

# ISAC STRATEGIES

## 2023 Record of Changes

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**Recommendation #1 – Assure Effective Communication:** Every person has an effective way to communicate in order to express choice and ensure his or her health and safety. All forms of communication should consider and include the individual’s language preferences and use of current technology.

Current Strategy	Keep As-Is	Retire or Revise To... ( <del>strickethrough for removal</del> and <u>underline for additions</u> )	Reason Proposed Change	ISAC Review Date
<p><b>#1</b> - Finalize and issue the communication policy bulletin.</p> <ul style="list-style-type: none"> <li>• Define communication:                             <ol style="list-style-type: none"> <li>a. It is a right;</li> <li>b. It is expressive and receptive;</li> <li>c. It is a meaningful interaction not just words/signs;</li> <li>d. It is cultural;</li> <li>e. It is foundational to leading a self-determined life, being a part of a community, being healthy and safe, and having healthy relationships;</li> <li>f. It will assert that everyone can communicate in one way or another (such as but not limited to behavior, eye gaze, visual gestural); however, not everyone can communicate effectively and meaningfully.</li> </ol> </li> <li>• Describe a communication profile and plan;</li> <li>• Specify roles and expectations;</li> <li>• Include the applicable 6100 regulations.</li> </ul>		<p><del>Finalize and</del> Issue the communication policy bulletin.</p> <ul style="list-style-type: none"> <li>• Define communication <u>and the ways people communicate.</u> <ol style="list-style-type: none"> <li><del>a. It is a right;</del></li> <li><del>b. It is expressive and receptive;</del></li> <li><del>c. It is a meaningful interaction not just words/signs;</del></li> <li><del>d. It is cultural;</del></li> <li><del>e. It is foundational to leading a self-determined life, being a part of a community, being healthy and safe, and having healthy relationships;</del></li> <li><del>f. It will</del> Assert that everyone can communicate in one way or another (such as but not limited to behavior, eye gaze, visual gestural); however, not everyone can communicate effectively and meaningfully;</li> </ol> </li> <li>• <del>Describe a communication profile and plan;</del></li> <li>• Specify roles and expectations; <u>consistently providing communication services and supports and striving to support everyone to communicate effectively and meaningfully;</u></li> <li>• Include the applicable 6100 regulations;</li> <li>• <u>Require a communication policy;</u></li> <li>• <u>Be available in plain language or easy read.</u></li> </ul>	Simplified based on ISAC small group conversations.	8/15/23

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<p><b>#2</b> - Incorporate a focus on communication in the individual planning process.</p>		<p><del>Incorporate a focus on communication in the individual planning process.</del> <u>The individual support plan and the planning process will start with communication.</u></p>	<p>Updated to be more reflective of ISP redesign.</p>	
<p><b>#3</b> - Identify all possible funding avenues (including private insurance, ACCESS (Medicaid), Medicare, Person/Family Directed Services (P/FDS), waivers, etc.) to support people in exploring effective communication supports. These would include formal assessments to identify needs and appropriate approaches, techniques, devices, updates, and training.</p>		<p>Retire</p>	<p>Just SO Speech and the amendment to the Assistive Technology service definition is expanding options.</p>	<p>8/15/23</p>
<p><b>#4</b> - Address the lack of Communication Specialists and clinicians, such as speech-language professionals and board-certified behavior analysts, with the expertise in communication to work with individuals with intellectual disabilities or autism.</p>		<p><del>Address the lack of Communication Specialists and clinicians, such as speech-language professionals and board-certified behavior analysts,</del> <u>Increase the number of professionals with the expertise in communication to work with individuals with intellectual disabilities or autism across the lifespan.</u></p>	<p>More direct language. Expanded to all professionals.</p>	<p>8/15/23</p>
<p><b>#5</b> - Recognize and accommodate the primary language of individuals, self-advocates, and families; provide materials and translation.</p>		<p><del>Recognize and Accommodate the primary preferred language and ways people communicate including individuals*, self-advocates, and families, and best communication partners. provide materials and translation.</del></p>	<p>Expanded to all communication. *Use of “individual(s)” to mean all who are eligible for services.</p>	<p>8/15/23</p>
<p><b>#6</b> - Promote generic social change by building capacity in understanding and supporting people with nontraditional communication needs.</p>		<p><del>Promote generic social change by building capacity in understanding and supporting people with nontraditional communication needs.</del> <u>Continue to develop and share tools, resources, and trainings in order to support a change to “communication first thinking” in Pennsylvania.</u></p>	<p>Simplified language.</p>	<p>8/15/23</p>
<p><b>#7</b> - Track progress by measuring compliance with revised regulations relating to communication.</p>		<p>Retire</p>	<p>SC monitoring tool question, Regulatory Compliance Guide, QA&amp;I updates.</p>	<p>8/15/23</p>

**ISAC REC #1 – New Strategy(s)**

**#3** - Use data to identify people in service that have communication access needs. Better utilize data through Supports Intensity Scale (SIS) and PA Plus, Health Risk Assessment Tool (HRST), Scales of Independent Behavior (SIB-R), Quality of Life Questionnaire (QOL.Q), and Periodic Risk Evaluation (PRE), Etc.

<b>Recommendation #2 – Promote Self-Direction, Choice, and Control:</b> Personal choice and control over all aspects of life must be supported for every person. Choice about where to live, whom to live with, what to do for a living, and how to have fun all are key choices in life, as are seemingly small choices: such as what to eat, what to wear, when to wake up in the morning, and when to go to bed. It is important to be able to trust the people who provide assistance, to feel confident that they respect you and your right to manage your life, and to enjoy each other’s company. Self-direction works when individuals have clear and understandable information, opportunities to exercise choice, and assistance with making decisions when needed. Self-direction is only possible when family, friends, and people who provide supports respect the individual’s preferences and their right to make mistakes and facilitate the implementation of the individual’s decisions.				
Current Strategy	Keep As-Is	Retire or Revise To... <i>(strikethrough for removal and underline for additions)</i>	Reason Proposed Change	ISAC Review Date
<p><b>#1</b> - Simplify the process for people to direct their services to reduce time and effort needed to use the model.</p> <ul style="list-style-type: none"> <li>Revise/simplify the PA Guide to Participant-Directed Services (PDS) to make the guide more accessible to people unfamiliar with PDS models;</li> <li>Simplify bulletins and announcements about Vendor/Fiscal Employer Agent (VF/EA) and Agency with Choice (AWC) to establish clear and consistent expectations for VF/EA and AWC performance;</li> <li>Clarify the documentation required to comply with state and federal regulations regarding PDS services.</li> </ul>		<p><del>Simplify the process for people to direct their services to reduce time and effort needed to use the model.</del></p> <ul style="list-style-type: none"> <li><del>Revise/simplify the PA Guide to Participant-Directed Services (PDS) to make the guide more accessible to people unfamiliar with PDS models;</del></li> <li><del>Simplify bulletins and announcements about Vendor/Fiscal Employer Agent (VF/EA) and Agency with Choice (AWC) to establish clear and consistent expectations for VF/EA and AWC performance;</del></li> <li><del>Clarify the documentation required to comply with state and federal regulations regarding PDS services.</del></li> </ul> <p><u>Promote and expand Use of Participant-Directed Services. Participant-Directed Services are a way for people to choose their own staff and direct how their services are provided. People may direct one, some, or all services based on personal preference and need.</u></p> <ul style="list-style-type: none"> <li><u>Revise the PA Guide to Participant-Directed Services to be more accessible and include plain-language explanations of how to use</u></li> </ul>	<p>This strategy is about encouraging people who do not use participant direction to try it and about encouraging people who do use participant direction, to direct more of their services.</p> <p>The existing #1 and #2 strategies are subtasks for the larger objective – expansion. Strategies #1 and #2 have been merged into the revised, more concise strategy.</p>	8/15/23

		<p><u>the Vendor/Fiscal Employer Agent and Agency with Choice service models.</u></p> <ul style="list-style-type: none"> <li>• <u>Create accessible supplemental materials that provide easy-to-understand summaries of participant-direction and direct people to the Guide to Participant-Directed Services.</u></li> </ul>		
<p><b>#2</b> - Provide information and education about self-direction to individuals, self-advocates, families, supports coordinators, and providers.</p> <ul style="list-style-type: none"> <li>• Provide training to participants, common-law employers, supports service workers, and natural supports on real world methods to manage the self-direction process in the VF/EA and AWC models through the PA Family Network and Self-Advocates United as 1;</li> <li>• Conduct targeted outreach to AEs/SCOs with low participation in PDS to encourage increased use of PDS;</li> <li>• Support the PA Family Network to educate families about the self-direction option.</li> </ul>		<p><del>Provide information and education about self-direction to individuals, self-advocates, families, supports coordinators, and providers.</del></p> <ul style="list-style-type: none"> <li>• <del>Provide training to participants, common-law employers, supports service workers, and natural supports on real world methods to manage the self-direction process in the VF/EA and AWC models through the PA Family Network and Self-Advocates United as 1;</del></li> <li>• <del>Conduct targeted outreach to AEs/SCOs with low participation in PDS to encourage increased use of PDS;</del></li> <li>• <del>Support the PA Family Network to educate families about the self-direction option.</del></li> </ul>	<p>The existing #1 and #2 strategies are subtasks for the larger objective – expansion. Strategies #1 and #2 have been merged into the revised, more concise strategy.</p>	8/15/23
<p><b>#3</b> - Assure the availability of fiscal intermediary services. Permit more than one AWC to operate within a county/AE, allowing greater access to AWC services and expanded participant choice.</p>	x			8/15/23
<p><b>#4</b> - Provide training to Agencies with Choice on operation and ODP recommendations to increase consistency of practice.</p>		Retire	Standard operating now.	8/15/23

