Community Participation Supports (CPS) Recommendations

ISAC Review

June 30, 2026

Pennsylvania
Department of Human Services
Office of Developmental Programs

Overview

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ODP launched an initiative to explore possible improvements to the Community Participation Supports (CPS) service which is part of several waiver programs. CPS is designed to help people build meaningful relationships, stay involved in their communities, and continue learning.

To help shape those improvements, ODP brought together a stakeholder workgroup and held focus groups with self-advocates to better understand how people experience CPS today. Each workgroup session focused on topics related to strengthening community-based experiences, organized around opportunities for improvement and strategies to enhance service delivery.

A series of recommendations was developed through in-depth workgroup sessions with stakeholders.



CPS Recommendations – Key Themes

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A total of 17 recommendations have been developed and 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

CPS Recommendations

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Simplify Service Delivery Expectations and Billing

4 total recommendations (1 - 4)

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.

CPS Recommendations

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Simplify Service Delivery Expectations and Billing

4 total recommendations (1 – 4)

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.

CPS Recommendations

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Improve Clinical Support to Ensure People with Complex Needs Access

3 total recommendations (5 – 7)

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.

CPS Recommendations

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Improve Clinical Support to Ensure People with Complex Needs Access

3 total recommendations (5 – 7)

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.
        - Emphasize instruction, modeling, rehearsal, and direct feedback (not asynchronous learning only), including “stop and think” exercises.
        - 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:
        - How to safely and effectively manage challenging behaviors (de-escalation techniques).
        - Developing and implementing a person-centered plan that includes short term and long-term measurable goals.
        - Supporting individuals with complex needs.
        - The basics of fading support.
        - AAC/communication tools and programs on devices.
        - Implementing technology into day-to-day activities.
        - Trauma informed care.

CPS Recommendations

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Clarify Expectations for Skill Building

3 total recommendations (8 – 11)

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.

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Leverage and Implement Technology in Service Delivery

3 total recommendations (12 – 14)

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

CPS Recommendations

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Update Licensing Regulations to Address Current Needs & Service Models

3 total recommendations (15 – 17)

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.

Next Steps

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- Refine recommendations based on ISAC feedback
- Develop a work plan to begin implementation planning
- Continue stakeholder collaboration to guide meaningful enhancements



THANK YOU!

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