

Information Sharing and Advisory Committee (ISAC)

Recommendations, Strategies, and Performance Measures
2019 Updates





Recommendation 3: Increase Employment

Employment is a centerpiece of adulthood and must be available for every person. The benefits of employment for people with disabilities are significant and are the same as for people without disabilities.

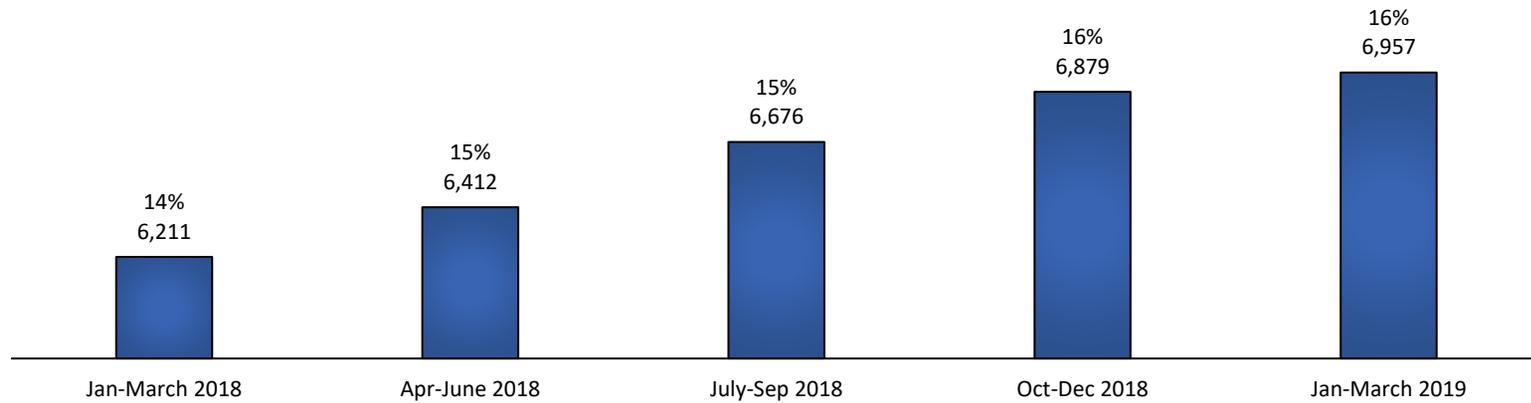
Strategies:

1. Inform families about employment opportunities when their children are young; inform self-advocates as they approach the age of transition. **(Retained)**
2. Strengthen state and local interagency collaboration to support individuals and self-advocates to transition into competitive integrated employment upon graduation. **(New)**
3. Support individuals receiving subminimum wage to gain competitive-integrated employment. **(New)**
4. Support families before, during, and after an individual's transition to competitive-integrated employment. **(New)**
5. Build an Employment First assumption in all supports coordination planning activities, including ISP redesign and training. **(Retained)**
6. Provide training and ongoing technical assistance to service providers and supports coordinators. **(Retained)**
7. Routinely publish data on employment services, work, and wages. **(Updated)**
8. Connect OVR Workforce Development information system and ODP information system (HCSIS) to enable the departments to share information. **(Retained)**
9. Support provider transformation to employment services. **(Retained)**
10. Facilitate public-private partnerships and local interagency coalitions to support employment opportunities and encourage innovation. **(Retained)**
11. Build provider capacity for the benefits counseling service. Provide training and technical assistance to supports coordinators to increase awareness of how benefits counseling might inform individuals, self-advocates, and families about options to work without losing benefits. **(Updated)**
12. Promote and increase county and state government hiring of people with disabilities. **(Updated)**
13. Support the growth and advancement of post-secondary education programs. **(Retained)**

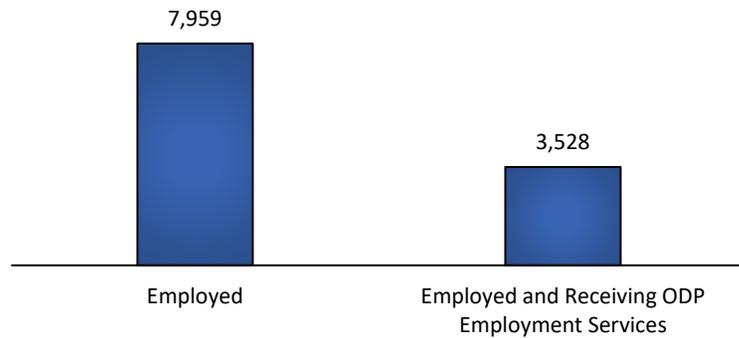
Performance Measures:

