Community Participation Supports (CPS) Workgroup Recommendations

Office of Developmental Programs

June 15, 2026

Pennsylvania
Department of Human Services
Office of Developmental Programs

Table of Contents

Acknowledgment 2

Background 2

CPS Workgroup Recommendations 4

- **Improve Clinical Support to Ensure People with Complex Needs Access** 5
- **Clarify Expectations for Skill Building** 6
- **Leverage and Implement Technology in Service Delivery** 7
- **Update Licensing Regulations to Address Current Needs and Service Models** 7

Closing Summary 8

Acknowledgment

We would like to begin by extending a sincere thank you to the Community Participation Supports (CPS) Workgroup members for their time, insight, and commitment to this effort. Their expertise and thoughtful input shaped the Community Participation Supports (CPS) recommendations presented in this report.

Kristin Ahrens	Sarah Hurst	Tonja Smith
Michael Anderson	Jordan Kembel	Lisa Stroup
Jack Andrews	Kelly Knarr	Kaitlynn Swartz
Melissa Bailey-Raison	April Klein	Sabra Townsend
Rose Baumann	Susan Lautenbacher	Jamie Walker
Emma Brunner	Christine Martin	Aaron Wrubleski
Kyle China	Frank McBurney	Jeremy Yale
Lesley Corey	Heidi McKenrick	Melissa Youells
Melissa Dague	Julie Mochon	Brandon Yorty
Brian Dengler	Brenda Moore	Patrick Zbasnik
Korey Ebert	Brenda Morem	
Josh Fields	Amy Nielsen	
Sue Giachetti	Maleita Olson	
Steven Goebel	Eric O'Neill	
Carol Grant	Denise Pioli	
Daniel Greene	Evan Salom	
Lauren House	Laura Silsby	

Background

Background and Overview

Pennsylvania's Department of Human Services (DHS) Office of Developmental Programs (ODP) is exploring potential changes to enhance the Community Participation Supports (CPS) service available through their Consolidated, Community Living, and Person/Family Direct Support waivers. The purpose of the Community Participation Supports (CPS) service is to provide opportunities, support, and expand the range of lifelong learning experiences available to individuals' receiving services. CPS is designed to help establish the expectation that individuals will pursue competitive integrated employment, engage in their communities, and/or participate in groups that reflect their interests. The ultimate goal of CPS is to support individuals in building meaningful relationships, strengthening social networks and natural supports, and participating in the community. To achieve this goal, activities should be tailored

to each person's strengths, preferences, and goals, while promoting community inclusion, self-determination, and self-advocacy.

Through an initiative designed to better understand how individuals receiving services currently experience CPS, ODP seeks to implement changes to the CPS service. The goal is to make sure future changes reflect the experiences and perspectives of the people who use these services and support what matters most to them in community life. To support this effort, ODP created a dedicated workgroup made up of cross-section of stakeholders, including Supports Coordination Organizations, Administrative Entities, providers, families, self-advocates, and ODP staff representing diverse perspectives and experiences related to CPS services.

Workgroup Objective

The goal of the workgroup was to identify strategies to expand access to and improve the quality of CPS services. Each workgroup session focused on topics related to strengthening community-based experiences, organized around opportunities for improvement and strategies to enhance service delivery.

The CPS workgroup included approximately 40 members and met six times over the ~6 month effort. During these in-depth sessions, members discussed current strengths, identified opportunities for improvement, and provided input on potential enhancements to CPS services.

In addition to the six CPS workgroup sessions, three focus groups were conducted with a total of approximately 25 self-advocate participants to gather direct input from individuals receiving CPS services. The focus groups explored self-advocates' experiences and perspectives related to the key topics discussed during the CPS workgroup sessions, and to identify opportunities to improve CPS services. The discussion across the focus groups was organized around three main topic areas: (1) experiences doing things in the community, (2) technology, and (3) learning new things.

Across the nine total CPS workgroup discussions and self-advocate focus groups, participants provided valuable insight and feedback on how CPS services are experienced today and where opportunities may exist to strengthen them in the future.

The next section outlines the recommendations generated through these discussions.