<p><b>#5</b> – Ensure personal choice and control over all aspects of life are supported for every person.</p> <ul style="list-style-type: none"> <li>• Apply the “Individual Rights” sections of Chapter 6100 to support choice and control over all aspects of individuals’ everyday lives;</li> <li>• Use data analytics to track and measure results, and to help support the provision of technical assistance and training.</li> </ul>		<p><del>Ensure personal choice and control over all aspects of life are supported for every person.</del></p> <ul style="list-style-type: none"> <li><del>• Apply the “Individual Rights” sections of Chapter 6100 to support choice and control over all aspects of individuals’ everyday lives;</del></li> <li><del>• Use data analytics to track and measure results, and to help support the provision of technical assistance and training.</del></li> </ul> <p><u>Ensure choice and control over all aspects of life are supported for individuals in licensed settings.</u></p> <p><u>Measure and track regulatory compliance with regulations associated with choice and control.</u></p>	<p>Intent remains the same with more concise language.</p>	<p>8/15/23</p>
<p><b>#6</b> - Build capacity in understanding and supporting people with nontraditional communication needs with an emphasis on self-direction, choice, and control.</p> <ul style="list-style-type: none"> <li>• Communicate expectations regarding the link between effective communication and the ability to control one’s own life.</li> </ul>		<p>Retire</p>	<p>This is what Recommendation #1 is all about.</p>	<p>8/15/23</p>
<p><b>ISAC REC #2 – New Strategy(s)</b></p>				
<p><b>#3</b> - Create and promote the Individual’s Bill of Rights. There are over 30 individual rights protected by the Chapter 6100 regulations. The rights are not always easy to understand because regulations can be hard to read. The Individual’s Bill of Rights presents individual rights in plain language so everyone can understand them. In addition to helping people understand their rights, the Individual’s Bill of Rights will be used when measuring compliance to ensure that rights are protected.</p> <p><b>#4</b> - Expand Use of the Life Sharing and Supported Living Services. Life Sharing is a regulated residential service where an individual becomes a member of a private household. Supported Living is a residential service provided in a home that is owned, rented, or leased by the participant. Both Life Sharing and Supported Living offer a great deal of individual choice and control. This strategy supports the transition and diversion of individuals from more restrictive residential settings to less-restrictive private homes.</p>				

<b>Recommendation #3 – Increase Employment:</b> 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.				
<b>Current Strategy</b>	<b>Keep As-Is</b>	<b>Retire or Revise To... (<del>strikethrough for removal and underline for additions</del>)</b>	<b>Reason Proposed Change</b>	<b>ISAC Review Date</b>
<b>#1</b> - Inform families about employment opportunities when their children are young; inform self-advocates as they approach the age of transition.		Inform <u>individuals and</u> families about employment opportunities <u>and the impact of employment on benefits throughout the life stages of early childhood, school age, and transition to adulthood.</u> <del>when their children are young; inform self-advocates as they approach the age of transition.</del>	To include children and their families in all phases of these discussions, prior to adulthood.	10/3/23
<b>#2</b> - Strengthen state and local interagency collaboration to support individuals and self-advocates to transition into competitive integrated employment upon graduation.		Strengthen <del>state and local interagency collaboration</del> <u>outreach to businesses through local employment coalitions</u> to support individuals* <del>and self-advocates to transition into</del> <u>obtain</u> competitive integrated employment <del>upon graduation.</del>	Intent remains the same. Revisions define the work more clearly.  *Use of “individual(s)” to mean all who are eligible for services.	10/3/23
<b>#3</b> - Support individuals receiving subminimum wage to gain competitive integrated employment.	x			10/3/23
<b>#4</b> - Support families before, during, and after an individual’s transition to competitive integrated employment.	x			10/3/23
<b>#5</b> – Build an Employment First assumption in all supports coordination planning activities, including ISP redesign and training.		Retire	The Employment First Act requires this to be done. ODP is actively working on incorporating it into the new ISP redesign. Employment First assumptions are included in SC Orientation. ODP has recorded additional trainings on employment for SCs.	10/3/23



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<p><b>#6</b> – Provide training and ongoing technical assistance to service providers and supports coordinators.</p>		<p>Retire</p>	<p>Standard operating procedure now.</p>	<p>10/3/23</p>
<p><b>#7</b> - Routinely publish data on employment services, work, and wages.</p>		<p>Retire</p>	<p>Standard operating procedure now.</p>	<p>10/3/23</p>
<p><b>#8</b> – Connect OVR Workforce Development information system and ODP information system (HCSIS) to enable the departments to share information.</p>		<p><del>#8 – Connect OVR Workforce Development information system and ODP information system (HCSIS) to enable the departments to share information.</del>  <b>#5</b> - <u>Work with OVR to develop a process for AEs and SCs to obtain relevant information from OVR’s Commonwealth Workforce Development System (CWDS) to facilitate individual transitions between the two offices.</u></p>	<p>OVR has access to relevant information in HCSIS. Changes the focus to obtaining access to CWDS for AEs and SCs.           Changing strategy numbering to <b>#5</b>.</p>	<p>10/3/23</p>
<p><b>#9</b> - Support provider transformation to employment services.</p>		<p><del>#6 - Support provider transformation to employment services</del> <u>from focusing on workshop/subminimum wage activities to services that support competitive integrated employment.</u></p>	<p>Intent remains the same. Revisions define the work more clearly. Changing strategy numbering to <b>#6</b>.           Discussion with ISAC: Employment First Oversight Commission recommended phase out of 14c in 2023 report.</p>	<p>10/3/23</p>
<p><b>#10</b> - Facilitate public-private partnerships and local interagency coalitions to support employment opportunities and encourage innovation.</p>	<p>x</p>		<p>Changing strategy numbering to <b>#7</b>.</p>	<p>10/3/23</p>
<p><b>#11</b> – 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-</p>		<p><del>Build provider capacity for the benefits counseling service.</del>  <b>#8</b> - Provide training and technical assistance to supports coordinators, <u>individuals*, and families to increase awareness of how benefits counseling, including how benefits counseling</u></p>	<p>Focuses on training and technical assistance regarding the benefits counseling service.           Changing strategy numbering to <b>#8</b>.</p>	<p>10/3/23</p>

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advocates, and families about options to work without losing benefits.		<u>supports competitive integrated employment and transitions from subminimum wage to competitive integrated employment.</u> <del>might inform individuals, self-advocates, and families about options to work without losing benefits.</del>	*Use of “individual(s)” to mean all who are eligible for services.	
<b>#12</b> - Promote and increase county and state government hiring of people with disabilities.	x		Changing strategy numbering to <b>#9</b> .	10/3/23
<b>#13</b> – Support the growth and advancement of post-secondary education programs.	x		Changing strategy numbering to <b>#10</b> .	10/3/23
<b>#14</b> - Disseminate county-level employment reports that include comparisons by race to AEs and local employment coalitions. Engage employment leads and coalitions in discussion about racial disparities and support adoption of local strategies to address the disparities.	x		Changing strategy numbering to <b>#11</b> .	10/3/23
<b>ISAC REC #3 - New Strategy(s)</b>				
<p><b>#12</b> - Establish and implement employment related performance measures for supports coordination and residential services.</p> <p><b>#13</b> - Collect and publish data from prevocational service providers (in both licensed day habilitation and prevocational facilities) on rates of moving people to competitive integrated employment. (Source: Annual provider survey)</p> <p><b>#14</b> - Provide training and ongoing technical assistance to providers and supports coordinators on barriers to employment and potential solutions such as how Community Participation Support can be used as a wraparound service for people with competitive integrated employment and services that support employment that are available through other agencies.</p>				

<b>Recommendation #4 – Support Families Throughout the Lifespan:</b> The vast majority of people with disabilities in Pennsylvania live with their families. Families need support in order make an everyday life possible throughout the person’s lifetime. Families need information, resources, and training. They need connections with other families and support services. Listening to people with disabilities and their families is key to providing supports that help them achieve an everyday life.				
<b>Current Strategy</b>	<b>Keep As-Is</b>	<b>Retire or Revise To... (<del>strikethrough</del> for removal and <u>underline</u> for additions)</b>	<b>Reason Proposed Change</b>	<b>ISAC Review Date</b>
<b>#1</b> - Recognize that family is defined by the person; by who is important to the person. It may include biological and chosen family or staff.		Retire	Embedded in LC, which is/will be embedded in ISP. From the LifeCourse Nexus: “Recognizing the Person in the Context of Family. People exist and have reciprocal roles within a family system, defined by that individual.”	10/3/23
<b>#2</b> - Support the work of the PA Family Network to reach families with a consistent message of the importance of family expectations of a good life for family members and opportunities for discovery and navigation of support/service systems and community-based resources.	x			10/3/23
<b>#3</b> - Support the continued growth of regional collaboratives, through the Community of Practice, so that communities and all stakeholders experience genuine direction and ownership in local approaches to ensure equal access and support of individuals and families.	x			10/3/23
<b>#4</b> - Align supports coordination with the LifeCourse Framework so that SCs have the skills and capacity to encourage,		Align supports coordination with the LifeCourse Framework so that SCs have the skills and capacity to encourage, explore, and plan with <u>individuals*</u> <del>self-advocates</del>	Moves beyond just having a vision and includes achieving goals that are working towards that vision.	10/3/23

