

ISAC Recommendations 5 and 6 March 2023

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Recommendation 5



Promote Health, Wellness, and Safety

 Promote physical and mental health, wellness, and personal safety for every individual and his or her family. Promoting physical and mental health means providing information about health and wellness, emotional support, and encouragement. Tools that help every individual adopt a healthy lifestyle — including good nutrition, healthy diets, physical activity, and strategies to reduce and manage stress and protect oneself from all types of abuse and exploitation — must be provided.

Health Risk Screening Tool HRST



A web-based instrument developed to screen for health risks associated with:

Intellectual/Developmental Disabilities

Physical Disabilities

Disabilities Associated with Aging

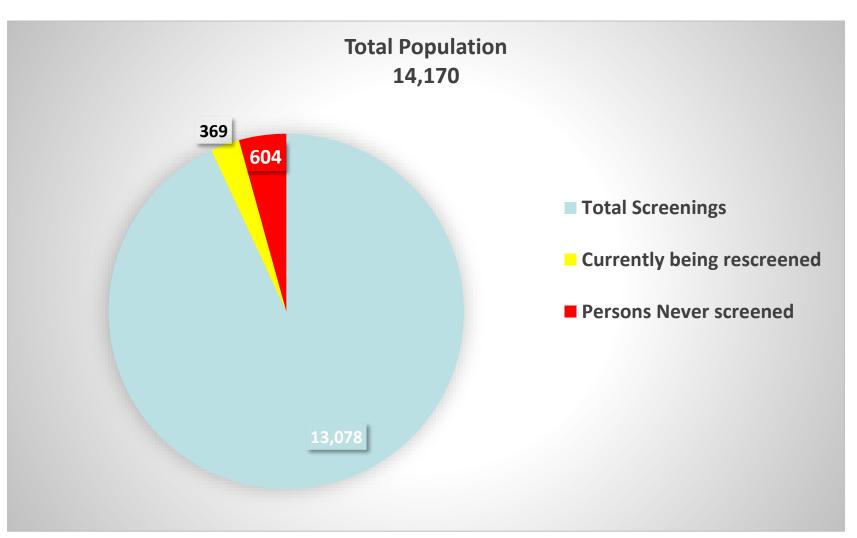
Traumatic Brain Injury

Any Vulnerable Population

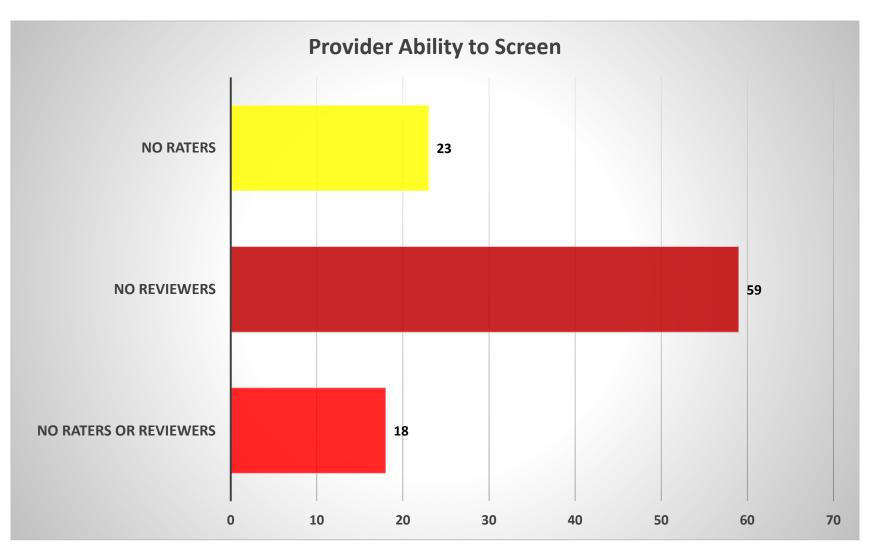
The HRST is a simple 22 item scale designed to find out which individuals are at most risk of illness and health destabilization.

The tool then responds by producing action steps that empower support staff in the form of special attention and prevention.

