

LONG RANGE PROGRAM PLAN

Rick Scott

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Director



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Agency for Persons with Disabilities
Tallahassee, FL
September 30, 2012

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

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

Michael Hansen, Staff Director
Senate Budget Committee
201 Capitol
Tallahassee, FL 32399-1300

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 2013-14 through Fiscal Year 2017-18. The internet website address that provides the link to the LRPP located on the Florida Fiscal Portal is <http://www.apd.myflorida.com/publications/reports/index.htm#plans>. This submission has been approved by Barbara Palmer

Sincerely,



Barbara Palmer
Director



agency for persons with disabilities
State of Florida

Long Range Program Plan

**Fiscal Years 2013-2014
through 2017-2018**



**Barbara Palmer,
Director**

**Rick Scott,
Governor**



Mission Statement

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

Goals

1. Efficiently manage Agency budget within fiscal allocation
2. Increase employment opportunities for individuals with developmental disabilities
3. Increase access to community-based services, treatment, and residential options for persons on the waitlist and not eligible for the waiver
4. Improve management and oversight of Agency and provider services



Agency Objectives

Objective 1.1: Develop Systems and Controls for Cost Containment

Objective 2.1: Increase Competitive Employment

Objective 3.1: Identify and Improve Access to Services and Supports

Objective 4.1: Develop an Integrated Quality Management System



Agency Service Outcomes and Performance Projections Tables

Objective 1.1: Develop Systems and Controls for Cost Containment

Outcome 1.1: Administrative cost as a percent of total program costs

Baseline FY 2007/2008	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
4.0%	4.0%	4.0%	4.0%	4.0%	4.0%

Objective 2.1: Increase Competitive Employment

Outcome 2.1: Percent of People who are Employed in Integrated Settings

Baseline FY2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
23%	22%	25%	28%	31%	34%

Objective 3.1: Identify and Improve Access to Services and Supports

Outcome 3.1: Reduce Reliance on State-funded Services in Home or Community-based Programs

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
(\$107,460)	N/A	N/A	N/A	N/A	N/A

Outcome 3.2: Number of Persons with Disabilities Served in Supported Living

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
4,139	5,700	5,800	5,900	6,000	6,100

Outcome 3.3: Increase Use of Services and Opportunities that are not Funded by the Medicaid Home and Community-Based Waiver or Other Appropriation.

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
N/A	N/A	N/A	N/A	N/A	N/A

Baseline information will be determined during the first quarter of FY 2014-2015.

Objective 4.1: Develop an Integrated Quality Management System

Outcome 4.1: Annual Number of Reportable Incidents per 100 Persons with Developmental Disabilities Living in Developmental Disabilities Centers

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
30	20	20	20	20	20

Outcome 4.2: Number of Adults Found Incompetent to Proceed to Trial who are Provided Competency Training and Custodial Care in the Mentally Retarded Defendant Program

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
390	300	300	300	300	300

Outcome 4.3: Percent of People Receiving Services who Meet Key Health, Safety, and Quality of Life Outcome Measures*

Baseline FY 2011/2012	FY 2013/2014	FY 2014/2015	FY 2015/2016	FY 2016/2017	FY 2017/2018
50.8%	50.8%	52.9%	52.9%	52.9%	52.9%

*Based upon the current data trend, APD is unable to make five year projections at this time. FYs 2015-2018 are a flat-line projection of the expected FY 2014/2015 result.



Linkage to Governor's Priorities

1. Accountability Budgeting

- Agency Goal 1: Efficiently Manage Agency Budget within Fiscal Allocation

2. Reduce Government Spending

- Agency Goal 3: Increase Access to Community-Based Services, Treatment, and Residential Options for Persons on the Waitlist and not Eligible for the Waiver

3. Regulatory Reform

- Agency Goal 4: Improve Management and Oversight of Agency and Provider Services

4. Focus on Job Growth and Retention

- Agency Goal 2: Increase Employment Opportunities for Individuals with Developmental Disabilities



Trends and Conditions Statement

Agency Primary Responsibilities Based on Statute

The Agency for Persons with Disabilities (Agency) serves persons with developmental disabilities – Autism, Cerebral Palsy, Down Syndrome, Mental Retardation, Prader-Willi Syndrome, and Spina Bifida - through collaboration with service providers, communities, families, and individuals served. Chapter 393 and subsection 916.301-916.304 (3), Florida Statutes, mandate that the Agency:

(1) Serve individuals in the least restrictive and most community-integrated setting available.

(2) Provide competency restoration services to individuals accused of a felony and deemed incompetent to stand trial

The Agency serves more than 29,000 people in the community through the Developmental Disabilities Home and Community-based Services (HCBS) Tier Waiver. The purpose of the Developmental Disabilities HCBS Waivers is to provide services to customers in the community and maximize their independence and community integration. Supported employment, job-coaching, supported living, and in-home companion services are some of the services provided through the waiver. Waiver Support Coordinators (WSCs) assist customers and their families in developing support plans and assessing non-waiver funded services in the community. When the non-waiver funded services are not sufficient to meet customer needs, the WSC assists the customer with assessing providers of waiver-funded services.