1. Number of Individuals working in Competitive-Integrated Jobs. **(Source: ODP Employment Comprehensive Report)**
2. Number of Individuals Employed vs Number of Individuals Employed and Receiving ODP Employment Services. **(Source: ODP Employment Comprehensive Report)**
3. Top 5 Most Utilized Job Types Among ODP Enrolled Individuals Ages 18-25 Reporting Competitive-integrated Employment. **(Source: ODP Employment Comprehensive Report)**
4. Number of people with authorized employment services. **(Source: HCSIS)**
5. Number of people receiving employment services. **(Source: PROMISE™)**
6. Percent of AEs having a designated employment lead. **(Source: QA&I)**
7. Percent of SCs providing education and information to the individual about employment services. **(Source: QA&I)**
8. Percent of people reporting their supports coordinators talked with them about employment at their most recent planning meetings. **(Source: IM4Q)**

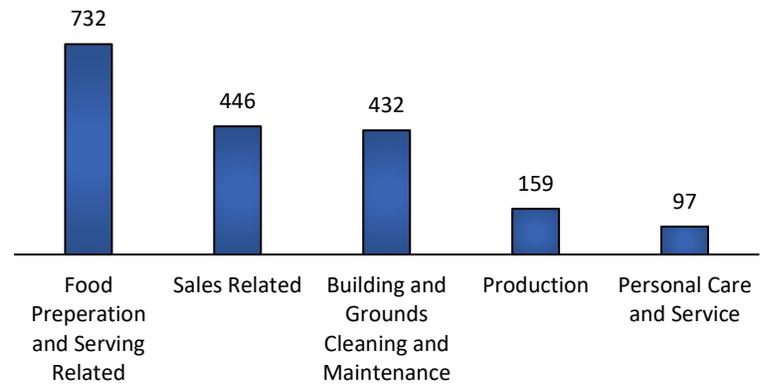
1. Individuals working in Competitive Integrated Job



