has since created its own database to better track its efforts with employment. The agency is proposing a new baseline and methodology to align with the 2010 starting point of its 5-Year Employment Plan.

Data Sources and Methodology:

Client Central Record (CCR) database
Supported Employment Tracking System (SETS) database

Methodology: Total Number of APD Customers Actively Employed DIVIDED by the Total Number of APD Customers with Meaningful Day Activities.

Baseline Requested: 23% *Direction of Indicator:* ↑ *2016/2017 Goal:* 28%

Meaningful Day Activities is defined as services that facilitate transition to gainful employment, such as volunteerism, internships, job coaching, mentoring, etc. In August of 2010, there were 17,582 APD customers in meaningful day services resulting in the employment of 4,844 individuals.

Validity: Data for the entire population group is available, eliminating the need for statistical sampling. However, the existing data reflects the number of individuals who self-report.

Reliability: The agency is migrating from its existing data collection system (SETS) to a new system (CCR). The new data source is state owned and operated. Enhancements will be made to the system this year for support coordinators to enter employment data for individuals served by the agency, as the measure is also a federal requirement that is reported quarterly.

Office of Policy and Budget – July 2011

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Number of people served in the community (not in private ICF/DDs)

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.

Data Sources and Methodology: Data reflects individuals who meet criteria for Agency services under Ch. 393, F.S., but may not necessarily be Medicaid eligible. It also includes individuals on the waiting list. The Agency is proposing to delete this measure.

Validity:

Reliability:

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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: The Agency proposes to replace this measure with a comparable measure from its new quality assurance tool. As noted in the APD Long Range Program Plan submitted in 2010, the Agency eliminated the use of the Personal Outcome Measures in 2009. Data for this measure is therefore no longer available.

Data Sources and Methodology:

Proposed Standard/Target:

Validity:

Reliability:

LRPP EXHIBIT IV: PERFORMANCE MEASURE VALIDITY AND RELIABILITY

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Reduce reliance on state-funded services in home or community-based programs.

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: Replacement of: Number of people served in the community (not in private ICF/DDs). The new measure will better reflect the governor's priority to reduce spending.

Data Sources and Methodology:

Florida Medicaid and Medicare Information System (FMMIS)
Allocation, Budget and Control (ABC) System
FY2011 – FY2012 General Appropriations

Methodology: (Average Cost-of-Care for people in Home and Community-Based Waiver programs) MINUS (Total Appropriation for Private Intermediate Care programs DIVIDED by Number of Unique Recipients of services) each year.

Direction of Indicator: ↓

Validity: Data for the entire population group is available, eliminating the need for statistical sampling.

Reliability: Data sources are state owned and operated.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100200
Measure: Increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation. (s. 393.062, F.S.; s. 20.197, F.S.; and Ch. 916, Part I, F.S.)

Action (check one):

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

Data Sources and Methodology:

Client Central Record (CCR) database
Quality Assurance (QA) database

Number of Support Plans that indicate one or more services are provided by community or other resources DIVIDED by Total Number of Support Plans.

Direction of Indicator: ↑

Validity: Data for the entire population group is in development, eliminating the need for statistical sampling.

Reliability: Data sources are state owned and operated.

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LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100200
Measure: Percent of people receiving services who meet key health, safety and quality of life outcome indicators. (Ch. 393.13 (3)(a) F.S.; Ch. 393.13 (2)(b)2, F.S.)

Action (check one):

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

Data Sources and Methodology: Data is collected from personal interviews conducted with people receiving services during quality assurance discovery processes.

Methodology: This measure is derived from seven key indicators from the National Core Indicators (NCI) and its supplemental assessment. A baseline 68.5% is indicated by FY 2010/11 data that showed people served by APD have at least five (5) of the seven (7) key quality indicators used for this measure present in their life.

Direction of Indicator: ↑

Validity: The National Core Indicators were developed by the Human Services Research Institute (HSRI) and tested to demonstrate its validity and reliability for gathering information from people with developmental disabilities in Florida. At least 30 states have now adopted the NCI tool, allowing state-to-state comparisons.

Reliability: Training in proper use of the NCI tool for key staff involved in Florida's quality assurance processes was conducted by HSRI. Inter-rater reliability among reviewers is tested regularly by the Quality Improvement Organization contracted in Florida for this purpose. Ongoing technical assistance and training is provided to ensure consistent interpretation and application of tools and is focused on improving reliability based on data from each review staff.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Annual Number of Significant Reportable Events per 100 Residents Living in Developmental Disability Centers

Action (check one):

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

Proposed Change to Measure: The tracking of Critical Reportable Incidents is a precise measure within APD that is aligned with the Abuse and Neglect Policies of the State of Florida and the policies on Abuse and Neglect Reporting, working in conjunction with Adult Protective Services (APS) and AHCA. The Significant Reportable Event (SRE) is no longer tracked by the agency as it does not align with the definitions and processes of APD, and those state policies to prevent abuse, neglect or exploitation. The number of SREs while tracked over the previous year (FY 2010-2011) trended below the benchmark by 1. Quality improvement process improvements in incident reporting in-line with APD and state policy on Abuse, Neglect and Exploitation necessitate change in the performance measure and baseline.