Some customers are also served in state-operated institutional care facilities, Developmental Disability Centers (DDCs). DDCs provide services to individuals who need intensive levels of care and whose needs may not be met in a group or family home setting. DDCs are an all-inclusive residential facility where customers receive clothing, meals, therapies, and recreational activities provided by the residential facility.

Individuals who are deemed incompetent to stand trial due to a developmental disability are provided competency restoration services at the Mentally Retarded Defendant Program (MRDP), a secure forensic facility located in Chattahoochee, FL. The program trains individuals on elements of trial competency and evaluates competency for the courts. The program also evaluates the defendants to determine if they are suitable to return to community settings or require longer term treatment to acquire skills that will prepare them for success in their future environments. Forensic competency services are also provided in the community.

Agency Priorities

The Agency's priorities, selected to support the vision, are focused on more efficiently managing waiver funds; addressing the service needs of individuals on the waitlist; increasing employment opportunities, and improving training of persons with developmental disabilities; and better developing and utilizing non-waiver funded supports and services. The Agency is working toward a model of service to persons with developmental disabilities that uses non-waiver funded services procured through the development of strong community partnerships as the cornerstone of service provision. The community-partnership focused model will allow customers to meet their health and safety needs while supporting them in being fully-integrated members of their communities. The Agency will focus on allowing customers and their families more control; fostering and strengthening community partnerships with organizations that can provide services, including integrated employment, internship, and volunteer opportunities; and finding ways of connecting people on the waiting list with services in the community. Administrative streamlining, quality oversight of service providers, and improvements in data collection and reporting are also important components in helping the Agency achieve its vision. Over the next five years, the Agency will implement and maintain an ongoing process of streamlining administrative processes, increasing employment opportunities, strengthening community resources, and implementing and maintaining quality monitoring measures and budget management tools.

The Agency is focused on streamlining Agency functions in order to maximize the amount of resources devoted to helping customers meet their health and safety needs and maximize their quality of life. Tactics the Agency will examine in the pursuit of efficiently manage the budget and streamlining the organizational structure will include consolidating the number of field offices and reducing the number of building leases held, reviewing the use of services for which customers are approved, and standardizing employee positions and processes across the state. These changes will free up funds currently directed to leases and rentals as well as introduce the possibility of telecommuting for more employees. In addition, service utilization reviews will allow the Agency to gain a better understanding of what services, and how many units of them, are most often needed by customers. Having better information of how much of an allocated service is actually used will help prevent the over-allocation of services and the over-commitment of funds that happens as a result. Funds that are no longer allocated to services that go unused will allow for increased funding of other services and the provision of services to more individuals.

Strengthening community resources will further the vision of waiver-funded services being a last resort. Customers will be able to connect to community organizations and businesses that are capable of providing services at no, or reduced, costs to the state. The use of community businesses, organizations, and individuals will promote the integration of customers in their community and help them achieve a better quality of life built around community and family supports. In order to address this priority, the Agency is working to build a more robust and up-to-date online directory for customers to find resources and services in their communities, redesigning the functions of community affairs coordinators at the local level, and reviewing best practices on how to match existing community resources to identified customer needs.

Employment and opportunities for training are a major concern for many of our customers and employment serves as a means of independence, social engagement, and community integration. The Agency is working to identify new employers open to providing employment and internship opportunities to persons with developmental disabilities. In addition to developing a stronger network of employers, the Agency will also focus on increasing training and educational opportunities, as well as educating customers on how to gain and maintain employment benefits.

To further the goal of improving quality and oversight, the Agency is implementing an enterprise quality management and electronic client-centered record system to:

1. Ensure the well-being and safety of the consumers we serve, and maximize self-sufficiency through the programs we provide:
 - Reduce the wait list for services by enhancing community and natural supports.
 - Increase the number of people employed in integrated settings.
 - Increase the independence of people receiving services through expansion of the Consumer-Directed Care Plus program.
 - Reduce reliance on large institutions as service settings.
2. Improve customer outcomes and service quality:
 - Increase provider focus on achieving customer outcomes through quality assurance reviews and quality improvement initiatives.
 - Emphasize a customer-service approach to quality management in community-based service programs, to enhance results.

Strengthen core competency training for all persons providing direct care. This project takes into consideration the business and technical environments of APD that require continual monitoring, analysis and enhancements. Customer outcomes and service quality provide the core foundation upon which clients can be served. This project is instrumental in supporting the Agency in its achievement of these goals. The final product, an integrated, enterprise system, will support the Agency in meeting its client-focused goals of: (1) improved customer service, (2) improved quality assurance, (3) improved quality monitoring of all providers, (4) accountability to the clients served, and (5) development of outcome-based performance scorecards that rank provider performance and service commitments to our clients. In addition, we will work with the Agency to develop requirements for a Quality Management system to ensure outcomes can be measured.

The system will produce the data necessary to populate robust agency and provider scorecards that measure health and safety standards, provider license requirements, employment trends, fiscal accountability, client goals and objectives, provider implementation activities, and client progress. The system is scheduled to go-live in mid to late 2013.