<p>explore, and plan with self-advocates and families about their vision of a good life.</p>		<p>and families about their vision of a good life <u>and achieving short and long-term goals towards that vision. LifeCourse Framework is the foundation for supports coordination so that SCs have the skills and capacity to encourage, explore, and plan with individuals* and families about their vision of an everyday life now and in the future.</u></p>	<p>*Use of “individual(s)” to mean all who are eligible for services.</p>	
<p><b>#5</b> - Amend the ISP to address families’ needs, including challenges a family faces, the vision for the individual, and extended family information.</p>		<p>Retire</p>	<p>Will be embedded in ECM, which is in process now.</p>	<p>10/3/23</p>
<p><b>#6</b> - Develop materials that lead families to information, connections, opportunities, supports, and resources needed to build everyday lives for all.</p>		<p>Develop materials <u>in plain language, like the Gold Book</u>, that lead families to information, connections, opportunities, supports, and resources needed to build everyday lives for all.</p>	<p>Intent remains the same. Revisions define the work more clearly.</p>	<p>10/3/23</p>
<p><b>#7</b> - Strategize multiple ways to disseminate information to families. Communication avenues include counties, providers, email distribution lists, school districts, advocacy organizations, social media, and traditional media at the local and state level.</p>		<p>Strategize multiple ways to disseminate information to families. Communication avenues include counties, providers, <u>ISAC members</u>, email distribution lists, school districts, advocacy organizations, <u>OVR and schools</u>, social media, and traditional media at the local and state level.</p>	<p>Intent remains the same. Revisions define additional avenues for communication.</p>	<p>10/3/23</p>
<p><b>#8</b> - Focus on the engagement of cross-systems partners in the Community of Practice to recognize their roles in supporting families to have strong visions and high expectations. The value their roles play in improving access for families to needed information, supports, and services throughout the lifespan is essential.</p>		<p>Focus on the engagement of cross-systems partners <u>to build capacity across fields (medical, hospital social workers, etc.)</u> in the Community of Practice to recognize their roles in supporting families to have strong visions and high expectations. The value their roles play in improving access for families to needed information, <u>connection to other families, simplifying the processes of accessing supports</u>, and</p>	<p>Intent remains the same. Revisions define the scope more clearly.</p>	<p>10/3/23</p>

		services throughout the lifespan is essential.		
<b>#9</b> - For people who are waiting for supports and services, utilize the supports coordination service, Targeted Support Management, to support community navigation through the LifeCourse Framework and tools for planning, connecting with other families, and finding information and resources within their communities.		Retire	TSM is an SC function. Eligibility was expanded and SCs have greater focus on TSM to help people plan for a good life by having a vision and accessing integrated supports; rather than just as a placeholder, until a waiver becomes open as TSM was sometimes used in the past.	10/3/23
<b>ISAC REC #4 - New Strategy(s)</b>				
<p><b>#1</b> - LifeCourse Framework is the foundation for intake so that individuals and families can start developing their vision and access integrated supports to respond to immediate needs. Families receive all information about possible/available services and supports, as well as where to go when they are ready for next steps.</p> <p><b>#5</b> - With most individuals living with their families, whether they receive formal services or not, Family Caregivers are supported to plan across life transitions, from birth throughout the arc of life. This includes financial planning, benefits planning, better planning tools, and SCs assisting in planning. Family Caregivers need information, connection, and services and supports.</p> <p><b>#9</b> - Disabled parents receive the support they need. Support should include planning with the SC.</p>				

<b>Recommendation #5 – Promote Health, Wellness and Safety:</b> 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.				
Current Strategy	Keep As-Is	Retire or Revise To... ( <del>strikethrough</del> for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
<p><b>#1</b> - Direct people to existing resources with information on healthy living.</p> <ul style="list-style-type: none"> <li>• Create a resource guide with available resources by region, and post online;</li> <li>• Provide outreach and education for Supports Coordinators on these topics to promote incorporation into the ISP;</li> <li>• Continue to promote waiver services among professionals to become eligible providers for available waiver services for wellness;</li> <li>• Promote health literacy to increase individuals’ capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.</li> </ul>		<p><b>#12</b> - Direct people to existing resources with information on healthy living. Develop resources where inadequate information exists.</p> <ul style="list-style-type: none"> <li>• <del>Create a resource guide with available resources by region, and post online;</del></li> <li>• Provide outreach and education for Supports Coordinators on these topics to promote incorporation into the ISP;</li> <li>• Continue to promote waiver services among professionals to become eligible providers for available waiver services for wellness;</li> <li>• Promote health literacy to increase individuals’ capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions;</li> <li>• Education for self-advocates about insurance options delivered by self-advocates;</li> <li>• Education on preventive health</li> </ul>	<p>Resource guides as envisioned have been problematic with attempts at developing, as well as maintaining.</p> <p>Changing strategy numbering to <b>#2</b>.</p>	8/15/23

<p><b>#2</b> - Increase the use of Mental Health First Aid (MHFA) among stakeholders across the state.</p>		<p>Retire</p>	<p>After several years of promoting and supporting MHFA sessions for stakeholders via MFP funding, this initiative was ended. Various MHFA resources exist in PA.</p>	<p>8/15/23</p>
<p><b>#3</b> - Update, disseminate, and provide training on sexuality guidelines.</p> <ul style="list-style-type: none"> <li>Identify experts in the field in PA available to support individuals and families with recommendations and strategies.</li> </ul>		<p><del>Update, disseminate, and provide training on sexuality guidelines.</del>  <u>Support and promote resources for healthy sexuality, problematic sexual behavior, and recovery from sexual trauma.</u></p> <ul style="list-style-type: none"> <li>Identify experts in the field in PA available to support individuals and families with recommendations and strategies.</li> <li><u>Promote and build capacity for availability of therapists with expertise in addressing trauma in individuals with IDA.</u></li> </ul>	<p>Sexuality guidelines were developed and disseminated as the result of a workgroup. Scope of strategy is being broadened to include previous intent and a wider range of sexuality topics, including trauma. Work with TRAIN will support this strategy.</p>	<p>8/15/23</p>
<p><b>#4</b> – Incorporate a focus on health and wellness into the individual planning process.</p> <ul style="list-style-type: none"> <li>Use the Health Risk Screening Tool (HRST) to inform individual planning;</li> <li>Offer training on the Fatal Four to broader audiences in both live and on-line formats.</li> </ul>		<p><b>#4 #1.</b> <u>Promote improved healthcare for individuals with intellectual disability, autism, and other developmental disabilities. This includes physical, behavioral, and dental healthcare.</u></p> <ul style="list-style-type: none"> <li>Incorporate a focus on health and wellness into the individual planning process.</li> <li>Use the Health Risk Screening Tool (HRST) to inform individual planning;</li> <li>Offer training on the Fatal <del>Four</del> <u>Five and other health conditions</u> to broader audiences in both live and on-line formats.             <ul style="list-style-type: none"> <li><u>Highlight effective monitoring done by providers.</u></li> </ul> </li> </ul>	<p>Strategy needed to be broader than just discussing the individual planning process.</p> <p>Changing strategy numbering to <b>#1.</b></p>	<p>8/15/23</p>

		<ul style="list-style-type: none"> <li>• <u>Pursue new waiver service for telehealth assessment availability with healthcare professionals with expertise in supporting individuals with IDA.</u></li> <li>• <u>Development of trainings for healthcare providers (ASERT, HCQU)</u></li> </ul>		
<b>#5</b> - Health Care Quality Units will develop outreach to promote wellness to individuals and self-advocates living with families, including people on the waiting list, engaging partners including ASERT, SAPNA, the PA Family Network, and Temple.		Health Care Quality Units <u>and ASERT will work independently and in coordination to</u> develop outreach to promote wellness to individuals* <del>and self-advocates</del> living with families, including people on the waiting list, engaging partners including <del>ASERT</del> , SAPNA, the PA Family Network, and Temple.	Wording changed slightly to reflect a more active role for ASERT in this process.  *Use of “individual(s)” to mean all who are eligible for services.	8/15/23
<b>#6</b> - Broaden the use of physical and behavioral health data to understand health, wellness and safety needs and risks, and to inform ODP planning and direction of supports such as waiver development, HCQU and ASERT activities.		<p>Broaden the use of physical and behavioral health data to understand health, wellness and safety needs and risks, and to inform ODP planning and direction of supports such as waiver development, HCQU and ASERT activities.</p> <ul style="list-style-type: none"> <li>• <u>Monitor trends in reporting sexual abuse incidents</u></li> <li>• <u>Monitor abuse dashboard</u></li> <li>• <u>Monitor trends for Fatal 5 and other serious injury.</u></li> <li>• <u>Consider possible role of artificial intelligence in examining data</u></li> <li>• <u>Explore HCQU access to Health Information Exchanges</u></li> </ul>	Revised to list some specific data to be monitored.	8/15/23



**ISAC REC #5 - New Strategy(s)**

**#4** – Increase preparedness for biological, environmental, and other critical situations that require significant and potentially sudden changes in standard activities in order to protect health and wellness.