CPS Workgroup Recommendations

A total of 17 recommendations were developed through the CPS workgroup and self-advocate sessions and have been organized into the following themes:


Simplify Service Delivery Expectations and Billing


Improve Clinical Support to Ensure People with Complex Needs Access


Clarify Expectations for Skill Building


Leverage and Implement Technology in Service Delivery


Update Licensing Regulations to Address Current Needs and Service Models

Detailed recommendations for each theme are provided below.

Simplify Service Delivery Expectations and Billing

Simplifying service delivery expectations and billing is essential so CPS providers can focus on delivering high-quality, person-centered supports rather than navigating administrative complexity. The recommendations in this section are designed to clarify requirements, streamline processes, and promote flexibility, ultimately enabling providers to better meet the needs and goals of individuals served. Four recommendations are included in this section below.

1. Simplify service definition for CPS. “Community” participation definition should be based on outcomes, purpose, and results related to employment, contributions to the community, skill-building, lifelong learning, and relationships vs. emphasis on where someone is or how many people are together.
    - The definition should maintain accountability for what people are doing while in a facility (e.g., require documentation of activities and progress).
2. Simplify billing for CPS to reduce administrative burden.
    - Same procedure codes for facility and community and simplify staffing ratios to allow greater flexibility.

- Allow billing for scheduling, planning, and coordinating community activities, including concurrent billing where appropriate, and consider incentives for serving people with more complex needs.

3. Monitor and evaluate for quality, integration, and person-centered outcomes through SCO individual monitoring, QA&I, Quality Management Planning, and quarterly and annual assessments with a stronger focus on meaningful skill-building and the outcomes rather than units and location of service.
    - Ensure services reflect each person's goals and support needs.
    - Create a more structured approach with services notes and quarterly progress notes to capture measurable goal(s) and outcomes.
    - Strengthen coordination between SCs and providers to support better goal development and outcome tracking.
4. Clarify that CPS can support employment in two ways: 1) Helping individuals prepare for employment, 2) Providing wraparound supports to help individuals maintain employment.
    - Distinguish between job-related and broader skill building activities.
    - Support other goals, such as community participation, fitness, and allowing family members reliable relief care to enable work outside the home.
    - Explore incentives for transitions from pre-vocational services to CIE and pay-for-performance incentives for meeting or exceeding benchmarks.

Improve Clinical Support to Ensure People with Complex Needs Access

Improving clinical support is essential to ensuring that individuals with complex needs can access and benefit from CPS. The recommendations in this section are designed to strengthen service delivery by promoting more integrated supports, clearer interdisciplinary coordination, and stronger staff training and mentorship. Three recommendations are included in this section.

5. Allow concurrent billing for CPS and therapies (e.g., occupational, physical, speech-language pathology, music and art therapy, recreational therapy) to enable wholistic service delivery to support individuals to achieve outcomes identified in plans and ensure access for individuals with high acuity support needs.
6. Explore use of interdisciplinary team in CPS service to address complex needs, particularly for successful transition from high school to adult services.
    - Establish clearer expectations for an interdisciplinary team in CPS to support students with complex needs as they transition from high school into the adult service system to CPS.
    - Define a minimum core team and also allow flexibility based on the individual's needs and circumstances.

- Encourage early transition coordination to support timely waiver enrollment and service planning.

7. Update ODP provided training and qualifications to include ongoing learning with refresher trainings offered in addition to one-time trainings.
    - Conduct training on CPS provider training/mentoring expectations.
    - Address need for providers to have specialized training for staff (program specialists, supervisors, DSPs) to better serve individuals with significant behavioral or medical challenges.
        i. Emphasize instruction, modeling, rehearsal, and direct feedback (not asynchronous learning only), including "stop and think" exercises.
        ii. Include a mentorship piece in onboarding training for staff to go out in the community with new hires.
    - Specific training topics include but not limited to:
        i. How to safely and effectively manage challenging behaviors (de-escalation techniques).
        ii. Developing and implementing a person-centered plan that includes short term and long term measurable goals.
        iii. Supporting individuals with complex needs.
        iv. The basics of fading support.
        v. AAC/communication tools and programs on devices.
        vi. Implementing technology into day-to-day activities.
        vii. Trauma informed care.