The efforts to address the Agency's priorities will be focused around utilizing the Agency's strengths and capitalizing on opportunities while remaining cognizant of threats and means of addressing any impact they might have on the Agency.

Strengths and Opportunities

- **iBudget Florida**

The Agency is progressing toward the goal of enrolling all individuals receiving services through the Developmental Disabilities HCBS Waivers into iBudget Florida. While there have been individual challenges to the revised cost plans under iBudget, the enrollment efforts overall have been a success. In addition to revising spending plans, the system presents the opportunity for better data collection on spending and service utilization patterns and justifications. The iBudget implementation plan is on schedule with over 13,000 customers enrolled.
- **Agency redesign**

The agency is undergoing a redesign in order to streamline Agency functions, reduce administrative costs, better use valuable human and other resources in a manner that will strengthen capacity for local communities to better serve both waiver and non-waiver persons with disabilities. The Agency is undergoing transition from 14 areas to 6 regions that geographically is aligned with the Department of Children and Families (DCF).
- **Development of relationships at the local level**

In order to insure the long-term stability of Developmental Disabilities HCBS Waivers services to persons with developmental disabilities, the Agency needs to look at ways to effectively and efficiently manage the budget. Over 29,000 people are currently served on the waiver with another 21,000 waiting to be enrolled in the waiver program. One of the largest challenges facing the Agency is the provision of services to individuals on the waiting list for the Developmental Disabilities HCBS Waivers. Increasing the availability of and access to non-waiver funded community resources is a key component in providing services to those on the wait list as well as reducing the amount of waiver-funded services used by those persons enrolled on the waiver. The Agency is working to identify more sources of services that are available in the community and do not use waiver funds, as well as increase access to these services through updating and refinement of the resource directory. A more robust network of community partners, along with awareness of the services offered, will allow people not currently enrolled on the waiver to receive more services, as well as reduce reliance on waiver-funded services for those people enrolled on the waiver.

Weaknesses and Threats

- **Lack of transition plans for customers exiting the K-12 school system**

5,300 of the 29,000 people on the waiver, are in the 15 to 22 years old age group and will be leaving the school system. Persons with developmental disabilities leaving the school system without supports and a transition plan often

face the risk of losing productive and meaningful sources of activity, socialization, and community integration. Transition plans for students leaving the education system are needed to insure they have a clear post-school path that make use of their abilities and engages them in the community.

- Lack of standardization in processes and procedures
The Agency is working to standardize procedures and practices across the state. Standardizing organizational structure and policies and procedures will enable the Agency to operate more efficiently and streamline communication between regional offices and the state office.
- Large caseloads for support coordinators
Large caseloads mean that support coordinators and employment liaisons have less time for individualized attention to customers.
- Lack of staff to devote to cost plan reviews
Cost plan reviews provide an opportunity to review the necessity of recommended services. The reviews can serve as a means of determining if certain services must be paid by the waiver or if there might be community providers, and can also be an opportunity to see if there might be more cost-effective means of delivering a service.
- Sheltered workshops might pose a litigation threat
Employment is a goal for many persons served by the Agency and serves as a means of community integration and independence. The Agency's employment efforts are focused on integrated and competitive employment as opposed to employment in sheltered workshops where customers are not integrated into the wider community and are often paid an insubstantial wage. The practice of sheltered workshops may also pose a litigation threat. There is currently a class-action lawsuit in Oregon challenging the reliance on sheltered workshops as a violation of the Americans with Disabilities Act and the Rehabilitation Act. Integrated employment opportunities will be increased for persons with developmental disabilities through educational campaigns on gaining and maintaining employment benefits, increasing access to vocational training, and reviewing performance standards for supported employment service providers. The Agency is also looking at different models of self-employment and increasing the availability of internship and volunteer opportunities for persons with developmental disabilities.
- Lack of clarity on the role of, and expectations from, providers
Ensuring that customers receive effective and high-quality services that meet their health and safety needs, as well as promote community-integration, requires strong management and oversight of the Agency and service providers. The Agency has developed provider scorecards to track the performance of service providers and is in the process of developing an Agency scorecard.

- **Fraud and abuse in Medicaid**

Historically, Medicaid programs have been vulnerable to fraud and abuse. The agency wishes to begin a concerted initiative to address fraud and abuse as it impacts APD programs and to cooperate with other Medicaid agencies in their fights against fraud, waste and abuse. Our initiative will entail study and evaluation of anti-fraud programs and operations and the education of staff and providers. We will adopt those initiatives that offer the best return and where possible use programs adopted by other Medicaid agencies to reduce cost and increase effectiveness across the Medicaid program. We would like to commit 2 FTE to this program. Because this is will be a management task, we believe that FS 20.055 precludes assigning this initiative to the Office of Inspector General.