- Utilize and disseminate guidelines and best practices
- Participate in the further development of AIDinPA.org as a platform to inform and educate
- Explore additional training opportunities, such as with shelters, healthcare settings, and emergency response agencies.

**#7** – Create an initiative to promote physical activity among all stakeholders. Ensure:

- Inclusive for all,
- Resources for people who use wheelchairs or have other mobility supports,
- Partnering with community resources such as Special Olympics
- Events held are inclusive, and
- Education about choice and impact on health.

<b>Recommendation #6 – Support People with Complex Needs:</b> People with disabilities who have both physical and behavioral health needs receive the medical treatment and supports needed throughout their lifespan. 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.				
Current Strategy	Keep As-Is	Retire or Revise To... <i>(<del>strikethrough</del> for removal and <u>underline</u> for additions)</i>	Reason Proposed Change	ISAC Review Date
<b>#1</b> – 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.		<del>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.</del>  Revise to: <u>Support the use of an “institute” structure to address capacity building across the spectrum of stakeholder needs. ODP will partner with other Program Offices as appropriate in this strategy, including the Office of Mental Health and Substance Abuse Services. Areas of focus that are in progress, in planning, or may be considered in the future include, but are not limited to:</u> <ul style="list-style-type: none"> <li>• <u>Capacity Building Institute</u></li> <li>• <u>Residential Learning Collaboratives</u></li> <li>• <u>Capacity Building for Children with Multisystem Involvement</u></li> <li>• <u>Justice System Involvement</u></li> <li>• <u>Aging/Late Life Issues</u></li> <li>• <u>Institute on Physical Health and Health Equity (with DOH involvement)</u></li> </ul>	Broadening this strategy to reflect the additional areas of focus that have been addressed and will be addressed beyond just CBI.	10/3/23
<b>#2</b> - Improved support for individuals and self-advocates with complex medical needs. ODP will		<del>Improved support for individuals* and self-advocates, their families and other support providers related to</del> <u>with</u> complex medical needs.	*Use of “individual(s)” to mean all who are eligible for services.	10/3/23

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<p>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.</p>		<p>ODP will develop, in coordination with the HCQUs and ASERTs, increased access to <u>standardized</u> information and guidance for individuals* <del>and self-advocates</del> with new onset or longstanding complex medical health needs, <u>their families and other support providers</u>.</p>	<p>ISAC small group additions included all new (underlined) edits.</p>	
<p><b>#3</b> - 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:</p> <ul style="list-style-type: none"> <li>• Training and education</li> <li>• Strategies to target identified health risks</li> <li>• Improved capacity</li> </ul>	<p>x</p>	<p>Improved use of data and consideration for additional data collection. Use data related to individuals with complex medical needs, complex dental needs or complex mental health needs to inform ODP policy and program design. <u>Data should be comprehensive with respect to healthcare disciplines and specialties. Data should be inclusive of LGBTQIA+ care, when available, including transgender care.</u> This data will enhance the development of:</p> <ul style="list-style-type: none"> <li>• Training and education</li> <li>• Strategies to target identified health risks</li> <li>• Improved capacity <u>to support people with complex needs</u></li> </ul>	<p>Strategy expanded to incorporate improved use of data with a wider focus for supporting people with complex needs.</p>	<p>10/3/23</p>
<p><b>#4</b> - Promote the use of online dual diagnosis training curriculum. New providers are required to complete the dual diagnosis training curriculum.</p>		<p>Retire</p>	<p>Use of dual diagnosis training curriculum reflected in <i>new</i> strategy below.</p>	<p>10/3/23</p>
<p><b>#5</b> – 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.</p>		<p><del>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.</del> <u>Conduct an annual conference addressing the support of individuals with complex needs for a broad range of stakeholders.</u></p>	<p>Strategy expanded to broader scope and range of stakeholders.</p>	<p>10/3/23</p>
<p><b>#6</b> - Develop online training modules for Functional Behavioral</p>		<p>Retire</p>	<p>The FBA training is complete, however there is a need for</p>	<p>10/3/23</p>

<p>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.</p>			<p>ongoing, supplemental trainings to help providers apply knowledge to day-to-day service delivery. This should be reflected in a new strategy about behavioral support. Use of FBA modules reflected in new strategy below.</p>	
<p><b>#7</b> - 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 &amp; clinicians.</p>		<p>Retire</p>	<p>Use of Professional Conference Series reflected in new strategy below.</p>	<p>10/3/23</p>
<p><b>#8</b> - ODP will explore ways to promote interest in and competencies for providing nursing services for individuals with I/DD and autism.</p>		<p>ODP will explore ways to promote interest in, and competencies for, <del>providing nursing services</del> <u>meeting the healthcare and support needs</u> for individuals with <del>ID</del><u>DD/A</u>. <u>This strategy will also promote access to these areas of need for individuals from childhood through late life. Areas of focus will include:</u></p> <ul style="list-style-type: none"> <li>• <b><u>Nursing</u></b> <ul style="list-style-type: none"> <li>○ <u>In home, pediatric and adult</u></li> <li>○ <u>Hospital, clinic, or agency based</u></li> </ul> </li> </ul>	<p>Expanded strategy to include other medical, clinical, and support services, across the life span</p>	<p>10/3/23</p>

		<ul style="list-style-type: none"> <li>• <b><u>Physician and other advanced practice providers</u></b> <ul style="list-style-type: none"> <li>○ <u>Physical health</u></li> <li>○ <u>Behavioral health</u></li> </ul> </li> <li>• <b><u>Therapies</u></b></li> </ul>		
<b>ISAC REC #6 - New Strategy(s)</b>				
<p><b>#4</b> - Increase capacity and proficiency of behavioral supports.</p> <ul style="list-style-type: none"> <li>• Promote best practice standards for behavioral support</li> <li>• Continue use of Online Training Modules for Functional Behavior Assessment</li> <li>• Pilot the START Model and the associated training and educational opportunities</li> <li>• Conduct Behavioral Support Roundtables</li> </ul> <p><b>#6</b> - Advance the availability and use of Certified Peer Specialists for individuals with ID/A.</p> <p><b>#7</b> - Provide novel approaches to the support of individuals with complex needs and maintain/enhance current effective platforms that include:</p> <ul style="list-style-type: none"> <li>• START Model</li> <li>• Trauma Recovery for Autistic, Intellectually Disabled and Neurodiverse Individuals: TRAIN</li> <li>• Project Reassure</li> <li>• Project ECHO</li> <li>• Dual Diagnosis Curriculum</li> <li>• Functional Behavior Assessment Modules</li> <li>• AIDinPA.org</li> <li>• Professional Conference Series</li> </ul> <p><b>#8</b> - Increase capacity to support children with complex needs.</p> <ul style="list-style-type: none"> <li>• Recognize the varying support needs for younger children, adolescents, and transition age individuals.</li> <li>• Work collaboratively with the Office of Medical Assistance Programs (OMAP) to increase pediatric in-home nursing capacity.</li> <li>• Work collaboratively with OMAP to explore the possibility of creating a credentialing process for state plan services that would allow family members to become paid providers of skilled care for children in the home.</li> </ul> <p><b>#9</b> - Build capacity to provide restorative and therapeutic homes for adults with dual diagnosis and safe, structured home environments for adults with autism, by establishing:</p> <ul style="list-style-type: none"> <li>• Clear standards for clinical expertise and</li> <li>• Corresponding funding for clinically enhanced services.</li> </ul>				