2. Number of Individuals Employed vs Number of Individuals Employed and Receiving ODP Employment Services

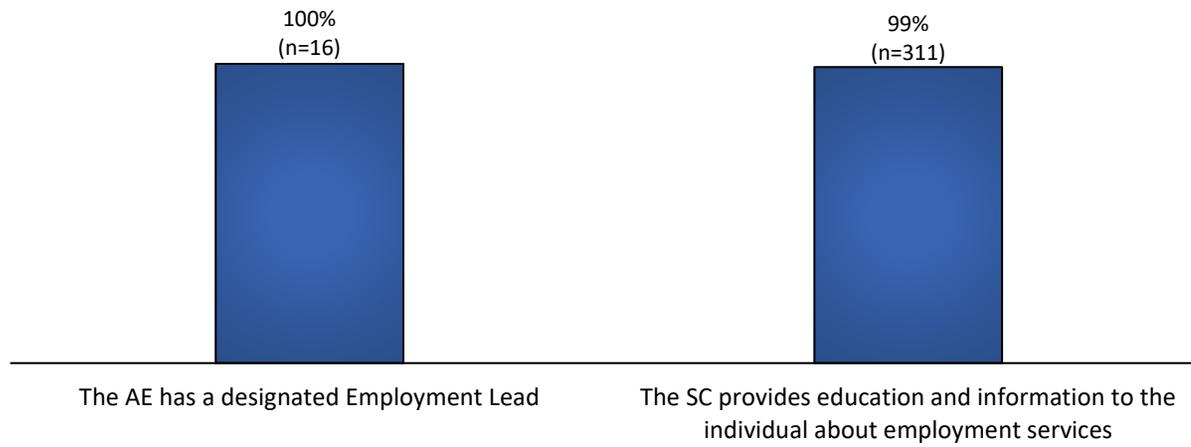


3. ODP Top 5 Most Utilized Job Types Among ODP Enrolled Individuals Ages 18-25 Reporting Competitive-integrated



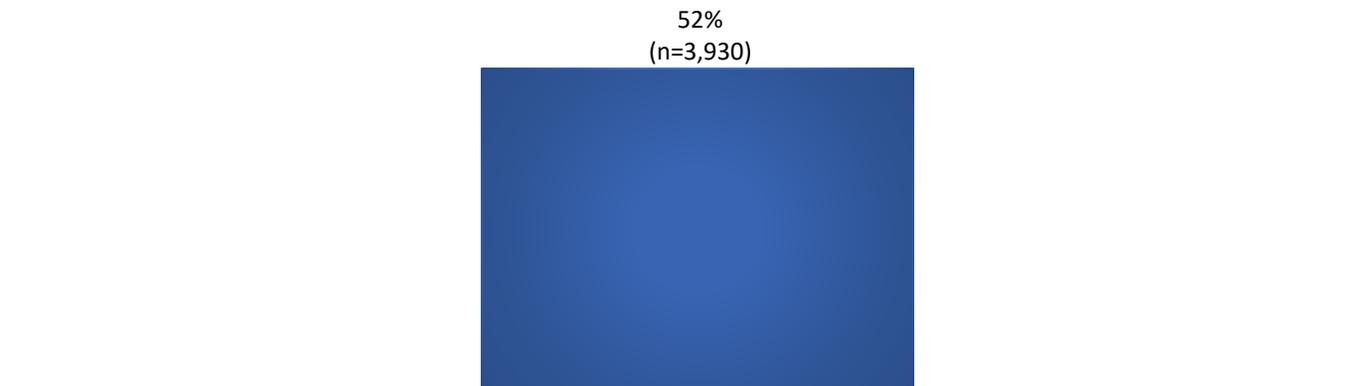
Source: ODP Employment Comprehensive Report

6 & 7. AE & SC Promote Employment



Source: QA&I FY18-19

8. Individuals surveyed reported that someone had talked to them about employment in their planning meeting



Source: IM4Q 2017-2018 Survey



Recommendation 6: Support People with Complex Needs

People with disabilities who have both physical and behavioral health needs receive the medical treatment and supports needed throughout their lifespans. People are more able to live an everyday life when individuals, families, and providers plan and prepare to provide and modify supports as needs and challenges change. Opportunities for a full community life are dependent on adequate supports and the commitment to build capacity within the larger human service delivery system.

Strategies:

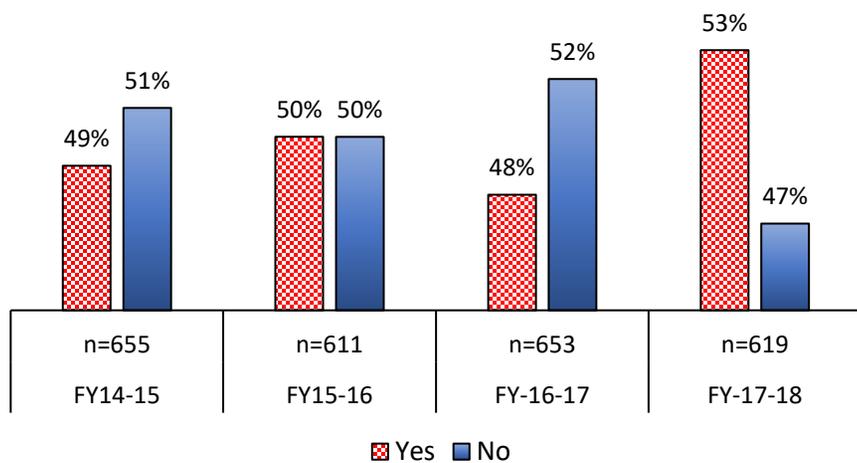
1. Develop Capacity Building Institute (CBI). ODP will, in collaboration with the Office of Mental Health and Substance Abuse Services, will establish a training opportunity for members of the IDD and mental health fields to better serve individuals and self-advocates with IDD and autism in addition to mental health needs. **(Retained)**
2. Improved support for individuals and self-advocates with complex medical needs. ODP will develop in coordination with the HCQUs and ASERTs increased access to information and guidance for individuals and self-advocates with new onset or longstanding complex medical health needs. **(Retained)**
3. Improved used of data. Use data related to individuals with complex medical needs, complex dental needs or complex mental health needs to inform ODP policy and program design. This data will enhance the development of:
 - Training and education.
 - Strategies to target identified health risks.
 - Improved capacity. **(Retained)**
4. Promote to use of online dual diagnosis training curriculum. New providers are required to complete the dual diagnosis training curriculum. **(Updated)**
5. Dual Diagnosis Conference – Implemented 2017. Next Dual Diagnosis Conference is scheduled for August 2019 in Altoona, PA. Since the first conference in 2017, each conference has met expectation for capacity. **(New)**
6. Develop online training modules for Functional Behavioral Assessment. These modules are being developed as a coordinated effort between BAS and ASERT but will be of use in support of any individual served by ODP. This will promote a more standardized approach to the FBA and will allow for a greater number of individuals to build competency in this area. **(New)**
7. Professional Conference Series – Initiated 2017. Specialized opportunities for clinicians in practice and in training, including but not limited to: psychiatrists, psychiatric residents, Nurse Practitioners, Licensed Social Workers, Behavior Specialists, DSPs, transition coordinators and educational coordinators, offering enhanced exposure to and education about the needs of individuals with I/DD and MH diagnoses and networking with other professionals & clinicians. **(New)**
8. ODP will explore ways to promote interest in and competencies for providing nursing services for individuals with I/DD and autism. **(New)**