- **Aging caregivers**

The Agency needs to be able to address the needs of customers with ageing caregivers once their caregivers are no longer able to care for them. As their caregivers age, the companion, home-care needs, and residential settings of the customers may change. As caregivers age and are less able to provide care for persons receiving services, the companion or in-home medical care of customers may increase and their residential settings may need to change as well. The ability of caregivers for persons on the wait list also needs to be considered, as one of the means of crisis enrollment on the waiver is the inability of the guardian to provide care. Proactive planning is needed to insure that customers with aging caregivers do not experience a lapse in necessary services if their guardian is unable to continue providing care for them.

Justification of Revised or Proposed New Programs and/or Services

No new programs or revisions to programs are being proposed by the Agency.

Justification of the Final Projection for each Outcome

Administrative cost as a percent of total program costs.

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

For FY 2011/2012, APD's administrative costs were 3.4%. This measure decreased by 0.6% from the previously fiscal year. The decline in administrative costs was caused by two significant impacts to the Agency's appropriations: continued Legislative reductions in administrative funding and non-recurring appropriations for

APD programs. The Agency will continue to meet or exceed this standard by streamlining the organization and developing tools to monitor and control cost.

Percent of people who are employed in integrated settings.

Individuals with developmental disabilities seek employment and training opportunities for self development, gaining independence and interacting with others in the community. Employment of people with developmental disabilities has declined for the second straight year and is being addressed by building a wider network of potential employers, increasing access to vocational training and institutions of higher learning, developing internships, providing volunteer opportunities, and educating individuals receiving APD services on how to gain and maintain employment benefits. The Agency requesting a revision in methodology to better reflect those efforts.

Number of persons with disabilities served in supported living.

Supported living continues to be the fastest growing residential option outside of the family home. In 1988, there were 200 people in supported living. This July, that number rose to 5400. Living at home or elsewhere in the community costs far less than institutional care. The supported living program is designed to offer people with developmental disabilities greater freedom, control and choice of living arrangement, and the opportunity for full integration in their communities. Participants have a variety of natural supports, but also have the opportunity to select from a variety of supports and services available through both Tier and iBudget Waivers.

Major barriers toward further expansion are affordable housing options throughout the state and shrinking Individual and Family Supports funding. Staff report that as long as the Agency has the capability to provide start-up funds (particularly rental security and utility deposits) and ongoing monthly subsidy payments, they can assist people to live in their own home.

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

The agency is projecting to have a reliable data source available to report on this measure during the last quarter of FY 2013/14. Baseline information will be determined during the first quarter of FY 2014/15.

Annual number of reportable incidents per 100 persons in DDCs.

Within the developmental disabilities population are people in fragile health or with medically complex conditions that require round-the-clock care. Hundreds of these individuals reside in two state operated developmental disabilities centers in Gainesville and Marianna. These individuals and others, who were grandfathered by law to live there, receive all their services onsite.

The measure for monitoring their health and safety was revised in the FY 2011-2012 LRPP to reflect a policy change to incident reporting. Whereas the measure previously counted only significant reportable incidents the revised measure captures all reportable incidents for analyzing trends to ensure the health and safety of residents and staff. The Agency is requesting a revision to the target now that there is data to estimate the frequency of incidents.. APD proposes re-setting the benchmark to 20

reportable incidents per 100 residents and collecting another 12 months of data to determine whether the revised benchmark is in the appropriate range or just the reflection a year with an unusually low number of incidents.

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

Other people requiring care and 24-hour supervision are those facing trial and deemed incompetent to proceed. Numbers served are determined by the courts. These individuals receive competency training in both secure and non-secure facilities.

The Agency proposes a language modification for this measure to better reflect the number of people served by APD forensic programs. The measure would change to: "Number of individuals served in the APD Forensic Services Program". This is a measure of program participants at MRDP, Sunland and Tacachale. It reflects the number of unduplicated admissions to secure and non-secure APD forensic programs. The measure counts the number of residents as of the first day of the fiscal year, and adds the total admissions over the course of the fiscal year to calculate the number served rather than a bed count. The measure is a census of Pathways, Seguin and Step-Out program participants added to the census of MRDP.

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

The Agency is part of a majority of states that use National Core Indicators (NCI) to measure their performance on Centers of Medicare and Medicaid requirements. The agency looks at seven health, safety, and quality of life indicators for the Long-Range Program Plan. The seven indicators measure the extent to which a person is:

- free from abuse and neglect;
- connected to family and natural support networks;
- empowered to direct the design of services to accomplish desired goals;
- exercises his/her rights; and
- in best possible health.

The percentage of individuals sampled attaining at least five of the seven indicators provided the basis of measurement for this objective. The distribution of outcomes is represented in a scale of zero (0) to seven (7). A score of zero (0) indicates that none of the indicators were attained by an individual. A score of seven (7) indicates that all of the indicators were met for the individual. The FY2011-2012 standard was established as 68.5%. The percent of individuals attaining five or more indicators for 2011 / 2012 was 50.8% and serves as a level of performance. Possible factors for the percentage score attained for FY2011-2012 can be associated with (a) limited resources such as dental services, behavioral analysis providers, transportation providers, etc., (b) aging population with increased health issues, natural supports, not enough health coverage, (c) legal/legislative change associated with limited budget to fund services, (d) staff capacity of providers associated with low wages, turnover and training that may limit the number of available providers.