**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 (DSPs) will improve the quality of support.

Current Strategy	Keep As-Is	Retire or Revise To... <i>(<del>strikethrough for removal and underline for additions</del>)</i>	Reason Proposed Change	ISAC Review Date
<p><b>#1</b> - Adopt the Direct Work Force Core Competencies, which were developed by the Centers for Medicare and Medicaid Services (CMS) as an expectation.</p> <p>a. To further this actively support and promote the Core Competencies through the following:</p> <ul style="list-style-type: none"> <li>• <i>Policy Bulletins;</i></li> <li>• <i>Training: As a part of this, conduct a review of MyODP.org for existing course content pertaining to Core Competencies to identify areas where augmentation of course material is needed, and to help identify and promote the use of this existing material;</i></li> <li>• <i>Other Outreach.</i></li> </ul> <p>b. Incentivize Core Competencies by:</p> <ul style="list-style-type: none"> <li>• <i>Identifying if there are any providers who have adjusted pay scales to promote/incentivize completion of Core Competencies;</i></li> <li>• <i>Reviewing the payment models of other states to report on how Core Competencies are incentivized elsewhere;</i></li> <li>• <i>Utilizing Residential Services Learning Collaborative (RSLC) meetings to provide information on creative incentive methods.</i></li> </ul> <p>c. Engage families and individuals in the discussion of Core Competencies to include:</p> <ul style="list-style-type: none"> <li>• <i>An explanation of the Core Competencies;</i></li> </ul>		<p><b>#1</b> - Adopt the Direct Work Force Core Competencies, which were developed by the Centers for Medicare and Medicaid Services (CMS) <u>as an expectation and embedded in the National Alliance for Direct Support Professionals (NASDP) and the College of Direct Support.</u></p> <p><del>a. To further this actively support and promote the Core Competencies through the following:</del></p> <ul style="list-style-type: none"> <li><del>• Policy Bulletins;</del></li> <li><del>• Training: As a part of this, conduct a review of MyODP.org for existing course content pertaining to Core Competencies to identify areas where augmentation of course material is needed, and to help identify and promote the use of this existing material;</del></li> <li><del>• Other Outreach.</del></li> </ul> <p>b. Incentivize Core Competencies by:</p> <ul style="list-style-type: none"> <li>• Identifying if there are any providers who have adjusted pay scales to promote/incentivize completion of <u>Core Competencies Direct Support Professional and Front Line Supervisor (DSP/FLS) credentialing;</u></li> </ul>	<p>Revisions reflect a focus on future planning for Selective Contracting.</p>	<p>8/15/23</p>

<ul style="list-style-type: none"> <li>• <i>Conveying ODP’s expectations regarding the implementation of Core Competencies.</i></li> <li>• <i>Facilitating a discussion as to whether or not Core Competencies should be tied to pay.</i></li> </ul>		<ul style="list-style-type: none"> <li>• Reviewing the payment models of other states to report on how <del>Core Competencies</del> <u>DSP credentialing</u> <del>are</del> <u>is</u> incentivized elsewhere;</li> <li>• <del>Utilizing Residential Services Learning Collaborative (RSLC) meetings to provide information on creative incentive methods</del> <u>Develop payment models that incentive provider adoption and sustainability of DSP/FLS credentialing.</u></li> </ul> <p>c. Engage families and individuals in the discussion of Core Competencies to include:</p> <ul style="list-style-type: none"> <li>• An explanation of the Core Competencies;</li> <li>• Conveying ODP’s expectations regarding the implementation of Core Competencies.</li> </ul>		
<p><b>#2</b> - Discuss opportunities to promote additional credentialing and competencies.</p>		<p>Retire</p>	<p>The NADSP review of ODP courses for acceptable courses that count towards credentialing was completed in October 2023 and includes almost all 6100 annual and orientation trainings.</p>	<p>8/15/23</p>
<p><b>#3</b> - Maintain and encourage significant DSP participation at Residential Strategic Learning Collaborative (RSLC) meetings.</p>		<p>Retire</p>	<p>Residential Strategic Learning Collaborative (RSLC) has moved to a specialized content focus. Participating</p>	<p>8/15/23</p>

			provider team composition includes lead DSP as a role.	
<b>#4</b> - 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.	x		Changing strategy numbering to <b>#2</b> .	8/15/23
<b>#5</b> - Build incentives into the reimbursement system to promote staff credentials, encourage professional growth and development, and adopt incentive-based training and credentialing. This includes: <ul style="list-style-type: none"> <li>• Reviewing other states’ models, where success has been achieved, to learn from those who have attempted and have identified hurdles to progress;</li> <li>• Obtaining consultation from The National Alliance for Direct Support Professionals (NADSP) as a mean of considering their extensive credentialing system.</li> </ul>		<b>#53</b> - Build incentives into the reimbursement system to promote staff credentials, encourage professional growth and development, and adopt incentive-based training and credentialing. This includes: <ul style="list-style-type: none"> <li>• Reviewing other states’ models, where success has been achieved, to learn from those who have attempted and have identified hurdles to progress;</li> <li>• <del>Obtaining consultation from The National Alliance for Direct Support Professionals (NADSP) as a mean of considering their extensive credentialing system.</del></li> </ul>	Changing strategy numbering to <b>#3</b> . Consultation with NADSP completed. The NADSP review of ODP courses for acceptable courses that count towards credentialing was completed in October 2023 and includes almost all 6100 annual and orientation trainings.	8/15/23
<b>#6</b> - 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.	x		Changing strategy numbering to <b>#4</b> . Although improvements have been made, this is important to keep, to	8/15/23



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			ensure we stay on top of maintaining its efficiency and continued access for all professionals and stakeholders.	
<b>ISAC REC #7 - New Strategy(s)</b>				
None				

<b>Recommendation #8 – Simplify the System:</b> 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.				
<b>Current Strategy</b>	<b>Keep As-Is</b>	<b>Retire or Revise To...</b> <i>(<del>strikethrough for removal</del> and <u>underline for additions</u>)</i>	<b>Reason Proposed Change</b>	<b>ISAC Review Date</b>
<b>#1</b> - 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.		Redesign the <u>individual support plan (ISP)</u> process and format to reduce the time <u>needed to complete and update the ISP</u> , streamline <del>simplify</del> the <del>document</del> <u>ISP</u> , and increase the positive experience of individuals*, <del>self-advocates</del> and families, and all stakeholders.	Provides clarification on the activities we are aiming to save time on in the ISP process. Use of more precise language on how we intend to simplify the ISP.  *Use of “individual(s)” to mean all who are eligible for services.	8/15/23
<b>#2</b> - 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.		Provide a user-friendly <del>useful planning tool and document</del> <u>individual support plan (ISP)</u> that increases flexibility and <u>promotes</u> ease of access for the individual*, <del>self-advocate</del> , their family, and supporters to manage services and supports.	Specifying the tool/document is the ISP. Updating ISP will help promote ease of access to individual and their support team.  *Use of “individual(s)” to mean all who are eligible for services.	8/15/23
<b>ISAC REC #8 - New Strategy(s)</b>				
<b>#3</b> - Design and implement an enterprise case management system to provide direct access to individual plan information for individuals and families; and optimize and automate workflow processes where possible, leveraging existing information from other Medical Assistance (MA) systems via near real-time interfaces to reduce the time it takes from enrollment to begin providing services to individuals.				

<b>Recommendation #9 – Improve Quality:</b> Together we must plan and deliver services and supports that adhere to our values, measure person-centered outcomes, and continuously improve an individual’s quality of life. All stakeholders must be engaged in the process of measuring how well services assist people in achieving an everyday life.				
<b>Current Strategy</b>	<b>Keep As-Is</b>	<b>Retire or Revise To...</b> <i>(<del>strikethrough for removal</del> and <u>underline for additions</u>)</i>	<b>Reason Proposed Change</b>	<b>ISAC Review Date</b>
<b>#1</b> - Maintain the Information Sharing and Advisory Committee (ISAC) as ODP’s Stakeholder Quality Council, the entity that creates a detailed series of recommendations, strategies, and performance measures to guide the Office of Developmental Programs (ODP) and gauge its progress in achieving the important goals put forth in Everyday Lives. The ISAC will continue to use the quality improvement framework to plan and implement improvements, assess whether we achieve outcomes as intended, make changes as needed, and embed successful practices in the system.		Maintain the Information Sharing and Advisory Committee (ISAC) as ODP’s Stakeholder Quality Council. <del>the entity that creates a detailed series of recommendations, strategies, and performance measures to guide the Office of Developmental Programs (ODP) and gauge its progress in achieving the important goals put forth in Everyday Lives.</del> <u>Publish an ODP ISAC annual report to show the results of implementation of approved recommendations and strategies across the system. The ISAC will continue to use the quality improvement framework to plan and implement improvements, gauge progress, and assess whether we achieve outcomes as intended, make changes as needed, and embed successful practices in the system.</u>	Merged strategies #1 and #3. The strategies remain the same with more concise language.	8/15/23
<b>#2</b> - Continue to offer ODP’s Quality Management (QM) Certification Curriculum to build system capacity in applying quality management principles and practices across the system.	x			8/15/23
<b>#3</b> - Develop and disseminate an ODP annual report to show the implementation of approved recommendations and strategies across the system.		Revised and merged with strategy #1.	Strategies #1 and #3 merged. They remain the same with more concise language.	8/15/23

<p><del>#4</del> Create a provider profile to assist individuals, self-advocates, families, and supporters to make informed choices about providers and services.</p>		<p>Retire</p>	<p>Provider profiles created and available on MyODP. Selective contracting will include preferred status/tiers based on comprehensive quality metrics and these tiers will be available to stakeholders for decision-making.</p>	<p>8/15/23</p>
<p>#5 - Develop, implement, and maintain Quality Assessment and Improvement (QA&amp;I) process as ODP's annual monitoring of the system's performance in supporting individuals and families.</p>		<p><del>Develop, implement, and</del> Maintain Quality Assessment and Improvement (QA&amp;I) <u>as ODP's annual process for as ODP's annual</u> monitoring of the system's performance in supporting individuals and families. <u>Publish a QA&amp;I annual report to show the results.</u></p>	<p>Strategy remains the same with more concise language. Added commitment to publish QA&amp;I results annually.</p>	<p>8/15/23</p>

## ISAC REC #9 - New Strategy(s)

**#3** - Continue to engage in annual participation of Independent Monitoring for Quality (IM4Q) and National Core Indicators (NCI) surveys as valuable tools for collecting satisfaction data about how individuals and families feel about services received from the ODP system. ODP will:

- continue to use this data to measure the progress of identified ISAC performance measures,
- continue to scan the environment for additional opportunities for use of this data, and
- adjust data collection practices, as needed, to address any new Center for Medicare and Medicaid (CMS) Home and Community-Based Services (HCBS) Quality Measure Set requirements.