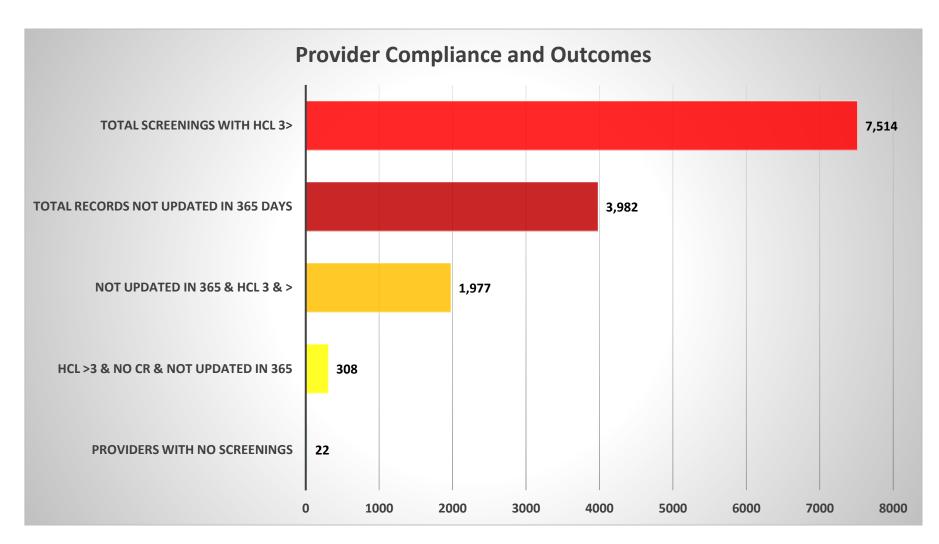












HRST and LTMH Workgroup



- Workgroup initiated August 2022 to look at potential for increased efficiency and reduced redundancy with HRST and annual assessment process
- Focus on Lifetime Medical History form
- Representatives from 4 provider associations, ODP and IntellectAbility
- Draft template is being finalized



- Medical claims encompassing L89 Pressure Injury ICD-10 codes that had a claim begin date between 10/1/2019-9/30/2021 were distributed to the state's Health Care Quality Units (HCQUs) on 11/12/2021.
- 381 individuals were identified in this data set.
- Work by the HCQU, including outreach and data collection, occurred between 11/12/2021-12/30/2022.
- Outreach and data collection occurred for 66% of the original sample (253/381 individuals).
- Of the original wounds identified on the claims of those 253 individuals:
 - 201 individuals (79%) are noted to have completely healed wounds
 - 29 individuals (11%) are noted to having healing wounds
 - 9 individuals (3.5%) are noted to have unchanged wounds
 - 11 individuals (4.3%) have a wound status of "unknown"
 - 3 individuals (1.19%) have worsened injuries



381 Individuals

Most common Ambulation: Independent

Avg Age: **51.10**



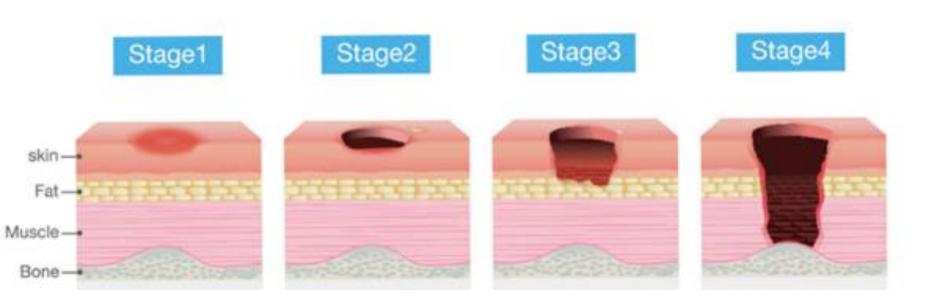


	INDIVIDUALS	CLAIMS
ACUTE CARE	177	218
OUTPATIENT	269	1530

	ACUTE CARE	POA?	OUTPATIENT	TOTAL
STAGE 1	53	53, 100%	238	291
STAGE 2	53	46, 87%	1411	1464
STAGE 3	41	38, 93%	1538	1579
STAGE 4	27	23, 85%	1169	1196
UNSTAGEABLE	130	118, 91%	765	895
TOTAL	304	278, 91%	5121	5425