Performance Measures:

1. Number of people with authorized nursing services. **(Source: HCSIS)**
2. Number of people who use nursing services. **(Source: PROMISE™)**
3. Number of people with ID with authorized behavioral support services **(Source: HCSIS)**
4. Number of people with ID who use behavioral support services. **(Source: PROMISE™)**
5. Number of people with Autism with authorized behavioral support services **(Source: HCSIS)**
6. Number of people with Autism who use behavioral support services. **(Source: PROMISE™)**

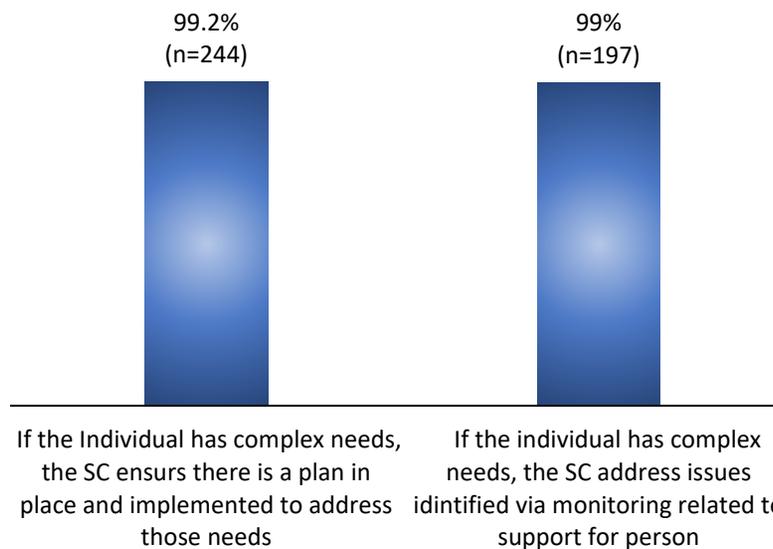
7. Number and percent of people who take at least one medication for mood disorders, anxiety, behavior challenges, and/or psychotic disorders. *(Source: NCI PA Adult Consumer Survey)*
8. Number of providers qualified to provide behavior support services. *(Source: HCSIS)*
9. If the Individual has complex needs, the percent for whom the SC ensures there is a plan in place and implemented to address those needs. *(Source: QA&I)*
10. If the individual has complex needs, the percent for whom SC addresses issues identified via monitoring related to support for the person. *(Source: QA&I)*

7. % of Individuals and Self-Advocates Who Take at Least One Medication for Mood Disorders, Anxiety, Behavior Challenges, and/or Psychotic Disorders



Source: NCI PA Adult Consumer Survey

9 & 10. SCs Support Individuals with Complex Needs



Source: QA&I FY18-19



Recommendation 7: Develop and Support Qualified Staff

People with disabilities receiving services benefit when staff who support them are well trained. Values, ethics, and person-centered decision-making can be learned and used in daily practice through mentorship and training. Providing professional training that strengthens relationships and partnerships between individuals, families, and direct support professionals (DSP) will improve the quality of support.