**#4** - Improve quality of services through establishment and application of performance standards, use of standardized quality metrics, and aligning payment with outcomes. Share results of this process to assist individuals, families, and supporters to make informed choices about providers and services.

**#6** - Develop and refine an ODP Risk Management (RM) Framework. This involves mapping and evaluating existing RM activities for opportunities for improvement in the system intended to help keep individuals safe. Goals of this work include use of a framework to develop a common language and shared understanding across the system, having effective strategies and efficient tools to address various risk types within the system, and overall reduced harm to individuals.

**#7** - Revise the Quality Management (QM) Strategy Bulletin and include incorporation and alignment with Risk Management (RM) strategies to support greater understanding of ODP's Culture of Quality and Safety.\* Fostering a Culture of Quality and Safety can lead to better outcomes for people receiving services.

*\*For quick reference in discussion: A **Culture of Quality** involves a set of common characteristics that include desire to understand contributors to quality issues, recognition that mistakes occur, and blame is not useful, shared responsibility for identifying and acting on improvement opportunities, and ongoing feedback across all levels to achieve quality. A **Culture of Safety** fosters a culture that is focused on preventing, detecting, and minimizing exposure to danger and errors without blaming others. In a **Culture of Quality and Safety** there is a shared understanding of trust and learning, as well as a deep commitment to the common mission, vision, and values among all agencies and stakeholders. Fostering a Culture of Quality and Safety can lead to better outcomes for people receiving services and those caring for them to ensure freedom from harm.*

<b>Recommendation #10 – Expand Options for Community Living:</b> 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.				
Current Strategy	Keep As-Is	Retire or Revise To... <i>(strikethrough for removal and underline for additions)</i>	Reason Proposed Change	ISAC Review Date
<b>#1</b> - Review the Housing Transition and Tenancy services to determine if it is meeting the needs of individuals.		Retire	Revisions completed during waiver renewal. It should be standard operating procedure to review effectiveness of services.	8/15/23
<b>#2</b> - Develop a training for SCOs, AEs and providers on the Housing Transition and Tenancy service. <ul style="list-style-type: none"> <li>The training should include more information on the financial impact.</li> <li>Provide training on the varied options for community living.</li> </ul>		Develop a training for SCOs, AEs and providers on the Housing Transition and Tenancy service. <ul style="list-style-type: none"> <li>The training should include more information on the financial impact.</li> <li>Provide training on the varied options for community living.</li> <li><u>Help SC to understand that residential should not be the first option. Ensure they understand how to offer the service to meet the needs.</u></li> <li><u>Focus on person's strengths rather than what they can't do. Understand the assistive technology available to support independent living.</u></li> <li><u>Use community of practice LifeCourse tools for SCs and team to plan for independent living.</u></li> <li><u>Include competency-based tests to ensure understanding.</u></li> </ul>	Added components to strategy to address current needs.	8/15/23

<p><b>#3</b> - Expand understanding of what is possible.</p> <ul style="list-style-type: none"> <li>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.</li> <li>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 ABLÉ accounts, sustaining housing, and community support.</li> <li>Evaluate and improve the education and support for individuals to budget for their housing needs.</li> </ul>		<p>Expand understanding of what is possible.</p> <ul style="list-style-type: none"> <li>Promote development and distribution of education/training/technical assistance to individuals*<del> and self-advocates</del> to increase knowledge of options and ability to make informed choices.</li> <li>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 ABLÉ accounts, sustaining housing, and community support.</li> <li>Evaluate and improve the education and support for individuals to budget for their housing needs.</li> <li><u>Develop training to be applicable to everyone, including impoverished families and individuals. It's hard for people to think about what is possible as it relates to living independently.</u></li> <li><u>Develop guidance to ensure families understand that this is possible for individuals with complex needs. Show people what is possible - LifeSharing and supported living.</u></li> <li><u>Explore options to assist families to understand LifeSharing is beneficial and answer "if I can't do it how can another family do it?"</u></li> <li><u>Explore live-in caregiver, house parent.</u></li> <li><u>Ensure information is available for families who have language barriers so that they understand what is possible.</u></li> </ul>	<p>*Use of "individual(s)" to mean all who are eligible for services.</p>	<p>8/15/23</p>
<p><b>#4</b> - Expand the Life Sharing service to allow for the enrollment of birth families as Life Sharing providers.</p>		<p>Retire</p>	<p>Completed</p>	<p>8/15/23</p>

<ul style="list-style-type: none"> <li>• Begin to develop material to help SCs and families understand the benefit to delivering this service.</li> <li>• Hold listening session with life sharing providers and individuals and their families to brainstorm on how to expand the supports.</li> </ul>				
<p><b>#5</b> - Continue to develop supported living service availability 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.</p> <ul style="list-style-type: none"> <li>• Continue to promote this service as an alternative to residential habilitation.</li> <li>• Develop more specific material to help SCs explain the benefit of the services to individuals and families.</li> </ul>		<p>Continue to develop supported living service availability that enables individuals* <del>and self-advocates</del> to live in their own homes with the support of an agency available to provide guidance and assistance as needed.</p> <ul style="list-style-type: none"> <li>• Continue to promote this service as an alternative to residential habilitation. <u>Use the transition incentive payment to assist in promoting the supported living service.</u></li> <li>• <u>Add incentive for SCOs to divert residential placement.</u></li> <li>• <u>Propose the transition incentive payment to be expanded/shared with the supported living provider.</u></li> <li>• Develop more specific material to help SCs explain the benefit of the services to individuals and families.</li> <li>• <u>Ensure availability of pest eradication</u></li> </ul>	<p>Added Independent Living transition payments as another sub-strategy to promote supported living. The incentive payments were added since the last revision to the strategy.</p> <p>*Use of “individual(s)” to mean all who are eligible for services.</p>	<p>8/15/23</p>
<p><b>#6</b> - Expand choice of options to include creative housing alternatives.</p> <ul style="list-style-type: none"> <li>• Continue to work on developing more integrated options that support the Everyday Lives (EDL) philosophy.</li> </ul>		<p><del><b>#6</b> - Expand choice of options to include creative housing alternatives.</del></p> <ul style="list-style-type: none"> <li><del>• Continue to work on developing more integrated options that support the Everyday Lives (EDL) philosophy.</del></li> </ul> <p>Replace #6 and #7 with:</p>	<p>Merges intent of strategies #6 and #7 and replaces them.</p>	<p>8/15/23</p>



		<u>#6 - Explore implementation of ODP HCBS housing vouchers to support affordable, accessible housing options for individuals with IDD.</u>		
<u>#7</u> - Support the development of safe and affordable housing options that meet the individual's and self-advocates personal preferences. <ul style="list-style-type: none"> <li>• Work with the providers of the Housing transition and pre-tenancy service to identify options that support individual preference.</li> </ul>		<del>Support the development of safe and affordable housing options that meet the individual's and self-advocates personal preferences.</del> Work with the providers of the Housing transition and pre-tenancy service to identify options that support individual preference.	Merged with strategy #6.	8/15/23
<u>#8</u> - Provide access to home modifications, transportation, and assistive technology to support people to live in their homes. <ul style="list-style-type: none"> <li>• Continue to help SCs and providers learn how to access technology to promote independence.</li> </ul>		<del>#87</del> - Provide access to home modifications, transportation, and assistive technology to support people to live in their homes. <ul style="list-style-type: none"> <li>• Continue to help SCs and providers learn how to access technology to promote independence.</li> <li>• <u>Explore how ride share could be paid for when transportation is needed and when assisting individuals with finding transportation.</u></li> </ul>	Added component to strategy to address current needs.	8/15/23
<b>ISAC REC #10 - New Strategy(s)</b>				
<u>#1</u> - Monitor and evaluate the number of qualified providers of Housing Transition and Tenancy Services across the state to ensure sufficient access. Track utilization of the HTTS service.				
<u>#4</u> - Track movement of people by living arrangement.				