Stages of a Pressure Injury





Risk Factors Identified by HCQU			
Risk	Number of Individuals	Percentage	
Continence	183	72%	
Mobility	183	72%	
Activity Level	168	66%	
Friction/Shear	110	43%	
Nutrition	85	34%	
Sensory Perception	63	25%	
Mental Status	63	25%	
Hydration	53	21%	
Advanced Age*	49	19%	



Comorbid Conditions Identified by HCQU			
Risk	Number of Individuals	Percentage	
Neurological Disease	84	33%	
Arthritis	52	20%	
Depression	47	19%	
Heart Disease	45	18%	
Circulatory issues	43	17%	
Diabetes	38	15%	
Obesity	29	11%	
Dementia	26	10%	
Neuropathy	13	5%	
Cancer	6	2%	





Specialty Health Assessment and Coordination (SHAC) are teleservices available 24/7 that provide right-on-time health assessments to determine the best clinical course of action with the goal of avoiding unnecessary emergency room visits.

The provider can also communicate with the emergency department directly, ensuring advance preparation for the emergency department with the goal of decreasing the chances of admission.

Purpose: Promote health, wellness, and safety

4/6/2023 14



- This service is consultative and provides disabilityspecific advice on when best to seek additional or inperson medical treatment for the participant.
- Can occur in the participant's private or residential home to help assess their need for medical attention
- Includes support and consultation to paid and unpaid caregivers to build their capacity to better understand the best approaches for supporting the participant depending on their symptom presentation.



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- This service will not duplicate any service available to the participant through the state plan.
- This service will not supplant in-person exams as needed.
- This service is provided as a monthly service and billed in monthly units.
 - ODP will not develop a rate for this service

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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.

ODP Clinical Team



- Unified Clinical Team
- Ongoing supports to all systems, programs, diagnoses, and lifespan
- Current priority is around Behavioral Supports
 - Ongoing implementation of Best Practice Standards
 - Roundtable Cohorts
 - Currently 3rd cohort, BS supervisors representing all programs, including discrete and bundled
 - 3 months, 3 hours monthly
 - Focus on assessment, support planning, and implementation
 - Ongoing trainings and resources
 - Working with policy to finalize FAQs for the field
 - Updating MyODP Behavioral Supports page with trainings, resources, and information

Support People with Complex Needs



- Capacity Building Institute (CBI)
- Dual Diagnosis Conference
- Positive Approaches Journal
- Trauma Recovery for Autistic, Intellectually disabled, and Neurodiverse individuals TRAIN
- Project Reassure (Resilience and Stress Support Rallies Everyone)
- Pennsylvania START Model
- Children's Initiatives
- Telehealth Project

CBI



- Completed Cycle 6 in February 2023
- Cycle 7 will begin September 2023
- Recruitment will be May
- Penn Stater in State College
- "Hybrid"
 - Sessions 1 3 in person
 - Sessions 4 7 via Zoom platform
 - Sessions 8 9 in person



- Interactive educational experience for participants
- 18 sessions: Two per month for 9 months
- Focus on individuals who are "dually diagnosed"
- Discuss the state-of-the-art approaches for best and promising practices from multiple perspectives with respect to the support of people with I/DD and ASD who have significant behavioral health challenges



- Hybrid Model
- State College, PA
 - September November 2023, In person
 - December 2023 March 2024, Virtual classroom
 - April May, 2024, In person
- Open announcement for those interested in May/June



Enhancing Trauma Recovery Services and Increasing Capacity for Vulnerable Populations

- Trauma Recovery for Autistic, Intellectually Disabled, and Neurodivergent Individuals
- Intended for licensed clinicians who offer psychotherapy services and willing to see neurodivergent individuals
- Training is meant to equip them to use current evidence based practices for meeting trauma recovery needs of neurodivergent individuals