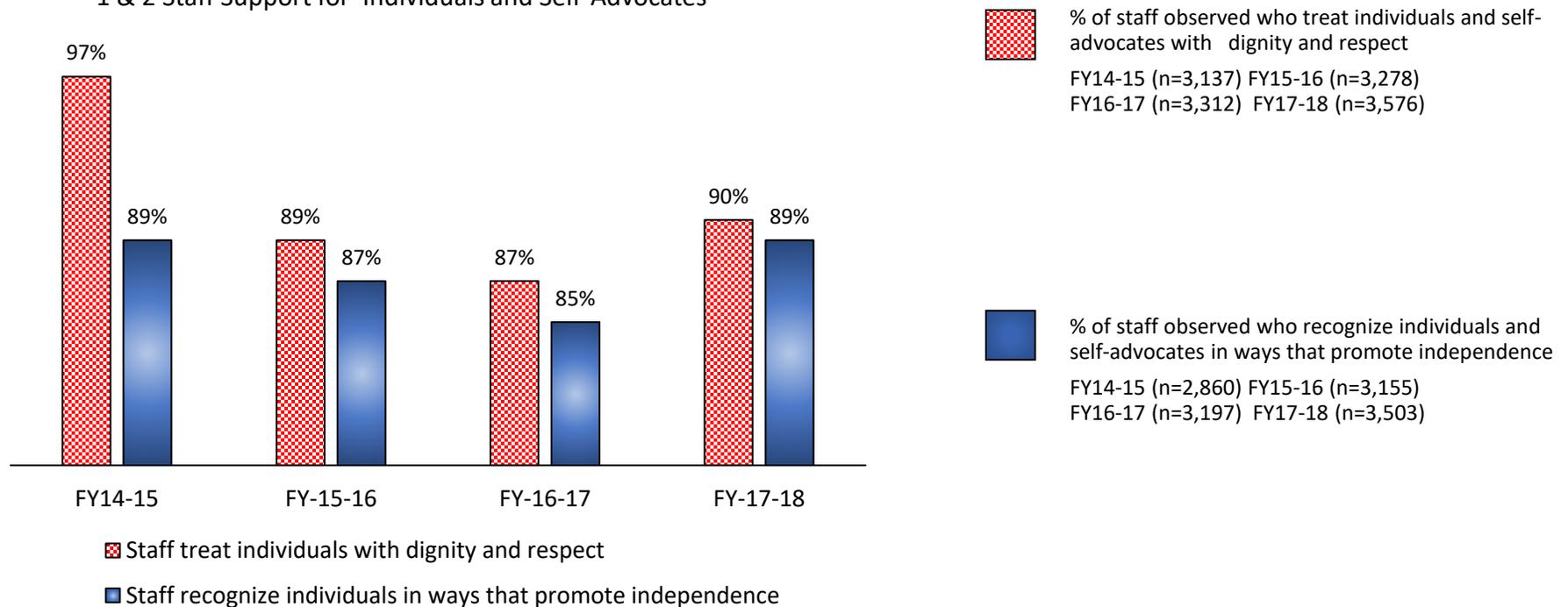
Strategies:

1. Adopt as an expectation and actively support and promote through policy bulletins, training, and other outreach the Direct Work Force Core Competencies, which were developed by the Centers for Medicare and Medicaid Services (CMS). **(Updated)**
2. Review MyODP.org for existing course content pertaining to Core Competencies, identify areas where augmentation of course material is needed, and promote the use of this existing material. **(New)**
3. Incentivize the Core Competencies by:
 - Identifying if there are any providers who have adjusted pay scales to promote/incentivize completion of Core Competencies;
 - Reviewing the payment models of other states to report on how Core Competencies are incentivized elsewhere;
 - Utilizing Residential Services Learning Collaborative (RSLC) meetings to provide information on creative incentive methods. **(New)**
4. Discuss additional opportunities to promote credentialing and competencies. **(New)**
5. Maintain and encourage significant DSP participation at RSLC meetings. **(New)**
6. Engage families and individuals in the discussion of Core Competencies to include:
 - An explanation of the Core Competencies;
 - Conveying ODP's expectations regarding the implementation of Core Competencies;
 - Facilitating a discussion as to whether or not Core Competencies should be tied to pay. **(Updated)**
7. ODP will establish and implement credentialed training programs based on standard curriculum and testing in an attempt to maintain and develop qualified staff, decrease the rate of turnover, and promote staff retention and provider capacity. This strategy will include training for DSPs as well as other professionals, such as Benefits Counselors. **(Updated)**
8. Build incentives into the reimbursement system to promote staff credentials, encourage professional growth and development, and adopt incentive-based training and credentialing. This includes:
 - Reviewing other states' models, where success has been achieved, to learn from those who have attempted and have identified hurdles to progress;
 - Obtaining consultation from The National Alliance for Direct Support Professionals (NADSP) as a mean of considering their extensive credentialing system. **(Updated)**
9. Promote the use of and improve the usability and functionality of MyODP.org, to include allowing for greater access, upgrading the Learning Management System (LMS) software, and promoting the College of Direct Support and other courses available via the site. **(Updated)**