<b>Recommendation #11 – Increase Community Participation:</b> Being involved in community life creates opportunities for new experiences and interests, the potential to develop friendships, and the ability to make a contribution to the community. An inter-dependent life, where people with and without disabilities are connected, enriches all of our lives.				
Current Strategy	Keep As-Is	Retire or Revise To... <i>(strikethrough for removal and underline for additions)</i>	Reason Proposed Change	ISAC Review Date
<p><b>#1</b> - Train direct care provider staff, supervisors, and managers in Person Centered Thinking and Planning to assist people to identify new experiences, promote engagement in new activities, and make new connections that are important to them.</p>		<p><u>Promote and support opportunities for <del>Train</del> <del>direct care provider staff, supervisors, and managers in</del> Person-Centered Thinking and Planning <del>training that focuses on to assisting</del> <del>people</del> individuals to <u>implement their community inclusion plan through</u> identifying new experiences, <u>promoting</u> engagement in new activities, and <u>making</u> new connections, that are important to them, in their local community.</u></p>	<p>Promoting opportunities for training widens the scope of resources to draw from, to allow ODP to highlight and recommend helpful supplemental trainings on the topic. Training on CPS is a requirement prior to providing the service and is an ongoing effort, so will not change. Revisions also adjust the focus to be training for everyone to assist individuals with implementing the plan for how they want to spend their time in the community.</p>	10/3/23
<p><b>#2</b> - Continue the statewide practice of community participation that facilitates valued and active participation in a broad range of integrated activities that build on the person’s interests, preferences, and strengths while reflecting the person’s desires for employment, community involvement, and membership.</p>	x			10/3/23

<p><b>#3</b> - Provide peer to peer education for people with disabilities who might be considering increasing how much time they are supported in the community versus an adult training or prevocational facility.</p>		<p><del>Provide</del> <u>Promote and support opportunities for peer-to-peer education, self-advocacy, and discussion for people with disabilities who might be considering increasing how much time they are</u> <u>individuals and their families regarding potential goals for being supported in the community and successful community inclusion</u> <del>versus an adult training or prevocational facility.</del></p>	<p>Focuses more on individuals being involved in their own goal/outcome development and removes idea of this vs. that while maintaining a point of view of time in the community. Including language that adds families to the discussion if desired.</p>	<p>10/3/23</p>
<p><b>#4</b> - Establish technical assistance teams to focus on provider readiness to support expanding the individual’s connections to the community. The TA teams will include individuals with lived experiences and expertise in the LifeCourse framework, employment, transportation, and community mapping to develop plans that meet the individual’s choice, preferences, and goals. The PA Support Broker Network will also be available for consultation with providers seeking to improve community mapping and enhancement of community supports.</p>	<p>x</p>	<p><del>Establish technical assistance teams to focus on</del> <u>Support providers readiness to develop and implement the individual’s plans for community inclusion and/or competitive integrated employment outcomes support</u> <del>expanding the individual’s connections to the community. The TA teams will include individuals with lived experiences and expertise in the LifeCourse framework, employment, transportation, and community mapping to develop plans that meet the individual’s choice, preferences, and goals. The PA Support Broker Network will also be available for consultation with providers seeking to improve community mapping and enhancement of community supports.</del></p>	<p>Revision is meant to take what were very specific actions and change it to an overarching strategy that will include specific actions of establishing the TA teams.</p>	<p>10/3/23</p>
<p><b>#5</b> - Develop and provide training to SCs on facilitating planning, discussion, and effective monitoring to support individuals to become more involved in community life.</p>	<p>x</p>			<p>10/3/23</p>
<p><b>#6</b> - Develop and disseminate new ideas and approaches on how to provide creative solutions to transportation barriers.</p>	<p>x</p>			<p>10/3/23</p>

<p><b>#7</b> - Analyze data to identify providers that are meeting goals for CPS, to learn and share best practices with facility-based CPS providers through training and technical assistance.</p>		<p>Analyze data <u>and collect examples</u> to identify providers, <u>AEs, and individuals who have demonstrated successful community inclusion goals, strategies, and/or initiatives,</u> <del>that are meeting goals for CPS, to learn and share best practices with facility-based CPS providers through training, and technical assistance,</del> <u>and other accessible and innovative methods.</u></p>	<p>Incorporating the idea of successful community inclusion coming from different perspectives. Will allow the “how” for this strategy to encompass more anecdotal evidence to combine with analyzed data. Revised to reflect information will be shared with all interested stakeholders. Aims at increasing transparency about community integration as well as highlighting best practices for all support teams to discuss as they learn what successful community inclusion means to each individual.</p>	<p>10/3/23</p>
<p><b>ISAC REC #11 - New Strategy(s)</b></p>				
<p>None</p>				

<b>Recommendation #12 – Provide Community Services to Everyone:</b> People with disabilities — whether living on their own, with families, or in institutions — are waiting for community services. The goal is to build a system having the capacity to provide services in a timely fashion for all people who need supports.				
<b>Current Strategy</b>	<b>Keep As-Is</b>	<b>Retire or Revise To...</b> <i>(<del>strikethrough for removal and underline for additions</del>)</i>	<b>Reason Proposed Change</b>	<b>ISAC Review Date</b>
<p><b>#1</b> - Individuals, self-advocates with intellectual disabilities or autism, and families should receive supports coordination service; information about local resources and services (e.g., OVR, Medicaid, aging, housing supports, income supports and victim services); information to connect with family and self-advocacy support organizations; and Family Support Service (FSS) using Base and block grant funding.</p> <p>Supports coordination should provide individuals, self-advocates, and families with tools and support to create a vision of an everyday life that:</p> <ol style="list-style-type: none"> <li>Considers factors and local community resources in an everyday life: daily and community living, social and spirituality, healthy lifestyles, security, and advocacy.</li> <li>Builds on the personal strengths, interests, relationships, resources, and opportunities within the person’s and family’s lives; and</li> <li>Serves as the overall framework to provide publicly funded services which align with everyday life.</li> </ol>		<p>Individuals, <del>*_self-advocates with intellectual disabilities or autism,</del> and <u>their</u> families <del>should</del> receive supports coordination service; information about local resources and services (e.g., OVR, Medicaid, aging, housing supports, income supports, <u>justice related supports,</u> and victim services); information to connect with family and self-advocacy support organizations; and Family Support Service (FSS) using Base and block grant funding.</p> <p>Supports coordination should provide individuals <del>*_self-advocates,</del> and families with tools and support to create a vision of an everyday life that:</p> <ol style="list-style-type: none"> <li>Considers <del>factors and</del> local community resources in an everyday life: daily and community living, social and spirituality, healthy lifestyles, security, <u>civic engagement,</u> and advocacy.</li> <li>Builds on the personal strengths, interests, relationships, resources, and opportunities within the person’s and family’s lives; and</li> <li>Serves as the overall framework to provide publicly funded services which align with <u>their</u> everyday life.</li> </ol>	<p>*Use of “individual(s)” to mean all who are eligible for services.</p> <p>Removed “factors” for readability rather than elaborating on the factors that influence creating a vision for a good life that are not already included in the strategy. Added “civic engagement” as a component of an everyday life with a commitment to use Developmental Disabilities Council provided materials to educate and describe.</p>	10/3/23

<p><b>#2</b> - Expand service system capacity to be able to provide employment services, in home supports and community participation services to individuals and self-advocates with intellectual disabilities or autism within 90 days of their eligibility determination.</p> <p>In the process of building capacity, prioritize and reserve capacity for:</p> <ul style="list-style-type: none"> <li>a. High school graduates to begin services 30 days prior to graduation;</li> <li>b. People who have caregivers who are unable to take care of their family member due to illness, aging, or an unanticipated life situation;</li> <li>c. PUNS and/or any other emergency.</li> </ul>		<p>Expand service system capacity to be able to provide employment services, in home supports, and community participation services to individuals* <del>and self-advocates</del> with intellectual <u>and developmental</u> disabilities <del>or autism</del> within 90 days of their eligibility determination.</p> <p>In the process of building capacity, prioritize and reserve capacity for:</p> <ul style="list-style-type: none"> <li>a. High school graduates to begin services at least 30 days prior to graduation;</li> <li>b. People who have caregivers who are unable to take care of their family member due to illness, aging, or an unanticipated life situation;</li> <li>c. PUNS and/or any other emergency.</li> </ul>	<p>*Use of “individual(s)” to mean all who are eligible for services.</p>	<p>10/3/23</p>
<p><b>#3</b> - Conduct ongoing training on the Prioritization of Urgency of Need for Services (PUNS) instrument:</p> <ul style="list-style-type: none"> <li>a. For individuals, families, SC, and AEs;</li> <li>b. For SCs on facilitating discussion to inform the PUNS.</li> </ul>		<p><u>Update the Prioritization of Urgency of Need for Services (PUNS) instrument and conduct ongoing training on the PUNS tool for:</u></p> <p><del>Prioritization of Urgency of Need for Services (PUNS) instrument:</del></p> <ul style="list-style-type: none"> <li>a. <del>For</del> Individuals, families, SCs, and AEs;</li> <li>b. <del>For</del> SCs on facilitating discussion to inform the PUNS.</li> </ul>	<p>ODP and stakeholders have identified a need to update the PUNS instrument as we are preparing to build the PUNS tool in ECM.</p>	<p>10/3/23</p>
<p><b>#4</b> - ODP will provide training and technical assistance to law enforcement and criminal justice systems regarding intellectual disability and autism on available supports and services in order to:</p> <ul style="list-style-type: none"> <li>a. Promote diversion for people with intellectual disabilities or autism who are arrested;</li> </ul>		<p>ODP will provide training, <u>resource bundles</u>, and technical assistance to law enforcement and criminal justice systems regarding intellectual disability and autism on available supports and services in order to:</p> <ul style="list-style-type: none"> <li>a. Promote diversion for people with intellectual disabilities or autism who are arrested;</li> </ul>	<p>Added sub-strategy to address linkage back to local resources to support reentry to community.</p>	<p>10/3/23</p>