- Program occurs in 2 stages:
 - 12-week didactic portion comprised of self-paced learning modules with synchronous clinical skills application sessions
 - Followed by 12-week clinical portion comprised of group synchronous clinical consultation calls where program participants present their current cases where they are working with neurodivergent individuals addressing the impact of trauma/victimization experiences.
 - One presentation of individual in assessment phase of treatment
 - One presentation of individual in safety/stabilization or trauma processing phase of treatment



Training Overview

Module 1 Part 1	Defining Trauma
Module 1 Part 2	Expressions of Trauma
Module 1 Part 3	The Social Brain and Neurodiversity
Module 1 Part 4	Live Session: Principles of Trauma-Focused Treatment & Examining Ableism
Module 2 Part 1	After Disclosure & Psychoeducation
Module 2 Part 2	Assessing Traumatic Stress, Part 1
Module 2 Part 3	Assessing Traumatic Stress, Part 2
Module 2 Part 4	Live Session: Case Formulation
Module 3 Part 1	Building Resources
Module 3 Part 2	Trauma Processing, Meaning Making, & Future Planning
Module 3 Part 3	Resiliency & Self-Preservation
Module 3 Part 4	Live Session: Application of Building Resources & Personal Plan for Self-Preservation



TRAIN

- Cohort 1 (pilot cohort) had 8 participants
- Cohort 2 had 13 participants
- The 3rd cohort has completed their 12 week training and will finish their case consultations in April.
- With the completion of the 3rd cohort 33 therapists from across the state have been trained.
- Counties of participants include: Allegheny (9), Cambria (4), Fayette (3), Philadelphia (3), Erie (2), Lehigh (2), Montgomery, Armstrong, Cumberland, Snyder, Chester, Dauphin, Schuylkill, Mercer, Somerset, and Clinton all with one participant each.
- State Center and State Hospital participation

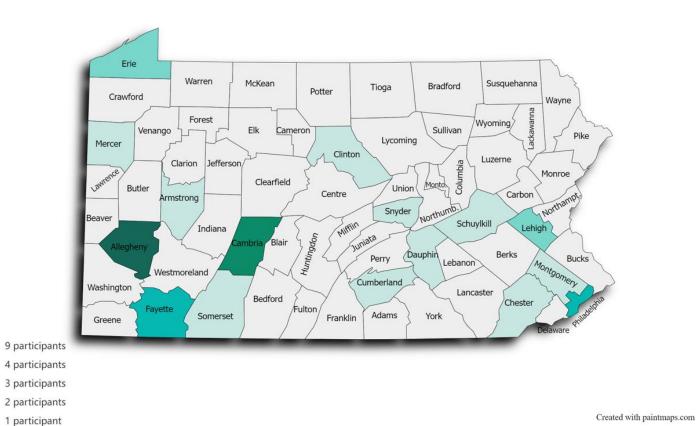


TRAIN

- 4th cohort starts April 11.
- Plan is to continue recruiting two cohorts (each up to 16 participants) per year for 5 years.
- Additional training materials is being developed based on feedback from initial cohorts.
- Further trainings will be in the format of clinical skills development workshops.
- All past participants are free to attend monthly ongoing clinical consultation call.



TRAIN Participants in PA



28



Credentials of Participants

COUNTY	CREDENTIAL	COUNT
Armstrong	LCSW	1
	LCSW	4
Allegheny	LPC	4
	MSPC	1
	LPC	1
6 1 1	PSS	1
Cambria	LSW	1
	NCC	1
Clinton	LPC	1
Cumberland	LSW	1
Dauphin	LCSW	1
	LMFT	1
Erie	LPC	1
	MA	1
	NBCC	1
Fayette	LCSW	1
	LPC	2
	NCC	1

COUNTY	CREDENTIAL	COUNT
Labrah	LPC	1
Lehigh	LCSW	1
Mercer	LSW	1
Philadelphia	ACSW	1
	LCSW	2
	LPC	3
	NCC	1
Schuylkill	LPC	1
Snyder	LPC	1
	MSPC	1
Somerset	LPC	1

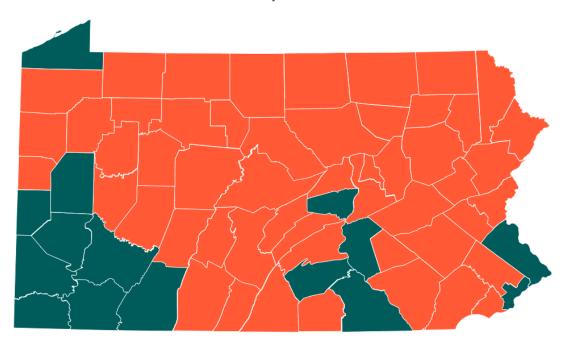


TRAIN Directory

Below is a map showing where past participants of the TRAIN program currently work and practice. Contact information is provided for those who choose to share that information, along with any details related to their practice.