A revision in methodology is proposed to align this measure with the Director's performance measure reported to the Governor on a quarterly basis. The scoring recommended reflects an overall quality-of-life indicator is the average percentage score for all seven response indicators . Using this methodology, the baseline for FY2010-2011 was 86.7% and for FY2011-2012 is 77.9%.

List of Potential Policy Changes Affecting the Agency Budget Requests

No policy changes affect the Agency's budget request.

List of Changes which would Require Legislative Action

There are no changes at this time requiring legislative action.

List of Taskforces and Workgroup in Progress

1	1915j Waiver State Plan
2	3rd National Guardianship Summit Standard of Excellence
3	APD/AHCA Policy Group
4	Big Bend Chapter, Florida State Guardianship Association-chairperson
5	Child Abuse Prevention and Permanency Planning Advisory Council
6	Children and Youth Cabinet Technology Collaboration
7	Commission for the Transportation Disadvantaged
8	DOE Stakeholder's Workgroup
9	DOEA-ARDC Expansion
10	DOH-APD Oral Health Collaboration
11	Florida Cabinet on Children and Youth
12	Florida Center for Inclusive Communities, Community Advisory Council
13	Florida Developmental Disabilities Council (The Agency has multiple partnerships with the Council)
14	Florida Genetics and Newborn Screening Advisory Council
15	Florida Independent Living Council
16	Florida State Guardianship Association- board member
17	Foundation for Indigent Guardianship - chairperson
18	iBudget Florida Stakeholders' Group
19	Interagency Agreement Workgroup for Educational Services to Children, served by DCF
20	Inter-agency Medical Fraud Committee
21	Multi-Agency Headquarters Interagency Workgroup for Children being served by DCF
22	National Guardianship Association
23	Northwood Shared Resource Center (NSRC) Data Center Board
24	NSRC Data Center Board Finance and Auditing Committee
25	Oral Health Florida Special Needs work group
26	Quality Council
27	Residential Services Roundtable Chair
28	Restoration of Capacity
29	Select Advisory Panel on Adult Protective Services
30	Special Needs Shelter Committee (DOH)
31	State Secondary Transition Interagency Committee (SSTIC) Family Involvement Subcommittee
32	Taskforce on Fostering Success
33	Volunteers of Florida, Inclusion Council
34	Wait List Task Force
35	Workforce Florida, Inc Board of Directors



Performance Measures and Standards

LRPP Exhibit II

LRPP Exhibit II - Performance Measures and Standards

Department: Agency for Persons with Disabilities	Department No.: 6700000
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Program: Services to Disabled	Code: 67100000			
Service/Budget Entity: Home and Community Services	Code: 67100100			
Approved Performance Measures for FY 2012-13	Approved Prior Year Standard FY 2011-12	Prior Year Actual FY 2011-12	Approved Standards for FY 2012-13	Requested FY 2013-14 Standard
Percent of people who are employed in integrated settings	31.0%	17.0%	23.0%	22.0%
Reduce reliance on state-funded services in home or community-based programs	N/A	(\$107,460)	N/A	N/A
Number of persons with disabilities served in supported living	5,066	5,400	4,319	5,600

Program: Services to Disabled	Code: 67100000			
Service/Budget Entity: Program Management and Compliance	Code: 67100200			
Approved Performance Measures for FY 2012-13	Approved Prior Year Standard FY 2011-12	Prior Year Actual FY 2011-12	Approved Standards for FY 2012-13	Requested FY 2013-14 Standard
Administrative costs as a percent of total program costs	4.0%	3.4%	4.0%	4.0%
Increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation	N/A	N/A	N/A	N/A
Percent of people receiving services who meet key health, safety and quality of life outcome indicators	N/A	50.8%	68.5%	77.9%

Program: Services to Disabled	Code: 67100000			
Service/Budget Entity: Developmental Services Public Facilities	Code: 67100300			
Approved Performance Measures for FY 2012-13	Approved Prior Year Standard FY 2011-12	Prior Year Actual FY 2011-12	Approved Standards for FY 2012-13	Requested FY 2013-14 Standard
Annual number of reportable incidents per 100 persons in DDCs	21	8.6	20	20
Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program	310	289	390	310



Assessment of Performance for Approved Performance Measures

LRPP Exhibit III

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

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

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
31%	17%	14% under	-45%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

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

Explanation:

While competing priorities has been extensive, the primary factor for the drop in achievement is an inexact estimate of previous level of achievement. Training is needed for APD as well as service provider staff.

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input checked="" 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: Technology for data collection, tracking and reporting is not available. In addition, accountability by providers in furnishing data has been unreliable.

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

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

Recommendations:

Ensure (a) providers are held accountable for reporting employment outcome data, and (b) the APD Enterprise System includes automation needed for providers to submit data directly and for analysis at local, regional and state levels.

Office of Policy and Budget – July 2012

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

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

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
N/A	(107,460)	N/A	N/A

Factors Accounting for the Difference:

Internal Factors (check all that apply):

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

Explanation: This outcome is being captured in another measure.

