



agency for persons with disabilities  
State of Florida

LONG RANGE PROGRAM PLAN

Rick Scott  
Governor

Agency for Persons with Disabilities

Tallahassee, FL

Barbara Palmer  
Director

September 30, 2016

State Office

Cynthia Kelly, Director  
Office of Policy and Budget  
Executive Office of the Governor  
1701 Capitol  
Tallahassee, Florida 32399-0001

4030 Esplanade Way  
Suite 380  
Tallahassee  
Florida  
32399-0950

JoAnne Leznoff, Staff Director  
House Appropriations Committee  
221 Capitol  
Tallahassee, Florida 32399-1300

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

Cindy Kynoch, Staff Director  
Senate Committee on Appropriations  
201 Capitol  
Tallahassee, FL 32399-1300

Toll Free:  
(866) APD-CARES  
(866-273-2273)

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 2017-18 through Fiscal Year 2021-22. The internet website address that provides the link to the LRPP located on the Florida Fiscal Portal is <http://apd.myflorida.com/publications/reports/>. This submission has been approved by Barbara Palmer, Director of the Agency for Persons with Disabilities.

Barbara Palmer  
Director



## Long Range Program Plan

Fiscal Year 2017-2018  
through Fiscal Year 2021-2022



**Barbara Palmer,**  
Director

**Rick Scott,**  
Governor

September 30, 2016



## **Mission Statement**

The agency supports persons with disabilities in living, learning, and working in their communities.

## **Goals**

1. Increase access to community-based services, treatment, and residential options.
2. Increase the number of individuals with developmental disabilities in the workforce.
3. Improve management of the agency and oversight of providers.



## Agency Objectives

**Objective 1.1** Improve availability of services to people with developmental disabilities.

**Objective 2.1** Enhance overall employment services to assist in job placement, training, customized employment, and follow-up services.

**Objective 3.1** Improve provider monitoring and accountability.

**Objective 3.2** Improve agency internal operations and cost controls.



## Agency Service Outcomes and Performance Projections Tables

Goal 1: Increase access to community-based services, treatment, and residential options.

Objective 1.1: Improve availability of services to people with developmental disabilities.

**Measure 1.1.1** Number of persons with developmental disabilities served in supported living

Baseline FY 2013/14	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
5,600	5,600	5,600	5,600	5,600	5,600

**Measure 1.1.2** Percent of ICF residents who accept waiver services and move into the community

Baseline FY 2015/16	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
85%	85%	85%	85%	85%	85%

Goal 2: Increase the number of individuals with developmental disabilities in the workforce.

Objective 2.1: Enhance overall employment services to assist in job placement, training, customized employment, and follow-up services.

**Measure 2.1.1** Percent of people who are employed in integrated settings

Baseline FY 2015/16	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
27%	27%	27%	27%	27%	27%

Goal 3: Improve management of the agency and oversight of providers.

Objective 3.1: Improve provider monitoring and accountability.

**Measure 3.1.1** Percent of people receiving services who meet key health, safety, and quality of life outcome measures

Baseline FY 2013/14	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
77.9%	77.9%	90.0%	91.0%	92.0%	93.0%

Objective 3.2 Improve agency internal operations and cost controls.

**Measure 3.2.1** Administrative cost as a percent of total program costs

Baseline FY 2007/08	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
4.0%	4.0%	4.0%	4.0%	4.0%	4.0%

**Measure 3.2.2** Annual number of critical reportable incidents per 100 persons with developmental disabilities living in developmental disabilities centers

Baseline FY 2015/16	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
15	15	15	15	15	15

**Measure 3.2.3** Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the APD Forensic Services Program

Baseline FY 2015/16	FY 2017/2018	FY 2018/2019	FY 2019/2020	FY 2020/2021	FY 2021/2022
300	300	300	300	300	300



## **Linkages to Governor's Priorities**

The focus of the Agency for Persons with Disabilities (APD) on employment links to the Governor's priority of giving all Floridians the opportunity to work. APD is in the process of developing a systematic approach for job placement, customized employment, or a career path to increase employment for the hundreds of people with developmental disabilities who have expressed an interest in working. Job income expands choices for people with developmental disabilities. More income can make a difference in where they choose to live, the services they can afford, and their lifestyle.

Employing individuals with developmental disabilities has an economic multiplier effect. Their employment provides family caregivers the opportunity to work. Service delivery, such as job training, transportation, and basic life skills, creates jobs for other people in the community. Increasing the number people in the workforce acts as a stimulus for economic growth. It creates synergy that spurs investment in the community, involvement of its residents, and improvements in the quality of life.

All of the agency's goals support the Governor's goal to create healthy and safe communities. Resources that ensure the health and safety of individuals with developmental disabilities are important to all citizens. Improving the wellbeing of all members of society keep families intact, individuals productive, and communities thriving.

## Trends and Conditions Statements

The Agency for Persons with Disabilities (APD) annually serves more than 53,000 Floridians with autism, cerebral palsy, spina bifida, intellectual disabilities, Down syndrome, and Prader-Willi syndrome as defined in Florida Statutes. This year, the Florida Legislature added individuals with Phelan-McDermid syndrome to the list of people eligible for APD services. People born with this rare syndrome have a specific chromosomal abnormality. Symptoms vary in range and severity, but often include low muscle tone, difficulty moving, absent -to- severely delayed speech, autistic features, moderate -to- profound intellectual disability, and epilepsy.

The agency is responsible for three major service delivery systems as described in statute:

1. Services in the least restrictive and most community-integrated setting available (Chapter 393 F.S.);
2. Care, habilitation, and rehabilitation at state-owned and operated facilities (Chapter 393 F.S.); and
3. Competency restoration services to individuals accused of a felony and deemed incompetent to stand trial (Chapter 916 F.S.).

**Home and Community-Based Services (HCBS):** This program is an alternative to institutional care that supports individuals who live in their communities with a choice of services and living arrangements as its cornerstones. The program, known as the Developmental Disabilities Individual Budgeting waiver in Florida, or the iBudget waiver for short, is both federal and state funded. Most people enrolled for waiver services live with their families or in their own home, which costs less than an institution and results in better individual outcomes. Each year, the number of individuals enrolled on the iBudget waiver is contingent upon the availability of funds, the person's level of need, and the waiting list category. The Florida Legislature may specify which of the seven waiting list categories receives new funding. People enrolled in the iBudget waiver have the option to enroll in Community Directed Care Plus (CDC+). This optional program offers individuals more flexibility to self-manage their services and their service providers.

There are several way pathways to waiver enrollment. Most people come from the waiver waiting list. A prioritization tool, defined by law, is the mechanism used to determine an individual's waiting list category.



- Category 1: Individuals in crisis;
- Category 2: Individuals who are transitioning out of the child welfare system at the time of adoption, reunification, permanent placement with a relative, guardian, or non-relative, and individuals in the child welfare system who turn 18-years old;
- Category 3: Individuals whose caregiver has a documented condition that will render the caregiver unable to provide care in the near future, those with no caregiver, those at a substantial risk for incarceration, and those with intense physical or behavioral needs;
- Category 4: Individuals with caregivers age 70 or older;
- Category 5: Youth leaving secondary school within the next 12 months;
- Category 6: Individuals ages 21 or older; and
- Category 7: Individuals less than 21 years old.

Developmental Disability Centers (DDCs): APD operates two developmental disability centers for people who need structured care 24 hours a day. Tacachale in Gainesville and Sunland Center in Marianna are progressive communities dedicated to offering residents opportunities that enhance their quality of life and maximize their individual potential. This includes social outings, team sports, therapeutic hobbies, learning a trade, and employment in a campus-like setting.

Developmental Disabilities Defendant Program (DDDP): Individuals with developmental disabilities accused of committing a crime may be court-ordered into APD's care if there is a question about their competency. The Developmental Disabilities Defendant Program provides competency restoration services to more than 300 people each year in a secure facility. The agency also operates step-down programs for individuals determined incompetent to proceed to trial prior to discharge into the community.

## ACCOMPLISHMENTS AND HIGHLIGHTS

Groundwork laid in previous years has led to positive effects in the lives of people with developmental disabilities, their families, and caregivers. APD's goals are coming to fruition and making the Governor's effort to make Florida the nation's leader in quality of life become a reality. Recent initiatives and agency accomplishments are shaping Florida into one of the most attractive states to live, learn, work, and invest as described in the following narrative.

- The Florida Legislature's 2016 session was generous to people with developmental disabilities. Lawmakers provided new postsecondary education options by setting aside \$8 million for colleges, universities, and other schools to create transition programs. They also modified state policy to encourage job opportunities at state executive agencies for individuals with disabilities.
- Nearly 3,000 individuals left the waiting list in fiscal year 2015-16 and received the waiver services they needed to live with their families in their community. The Governor and the Florida Legislature increased appropriations for the third year in a row, funding medically necessary services to improve the quality of life for citizens with developmental disabilities.
- The agency promulgated final rules for the iBudget waiver that incorporated a new and improved algorithm to determine an individual's allocation amount for services. The rule that went into effect July 7, 2016 ensures everyone receives an individual review to determine the funding needed to provide medically necessary services to each person enrolled on the waiver.
- Some service providers received a rate increase in April 2016 that continues into this fiscal year. The Florida Legislature provided a three percent across-the-board increase to offset the impact of a U.S. Department of Labor rule for service providers that offer personal supports, life skills 1 (companion) services, respite services, and live-in residential habilitation services. The rate increase also applied to adult training services provided at the ratio of one staff member for every three clients. This action protects individuals with developmental disabilities who receive these services and gives service providers more time to adjust their business models to comply with the rule change.
- APD completed refinements to the next generation Questionnaire for Situational Information (QSI) assessment tool last fiscal year. The new QSI should better inform the agency in determining medical necessity, level of need, and resource allocation. Information collected from the QSI will alert waiver support coordinators (WSCs) of imminent risks or general threats for better support planning. The

agency is now poised for recertifying its assessors and piloting the new tool in 2017-18.