Please note that while participants are listed by county, many currently provide telehealth services which can be accessed from across the state. This will be updated regularly as more participants complete the TRAIN program.

Click a county to find more info



https://aidinpa.org/train-2/



- Trauma education and resilience building resources aimed at neurodiverse communities
- Stemming from the universal traumater exposure of the COVID-19 pandemi
- 5 Stakeholder Groups
 - Self-advocates
 - Family members/natural supports
 - Direct Support Professionals (DSPs)
 - Licensed/Managerial Service
 Professionals (LMSPs)
 - LMSPs participating in the ECHO outreach program (covered later)

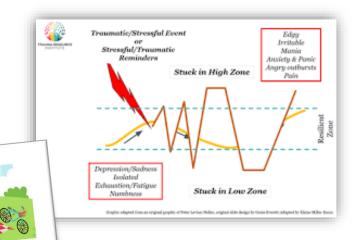


resilience and stress management for neurodiverse communities



Based on the Community Resilience Model

- Four core courses:
 - Trauma and Trauma Expressions
 - Resilience and The Resilient Zone
 - The Core Resilience Building Skills
 - Resilience Skills Application
- Community Collaborators:
 - Self-Advocates United as 1 (SAU-1)
 - The Acres Project
 - DSP, LMSP and family inputs
- Courses expected to become available by Summer, 2023
 - Self-advocate courses will be available first, targeting April, 2023



project reassure

What is Tracking?

Tracking is a way to help you stay in or get back to your "Resilient Zone" or "OK Zone." When you use tracking you pay attention to what is happening with your mind and body. We sometimes call these thoughts and feelings in our mind and body "sensations".

What do we Mean by Sensations?

There are many ways the brain takes in information. One way is through our senses. These are called sensations. Some senses are sight, sound, smell, taste, and touch. You can pay attention to other sensations like breathing, your heartbeat, and how your stomach feels.







Self-Advocates

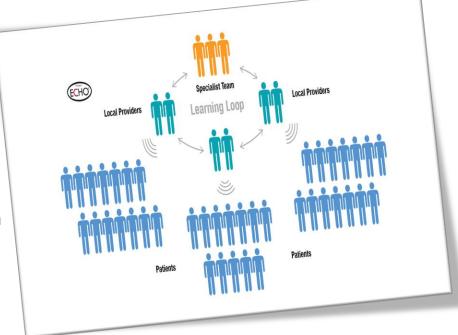


- ECHO-Expanding Community Health Options
- An "all teach, all learn" spoke and hub model where the 'spokes' are community members, and the 'hub' is comprised of a team of content experts.
- Heavy emphasis of case-based learning supported by 'flash talks' (10-15 minute talk of key clinical points)





- Focus is "Fostering Resilience for Neurodiverse Communities"
- Spokes are community providers in managerial and/or supervisory roles and hub team is comprised of Penn State Health providers and community partners:
 - Psychiatrist (also a parent of young man on the spectrum with ID)
 - BCBA
 - LCSW
 - Psychologist from Southeast HCQU
 - Self-advocate from Acres Project
 - Nurse Practitioner (Penn State Health is facilitator)





- Seven-week intervention covering following flash talk topics:
 - Trauma and trauma expressions
 - Anxiety and intolerance of uncertainty
 - Introduction to Community Resilience Model
 - Resilience Skills
 - Crisis risk reduction and safety considerations
 - Adapting skills for those with brain differences
 - Fostering community reengagement