Data Sources and Methodology: Around the clock care in Developmental Disability Centers, which include a forensic unit for consumers requiring a secure setting, is more likely to result in Critical Reportable Incidents than a community-based ICF/DD. Therefore, this baseline was developed based on actual averages for our state run Developmental Disability Centers and the actual occurrences of Critical Reportable Incidents per Agency operating procedures 10-005, 10-006, and 10-007.

New Baseline: APD would establish a baseline of thirty (30) events the first year, and a goal to reduce Critical Reportable Incidents by ten (10) percent each year.

Direction of Indicator: ↓

Validity: The data for the entire population is available through APD systems and provides an exact number of Critical Reportable Incidents per year, which can be cross referenced from APD reports to APS at an exact number.

Reliability: Data sources are state owned and operated, and can be cross referenced to APS.

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:

Data Sources and Methodology:

Proposed Standard/Target:

Validity: The Personal Outcome Measure data collection instrument is no longer available as it has been eliminated in the contracted quality assurance process.

Reliability:

Discussion:

Office of Policy and Budget – July 2011

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Number of adults receiving services in developmental disability centers

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.

Data Sources and Methodology: The Agency is proposing to delete this measure in lieu of new measures that will include budgetary performance in the delivery of services.

Validity:

Reliability:

Office of Policy and Budget – July 2011



Associated Activities Contributing to Performance Measures

LRPP Exhibit V

No.	Approved Performance Measure for FY 2012-17	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 Day 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 Training 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)	Community Support Services
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	Intermediate Care Facilities-Developmentally Disabled
6	Percent of people receiving services in private and public facilities 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.),	Intermediate Care Facilities-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	Forensic Care
8	Number of adults receiving services in DDCs Number of adults receiving services in DDCs	Intermediate Care Facilities-Developmentally Disabled, Forensic

Office of Policy and Budget – July 2011

AGENCY FOR PERSONS WITH DISABILITIES		FISCAL YEAR 2010-11			
SECTION I: BUDGET		OPERATING		FIXED CAPITAL OUTLAY	
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT		1,013,500,529		0	
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)		167,862,905		0	
FINAL BUDGET FOR AGENCY		1,181,363,434		0	
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		30,044	220.13	6,613,544	
Support Coordination * Number of people receiving support coordination		29,927	1,152.94	34,504,144	
Private Intermediate Care Facilities For The Developmentally Disabled *		701	139,171.25	97,559,045	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings		54,590	436.96	23,853,543	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living		6,887	8,797.35	60,587,340	
Adult Day Service * Number of persons with disabilities served in Adult Day Training Service		12,021	2,216.44	26,643,882	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental		16,185	766.23	12,401,363	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services		3,715	1,775.39	6,595,562	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation		8,025	13,843.07	111,090,612	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies		6,895	1,921.79	13,250,731	
Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment		2,669	4,660.45	12,438,747	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies		8,564	6,152.94	52,693,750	
Adult Transportation * Number of persons with disabilities served in Adult Transportation		13,145	969.00	12,737,445	
Children Daily Living * Number of persons with disabilities served in Children Daily Living		1,717	13,870.34	23,815,377	
Children Day Services * Number of persons with disabilities served in Children Day Training Services		2	1,864.50	3,729	
Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental		2,389	479.74	1,146,100	
Children Respite Services * Number of persons with disabilities served in Children Respite Services		541	617.66	334,155	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation		1,393	9,093.09	12,666,681	
Children Specialized Therapies/ Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies		2,465	755.18	1,861,515	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment		3	658.00	1,974	
Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies		1,072	2,566.35	2,751,128	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program		378	67,901.26	25,666,675	
TOTAL				539,217,042	
SECTION III: RECONCILIATION TO BUDGET					
PASS THROUGHS					
TRANSFER - STATE AGENCIES					
AID TO LOCAL GOVERNMENTS					
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS					
OTHER				1,561,705	
REVERSIONS				640,584,701	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)				1,181,363,448	

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: Agency for Persons with Disabilities

APS: Adult Protective Services

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 which 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: 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, Down 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.

Down Syndrome: A disorder caused by the presence of an extra chromosome 21.

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

Host-Homes: A foster home licensed by APD for up to three beds to provide a non-treatment oriented residence for customers not requiring in-home waiver 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 facility providing competency training and testing for persons with developmental disabilities who are alleged to have committed a felony and who are court ordered into the facility. (See Forensic.)

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 non-consumable 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.

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. They were replaced by National Core Indicators (NCI) to measure Florida's performance against other states.

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 embryonic 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 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)