Performance Measures:

1. Percent of staff observed who treat individuals with dignity and respect. *(Source: IM4Q Survey)*
2. Percent of respondents who said staff in their relative’s home and place of work always treat people with dignity and respect. *(Source: Family/Friend/Guardian IM4Q Survey)*
3. Percent of staff observed who recognize individuals in ways that promote independence. *(Source: IM4Q Survey)*
4. Percent of staff observed supporting individuals at home and/or work who appeared to have the skills they needed to support the person. *(Source: IM4Q Survey)*
5. Percent of respondents who said staff appear to have the skills they need to support their relative at home and at their place of work. *(Source: Family/Friend/Guardian IM4Q Survey)*

1 & 2 Staff Support for Individuals and Self-Advocates



Source: IM4Q 2017-2018 Survey



Recommendation 8: Simplify the System

The system of supports and funding of those supports must be as straightforward and uncomplicated as possible. This will allow for greater understanding and use of the system by everyone — most importantly the individual needing and receiving supports

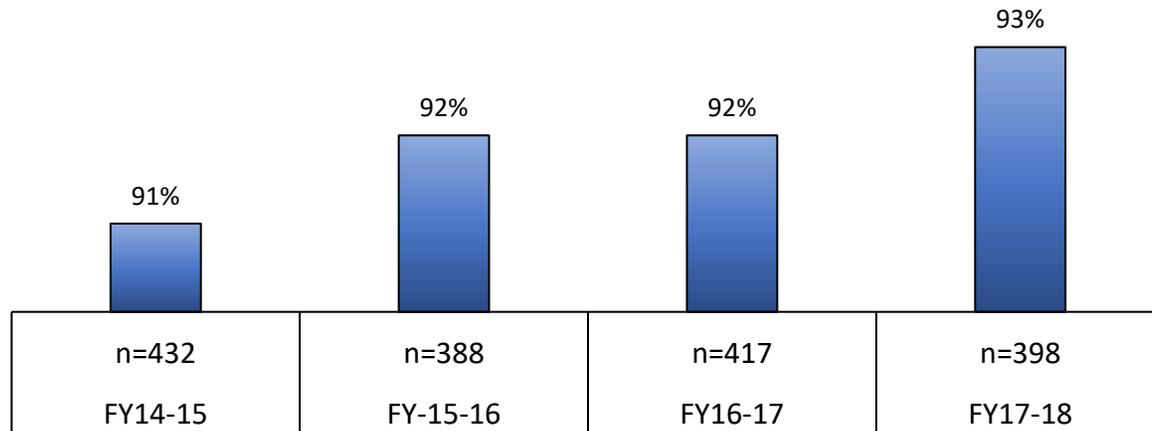
Strategies:

1. Redesign the ISP process and format to reduce the time, simplify the document and increase the positive experience of individuals, self-advocates and families, and all stakeholders. **(Retained)**
2. Provide a user-friendly useful planning tool and document that increases flexibility and ease of access for the individual, self-advocate, family, and supporters to manage services and supports. **(Retained)**

Performance Measures:

1. Evaluate the redesign of ISP process and format for: reduction in time that SC spends on administrative tasks, reduction in the number of pages in the ISP, and increase time spent with individuals, self-advocates, and families in person-centered planning.
2. Percent of respondents who report their supports coordinator asks them what they want **(Source: Annual Adult Consumer NCI Survey)**
3. Percent of people in the Consolidated and P/FDS waivers who had a change in need and had the plan updated. **(Source: QA&I)**

2. % of Individuals and Self-Advocates whose Supports Coordinators Ask Them What They Need



Source: NCI PA Adult Consumer Survey



Recommendation 10: Expand Options for Community Living

Expand the range of housing options in the community so all people can live where and with whom they want to live. Listening to people with disabilities and their families, providers, and Support Coordinators will help people locate affordable and accessible housing, find house mates, and identify housing resources/supports and other government benefits that, when blended with natural supports, will promote an everyday life.