- The agency launched an automated system for Significant Additional Needs (SAN) requests in July 2016. The automated system allows support coordinators to complete SAN requests electronically and provides APD a tracking mechanism to facilitate a timely response. A SAN request, as specified by rule, provides waiver enrollees the opportunity to obtain funding above the individual's iBudget algorithm amount conditions and circumstances specified in Chapter 393 F.S.
- The agency launched an online learning management system in May 2016 that enables service providers and their employees the opportunity to complete required training at their convenience. TRAIN (Training Finder Real-time Affiliate Integrated Network) is a nationwide public health learning management system that allows users free access to distance-learning courses and mandatory APD training. The agency entered into a partnership with the Department of Health to open the online system to more users.
- A new system launched in July 2016 is strengthening APD's ability to track client health and safety issues. The agency's Incident Management System (IMS) provides a standardized means for documenting injuries, accidents, and other mishaps, including service provider response. The new system serves as a central repository for information about an individual's incident history, a provider's safety record, and frequency of incidents. Enhancements and upgrades to the system continue in response to user input and queries.
- Work continues on the migration of major business activities to technology. Mediware Information Systems, along with select APD leadership staff, began employee solution-mapping sessions earlier this year to create a new client data management system (CDMS). The new system will be the hub for all customer-related data used by service providers and agency staff.

## ENVIRONMENTAL TRENDS

### Population

Recent Census data suggest some of the nation's fastest growing metropolitan areas are in the South. The surge in baby boomer retirees is helping fuel much of this growth. Florida, a popular destination for retirees, had eight of the nation's top ten metro areas with the highest net migration rates. The influx of new residents is welcome news after migration fell to record levels during much of the recession in 2008 and 2009. Most of the state's population growth was in the Orlando-Kissimmee-Sanford vicinity, and Tamp-St. Petersburg-Clearwater area. In Hillsborough County alone, an estimated 15,000 residents resettled from other parts of the country last year.<sup>1</sup>

According to the U.S. Census Bureau, Florida's net migration in 2014-15 was 332,035 new residents. The state's population forecast is for continued growth. The annual population change between now and 2020 expected by the Florida Office of Economic and Demographic Research (EDR) will remain above a net gain of 300,000 each year.<sup>2</sup> More residents will mean more pressure on state resources and service capacity.

### Annual Florida Population Change

April 1	Population	Percent Change	Population Change
2016	20,129,234	1.58%	314,051
2017	20,445,808	1.56%	315,028
2018	20,757,668	1.53%	311,860
2019	21,066,063	1.49%	308,395
2020	21,372,207	1.45%	306,144

Source: Florida Office of Economic and Demographic Research July 6, 2016

### Demographics

The national average age of adults with developmental disabilities receiving state services is 43. Currently, one in three Americans is age 50 or older. Demographic data reflect the growing number of aging Floridians. The U.S. Census Bureau reports that 19.4 percent of Florida's population was age 65 and over in 2015, the highest among the states. Sumter County had the distinction of being the only county in the nation with a population of 1,000 or more, where the majority of its residents are ages 65 or older.<sup>3</sup> As

of June 1, 2016, APD had 2,700 people ages 60 or older receiving waiver services.<sup>4</sup> By 2030, the Census Bureau predicts Floridians ages 65 and over will represent 24% of the total state population.<sup>5</sup>

The number of people who self-identify as a minority or ethnic group continues to trend upward. Five states already have minorities as their population majority. Florida should pass that threshold sometime in the 2020s.<sup>6</sup> Hispanics are the state’s largest minority group.

### Florida Population Characteristic

Population Group	Percent (July 1, 2015)*
White	55.3%
Non-White	44.7%
○ Hispanic or Latino	24.5%
○ Black or African American	16.8%
○ Asian	2.8%
○ All Other	0.6%

Source: U.S. Census Bureau July 2016

\*Single year (2010 - 2015 series)

### Labor Market

The unemployment rate for the nation in July 2016 held steady at 4.9% percent. Workforce participation was 67.8 percent, the highest since June 2013. The economy created 255,000 jobs in July, stronger-than-expected, sending U.S. stocks toward a record high.<sup>7</sup> Unemployment in Florida was 4.7% in June 2016, a decrease of 0.6 percent from June the previous year. Florida’s overall labor market is mixed. Employers continued to hire in the past 12 months, but employment growth was flatter. Labor force participation rate in May 2016 was 58.9%.<sup>8</sup>

A Brookings Institute report issued in August 2016 ranked three metropolitan areas in Florida among the top 20 nationwide in the growth of advanced high-skilled industries.<sup>9</sup> Between 2013 to 2015, Cape Coral-Ft. Myers, North Port-Sarasota-Bradenton, and the Miami-Ft. Lauderdale-West Palm Beach regions excelled in commerce in the areas of science, technology, engineering, math, and research. The Brookings report said these businesses are valued because they bring high-paid jobs and spur innovation vital for struggling cities to transform into prosperous communities. A

strong economy has the potential to help more citizens who need state-funded services, as well as potential tax cuts for businesses.

Demographic changes affect who is in the labor pool. As the exodus of aging baby boomers from the workforce surges, both the private and public sectors are losing their most experienced workers with critical thinking skills. The U.S. Census Bureau expects the nationwide ratio of prime working-age adults (ages 25-54) in relation to retirees to drop from two working-age adults per retiree in 2015, to 1.4 working-age adults per retiree by 2030.<sup>10</sup> In Florida, these adults will represent only 35.8 percent of the total state population.<sup>11</sup> The U.S. Bureau of Labor Statistics expects health care support and practitioners will be the fastest growing occupational group from 2016 to 2024 due to demands of the aging population.<sup>12</sup>

### **Economy**

The state welcomed 57.4 million visitors at the end of the second quarter in 2016, setting a new record in tourism. It was the highest number of tourists in a six-month period in the state's history according to VISIT FLORIDA, and represented a 4.3 percent increase over last year. The Florida Office of Economic and Demographic Research (EDR) reports the state's overall economy is in good condition, but some sectors, such as housing, continue to drag. The state's economy grew by 5 percent compared to the national average of 4.4 percent in 2014, with further growth to 8.1 percent in 2015.<sup>13</sup> Gas prices hovered closer to the two-dollar mark compared to last year. The economic forecast for fiscal year 2017-18 is for continued growth, albeit not as high as previously expected according to the August 15, 2016 report issued by Florida's Revenue Estimating Conference.<sup>14</sup> The estimating conference revised the general revenue forecast downward to reflect slight softening in the economy.

### **Federal Regulation**

Significant changes in the federal requirements for delivery of Home and Community-Based Services (HCBS) will continue to affect the services and supports available to individuals with developmental disabilities. Provisions for implementation by 2019 seek to ensure that the people with developmental disabilities reside in settings that promote community integration. This will prevent the use of waiver funds in residential facilities that the federal government defines as institutional. Other provisions that go into effect emphasize individual rights, choice, and employment.

Businesses will have to spend more on their workforce as the U.S. Department of Labor begins enforcing changes to the Fair Labor Standards Act. The changes raised the salary threshold for employees entitled overtime pay for work in excess of 40 hours per week from \$23,660 to \$47,476. The greatest impact will be on salaried executives, administrators, and professionals previously exempt from earning overtime. According to

the Bureau of Economic and Business Research, Florida ranks second among the states most affected by the labor rules because of the high proportion of salaried executives, administrative, and professional workers paid below the new threshold.<sup>15</sup> Compliance with new overtime rules and requirements involving minimum wage and home care services will have a long-term impact on service providers.

## PRIORITIES AND SELECTION

The Americans with Disabilities Act (ADA) provides the framework for APD's mission — to support persons with disabilities in living, learning, and working in their communities. This landmark legislation, enacted 26 years ago, enabled people with disabilities to have more control over their lives and enjoy the same freedoms of every American citizen. The service delivery is person-centered with guiding principles so the individual will:

- Be treated with respect and dignity,
- Be the person who decides what services to receive and who delivers them,
- Be part of the community and their family's life, and
- Have opportunities to maximize their full potential, work, and become independent.

The agency's priorities revolve around three broad outcomes for individuals with developmental disabilities: 1) increasing access to services in the community 2) promoting employment, and 3) improving management of the agency and oversight of providers. What follows describes some of the major issues that need resolution, and challenges in achieving these outcomes.

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Improve access to community-based services, treatment, and residential options.

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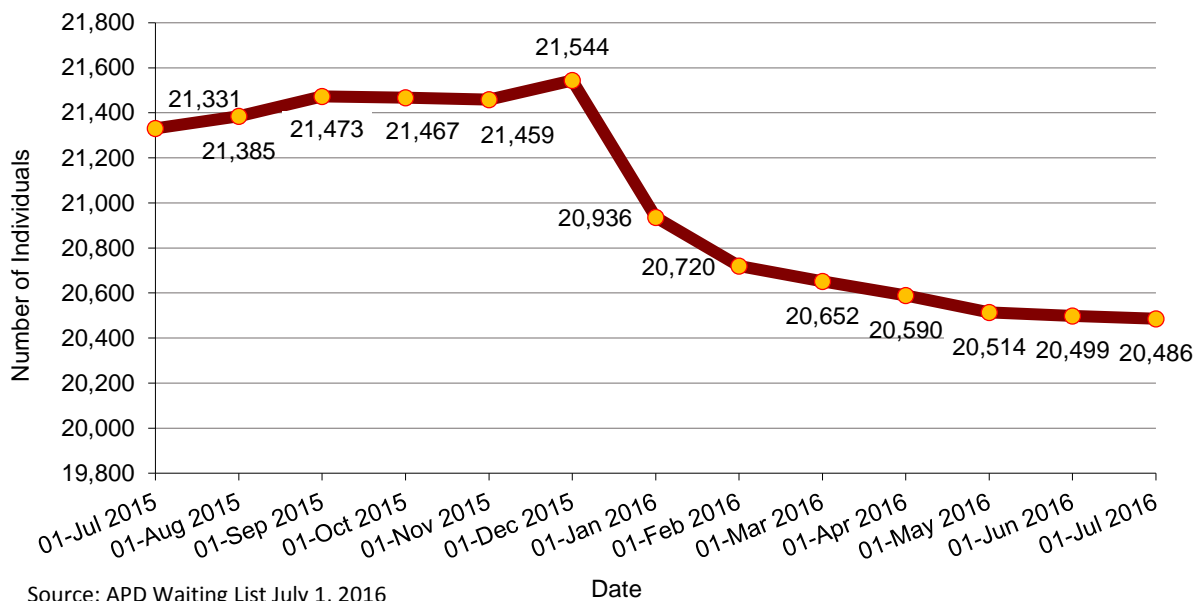
### Waiting List

Currently, demand for waiver services exceeds enrollment. The agency's waiting list for iBudget waiver enrollment continues to hover around 20,000 and, if net migration remains constant, the demand for service may have not yet reached its peak. Waiver enrollment rose from 30,795 individuals on July 1, 2015 to 32,715 on June 30, 2016 because of a legislative appropriation of more than \$40 million to reduce the waiting list. The agency enrolled an additional 1,100 people from the waiting list with other funding. Since July 1, 2015, this has included 951 individuals in crisis, 145 youth in community-based foster care, and 47 people transitioning out of intermediate care facilities for developmental disabilities and skilled nursing facilities.