Clarify Expectations for Skill Building

Clarifying expectations for skill building is critical to ensuring that CPS promotes measurable progress, greater independence, and more consistent service delivery. The recommendations in this section are intended to strengthen how skills are assessed, taught, documented, and enhanced over time by establishing clearer standards for assessments and progress reporting, creating more structured pathways for fading support, and improving service models for individuals with complex needs. Four recommendations are included in this section.

8. Clarify expectations for baseline and annual skills assessments, as required by regulation, by standardizing how assessments are administered and used to measure progress over time through quarterly and annual reporting.
    - AE/SC training on expectations for assessment, plan, and quarterly progress (quarterly progress notes are not just CPS provider sending all service notes).
9. Add clinically enhanced integrated program to allow safe learning and gradual integration for those with complex needs, supported by qualified staff (e.g., nurses, behavioral

specialists). Include guidance for conversations with families and care teams when implementing fading support service.

- Additional flexibility and resources may be needed for meaningful community participation for individuals with complex medical/behavioral needs.

10. Simplify the definition of fading support and provide more targeted staff awareness to support clearer communication and better understanding of support needs.
    - Provide a clearer, measurable fading pathway (e.g., linking to a fade plan with milestones) rather than treating "fade" as a vague expectation).
11. Restructure services that teach skills to encourage fading from 2:1 to 1:1 and 1:1 to group support, with the ultimate goal of promoting independence and reducing reliance on intensive staffing.

Leverage and Implement Technology in Service Delivery

Leveraging and implementing technology in service delivery is essential to expanding access, improving efficiency, and strengthening person-centered supports in CPS. The recommendations in this section focus on strengthening providers' ability to use technology effectively, ensuring rates reflect technology-related costs, and creating access to independent expertise to help guide technology decisions, implementation, and ongoing use. Three recommendations are included in this section.

12. Provide training and technical assistance to support exploration and implementation of technology in the following domains for CPS: (1) Scheduling, (2) Community Navigation (GPS, geo-fencing), (3) Employment (wearables), (4) Training Platforms (skill-building, socialization), (5) Communications, and (6) Health and Wellness.
    - Focus on education and preparation so technology can be used successfully in service delivery.
13. Review rate assumptions for technology related costs.
    - Include assistive technology and provider tools such as electronic health records, portals, data collection applications, and AI tools to support service notes, progress reports, and annual assessments.
14. Provide access to non-vendor specific technology experts to help evaluate opportunities, share best practices, provide actionable guidance, and provide ongoing consultation/coaching/reevaluation as needed.
    - Use a model similar to PaTTAN or the Technology Accelerator that operated through ARPA funding.

Update Licensing Regulations to Address Current Needs and Service Models

Updating licensing regulations is essential to ensuring that CPS service models reflect current provider practices, support community-based approaches, and meet the evolving needs of

individuals served. The recommendations in this section focus on removing outdated barriers to community-based service models, updating program specialist requirements, and clarifying licensing rules. Three recommendations are included in this section below.

15. Review 55. Pa Code 2380 Applicability requirements to remove barriers to provider-driven community settings (former 'hub' concept, collaborative agreements with community businesses).
16. Revise program specialist requirements related to degree requirements, experience, and job-related training.
17. Request discussion with Department of Aging to consider amending Pa. Code Chapter 11, an Older Adult Daily Living Center (OADLC) applicability to exclude 55. Pa Code Chapter 2380 facilities.

Closing Summary

The CPS workgroup discussions and self-advocate focus groups provided valuable insight into both the strengths of the current service model and the opportunities to enhance it. The 17 recommendations presented in this report reflect a shared commitment to strengthening Community Participation Supports so that services are more person-centered, flexible, and responsive to the goals, preferences, and support needs of individuals receiving the services.

CPS should result in active, valued participation in a broad range of integrated activities that build on the participant's interests, preferences, & strengths while reflecting their desired outcomes related to employment, community involvement & membership.

Next Steps

ODP will review the recommendations with the Information Sharing and Advisory Committee (ISAC) and, pending approval, will develop a work plan to begin implementation planning. Continued collaboration with self-advocates, families, providers, and other stakeholders will be essential to ensuring that future enhancements are meaningful.

Through this ongoing partnership, the future of CPS services will better support individuals in building skills, strengthening relationships, and fully participating in their communities.