Pilot Cohort - October 2022

Western	Central	Eastern
Region	Region	Region
Allegheny	Dauphin	Delaware
County (1)	County (2)	County (1)
Westmoreland	Cumberland	Chester
County (2)	County (1)	County (1)
Fayette County (1)		Philadelphia County (2)
		Montgomery County (1)



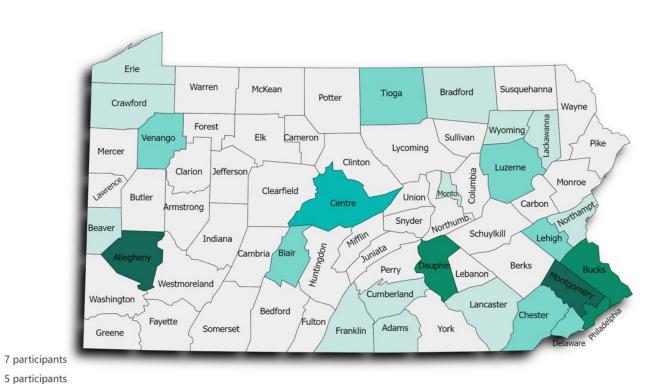
- The second round of ECHO just completed on 3/3/23.
- Third round set to start April 14th
- The third cohort filled up with 25 participants in the first day
- 32 participants in the first two cohorts, with another 25 registered for the upcoming cohort
- Counties of participants include: Allegheny (7), Montgomery (7), Bucks (5), Dauphin (5), Philadelphia (5), Centre (3), Blair (2), Chester (2), Delaware (2), Lehigh (2), Luzerne (2), Tioga (2), Venango (2), Adams, Beaver, Bradford, Crawford, Cumberland, Erie, Franklin, Lackawanna, Lancaster, Montour, Northampton, Wyoming, and Out of State all had 1 participant each.



ECHO Participants in PA

3 participants2 participants

1 participant

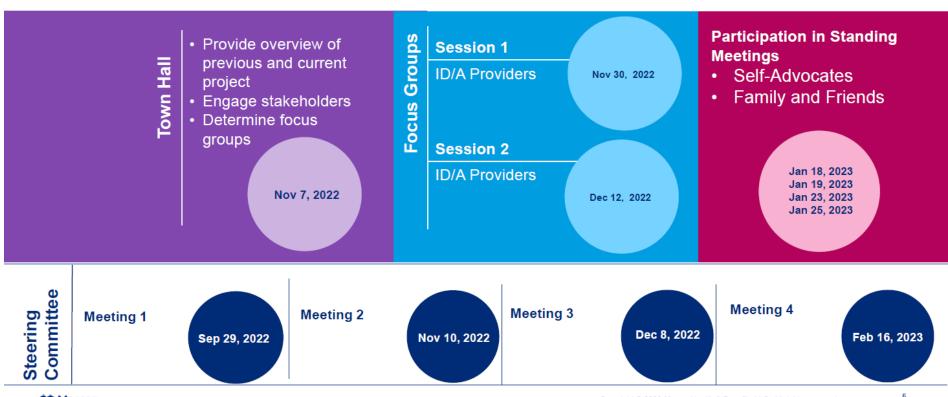


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ID/A Telehealth Project Timeline

Meeting Schedule and Topics



Mercer

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HOME SCHEDULE REGISTRATION CEUS VIRUTAL PLATFORM/ACCESSIBILITY CONTACT



ABOUT THE CONFERENCE

The Pennsylvania Office of Developmental Programs (ODP) and the Office of Mental Health and Substance Abuse Services (OMHSAS) host the statewide Dual Diagnosis Conference.



Professional Conference Series

- Dr. Brandi Kelly, Clinical Director, Louisiana Office for Citizens with Developmental Disabilities
- June 1, 2023 from 1–4 pm EST
- Therapeutic Adaptations
 - Adaptations to Assertive Community Treatment for IDD
 - Adaptations to Cognitive Behavioral Therapy for IDD
 - Adaptations to Dialectical Behavior Therapy for IDD
 - Adaptations to Positive Parenting Program for IDD
 - Adaptations to Trauma Focused CBT for IDD
 - Adaptions to EMDR for IDD
 - Adaptions to Multisystemic Therapy for IDD