Reducing the waiting list remains a priority. The Florida Legislature appropriated \$36.4 million to enroll more people for waiver services this fiscal year. Offers sent to approximately 1,300 individuals at the end of August will target individuals with critical needs and those in Category 6 who: 1) have high levels of need, 2) have been on the waiting list for 10 or more years, 3) live in the family home, and 4) are at least 30 years old. The Legislature appropriated an additional \$2.5 million to serve approximately 55 people with Phelan-McDermid syndrome statewide.

Individuals on the Waiting List by Month



Source: APD Waiting List July 1, 2016

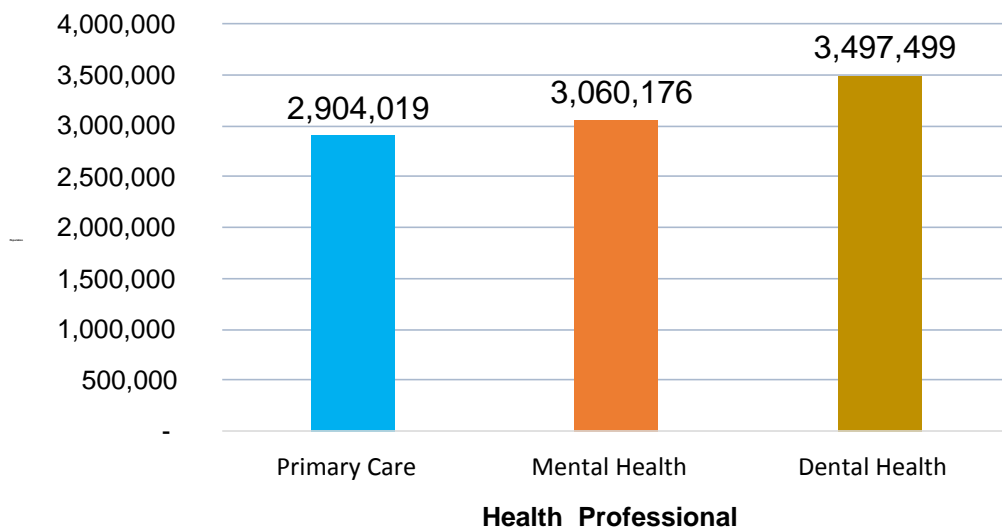
### Health Professionals

An important factor in meeting some of the challenges to accessing service will be APD's ability to retain its highly specialized clinical professionals. Florida has a health professional shortage in primary care, mental health, nursing, and dental care clinicians. According to the U.S. Department of Health and Human Services, the state does not meet established population-to-provider thresholds, leaving millions of Floridians with limited access to basic care.

Many APD processes, from client assessment and admissions to monitoring and discharges, involve registered nurses employed as medical case managers. Less than 20 percent are permanent (FTE) employees with benefits, yet they perform functions that no other employee is either legally allowed or qualified to do. Recruitment is highly competitive for nurses as they have been in short supply for the last ten years. Moreover,

the American Nurses Association warns that about one million registered nurses will reach retirement age in the next 10 to 15 years, at the same time that the aging population will increase overall demand.<sup>16</sup> In popular retiree states like Florida, the growing number of citizens that now can afford private insurance and military veterans with chronic health problems will exacerbate the nursing shortage. Even if nursing schools nationwide could produce more nurses, the U.S. Health Resources and Services Administration says distribution and other environmental factors will leave Southern states like Florida vulnerable to shortages.<sup>17</sup>

### Estimated Underserved Population in Florida \*



Source: HSRA Data Warehouse August 2016

\*The estimated underserved population is computed by multiplying the number of practitioners in the area by target population-to-practitioner ratios (2,000:1 for Primary Care; 3,000:1 for Dental Health; 10,000:1 for Mental Health Care), and subtracting this figure from the area population.

### Dual Behavioral–Mental Health Diagnosis

The National Institute of Mental Health estimates one in five adults in America had some type of mental illness in 2014. Approximately 9.8 million adults (4.1 percent) experienced serious mental illness that substantially interfered with major life activities.<sup>18</sup> Individuals with developmental disabilities also experience mental illness. In the 2014-15 National Core Indicators survey, 40 percent of adults receiving services for developmental disabilities in Florida said their physician prescribed them at least one medication for mood disorders, anxiety or psychotic disorders.<sup>19</sup>

Obtaining appropriate support and mental health services for individuals with developmental disabilities who have a co-occurring mental health diagnosis remains a challenge. Florida's fragmented mental health system creates confusion about which agencies have services. Preliminary statewide estimates suggest that more than 15,000 people with developmental disabilities have a dual diagnosis and fall into this service gap. Estimates of the frequency of dual diagnosis vary widely; however, many professionals have adopted the estimate that 30-35% of all persons with intellectual or developmental disabilities have a psychiatric disorder. Some studies show higher rates (30-50%) for children with developmental disabilities and mental health needs.

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Increase the number of individuals with developmental disabilities in the workforce.

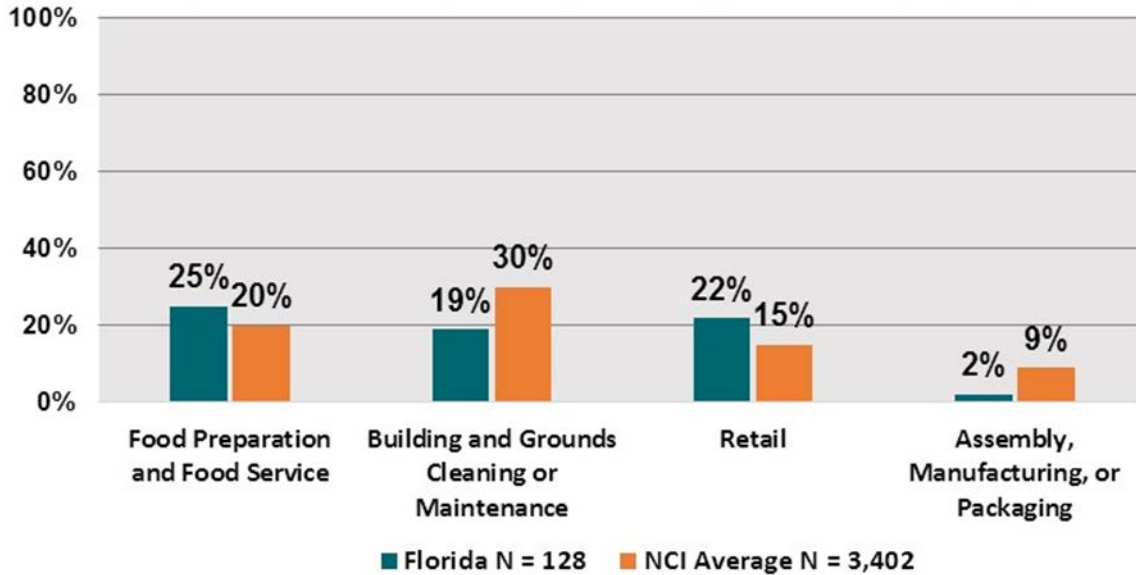
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## **Employment**

Individuals with developmental disabilities want jobs, but few are in the workplace. Data collected for the National Core Indicators (NCI) Project for 2014-15, showed one out of every 10 of them had a paid job in the community, most only working part-time. The four most common areas of employment were: 1) food preparation/food service, 2) cleaning buildings or grounds maintenance, 3) retail, and 4) assembly manufacturing or packaging.<sup>20</sup>

In Florida, employment data showed that people who have developmental disabilities receiving waiver services and those on the waiting list rose from 19 percent in 2014-15 to 22 percent in 2015-16. Additional funding helped individuals with developmental disabilities find and maintain employment last fiscal year. Filling staff vacancies strengthened the agency's effort to connect individuals with developmental disabilities to potential employers and training opportunities. Beginning January 2017, executive branch state agencies will be subject to new requirements in the hiring of individuals with disabilities. The Florida Department of Management Services is developing guidelines and training to assist human resources staff with the hiring process.

National Core Indicators Survey  
**Four Most Common Fields of Paid Community Employment**



Source: National Core Indicators Project 2014-15 Adult Consumer Survey

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**Improve management of the agency and oversight of providers.**

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**Client Data**

As the number of people with waivers grows, so does the amount of client records for APD employees to review and store. The ratio of APD staff to individuals served has not kept pace with waiver enrollment. Moreover, the agency relies heavily on manual processes and, in many cases, antiquated systems to do business. Paper records are easier to damage and harder to safeguard. Manual record keeping is time consuming and prone to errors. Decentralized records delay transfer of client documents from one provider to the next, and make it difficult for APD staff to verify services delivered. In a review of processes for automation, the agency found hundreds of spreadsheets used to collect and analyze data. The agency purchased a software solution to manage client information. Requirements gathering and business analysis for modifications to this product will continue development of a test site this fiscal year.