External Factors (check all that apply):

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

Explanation:

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

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

Recommendations: Requesting deletion of this measure.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100100
Measure: Number of persons 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
5,066	5,400	334 over	6.6%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

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

Explanation: Supported Living (SL) continues to be the fastest growing residential option in Florida outside of family home. Individuals residing in SL have the opportunity to select from a variety of supports and services made available thru HCBS waivers to live as independently as possible in their own home.

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: Major barrier is affordable housing units. Limited IFS dollars to assist in monthly stipends.

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: Exceeded expectations. Continue working with Florida Housing in developing more affordable housing options.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

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

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
4.0%	3.4%	(0.6)%	(0.6)%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input 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: Performance results were influenced by appropriations in the 2011-12 General Appropriations Act for APD programs.

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

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

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

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100200
Measure: Increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation

Action:

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

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

Factors Accounting for the Difference:

Internal Factors (check all that apply):

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

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Resources Unavailable | <input checked="" 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:

APD does not currently have a system available to capture the data for this measure.

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 (Identify) |

Recommendations: The Agency is working to develop a systematic means of collection for this data source including the existing Allocation, Budget and Contract Control system (ABC). Staff will be responsible for collecting and updating information of the usage of non-waiver funded services.

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 indicators

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
N/A	50.8%	N/A	N/A

Factors Accounting for the Difference:

Internal Factors (check all that apply):

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

Explanation:

FY 2011/2012 was to establish a baseline, no difference 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 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:

FY 2011/2012 was to establish a baseline, no difference to report.

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:

N/A

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Annual number of reportable incidents per 100 persons in DDCs

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
30	8.6	21.4 under	71%

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:

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:

This was a new measure for the FY 2011-2012 LRPP in that the APD Developmental Disability Centers policy changed with regard to Incident Reporting as was outlined in the measure change explanation submitted last year. The measure previously counted only Significant Reportable Incidents and was modified per APD Policy #10-005, 10-006 and 10-007 to capture all reportable incidents such that the information could be used for trending and analysis to insure the health and safety of our residents and staff. The agency would like to reduce the target number for the measure as we feel the benchmark was too high at 30 incidents per 100 residents given the number came in at 8 per 100 residents. Therefore, we would like to lower the benchmark to 20 Reportable Incidents per 100 residents for the second year of this measure such that we can continually push to improve our performance as well as determine whether the benchmark is in the appropriate range or if we had a year with an unusually low number of incidents.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Agency for Person with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100300
Measure: Number of adults found incompetent to proceed who are provided competency restoration services

Action:

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

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
310	289	21 under	7%

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:

For the FY 2011-2012 the impact of competency training is one variable that diminishes this number as defendants are prepared successfully to face their charges in court. In addition, the number of admissions fell thus holding the number of people served down as well. However, given the dynamic nature of those arrested and placed in the system we feel this measure should remain the same but the verbiage used to describe the measure modified to "Number of Adults found incompetent to proceed who are provided competency restoration services within the APD Forensic Services Program", which is a more precise description of what is being measured.

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:

Given the dynamic nature of the volume of those arrested and placed in the APD Forensic Services Program for both the secure and non-secure environments, we feel this measure should remain the same but the verbiage used to describe the measure modified to "Number of Adults found incompetent to proceed who are provided competency restoration services within the APD Forensic Services Program", which is a more precise description of what is being measured.



Performance Measure Validity and Reliability

LRPP Exhibit IV

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

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

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 data source is the APD Questionnaire for Situational Information (QSI), the ABC Data System, the Supported Employment Data Systems (SETS) and provider reporting on the number of people served by APD who are competitively employed. The proposed method of measurement is:

- Numerator: The number of people competitively employed,
- Denominator: The number of people competitively employed plus the number of people identified in the QSI who want to be employed.

Validity:

The proposed measure of integrated employment will be defined as those people competitively employed (at least minimum wage and working in the community workforce) and by the above methodology. The proposed revision will align this LRPP measure with the Agency's quarterly employment performance measure reported to the Governor.

Reliability:

QSI assessors are trained and certified based on reliable performance in application of the assessment and are recertified annually. Data from the ABC system is based on individual cost plans and valid paid claims. Data from SETS is based on provider self-reporting. An automated data base is under construction to ensure data from providers has greater reliability.

Office of Policy and Budget – July 2012

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 served 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:

Data Source: Allocation Budget Control System (ABC)

Methodology: ABC Program Component Count to include Independent (01), Supported Living (11) and Transitional (12) componets for both waiver and IFS.

Validity: This change will improve the validity of the data by capturing the entire population as oppose to a statistical sample.

Reliability: Data sources are state owned and operated.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

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

Action (check one):

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

Data Sources and Methodology: Upon further analysis, the Agency realizes the measure does not accurately reflect the cost of serving persons in the community versus serving people in institutions. The outcome this measure is seeking to address is better captured in "number of persons with disabilities served in supported living" and "increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation." These measures show the number of people served in supported living, which tends to cost less than serving people in institutional settings, and the amount of non-waiver funded services used.

