

FCC Algorithm Feedback - 12/16/14

1. Many individuals live in the family home. Does the algorithm take into account if caregivers are elderly?
2. The age of the caregiver is important if the individual is not living at home because they might be an advocate. They keep tabs on the provider and quality of services.
3. Why doesn't the algorithm consider the diagnosis, whether there are multiple diagnoses, and physical status of individuals?
4. When APD says that diagnosis/physical status is not factored in, were the "completed" assessments considered? My concern is the assessment did not capture the latest health details. (Focus on QSI and how data is gathered here).
5. My concern: Families are not getting a copy of the QSI to review and verify information.
6. What portions of the QSI can the WSC(s) obtain online?
7. Ensure all Regions are implementing QSI uniformly.
8. Age discussion: Transition 18-22, Over 45, etc.
9. As individuals age, the living setting is important. If they reside in the family home, caregivers are also aging.
10. If Family/Guardian training is available, the algorithm should allow funds for it.
11. As the families get older there are needs that must be met. Older caregivers, need the advocate to be involved.
12. Resources for individuals over 21 are few and hard to navigate.
13. Loss of school support is challenging.
14. There are concerns that individuals with similar needs have different budgets. This is a result of the QSI.
15. It is important to include families in the QSI administration. This might include siblings when the parents are elderly.
16. There are concerns regarding the age of the QSI. When was it updated? If QSI is updated, it is suggested to have a new person review it, rather than the creator.
17. The age of caregiver even if person is not living at home – advocate and older caregiver says it is harder to watch the system – watch the workers
18. In the previous questions, QSI is not counted in the algorithm - terms of diagnosis and more than on disabilities – The question is: Do they show the level of disability? People are in various levels in group homes.
19. There is a tendency to generalize and we need to start looking at more individualized questions – all people in group homes are not the same.
20. Completed assessments – Why doesn't QSI assessors talk to families? Guardians? They must talk to them and not the day-to-day caregiver. How often is it done?
21. Hard to get copy of QSI – Does WSC have access?
22. Questions related to employment should be counted in the algorithm.

23. Age under 21 and over 21 – does not do enough – more information on older individuals
24. Aging needs to be a consideration
25. There is a need for future care particularly with the primary focus on aging, and who will be the advocate
26. Younger parents have the ability and energy to get what they need whereas the older parents do not have that – and the school system is there to help the younger parents
27. Consistency of QSI assessors – see people with similar disabilities and budgets are - vastly different – support coordinator and family member should be there for the assessment – maybe a pre-interview by the WSC – WSC should have a copy of the QSI and go over it with the person to help understand the QSI- WSC delivering and helping with data collection
28. Even siblings – depending on the health of the parents – need to be consulted on QSI
29. Aging is quicker – age 40 reevaluation should be a given
30. QSI has been in existence for 8 years– it is time to review and update
31. Have someone other than original creators of the QSI to update the QSI
32. We are requesting APD to post summary of the feedback on algorithm so that everyone can see the feedback