## Compliance

New federal rules for Home and Community Based Services (HCBS) programs require states to ensure that people with waivers reside in integrated community settings. The Centers for Medicare and Medicaid Services (CMS) considers residential facilities with more than 15 beds as institutional in nature. Owners of such facilities must reduce the number of individuals they house by 2019 or get an exemption to remain in compliance. Over 1,500 individuals with waivers resided in large group homes in Florida in July 2016. APD must assess each service provider to determine compliance, assist with correcting deficiencies, and develop a process for granting exemptions.

People with iBudget waivers and participants in the Consumer Directed Care Plus (CDC+) program fared well in quality-of-life standards in 2015-2016. APD's contracted quality improvement organization (The Delmarva Foundation) implemented new methodologies to measure performance in six broad standards in the Person-Centered Review (PCR) tool used at client interviews:

- Person-Centered Supports: Direct Services
- Rights
- Health
- Safety
- Abuse, Neglect, and Exploitation
- Community

Percentages "met" involved total results for each individual response to each question and each standard (Number of standards met DIVIDED BY Number of individuals who responded). Scores exceeded the 90 percent range for both programs in all categories.

Quality of Life Results by Waiver Type July 01, 2015 - June 30, 2016						
	iBudget Waiver			CDC+		
Standard	# Met	Total*	% Met	# Met	Total*	% Met
Person Centered Supports: Direct Services	10,284	10,783	95.4%	2,640	2,691	98.1%
Rights	6,451	6,633	97.3%	1,301	1,314	99.0%
Health	3,498	3,647	95.9%	918	937	98.0%
Safety	2,324	2,441	95.2%	607	634	95.7%
Abuse, Neglect, and Exploitation	4,087	4,233	96.6%	1,056	1,074	98.3%
Community	5,864	6,333	92.6%	1,403	1,467	95.6%
<b>Overall Score</b>	<b>32,508</b>	<b>34,070</b>	<b>95.4%</b>	<b>7,925</b>	<b>8,117</b>	<b>97.6%</b>

Each standard consisted of multiple questions. These questions allowed the agency to identify specific areas that need greater attention. For example, scores for both subgroups were below 90 percent on one indicator:

- *Person has only had limited opportunities to develop new friendship/relationships.*

*iBudget 86.6% vs. CDC+ 88.3% 1.7% Difference*

Overall, individuals served through the CDC+ program demonstrated a greater degree of outcomes met/satisfaction (97.6 %) compared to individuals served through the iBudget waiver (95.4%), although not significantly. The data suggest three areas of improvement so outcomes/satisfaction for people with waivers more closely matches CDC+ participants.

- *Person’s preferences concerning social roles in the community are addressed.*

*iBudget 88.8 % CDC+ 95.5 % 6.7% Difference*

- *Person's access to food is not restricted without reason (in licensed settings).*

*iBudget 94.6 %      CDC+ 100 %      5.4% Difference*

- *Person is supported to drive the development of goals.*

*iBudget 93.8%      CDC+ 98.1 %      4.3% Difference*

Conclusion: The overall findings for individuals in the Home and Community Based Service delivery system reveal a high degree of quality-of-life as evident by the average scores on all six standards. Limited opportunities to develop friendships and social roles in the community were the two weakest areas needing improvement. The findings reveal a greater need to train Waiver Support Coordinators and direct-care providers on community involvement, consumer rights, and person-centered planning. The agency believes it can improve quality-of-life outcomes with the development and implementation of the TRAIN learning management system, a data management system, standardized provider curricula, and revised support plans/implementation plans.

## RESPONSE AND JUSTIFICATION

Agency activities, in the short term, will focus on enrolling more people for waiver services as directed by the Florida Legislature and developing capacity to meet growing demands. As APD serves one of the most vulnerable populations, it is imperative to invest state resources in protecting health and safety to delay the costs of aging and institutionalization. Solutions must be long lasting and cost effective to keep families intact and ease their burdens. APD will align resources to strengthen services for individuals with intensive needs, increase residential options for people served in the community, promote employment and training opportunities for those who want to work, and introduce more technology into the service delivery system. The following narrative describes infrastructure, activities, and process improvements for achieving agency objectives.

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### Improve availability of services to people with developmental disabilities.

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**Waiting List:** Over 20,000 people with developmental disabilities currently wait for waiver services. In the years ahead, as they age and their family members become too frail to provide care, APD will become their lifeline. The agency will continue to offer waiver enrollments to more people this fiscal year as it explores how to leverage and coordinate services with other state agencies to meet the needs of Florida's aging population.

**Assessment:** APD plans to pilot new protocol for implementation of its new and improved Questionnaire for Situational Information (QSI) assessment tool. Accurately assessing an individual's level of need is necessary to ensure an applicant gets services to meet their needs. Testing the tool is important because the QSI is a critical component of the algorithm that determines an individual's iBudget allocation.

**Services for Intensive Needs:** The Centers for Medicare and Medicaid Services (CMS) issued notice this spring of pending rules in the application of the 2008 Mental Health Parity and Addiction Equity Act in the public sector. The rules broaden benefits for individuals receiving mental health services to include long-term care. Residential options for people with a dual diagnosis and individuals with intensive behaviors are very limited.



The supply will become scarcer as more than 200 individuals who currently live in Carlton Palms, a facility for intensive behavioral and medical services, begin to transition to smaller settings. A recruitment campaign is underway to find service providers interested in offering intensive residential services in smaller home-like environments in the community. The agency also is exploring residential options in the community for individuals who are court ordered into the agency's care.

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**Enhance overall employment services to assist in job placement, training, customized employment, and follow-up services.**

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**Employment:** Individuals with developmental disabilities remain an untapped workforce, often overlooked as a source of employees. People served by APD need exposure to the workplace to gain experience, and employers need information about the economic benefits of hiring someone with a disability. The agency will continue to increase the number of participants in the Employment Enhancement Program by collaborating with community partners to implement best practices that match individuals with developmental disabilities who want to work with employers willing to hire them. Activities will include: (1) developing internship and job-shadowing opportunities; (2) increasing outreach to service providers, organizations, and businesses in the community; (3) educating individuals, families, and advocates on the impact of employment on income, overall health and safety, Medicaid waiver eligibility, and Social Security work incentives. The agency also will explore ways to redesign adult day training to transition more individuals in ADT who want to work into employment.

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**Improve provider monitoring and accountability.**

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**CMS Compliance:** The agency will continue working with service providers who must comply with new Home and Community Based Services (HCBS) rules that go into effect March 2019. Failure by the state to comply with federal rule requirements could jeopardize APD's waiver funding and affect more than 50,000 people receiving services in the community. The new rules focus on ensuring that: (1) individuals with developmental disabilities reside in integrated community settings, (2) their plans are person centered, and (3) their choices are respected. The agency will review the results of an onsite survey of service providers conducted earlier this year to determine

compliance. APD also will track action plans, known as plans of remediation, to correct deficiencies. Providing providers technical assistance to achieve compliance is important because of the potential impact to clients who need intensive or specialized services that already are scarce. The agency is required to notify providers who do not meet requirements and terminate their HCBS funding. However, APD is collaborating with AHCA to implement an exemption process to forward to the Centers for Medicaid and Medicare Services for approval.

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### Improve agency internal operations and cost controls.

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**Electronic Information System:** As technology permeates society, so must APD adapt the way it does business. People do not want to fill out countless paper forms that ask for the same information. In today's digital world, they have neither the time nor the patience. The public expects convenient and efficient transfer of information. The agency will begin modifications to an off-the-shelf product for its new client data management system (CDMS). The new system will be web-based, allowing information to be available whenever and wherever service providers, staff, and individuals need it. Return on investment for CDMS includes streamlined processes, increased efficiency, and improved monitoring of the service delivery system. It will make it easier to uncover fraud, measure performance, and hold providers accountable.

**Online Training:** The agency launched a new web-based learning management system (LMS) in partnership with the Department of Health in May 2016 to make training more convenient for service providers, APD employees, and families. TRAIN Florida is part of a national learning management network, managed by the Public Health Foundation. The network includes, Centers for Disease Control and Prevention, Medical Reserve Corps, Health Resources and Services Administration, and the Florida Department of Health. TRAIN provides a means of tracking successful completion of required basic APD training, service-specific provider training, and in-service training. The agency will continue improving the system and adding new curricula as technology is a cost-effective means for providing access to training and the preferred method for millennials in the workforce.

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## CRITICAL POLICY AND LEGISLATIVE CHANGES

The Agency's legislative proposals still are under development.