Validity:

Reliability:

Office of Policy and Budget – July 2012

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to Disabled
Service/Budget Entity: 67100200
Measure: Percent of people receiving service who meet key health, safety, and quality of life indicators.

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 to use the average of all seven indicators being met instead of only the top 3. The Agency is also requesting that the data source be changed to concrete data that will be obtained from an enterprise-wide quality management system. Individual customer satisfaction will also be incorporated in the final data analysis.

Data Sources: Quality management system and consumer interviews.

Methodology: This indicator assesses the quality of life of individuals served during a specific period of time. A baseline of 77.9% is indicated for FY 2011/2012. The methodology to be used will be in line with the Agency scorecard submitted to the governor's office. The Agency will determine key health and safety standards that incorporate National Core Indicators along with the Agency-identified standards.

Validity: The National Core Indicators were developed by the Human Services Research Institute (HSRI) and tested to demonstrate its validity and reliability for gathering information from people with developmental disabilities in Florida. At least 30 states have now adopted the NCI tool, allowing state-to-state comparisons. The Quality management system that will be implemented will be a system that has been successfully implemented in other states that serve individuals with developmental disabilities in addition best practices will be incorporated into the framework for the system.

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

Office of Policy and Budget – July 2012

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department: Agency for Persons with Disabilities
Program: Services to the Disabled
Service/Budget Entity: 67100300
Measure: Annual number of Reportable Incidents per 100 persons in the state owned DDCs

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:

This was a new measure for the FY 2011-2012 LRPP in that the APD Developmental Disability Centers policy changed with regard to Incident Reporting as was outlined in the measure change explanation submitted last year. The measure previously counted only Significant Reportable Incidents and was modified per APD Policy #10-005, 10-006 and 10-007 to capture all reportable incidents such that the information could be used for trending and analysis to insure the health and safety of our residents and staff. The agency would like to reduce the target number for the measure as we feel the benchmark was too high at 30 incidents per 100 residents given the number came in at 8 per 100 residents. Therefore, we would like to lower the benchmark to 20 Reportable Incidents per 100 residents for the second year of this measure such that we can continually push to improve our performance as well as determine whether the benchmark is in the appropriate range and we just had a year with an unusually low number of incidents.

Validity:

This is a valid measure of the occurrence of Reportable incidents within APD facilities that present a potential danger to resident or staff health and safety. It is a key indicator of the types of incidents occurring within these environments as well as the frequency incidents occur such that management can modify operations to minimize potential risks.

Reliability:

Training on Incident Reporting is a part of every staff members' orientation and annual training within the agency and facilities, which includes the policy and procedure for addressing Reportable Incidents. This is a reliable measure of the implementation of this policy across all the APD facilities and the differentiation between incidents that require closer scrutiny apart from daily incidents which occur in this environment of care.

Office of Policy and Budget – July 2012

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

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

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:

Our goal will be to modify the verbiage of this measure to capture the true nature of the measure, the actual number of persons served by APD Forensic Services. Therefore this would change to "Number of adults found incompetent to proceed who are provided competency training and custodial care in the APD Forensic Services Program". This is a valid output measure of the program participants and cost per person for the APD Forensic Services Program, which is actually housed at MRDP, Sunland and Tacachale. The measure captures the actual number of unduplicated admissions to the agency secure and non-secure forensic environments. The measure counts the number of residents as of the first day of the fiscal year, and adds the total admissions over the course of the fiscal year to calculate the number served. This measure is used rather than a bed count. The measure includes the census of the secure and non-secure forensic programs at the Pathways, Seguin and Step-Out programs added to the MRDP total to capture all forensic environment residents. The methodology is (census of the 3 forensic facilities as of July 1 + admissions through June 30 = total individuals served) and is a useful measure that can also be utilized for other analytical purposes.

Validity:

This is a valid measure of the actual number of individuals that are admitted and ordered by the courts to the APD Forensic Services program which includes secure and non-secure environments for those individuals found incompetent to proceed on felony criminal charges and unable to reside in a community based environment.

Reliability:

This is a reliable measure of the actual number of consumers served with the resources allocated to the APD Forensic Services Program that includes secure and non-secure residential custodial care.

Office of Policy and Budget – July 2012



Associated Activities Contributing to Performance Measures

LRPP Exhibit V

No.	Approved Performance Measure for FY 2012-17	Associated Activities Title
1	Percent of people who are employed in integrated settings.	Adult Supported Employment, Children Supported Employment
2	Reduce reliance on state-funded services in home or community-based programs.	Home and Community Services Administration
3	Number of persons with disabilities served in supported living	Adult Supported Living, Children Supported Living
4	Increase use of services and opportunities that are not funded by the Medicaid home and community-based waiver or other appropriation.	Home and Community Services Administration
5	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
6	Annual number of reportable incidents per 100 persons in DDCs	Intermediate Care Facilities-Developmentally Disabled
7	Number of adults found incompetent to proceed who are provided competency restoration services.	Forensic Care