<p><b>b.</b> Improve supports to victims of crimes with intellectual disabilities or autism.</p>		<p><b>b.</b> Improve supports to victims of crimes with intellectual disabilities or autism.  <b>c.</b> <u>Ensure individuals who are eligible for services are referred by corrections facilities to appropriate counties so that appropriate supports can be identified to facilitate a safe introduction to the community.</u></p>		
<p><b>#5</b> - Develop expertise within AEs and SCOs and provide training for AEs and SCOs to navigate the criminal justice system to support diversion and improve outcomes for those who are arrested.</p>		<p>Develop expertise within AEs and SCOs and provide training for AEs and SCOs to navigate the criminal justice system to support diversion and <u>increase collective system capacity to support individuals involved with the criminal justice system.</u> <del>improve outcomes for those who are arrested.</del>  <u>Establish standards for Supports Coordination Organizations to have expertise in supporting justice involved individuals.</u></p>	<p>Don't want to only focus on individuals who have been arrested we should be working on support at any point a person could become involved in the criminal justice system.</p>	<p>10/3/23</p>
<p><b>#6</b> - ODP will issue an annual report on progress in addressing the waiting list.</p>		<p>ODP will issue an annual report on progress in addressing the waiting list. <u>The report will include strategies to address ending the waiting list for eligible adults in PA.</u></p>	<p>Additional information added to highlight component of report.</p>	<p>10/3/23</p>
<p><b>#7</b> - Provide outreach and communication to autism community about the expanded eligibility in ODP Programs.</p>		<p>Provide outreach and communication to autism <u>and Children with Medically Complex Conditions</u> communities <u>and system partners</u> <u>about</u> the expanded eligibility in ODP Programs.</p>	<p>Change to reflect our population served. Also changed to reflect that our target for outreach includes system partners.</p>	
<p><b>ISAC REC #12 - New Strategy(s)</b></p>				
<p><b>#8</b> - Building on the success of ODP's approach to managing waiver capacity for high school graduates, ODP will develop strategies &amp; train Administrative Entities to implement more efficient waiver capacity management strategies giving administrative entities more flexibility while serving more people.</p>				

<b>Recommendation #13 – Evaluate Future Innovations Based on Everyday Lives Principles:</b> <del>Future</del> Consideration of service models and reimbursement strategies must be based on the principles of person-centered planning, individual choice, control over who provides services and where, and access to/full engagement in community life. Innovative approaches should be evaluated based on the recommendations of Everyday Lives, including employment, recognizing, and supporting the role of families, and meeting the diverse needs of all individuals. Stakeholders should be fully engaged in designing, implementing, and monitoring the outcomes and effectiveness of innovative service models and service delivery systems.				
Current Principle	Keep As-Is	Retire or Revise To... ( <del>strikethrough for removal and underline for additions</del> )	Reason Proposed Change	ISAC Review Date
#1 - Adherence to the values and principles of <i>Everyday Lives</i> .	x	Adherence to the values and principles of <i>Everyday Lives</i> , <del>and person-centered planning, individual choice and control over who provides services and where, and support access to the greater community and full engagement in community life, as required by the Federal Home and Community Based Settings Rule.</del>	Added additional description to elements of commitment to EDL and merged strategy #5 into strategy #1.	10/3/23
#2 - Engagement of stakeholders, including individuals and self-advocates with disabilities, family members, county governments, providers, and advocates in designing, implementing, and monitoring the outcomes.		<u>Meaningful</u> engagement of stakeholders, including individuals*, <del>and self-advocates with disabilities</del> family members, county governments, providers, <u>SCOs</u> , and advocates in designing, implementing, and monitoring <del>the provider and system performance and</del> outcomes.	*Use of “individual(s)” to mean all who are eligible for services.  Including SCOs as distinct entity of importance. Meaningful engagement involves making sure we are engaging all the right people in discussions with mutual learning and exchange of information.	10/3/23
#3 - Recognition that payment models assume that individuals and self-advocates with intellectual disability and autism require supports across the lifespan, that their needs are not episodic or time-limited but are on-going and ever changing throughout life.		Recognition that payment models <u>should align with outcomes and</u> assume that individuals* <del>and self-advocates with intellectual disability and autism</del> require supports across the lifespan, that their needs are not episodic or time-limited but are on-going and ever changing throughout life.	*Use of “individual(s)” to mean all who are eligible for services.	10/3/23



<p>Investment in skill development and job placement and training may not realize savings for a number of years into the future.</p>		<p>Investment in skill development and job placement and training may not realize savings for a number of years into the future.</p>		
<p><b>#4</b> - Recognition that while individuals and self-advocates with intellectual disability or autism have medical, mental health, and dental needs that require medical services, the goal of home and community-based services is to enable people to live and engage in community life.</p>		<p><del>Recognition</del> <u>Ensure that home and community-based services enable people to live and engage in community life while ensuring individuals have their medical, mental/behavioral health, and dental needs met.</u> <del>that require medical services, the goal of home and community based services is to enable people to live and engage in community life.</del></p>	<p>Clarifies intent of principle.</p>	<p>10/3/23</p>
<p><b>#5</b> - Incorporation of the Federal Home and Community-Based Services rule, which requires person-centered planning, individual choice, and control over who provides services and where and supports access to the greater community and full engagement in community life.</p>		<p>Retire</p>	<p>Completed and principle is incorporated throughout ISAC recommendations and strategies, including revisions to strategy #1 under this recommendation.</p>	<p>10/3/23</p>
<p><b>#6</b> - Adoption of a performance evaluation system founded in the principles of <i>Everyday Lives</i> and the Home and Community-Based Services Rule.</p>	<p>x</p>			<p>10/3/23</p>
<p><b>#7</b> - Recognition that most individuals and self-advocates with intellectual disability or autism are supported by their families throughout life. An effective service system respects the valued role of families and understands that supporting families is critical to achieving good outcomes for individuals and self-advocates with disabilities.</p>		<p>Recognition that most individuals* <del>and self-advocates with intellectual disability or autism</del> are supported by their families throughout life. An effective service system respects the valued role of families and understands that supporting families is critical to achieving good outcomes for individuals <del>and self-advocates with disabilities.</del></p>	<p>*Use of “individual(s)” to mean all who are eligible for services.</p>	<p>10/3/23</p>

**ISAC REC #13 - New Principle(s)**

**#5** - Recognition that individuals' needs change over time creating new challenges to which service systems must adapt. These changes include increased numbers of individuals with dual diagnosis; autism; medical complexities; additional medical conditions or disabilities due to aging.

**#8** - Recognition that professionals are often supporting individuals with the most intimate aspects of their lives, from personal care to the experience and response to trauma, to health and mental health related matters, to sexuality and relationships. Individuals have a right to self-determination, dignity, and respect in all aspects of their lives.

**#9** - Establish a forum for ISAC to review provider performance metrics and provide recommendations to the Department related to performance and quality improvement in agencies providing home and community-based services to individuals\* with intellectual disabilities and autism.

**#10** - Establish forums to share and discuss provider performance data with providers. Regional forums and forums designed for targeted stakeholder groups should also be considered.

<b>Recommendation #14 – Promote Racial Equity:</b> Communities are richer, more just, and stronger when we honor and respect the whole of racial diversity. Access to a quality, person-centered, culturally competent system of supports and funding must be equally available regardless of race. Services must include planning over a life span and address racial disparities, including disparate outcomes. The duty to ensure that racial diversity is promoted and supported, at all levels within the services system, must be embraced.				
Current Strategy	Keep As-Is	Retire or Revise To... <i>(strikethrough for removal and underline for additions)</i>	Reason Proposed Change	ISAC Review Date
<b>#1</b> - Consistently include breakdowns by race, in data analysis and reporting, and incorporate in Quality Management (QM) plans.		Consistently include breakdowns by race, in data analysis and reporting, <u>to support identification of racial equity performance improvement opportunities</u> and incorporation <u>into</u> Quality Management (QM) plans <u>to drive improvement activities and use to measure progress on these activities</u> .	Revisions clarify the strategy's intent.	10/3/23
<b>#2</b> - Develop and provide peer training for self-advocates on racial bias and racial equity.	x			10/3/23
<b>#3</b> - Support organizations with tools to improve racial equity performance and ensure increasing levels of racial diversity and inclusion, across all levels of the organization, as part of their quality management strategy.		Support organizations with tools to <u>understand</u> and improve <u>their</u> racial equity performance and ensure increasing levels of racial diversity and inclusion, across all levels of <u>their</u> organization, as part of their quality management strategy.	Revision clarifies the strategy's intent.	10/3/23
ISAC REC #14 - New Strategy(s)				
<b>#4</b> - Explore ethnicity data availability to incorporate in analysis and reporting.				