## TASKFORCES AND WORKGROUPS

Adult Protective Services Interagency Workgroup

Agency for Persons with Disabilities/Agency for Health Care Administration (APD/AHCA)  
Policy Group

Business Leadership Network (BLN)

CDC+ Quality Advisory Committee

Community Advisory Committee of the Florida Center for Inclusive Communities

Employment First Collaboration

Family Care Council (FCC)

FDDC Abuse and Neglect Task Force

FDDC Community Living Task Force

FDDC Employment and Transportation Task Force

FDDC Self Advocacy Task Force

FDDC Wait List Strategic Plan Implementation Task Force

Florida Association of State Agency Administrative Services Directors

Florida Cabinet on Children and Youth

Florida Commission for the Transportation Disadvantaged

Florida Developmental Disabilities Council (FDDC)

Florida Genetics and Newborn Screening Advisory Council

Florida Inter-Agency Grants Consortium

Human Services Contract Administrators Task Force

Human Trafficking Interagency Workgroup

Interagency Medical Director's Committee

Interagency Medical Fraud Committee

Interagency State Review Team for Children Served by Multiple Agencies

Interagency Workgroup on Supported Employment

National Association of State Directors of Developmental Disability Services (NASDDDS)

Northwood Shared Resource Center (NSRC) Data Center Board

NSRC Data Center Board Finance and Auditing Committee

Pre-Admission Screening and Resident Review (PASRR) Interagency Workgroup

Select Advisory Panel on Adult Protective Services

State Advisory Council (SAC) for Bureau of Exceptional Student Services with Department of Education (DOE)

State Secondary Transition Interagency Committee (SSTIC) Family Involvement Subcommittee

State Steering Committee for Exceptional Students Transition Services Project

Workforce Innovation and Opportunity Act Task Force (WIOA)



# Performance Measures and Standards

## LRPP Exhibit II



## LRPP Exhibit II - Performance Measures and Standards

Department: Agency for Persons with Disabilities		Department No.: 6700000		
Program: Services to Disabled		Code: 67000000		
Service/Budget Entity: Home and Community Services		Code: 67100100		
Approved Performance Measures for FY 2015-16	FY 2015-16 Approved Prior Year Standard	FY 2015-16 Prior Year Actual	FY2016-17 Approved Standard	FY 2017-18 Requested Standard
Percent of people who are employed in integrated settings	27%	22%	27%	27%
Number of persons with developmental disabilities served in Supported Living	5,600	5,590	5,600	5,600
Percent of ICF residents who accept waiver services and move into the community	85%	68%	85%	85%
Program: Services to Disabled		Code: 67000000		
Service/Budget Entity: Program Management and Compliance		Code: 67100200		
Approved Performance Measures for FY 2015-16	FY 2015-16 Approved Prior Year Standard	FY 2015-16 Prior Year Actual	FY2016-17 Approved Standard	FY 2017-18 Requested Standard
Percent of people receiving services who meet key health, safety, and quality of life outcome measures	77.9%	95.9%	77.9%	77.9%
Administrative cost as a percent of total program costs	4.0%	2.2%	4.0%	4.0%
Program: Services to Disabled		Code: 67000000		
Service/Budget Entity: Developmental Services Public Facilities		Code: 67100400		
Approved Performance Measures for FY 2015-16	FY 2015-16 Approved Prior Year Standard	FY 2015-16 Prior Year Actual	FY2016-17 Approved Standard	FY 2017-18 Requested Standard
Annual number of reportable critical incidents per 100 persons with developmental disabilities living in Developmental Disabilities Centers (DDCs)	15	2.57	15	15
Program: Services to Disabled		Code: 67000000		
Service/Budget Entity: Developmental Services Forensic Services		Code: 67100500		
Approved Performance Measures for FY 2015-16	FY 2015-16 Approved Prior Year Standard	FY 2015-16 Prior Year Actual	FY2016-17 Approved Standard	FY 2017-18 Requested Standard
Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the APD Forensic Services Program.	300	288	300	300

Office of Policy and Budget - June 2016



# 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:** Number of persons with disabilities served in supported living

**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
5,600	5,590	(10)	(0.2%)

*ABC Program Component Count to include Independent (01) and Supported Living (11) components for both waiver and IFS.*

**Factors Accounting for the Difference:**

**Internal Factors** (check all that apply):

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

**Explanation:**

**External Factors** (check all that apply):

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

**Explanation:**

Individuals are allowed freedom of choice when selecting residential placement. They can decide how and where they want to live at any time.

**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:**

No further action is necessary.

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## LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

**Department:** Agency for Persons with Disabilities

**Program:** Services to Disabled

**Service/Budget Entity:** 67100100

**Measure:** Percent of ICF residents who accept waiver services and move into the community

**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 type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards                     |  |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
85%	68%	(17%)	(20%)

*Number of ICF residents who accept waiver services and move into the community DIVIDED BY Number of ICF residents who accept the offer to receive waiver services in the community.*

**Factors Accounting for the Difference:**

**Internal Factors** (check all that apply):

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

**Explanation:**

**External Factors** (check all that apply):

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

**Explanation:** Moving individuals out of ICFs require coordination between waiver support coordinators, family or legal guardian, service providers and Medicaid. Transitions from ICF usually take at least 90 days from the date of acceptance. The fiscal year ended while some of the clients were still in transition.

**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:**

No further action necessary.

*Office of Policy and Budget – June 2016*

## 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 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
27%	22%	(5%)	(18.5%)

*The Number of people competitively employed DIVIDED BY Number of people competitively employed PLUS the Number of people identified in the QSI who want employment.*

**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:** APD was able to fill some, but not all employment liaison vacancies last fiscal year. This resulted in a small increase from last year's performance, but not enough to meet the standard.

**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 checked="" type="checkbox"/> Training  | <input checked="" type="checkbox"/> Technology |
| <input checked="" type="checkbox"/> Personnel | <input type="checkbox"/> Other                 |

**Recommendations:** APD will continue to make employment a high priority. Training will be enhanced for agency staff and service providers to ensure every client has an opportunity for employment.

*Office of Policy and Budget – June 2016*

## LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

**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 measures

**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 type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards                     |  |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
77.9%	95.9%	18.0%	23.1%

*SUM of percent met for each quality of life indicator DIVIDED BY Number of indicators.*

**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 data reflects the first full year in the use of the Person Centered Review, an individual Interview tool used by the Quality Improvement Organization. The methodology provides more in-depth analysis of quality of life indicators. Use of the new tool also enables the Quality Improvement Organization to interview more people.

**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:** The approved standard (77.9%) should be maintained for another fiscal year before considering a baseline change.

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## 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 percentage of total cost

**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
4.0%	2.2%	(1.8%)	(45.0%)

*Budget Entity 200 (Program Mgt. & Compliance) DIVIDED BY the SUM of Budget Entity 100 PLUS Budget Entity 200, Plus Budget Entity 400, and 500.*

**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:** During the fiscal year, 147 positions and \$6.5 million of appropriations were transferred from Budget Entity 67100200 to Budget Entity 67100100 in Fiscal Year 2014-15 to realign regional functions to the 67100100 Budget Entity. In addition, performance was calculated with the equation noted above, which in addressing the change in Budget Entity 300 (to 400 and 500) in last year's Exhibit IV inadvertently omitted Budget Entities 100 and 200 from the divisor. A corrected Exhibit IV is included in this year's report.

**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:**

No further action is necessary.

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## LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

**Department:** Agency for Persons with Disabilities

**Program:** Services to Disabled

**Service/Budget Entity:** 67100400

**Measure:** Annual Number of Reportable Critical Incidents per 100 Persons with Developmental Disabilities Living in Developmental Disabilities 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 type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards                     |  |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
15	2.57	(12.43)	(83%)

*Total Number of reportable critical incidents at APD-operated institutions DIVIDED BY the Average client census MULTIPLIED BY 100 for ratio.*

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

**Explanation:** APD over estimated how many critical reportable incidents per 100 clients the agency would have to report.

**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:**

The agency will reassess reporting to rule out anomalies before proposing a change in the standard.

*Office of Policy and Budget – June 2016*



## LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

**Department:** Agency for Persons with Disabilities

**Program:** Services to Disabled

**Service/Budget Entity:** 67100500

**Measure:** Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the APD Forensic Services 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
300	288	(12)	(4%)

*Census of APD's three forensic facilities as of July 1 PLUS admissions through June 30 for the fiscal year.*

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

**Explanation:** The courts control admissions and discharges for forensic clients receiving competency services and care from APD. The agency can only estimate how many people it can serve for a given period of time.

**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:**

No further action is necessary.

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# 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

Program Management and Compliance

**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.

### **Data Sources and Methodology:**

APD is requesting a change in methodology to measure the percent of people who are employed in integrated settings. The current formula to calculate the performance of this measure is: The number of people competitively employed DIVIDED BY the number of people competitively employed PLUS the number of people identified in the QSI wanting employment. For clarity, the agency is requesting the calculation change to:

The number of people competitively employed DIVIDED BY the number of people identified in the QSI wanting employment.

There is no change in the data source. In addition, the agency proposes changing the language in the measure to specify who is served by APD and use active voice instead of passive voice (delete "who are") as follows:

Percent of people with developmental disabilities employed in integrated settings.

**Validity:** Integrated employment is defined as individuals competitively employed earning minimum wage or better in a community workforce setting. The revised methodology avoids double counting those employed in the number used as the divisor.

**Reliability:** Certification as a QSI assessor is based on reliable performance in the application of the assessment tool. Assessors are re-certified annually. Data from the ABC/iBudget system is based on individual cost plans and valid paid claims. Employment data from the agency's tracking system is reported by service providers to APD Regional staff.

## LRPP EXHIBIT IV: Performance Measure Validity and Reliability

**Department:** Agency for Persons with Disabilities

**Program:** Services to Disabled

**Service/Budget Entity:** 67100200

Program Management and Compliance

**Measure:** Administrative cost as a percent of total program costs

**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:**

The 2015 Florida legislative session changed the 67100300 budget code shared by the agency's developmental disability centers and forensic programs into two new codes (67100400 and 67100500). This request is for a technical change to the methodology for the administrative cost measure submitted last year that addressed only the new budget entities in the divisor. The methodology for measuring administrative costs should read as follows.

Budget Entity 200 (Program Mgt. & Compliance) DIVIDED BY the SUM of Budget Entity 100 PLUS Budget Entity 200, Plus Budget Entity 400, and 500.

### **Validity:**

Unchanged.

### **Reliability:**

Unchanged.

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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:** Number of persons with disabilities in supported living

**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:**

The agency is requesting a revision in methodology for supported living to align with clarification in criteria and coding in the system that tracks individuals for this measure. The data source will remain the same, Allocation, Budget, and Contract Control System (ABC). Program component code 01 will be removed from the count of the number of persons with disabilities in supported living. The new methodology for reporting performance will change to:

Count of individuals with developmental disabilities in supported living (program component code 11).