Office of Policy and Budget – July 2012

AGENCY FOR PERSONS WITH DISABILITIES		FISCAL YEAR 2011-12			
SECTION I: BUDGET		OPERATING		FIXED CAPITAL OUTLAY	
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT		1,014,963,478		0	
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)		41,123,179		0	
FINAL BUDGET FOR AGENCY		1,056,086,657		0	
SECTION II: ACTIVITIES * MEASURES		Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
<i>Executive Direction, Administrative Support and Information Technology (2)</i>					0
Home And Community Services Administration * Number of Medicaid Waiver clients enrolled		29,958	101.81	3,049,932	
Support Coordination * Number of people receiving support coordination		29,679	1,348.53	40,023,003	
Private Intermediate Care Facilities For The Developmentally Disabled * Number of adults receiving services in Developmental Service Public Facilities		693	138,298.34	95,840,752	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings		55,294	418.14	23,120,751	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living		9,082	7,311.03	66,398,761	
Adult Day Service * Number of persons with disabilities served in Adult Day Training Service		11,677	2,693.78	31,455,245	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental		9,888	1,250.98	12,369,706	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services		3,758	1,457.87	5,478,677	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation		7,805	19,280.09	150,481,069	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies		6,016	2,376.46	14,296,765	
Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment		2,314	1,628.28	3,767,838	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies		8,013	6,715.84	53,814,013	
Adult Transportation * Number of persons with disabilities served in Adult Transportation		9,575	1,333.82	12,771,371	
Children Daily Living * Number of persons with disabilities served in Children Daily Living		779	10,491.75	8,173,076	
Children Day Services * Number of persons with disabilities served in Children Day Training Services		2	31,676.50	63,353	
Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental		1,457	490.15	714,151	
Children Respite Services * Number of persons with disabilities served in Children Respite Services		1,472	1,965.97	2,893,914	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation		434	27,934.25	12,123,463	
Children Specialized Therapies/ Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies		893	1,845.00	1,647,586	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment		1	549.00	549	
Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies		593	3,781.63	2,242,509	
Children Transportation * Number of persons with disabilities served in Children Transportation		199	240.17	47,794	
Community Support Services * Number of persons served		1,149	625.44	718,634	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Mentally Retarded Defendant Program		346	72,522.69	25,092,852	
TOTAL				566,585,764	
SECTION III: RECONCILIATION TO BUDGET					
PASS THROUGHS					
TRANSFER - STATE AGENCIES					
AID TO LOCAL GOVERNMENTS					
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS					
OTHER					
REVERSIONS				489,498,919	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)				1,056,084,683	

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

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



Agency Glossary of Terms and Acronyms

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

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

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

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

AHCA: Agency for Health Care Administration

APD: Agency for Persons with Disabilities

APS: Adult Protective Services

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

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

and imaginative ability, and a markedly restricted repertoire of activities and interests.

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

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

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

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

CIO: Chief Information Officer

CIP: Capital Improvements Program Plan

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

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

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

Data Processing Services: The electronic data processing services provided by or to state agencies or the judicial branch which include, but are not limited to, systems

design, software development, or time-sharing by other governmental units or budget entities.

DCF: Florida Department of Children and Families

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

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

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

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

EOG: Executive Office of the Governor

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

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

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

FFMIS: Florida Financial Management Information System

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

FLAIR: Florida Accounting Information Resource Subsystem

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

F.S.: Florida Statutes

FTE: Full-Time Equivalent

GAA: General Appropriations Act

GR: General Revenue Fund

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

HCBS: Home and Community-Based Services

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

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

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

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

Input: See Performance Measure.

IOE: Itemization of Expenditure

IT: Information Technology

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

LAN: Local Area Network

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

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

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

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

L.O.F.: Laws of Florida

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

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

MAN: Metropolitan Area Network

MSP: Medicaid State Plan

Medicaid Waiver: See Waiver

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

MRDP: Mentally Retarded Defendant Program (MRDP) is a secure residential facility providing competency training and testing for persons with developmental disabilities who are alleged to have committed a felony and who are court ordered into the facility. (See Forensic.)

NASBO: National Association of State Budget Officers

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

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

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

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

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

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

Outcome: See Performance Measure.

Output: See Performance Measure.

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

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

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

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

Personal Outcome Measures: The Personal Outcome Measures were developed by the Council on Quality and Leadership (CQL) in 1991. They were replaced by National Core Indicators (NCI) to measure Florida's performance against other states.

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

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

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

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

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

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

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

Questionnaire for Situational Information QSI: This questionnaire is the approved method or tool utilized by the agency for evidence-based client assessments. It is

designed to gather key information (physical, behavioral and functional areas) about an individual's life and need for supports from APD. The QSI is administered by APD employees who are certified in its use.

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

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

Service: See Budget Entity

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

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

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

STO: State Technology Office

SWOT: Strengths, Weaknesses, Opportunities and Threats

TCS: Trends and Conditions Statement

TF: Trust Fund

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

TRW: Technology Review Workgroup

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

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

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

WAN: Wide Area Network (Information Technology)