Strategies:

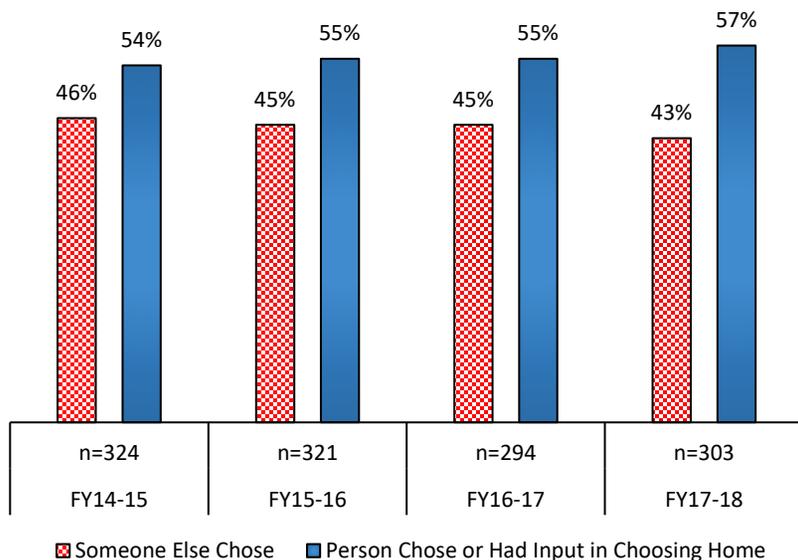
1. Review the Housing Transition and Tenancy services definition to determine if it is meeting the needs of individuals. **(New)**
2. Develop a training for SCOs, AEs and providers on the Housing Transition and Tenancy service.
 - The training should include more information on the financial impact. **(New)**
3. Expand understanding of what is possible.
 - Promote development and distribution of education/training/technical assistance to individuals and self-advocates to increase knowledge of options and ability to make informed choices.
 - Ensure development and distribution of education/training/technical assistance for families through the Supporting Families initiative. This should include planning for the future so that families can explore what is possible. The education should include items like ABLE accounts, sustaining housing, and community support. **(Retained)**
4. Expand LifeSharing to allow for the enrollment of birth families as life sharing providers.
 - Begin to develop material to help SCs and families understand the benefit to delivering this service.
 - Hold listening session with lifesharing providers to brainstorm on how to expand the supports. **(Updated)**
5. Continue to develop supported living options that enable individuals and self-advocates to live in their own homes with the support of an agency available to provide guidance and assistance as needed.
 - Continue to promote this service as an alternative to residential habilitation.
 - Develop more specific material to help SCs explain the benefit of the services to individuals and families. **(Updated)**
6. Provide training to Supports Coordinators on the varied options for community living. **(Retained)**
7. Expand choice of options to include creative housing alternatives.
 - Continue to work on developing more integrated options that support the Every Day Lives (EDL) philosophy. **(Updated)**
8. Support the development of safe and affordable housing options that meet the individual's and self-advocates personal preferences.
 - Work with the current providers of the Housing transition and pre-tenancy to identify options that support individual preference. **(Updated)**

9. Provide access to home modifications, transportation, and assistive technology to support people to live in their homes.
 - Continue to help SCs and providers learn how to use technology to promote independence. (Updated)

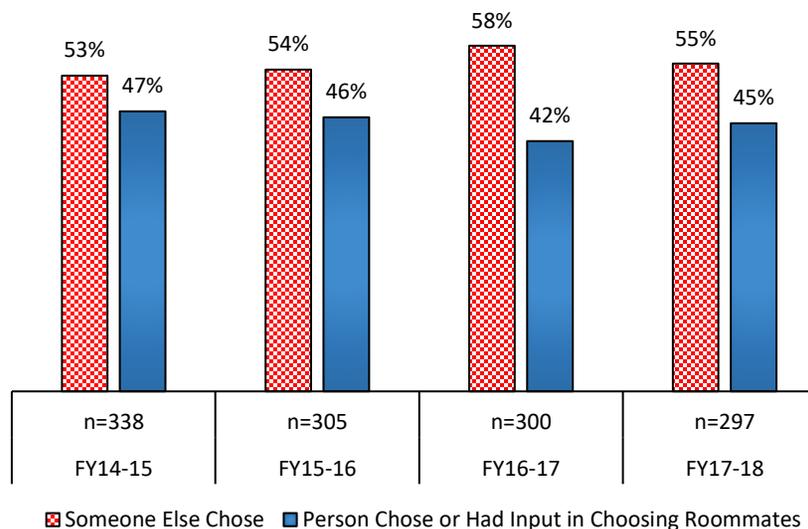
Performance Measures:

1. Percent of people who choose their home. (Source: NCI PA Adult Consumer Survey)
2. Percent of people who choose their roommate. (Source: NCI PA Adult Consumer Survey)
3. Percent of people who rent or own their homes. (Source: NCI PA Adult Consumer Survey)
4. If people do not get needed services, the percent whose unmet need is in the area of finding/changing housing. (Source: NCI PA Adult Consumer Survey)

1. % of Individuals and Self-Advocates Who Chose Their Home

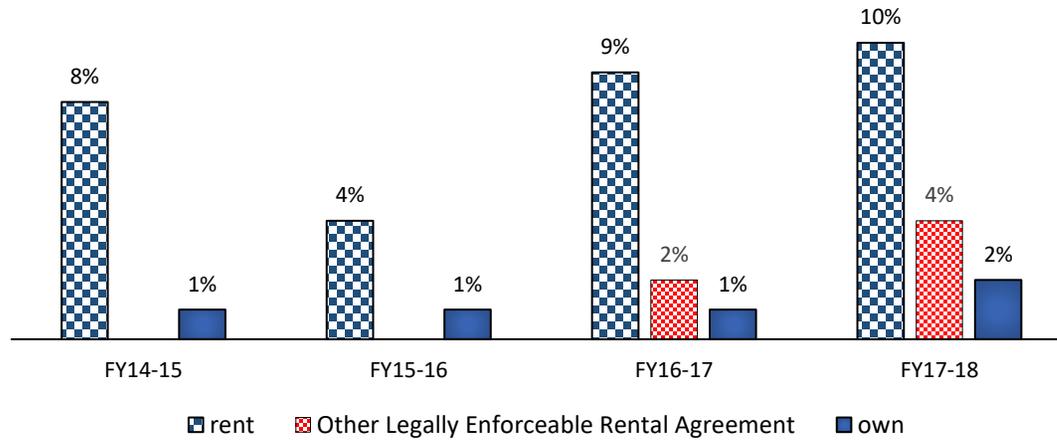


2. % of Individuals and Self-Advocates Who Chose Their Roommates



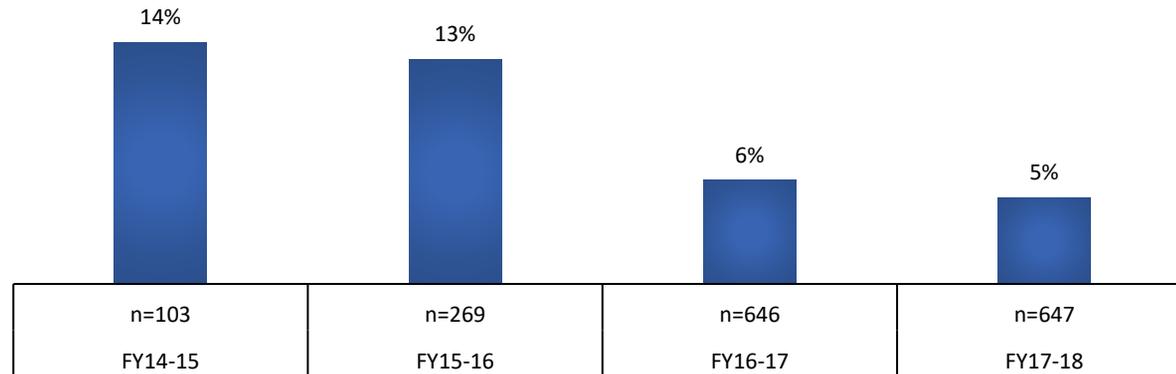
Source: NCI PA Adult Consumer Survey

3. % of individuals and self-Advocates Who rent or own their home



Source: NCI PA Adult Consumer Survey

4. If individuals and self-advocates do not get needed services, the percent who need help finding/changing housing



Source: NCI PA Adult Consumer Survey