The agency will request a new standard when recoding in ABC is implemented system wide to determine a baseline. Until this occurs, the agency is unlikely to meet the approved standard (5,600). Additionally, the agency proposes changing the language in the measure to specify who is served by APD as follows:

Number of persons with developmental disabilities in supported living.

**Validity:** The change in methodology aligns with criteria that the agency's quality improvement organization uses in its quality assurance review of individuals receiving services. The clarification in criteria also aligns with information provided to regional staff that distinguishes people in supported living from individuals in independent living.

**Reliability:** The agency uses program component code 11 in ABC to track persons in supported living. ABC is the agency's system of record.

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# **Associated Activities Contributing to Performance Measures**

LRPP Exhibit V

**LRPP Exhibit V: Associated Activities Contributing to Performance Measures**

<b>Measure Number</b>	<b>Approved Performance Measures for FY 2016-17</b>	<b>Associated Activities Title</b>
1	Percent of people who are employed in integrated settings	Adult Supported Employment
		Children Supported Employment
2	Number of persons with disabilities served in supported living	Adult Supported Living
		Children Supported Living
3	Percent of ICF residents who accept waiver services and move into the community	Home and Community Services Administration
		Private Intermediate Care Facilities for the Developmentally Disabled
4	Percent of people receiving services who meet key health, safety and quality of life outcome indicators	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		
5	Administrative costs as a percentage of total cost	Home and Community Services Administration
6	Annual number of reportable critical incidents per 100 persons in Developmental Disability Centers	Intermediate Care Facilities for the Developmentally Disabled
7	Number of adults found incompetent to proceed to trial who are provided competency training and custodial care in the APD Forensics Program	Forensic Care

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AGENCY FOR PERSONS WITH DISABILITIES	FISCAL YEAR 2015-16			
SECTION I: BUDGET	OPERATING		FIXED CAPITAL OUTLAY	
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT		1,207,602,839	2,999,111	
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)		129,417,127	-1,149,111	
FINAL BUDGET FOR AGENCY		1,337,019,966	1,850,000	
SECTION II: ACTIVITIES * MEASURES	Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
Executive Direction, Administrative Support and Information Technology (2)				1,850,000
Home And Community Services Administration *	32,754	163.72	5,362,388	
Support Coordination * <b>Number of people receiving support coordination</b>	32,614	1,512.05	49,314,011	
Private Intermediate Care Facilities For The Developmentally Disabled *	674	133,790.06	90,174,501	
Program Management And Compliance * <b>Based on Administrative Components of serving people in the Community and Institutional settings</b>	57,471	249.71	14,350,833	
Adult Daily Living * <b>Number of persons with disabilities served in Adult Daily Living</b>	17,752	4,378.29	77,723,406	
Adult Day Service * <b>Number of persons with disabilities served in Adult Day Training Service</b>	12,654	2,760.84	34,935,671	
Adult Medical/Dental * <b>Number of persons with disabilities served in Adult Medical/Dental</b>	11,165	1,672.76	18,676,323	
Adult Respite Services * <b>Number of persons with disabilities served in Adult Respite Services</b>	30	21,647.73	649,432	
Adult Residential Habilitation * <b>Number of persons with disabilities served in Adult Residential Habilitation</b>	7,636	18,239.88	139,279,745	
Adult Specialized Therapies/ Assessments * <b>Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies</b>	4,078	2,029.21	8,275,135	
Adult Supported Employment * <b>Number of persons with disabilities served in Adult Supported Employment</b>	1,811	1,885.21	3,414,110	
Adult Supported Living * <b>Number of persons with disabilities served in Adult Supported Living and In Home Subsidies</b>	12,699	8,405.19	106,737,532	
Adult Transportation * <b>Number of persons with disabilities served in Adult Transportation</b>	9,499	1,389.26	13,196,539	
Children Daily Living * <b>Number of persons with disabilities served in Children Daily Living</b>	1,124	6,418.11	7,213,951	
Children Day Services * <b>Number of persons with disabilities served in Children Day Training Services</b>	154	1,316.87	202,798	
Children Medical/Dental * <b>Number of persons with disabilities served in Children Medical/Dental</b>	1,868	939.02	1,754,092	
Children Respite Services * <b>Number of persons with disabilities served in Children Respite Services</b>	2,363	2,913.48	6,884,558	
Children Residential Habilitation * <b>Number of persons with disabilities served in Children Residential Habilitation</b>	836	20,032.34	16,747,033	
Children Specialized Therapies/ Assessments * <b>Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies</b>	374	1,404.41	525,248	
Children Support Employment * <b>Number of persons with disabilities served in Children Supported Employment</b>	20	769.30	15,386	
Children Supported Living * <b>Number of persons with disabilities served in Children Supported Living and In Home Subsidies</b>	486	5,025.61	2,442,447	
Children Transportation * <b>Number of persons with disabilities served in Children Transportation</b>	114	738.77	84,220	
Community Support Services * <b>Number of persons served</b>	19,335	255.46	4,939,402	
Forensic Care *	288	97,401.25	28,051,560	
TOTAL			630,950,321	1,850,000
SECTION III: RECONCILIATION TO BUDGET				
PASS THROUGHS				
TRANSFER - STATE AGENCIES				
AID TO LOCAL GOVERNMENTS				
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS				
OTHER				
REVERSIONS			706,069,701	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)			1,337,020,022	1,850,000

### 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.

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## Agency Glossary of Terms and Acronyms

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

**Activity:** A unit of work, that 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. Agencies may certify forward outstanding payables and encumbrances at the end of a fiscal year for disbursement between July 1 and September 30 of the subsequent fiscal year. Certified forward amounts count in the year in which the funds are committed, rather than the year disbursed.

**ADT (Adult Day Training):** Services for adults with developmental disabilities that support their participation in community activities, including volunteering, job exploration, accessing community resources, and self-advocacy. Individuals generally attend ADT in facilities that are age and culturally appropriate.

**AHCA:** Agency for Health Care Administration

**APD:** Agency for Persons with Disabilities

**Appropriation Category:** The lowest line-item funding level in the Florida General Appropriations Act (GAA) that represents a major expenditure classification. Within budget entities, these categories may include: salaries and benefits, other personal services (OPS), expenses, operating capital outlay (OCO), data processing services, fixed capital outlay (FCO), etc.

**APS:** Adult Protective Services

**Anti-Fraud Activity:** Action taken by the Office of the Inspector General (OIG) for the purposes of detecting or investigating fraud against the state, usually in cooperation with other state regulatory or law enforcement agencies.

**AST:** Agency for State Technology

**Autism:** A 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 social interaction, impairment in verbal and nonverbal communication and imaginative ability, and a markedly restricted repertoire of activities and interests.

**AWD (Adults with Disabilities):** A program administered by the Division of Vocational Rehabilitation (VR).

**Baseline Data:** Indicators of a state agency's current performance level, pursuant to guidelines established by the Executive Office of the Governor (EOG) 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. A budget entity can be a department, division, program, or service and have one or more program components.

**CARES Program:** Comprehensive Assessment and Review for Long-Term Care Services.

**CAS (Contract Audit System):** A tracking system for contract audits performed by the Department of Financial Services' Bureau of Auditing, as well as a mechanism to make audit information available for public viewing via FACTS.

**CDC+ (Consumer Directed Care Plus):** A Medicaid State Plan option 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. To be eligible for CDC+, an individual must be receiving services from APD through the iBudget waiver. CDC+ provides the opportunity to improve quality of life empowering the consumer to make choices about the kinds of supports and services needed. Together with the assistance of a trained CDC+ consultant, who is also a waiver support coordinator, the consumer plans his or her own supports, manages an established budget, and makes decisions regarding care, and staff hired.

**CDCFEA (Consumer Directed Care Fiscal Employer Agent):** Refers to the individual or representative who performs claims payment, payroll, banking, and financial reporting.

**CDC+ Purchasing Plan:** A written spending plan that details the services and supports the CDC+ consumer or their designated representative may purchase with the CDC+ monthly budget allocation.

**CDC+ Representative:** An uncompensated individual designated by the consumer to assist in managing the consumer's budget allowance and needed services [ss. 409.221 (4)(c)(6), F.S.]. The CDC+ representative advocates for and acts on behalf of the consumer in CDC+ matters.

**CDMS (Client Data Management System):** A centralized consumer record system that upon implementation will collect key data at the client specific and provider specific level so analysis, tracking, and reporting processes can be improved.

**CP (Cerebral Palsy):** 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 with developmental disabilities who is determined eligible by the agency for services as defined in Chapter 393, F.S.

**CMAT:** Comprehensive Assessment and Review for Long-Term Care Services

**CMS (Centers for Medicare and Medicaid Services):** The federal agency with oversight of Medicaid State Plan and Medicaid Waiver services.

**Commodity:** Any of the various supplies, materials, goods, merchandise, equipment, information technology, and other personal property, including a mobile home, trailer, or other portable structure with floor space of less than 5,000 square feet, purchased, leased, or otherwise contracted for by the state and its agencies. Commodity also includes interest on deferred-payment commodity contracts, approved pursuant to section 287.063, F.S. However, commodities purchased for resale are excluded from this definition. Printing of publications shall be considered a commodity, when let upon contract pursuant to section 283.33, F.S., whether purchased for resale or not.

**Contract:** A formal written agreement, legally binding, between the agency and a contractor detailing the commodities or services to be provided by the contractor in exchange for the price to be paid for such commodities or services by the agency. The agreement includes terms and conditions which the parties must perform in compliance with statutes and regulations and specific details on how, when, where, and to whom the contractor should provide a commodity or service.

**Contract Document:** Refers to the contract and any amendments, renewals, extensions that may include attachments, exhibits, and documents incorporated by reference regardless of the method of procurement.

**Contractual Service:** Refers to a vendor's time and effort rather than the furnishing of specific commodities. The term applies only to those services rendered by individuals and firms who are contractors. Services may include, but are not limited to, evaluations, consultations, maintenance services, accounting, security, management systems, management consulting, educational training programs, research and development studies or reports, and professional, technical, and social services. Contractual service does not include any contract for the furnishing of labor or materials for the construction, renovation, repair, modification, or demolition of any facility, building, portion of building, utility, park, parking lot, or structure or other improvement to real property, entered into pursuant to Chapter 255, F.S. and Rule 60D-5, F.A.C. Commodities, which are acquired incidental to the acquisition of a contractual service, are considered to be part of the acquisition or purchase of the contractual service.

**CWE (Crisis Waiver Enrollment):** Individuals determined to be in crisis will be prioritized for available waiver placements in order of the severity of crisis, with the severity determined by risk to the health, safety, and welfare of each applicant. Crisis criteria for waiver enrollment in order of priority include: the applicant is currently homeless; the applicant exhibits behaviors that, without provision of immediate waiver services, may create a life-threatening situation for the applicant or others; the applicant's current caregiver is in extreme duress and is no longer able to provide for the applicant's health and safety because of illness, injury, or advanced age.

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

**Data Processing Services:** Electronic data processing services provided by or to state agencies or the judicial branch that 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

**DCF/FSFN (Department of Children and Families Florida Safe Families Network):** A system that houses data from investigations of abuse, neglect, and exploitation.

DCF/OAH (Department of Children and Families Office of Appeal Hearings): A work unit that has bidirectional access to APD's Legal Case Management System (LCMS) for Medicaid hearings.

DD (Developmental Disability): A disorder or syndrome defined in Florida statute as autism, cerebral palsy, intellectual disability, Down syndrome, Prader-Willi syndrome, Phelan-McDermid syndrome, and spina bifida that manifests before the age of 18, and constitutes a substantial handicap that can be expected to continue indefinitely.

DD Month (Developmental Disabilities Awareness Month): March is national Developmental Disabilities Awareness Month to help raise awareness and advocate for people with intellectual and developmental disabilities.

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

DDDP (Developmental Disabilities Defendant Program): A secure residential facility that provides competency training and testing for persons with developmental disabilities alleged to have committed a felony and who are court ordered into the facility. (See Forensic.)

DEAM (Disability Employment Awareness Month): October is Disability Employment Awareness Month that raises awareness about disability employment issues and celebrates the many contributions of exceptional employers and workers with disabilities.

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

DEO (Department of Economic Opportunity): The state agency that collects data and information from employers of APD clients.

DOEA: Department of Elder Affairs

DOH: Department of Health

DOH Vital Statistics: A state office within the Department of Health that maintains a data system for Social Security numbers and dates of birth used by state agencies for matching client data.

DOR: Department of Revenue

Down Syndrome: Also known as trisomy 21, is a genetic disorder caused when abnormal cell division results in extra genetic material from chromosome 21. This genetic

disorder, which varies in severity, causes lifelong intellectual disability and developmental delays, and, in some people, causes health problems.

**EEP (Employment Enhancement Project):** The EEP is a program funded by the Florida Legislature to provide opportunities and supports to clients on the APD Waiting List who want to work, obtain, and maintain competitive employment or internships. The Florida Legislature has funded this program since Fiscal Year 2013-14. Job seekers must be 18-years-of-age or older and on the APD Waiting List to qualify.

**EOG:** Executive Office of the Governor

**Estimated Expenditures:** Refers to amounts likely to be spent during the current fiscal year. These amounts will be computer generated, based on current year appropriations, adjusted for vetoes, and special appropriations.

**Expenditure:** An amount of money spent or the action of spending money.

**Expenses:** 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.

**External Providers:** An interface format as defined by Medisoft Information Systems for the agency's client data management system that includes progress notes, quarterly reports, incident report, monthly reports, waiver documentation, and medication administration.

**Extraordinary Needs:** Pursuant to Section 393.0662(1)(b), F.S., needs that would place the health and safety of the client, the client's caregiver, or the public in immediate, serious jeopardy unless an increased amount of funds allocated to a client's iBudget, as determined by the algorithm, is approved.

**FACTS (Florida Accountability Contract Tracking System):** An online tool developed by the Department of Financial Services to make the government contracting process in Florida more transparent through the creation of a centralized, statewide contract reporting system.

**FAS: (Financial Application System)** A system used to query the Florida Accounting Information Resource Subsystem (FLAIR).

**FCC (Family Care Council):** Groups of volunteers who advocate, educate, and empower individuals with developmental disabilities and their families, in collaboration with APD to bring quality services to individuals for dignity and choice. Each council

consists of individuals with developmental disabilities, as well as, parents, siblings, grandparents, and guardians of people with developmental disabilities who qualify for APD services.

FCCF (Family Care Council Florida): The organization that functions as a statewide board of the FCC. Its membership includes the chairperson of each Family Care Council.

FCO (Fixed Capital Outlay): Real property (land, buildings, fixtures, etc.) including additions, replacements, major repairs, and renovations which extend useful life, or 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.

FFMIS: Florida Financial Management Information System

FLAIR: Florida Accounting Information Resource Subsystem

FLAIR RECON: Florida Accounting Information Resource system, reconciles invoices between ABC and FAS.

Florida Whistleblowers Act: Section 112.3187, F.S. creates a procedure for complainants to follow and provides a civil right of action against retaliation for some complainants.

FMMIS: Florida Medicaid Management Information System

FMS: Fee Maintenance System

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

F.S.: Florida Statute

FSFN (Florida Safe Families Network): An intranet website operated by the Department of Children and Families for state employees to access adult and child protective services reports, findings, and training.

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

FTE: Full-Time Equivalent

GAA (General Appropriations Act): Provides moneys for annual period beginning July 1 and ending the following year on June 30, as well as supplemental appropriations,

to pay salaries and other expenses, capital outlay—buildings or other improvements, and other specified purposes of various agencies of state government.

GH (Group Home): A licensed residential facility that provides a family living environment including supervision and care necessary to meet the physical, emotional, and social needs of its residents as established in Chapter 393, F.S.

GR (General Revenue): A collection of state taxes and selected fees deposited into a fund and appropriated by the Legislature for any purpose.

HCBS (Home and Community-Based Services): Services provided by the agency through the iBudget Waiver. The iBudget Waiver provides supports and services to eligible persons with developmental disabilities living at home or in a home-like setting. The iBudget Waiver program is funded by both federal and matching state dollars. This waiver reflects use of an individual budgeting approach and enhanced opportunities for self-determination. The purpose of this waiver is to promote and maintain the health of eligible individuals with developmental disabilities, provide medically necessary supports and services to delay or prevent institutionalization, and foster the principles of self-determination as a foundation for services and supports.

HIPAA (Health Insurance Portability and Accountability Act): The primary goal of the 1996 federal law is to make it easier for people to keep health insurance, protect the confidentiality and security of healthcare information, and help the healthcare industry control administrative costs.

iBudget (Individual Budgeting): A term associated with APD's Home and Community-Based Program that is used to describe both an electronic system and a method for determining a person's allocation of funds for services. iBudget considers the legislative appropriation for the fiscal year and individual characteristics correlated with costs to generate a base budget amount for each person. iBudget also is the short form of the Developmental Disabilities Individual Budgeting waiver, an approved HCBS waiver also used by participants in the CDC+ program.

ICF/DD (Intermediate Care Facility/Developmental Disabilities): Facilities for the treatment and care of individuals with developmental disabilities licensed by the Agency for Health Care Administration.

ICF/IID (Intermediate Care Facility for Individuals with Intellectual Disabilities): A facility licensed in accordance with state law and certified in accordance with federal regulations, pursuant to the Social Security Act, as a provider of Medicaid services to individuals who are intellectually disabled or who have a related condition. A residential facility licensed and certified by AHCA under part VIII of Chapter 400, F.S. The term also refers to a Medicaid benefit that enables states to provide



comprehensive and individualized health care and rehabilitation services to individuals with intellectual disabilities or related conditions to promote their functional status and independence. ICF/IIDs provide active treatment, which is continuous, aggressive, and consistent implementation of a program of specialized and generic training, treatment, and health or related services, directed toward helping the individual function with as much self-determination and independence as possible.

ID/RD: Intellectual Disability/Related Condition

IFS (Individual and Family Services): A fund provided to the state through federal Social Services Block Grant (SSBG), authorized under Title XX of the Social Security Act. This fund may be used for a variety of services. However, federal interpretation specifically prohibits the use of SSBG funds for providing medical services, dental services, and for providing direct stipends to individuals or their families.

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. Another term for the word “measure.”

Input: See Performance Measure.

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

Intellectual Disability: 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 intellectual disabilities 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., an intellectual disability 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 that 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.

**Internal Audit:** An OIG examination of financial or performance issues internal to the agency resulting in an official report. These audits may also involve providers under agency contract.

**Internal Investigation:** An OIG inquiry of misconduct, misuse, and misappropriation issues internal to the agency and resulting in an official report. Internal investigations may also involve providers under agency contract.

**IOE:** Itemization of Expenditure

**IT:** Information Technology

**IVR (Interactive Voice Response):** A system used for touchtone phone claims submission.

**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.

**LBC (Legislative Budget Commission):** A standing joint committee of the Legislature. The Commission reviews and approves/disapproves agency requests to amend original approved budgets; reviews agency spending plans; and takes 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.

**LBR (Legislative Budget Request):** 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 is requesting authorization by law to perform.

**LCMS (Legal Case Management System):** A sub system that uses ABC to send demographic information and track fair hearings.

**L.O.F.:** Laws of Florida

**LRPP (Long-Range Program Plan):** 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 based on state priorities, established 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.

LTC (Long-Term Care): 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

Management Review: An OIG assessment of agency management issues, usually related to a program, process, or personnel, requested by agency managers.

Medicaid Waiver: See Waiver

MSP: Medicaid State Plan

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.

NASBO: National Association of State Budget Officers

NASDDDS (National Association of State Director of Developmental Disabilities Services): An organization that represents the nation's agencies in 50 states and the District of Columbia providing services to children and adults with intellectual and developmental disabilities and their families. NASDDDS promotes visionary leadership, systems innovation, and the development of national policies that support home and community-based services for individuals with disabilities and their families.

NCI (National Core Indicators): 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 in collaboration with the Human Services Research Institute (HSRI). 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.). Florida joined over 45 states that are using the National Core Indicators, gaining the capacity to compare Florida against other states and national trends.

NF (Nursing Facility): Medicaid-certified nursing facility.

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

OCO (Operating Capital Outlay): Equipment, fixtures, and other tangible personal property of a non-consumable and nonexpendable nature. OCO generally applies to items valued at \$1,000 or more that have an expected life of one year or more. This may include hardback-covered bound books circulated to students or the 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.

OIG (Office of the Inspector General): An agency unit responsible for oversight and performance of internal investigations, audits, and management reviews.

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

OPPAGA (Office of Program Policy Analysis and Government Accountability): OPPAGA is an office of the legislature that provides data, evaluative research, and objective analyses to assist legislative budget and policy deliberations. OPPAGA also conducts research as directed by state law, the presiding officers, or the Joint Legislative Auditing Committee.

OPS (Other Personal Services): Refers to an employment classification and a budget category for compensation for services rendered by a person who is not a regular or full-time employee in an established position. This includes but is not be limited to, temporary employees, students, graduate assistants and fellows, part-time academic employees, board members, consultants, and others specifically budgeted for an agency in this category.

Outcome: See Performance Measure

Output: See Performance Measure

Outsourcing: The contracting with a vendor for the delivery of a service or item, and includes the responsibility for performance. Outsourcing includes everything from contracting for minor administration tasks to contracting for major portions of activities or services that support the agency mission.

PASRR (Preadmission Screening and Resident Review): A federal requirement to help ensure that individuals are not inappropriately placed in nursing homes for long-term care. PASRR requires all nursing facility applicants evaluated for serious mental illness and/or ID/RC, are offered the most appropriate setting for their needs (in the community, a nursing facility, or acute care settings), and receive the services they

need in those settings. A Level I PASRR screen identifies whether an individual referred for admission into an NF has or is suspected of having an SMI and/or an ID diagnosis. The DOEA CARES program or the entity to which CARES delegates this responsibility performs the Level I PASRR screening for all adults. The CARES program is also responsible for a request of a Level II PASRR evaluation when appropriate for adults. DOH is AHCA's delegate for completion of the Level I PASRR screen for children under the age of 21 years seeking entry to an NF. -CMAT- within DOH performs the Level I PASRR screening for children. The CMAT is also responsible for a request of a Level II PASRR evaluation for any child when appropriate. A Level II PASRR confirms or rules out an SMI and/or ID diagnosis. It is an in-depth evaluation of the individual and is a determination of the need for NF services. The Level II PASRR also evaluates what specialized services, if any, the individual needs. APD (or its designee) is responsible for completing the PASRR Level II evaluations and determinations for intellectual disabilities (ID) or related conditions. The DCF Mental Health program office (or their designee) is responsible for completing the PASRR Level II determinations for SMI.

**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 managed or spent. The activities (outputs) associated with the expenditure of the funds are not measured at the state level. NOTE: This definition of "pass through" only applies for the purposes of long-range program planning.

**PBPB/PB2:** Performance-Based Program Budgeting

**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. Three types used for the LRPP are:

- 1) Input means the quantities of resources used to produce goods or services and the demand for those goods and services.
- 2) Outcome means an indicator of the actual impact or public benefit of a service.
- 3) Output means the actual service or product delivered by a state agency.

**Phelan-McDermid Syndrome:** A rare condition due to a chromosomal abnormality. Symptoms vary in range and severity, but often include low muscle tone, difficulty

moving, absent –to- severely delayed speech, autistic features, moderate –to- profound intellectual disability, and epilepsy.

PMDS: Payroll Management Data System

Policy Area: A grouping of related activities that reflect major statewide priorities. Policy areas summarize data at a statewide level by using the first two digits of the 10-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 an intellectual disability, or learning disabilities and behavioral problems.

Primary Service Outcome Measure: A legislatively approved performance measure that best reflects or quantifies 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.

Procurement: The act of obtaining commodities or contractual services through standardized methods, policies, or law.

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. In some instances, a program consists of several services, and 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 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.

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

**Purchasing Categories/Thresholds:** The categories related to specific dollar amounts that govern required procurement procedures as established by section 287.017, F.S.

**QIO:** A quality improvement organization, such as Delmarva, that conducts activities related to quality information, provider monitoring, and plans of remediation for APD.

**QSI (Questionnaire for Situational Information):** This questionnaire is the approved tool and method utilized by the agency for evidence-based client assessments. The QSI gathers key information (physical, behavioral, and functional areas) about an individual's life and need for supports from APD. Only employees who are QSI certified may administer the assessment.

**Reference Check:** An OIG task performed as part of an agency's hiring process. A job candidate is screened against OIG files and prior actions. The results of the screening are reported to the hiring authority.

**Regions or Regional Office:** Refers to the structure of the agency's field offices from consolidation of 14 area offices into six (6) regions.

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

**Rish Park:** A recreational area named after William J. (Billy Joe) Rish that is owned and operated by APD. The park is located on the St. Joseph Peninsula near Port St. Joe and Cape San Blas in Northwest Florida. The park is specifically designed for individuals with disabilities and their families. It features include an accessible Olympic-size swimming pool, boardwalk, and cabins for overnight lodging.

**ROM (Regional Operations Manager):** An executive-level manager who operates and directs activities in APD's six regional offices and any field offices within their region. ROMs report to the Deputy Director of Operations.

**SAN (Significant Additional Needs):** A term associated with a request for additional funding that if not provided would place the health and safety of the individual, the individual's caregiver, or public in serious jeopardy. As authorized under Section 393.0662(1)(b), F.S., a SAN is categorized as extraordinary need, significant need for one time or temporary support or services, or significant increase in the need for services after the beginning of the service plan year.

**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.

Secure Web for Consultants: An application to view only the monthly reporting statements.

Secure Web-Based Payroll Systems: Also known as the CDC+ timesheet system, it is used for claims submission, collection, and reporting, and available in both English and Spanish.

Service: See Budget Entity

Service Provider: An individual or business determined eligible to deliver Medicaid services and has an agreement with APD to provide services to people with developmental disabilities.

SETS (Supported Employment Tracking System): An internet-based tracking system used for tracking consumers that have jobs or working to obtain jobs. Consumer demographic information is uploaded into SETS from ABC nightly. Information from the Department of Revenue and DEO is uploaded quarterly. The system interacts with ABC in real time for EEP claim payments.

SIMS (Supply and Inventory Management System): A tracking system for non-client related supplies.

SL (Supported Living): Supported Living is a category of individually determined services designed and coordinated in such a manner as to assist adult clients who require ongoing supports to live independently as possible in their own homes, be integrated into the community, and participate in community life to the fullest extent possible.

SMI: Serious Mental Illness

Spina Bifida: A birth defect (a congenital malformation) in the vertebral column in which part of the spinal cord, which is normally protected within the vertebral column, is exposed. 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. People with spina bifida can have difficulty with bladder and bowel incontinence, cognitive (learning) problems, and limited mobility.

SSI (Supplemental Security Income): A benefit administered by the Social Security Administration for disabled adults and children with limited income and resources. Americans ages 65 and older without disabilities who meet financial criteria also may be eligible for SSI benefits.

SSRC: Southwood Shared Resource Center

Standard: A level of performance, a measure of outcome, or output.



SWOT: Strengths, Weaknesses, Opportunities, and Threats

TCS: Trends and Conditions Statement

TF: Trust Fund

TRW: Technology Review Workgroup

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

UR/CSR (Utilization Review/Continued Stay Review): The periodic evaluation of an individual's need for continued stay in an institutional care facility.

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

VR: Division of Vocational Rehabilitation is a federal-state program within the Department of Education that helps people who have physical or mental disabilities get or keep a job.

Waiting List: In order to enroll on the iBudget Florida waiver, a person must submit an APD service application; meet the eligibility criteria for APD, as defined in Section 393.063, F.S.; meet level-of-care criteria for the iBudget waiver, as found in the federal waiver document; and, funds must be available. Pursuant to Section 393.065(5), F.S., persons who meet APD eligibility criteria and level-of-care criteria for the iBudget waiver are placed on a waiting list for waiver services in one of seven (7) priority categories. There is not an actual timeframe for the length of waiting. Each year, the number of individuals who can be added to the waiver is contingent upon the availability of funds, level of need, and waiting list category.

Waiting List Priority Categories: Section 393.065(5), Florida Statutes describes the waiting list priority categories. There are seven categories described as follows:

- Category 1: Individuals in crisis.
- Category 2: Individuals who are transitioning out of the child welfare system at the time of adoption, reunification, permanent placement with a relative, guardian, or non-relative, and individuals in the child welfare system who turn 18-years old.
- Category 3: Individuals whose caregiver has a documented condition that will render the caregiver unable to provide care in the near future, those with no caregiver, those at a substantial risk for incarceration, and those with intense physical or behavioral needs.

- Category 4: Individuals with caregivers 70 years of age or older.
- Category 5: Youth leaving secondary school within the next 12 months.
- Category 6: Individuals ages 21 or older.
- Category 7: Individuals less than 21 years older

Waiver: Refers to the Home and Community-Based Services program and iBudget waiver authorized under Title IX of the Social Security Act. Waivers provide an alternative program to institutional care. The iBudget waiver consists of state and federal matching funds for services so individuals live in their community rather than live in an institutional setting.

WAN: Wide Area Network

WSC (Waiver Support Coordinator): A person who is selected by the individual to assist the individual and family in identifying a consumer's capacities, needs, and resources; finding and gaining access to necessary supports and services; coordinating the delivery of supports and services; advocating on behalf of the individual and family; maintaining relevant records; and monitoring and evaluating the delivery of supports and services to determine the extent to which they meet the needs and expectations identified by the individual, family and others who participated in the development of the support plan.