



Life Choices Statewide Meeting

Meeting with PAS Agency, Service Providers and DD Staff
11/12/2014
10:00 AM to 3:00 PM

- Vision Statement: All children and adults with developmental disabilities living in Illinois receive high quality services guided by a Person-Centered Plan that maximizes individual choice and flexibility in the most integrated setting possible. All areas of the State have available a full array of services that meet the needs of children and adults with developmental disabilities living in their local communities regardless of intensity or severity of need. There is no waiting list for services.

Team One: Support Coordination Enhancement

- Purpose: Define the role of service coordinators
- Tasks assigned:
 - Identify competencies, knowledge, training, resources needed to perform jobs
 - Identify changes needed in structure and/or business processes to support service coordinators
 - Identify a set of performance measures or use in ascertaining effectiveness of ISC agencies

Team One: Support Coordination Enhancement

ISC Members:

Steve Boisse, Molly Danay, Jennifer Gilmore (co-chair), Gary Hake, Lisa Jacino, Darlene Kloepffel (co-chair), Mary McGlauchlen, Denise Oligney-Estill (communicator), Alise Raisbeck, Brent Schwartzhoff

Family Members: Laurie Jerue

DHS/DDD Members:

Sherry Hinds, John Knight, Mary Spriggs-Ploessl



Team One: Support Coordination Enhancement

1. Recommendations to clarify ISC responsibilities
2. Recommendations to clarify the ISC role in monitoring of provider agencies
3. Recommendations for data collection/reporting
4. Recommendations for improvements in person-centered planning
5. Recommendations for ISC training expectations
6. Recommendations for developing a full array of services/system development

Team One: Support

Coordination Enhancement

High Impact/Very Do-able Recommendations -

- 1(a) - DHS/DDD formally adopt the name of Independent Service Coordination agencies and discontinue the reference to PAS/ISC/ISSA agencies. Formal references to staff of the agencies should be Independent Service Coordinators. (note, this does not mean agency job descriptions must change, but all DDD references in formal documents)
- **1(c) - Create and formally adopt one ISC manual.**
- 2(b) - Anytime policy or procedural changes are developed and/or changes made, a formal process is used for vetting, with clear and concise expectations, and posted in one location.
- 2(d) - ISC Summary - BQM recommendations and findings for individual agencies be documented in written form and sent to the local ISC agency; a non-identifying summary of the most frequent recommendations and findings related to ISC agencies, be distributed to all ISC's for improvement initiatives.
- 6(c) - Develop clear guidelines and criteria for decision making when the DD Division closes a DDD funded residential setting, including clear descriptions of the expectations for ISC involvement and the receiving service providers.

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High Impact/Will Take More Work Recommendations -

- 1(b) - In order to clear up the confusion between Service Facilitation and ISC, we recommend Service Facilitation tasks be merged into ISC responsibilities.
- 1(d) - ISSA guidelines manual be updated to encompass all currently expected responsibilities, including detailed ISP approval process, under the ISC role (PAS/PUNS/ISSA/Bogard/Service Facilitation) and that it be consistent with the ISC contract/amendments and reviewed annually for updates. The 2004 ISSA guidelines paper manual and ISSA guidelines on the web will be merged and updated for accuracy and removed from draft status.
- 1(e) - Within 1 year of the finished work teams, and with the involvement of the ISC agencies, an updated ISC manual should be completed that incorporates all approved recommendations for ISC responsibilities, reflect a person-centered view, and infuse the desired outcomes for DHS/DDD and individuals with intellectual/developmental disabilities.
- 1(f) - Consistent communication is needed regarding the role of ISC's: a single statewide brochure which reflects the role of the ISC; accessible information for individuals via the DHS website; financial support for each ISC agency to have a web presence; and incorporation of content about the ISC role in QIDP training.
- 2(a) - The monitoring requirements developed by Team 5 be formally adopted and made available to the whole DD system, included in the ISC manual and on the DHS website.

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High Impact/Will Take More Work Recommendations (continued)-

- 2(c) - Clarify procedures/process/expectations of roles of DDD and ISC agencies with regard to monitoring DD funded direct service providers, with the business process team to consider the payment schedule for additional monitoring of direct service providers with identified issues.
- 2(d) - Provider - BQM recommendations and findings for individual agencies be documented in written form and sent to the local ISC agency; a non-identifying summary of the most frequent recommendations and findings related to ISC agencies, be distributed to all ISC's for improvement initiatives.
- **2(e) - The frequency of visits made by ISC should be increased to a minimum of six times per year (every other month), with clear criteria and process for requesting more frequent visits when needed by the person being supported.**
- **3(a) - Within one year, a decision should be made to develop and/or purchase one statewide database documentation system for the DD system for all of the 18 ISC agencies and the Bureaus of Regional and Transitional Services so information can be exchanged seamlessly to make referrals, determine eligibility, document in individual files and perform billing.**
- 4(a) - As of a person's date of disposition for the HCBS waiver, all services be funded through the waiver, including all follow up activities. If a person has a change in level of care services provided, the person will receive weekly ISC follow-up for the first 4 weeks and additional visits as approved by DHS. Shift the payment from PAS to ISSA for the required visits for the first four weeks.

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High Impact/Will Take More Work Recommendations (continued)-

- 4(b) - Eliminate active treatment as a condition for services.
- **6(d) - An expedited Medicaid Enrollment process should be developed in collaboration with DHS/HFS for people entering Home and Community Based Waiver services.**
- 6(e) - Establish a method/payment structure to offer opportunity for families/people supported to choose the ISC agency from which they receive support. 6(a) - Identify the responsibility for provider capacity building within Illinois, including role of Division of DD, Service Providers and ISC Agencies, and mechanisms to accomplish it.
- 6(b) - Consider possible methods for DHS/DDD to partner with higher education/workforce development services to develop a career pathway necessary to recruit new workers into the DSP role and to move interested persons now performing DSP jobs into jobs requiring QIDP certification.

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Training Revision Recommendation for SC (Low Impact/Very Do-able) -

- 5 - Qualifications at Hire: In addition to at least one year of experience working in human services and passing background check requirements, persons employed to provide PUNS, PAS, ISSA and/or Service Facilitation must be Qualified Intellectual Disability Professionals (QIDP) as defined in Rule 115.200, "Standards and Licensure Requirements for Community Integrated Living Arrangements." This requirement applies regardless of whether their work is full-time or part-time. In addition, good oral and written communication skills, including basic word processing skills, are required.
- Orientation Provided at ISC Agency: Employee checklist set up for satisfactory completion (on a scale of not satisfactory, needs improvement, satisfactory) within 30 days, 60 days and 90 days on the following knowledge/skill evaluation by agency trainer or supervisor:
 - Agency provided - Office P & P/HR forms/ISC job description and duties
 - DHS provided - Modules applicable to job duties (DHS learning management system, webinars/DVD's) for knowledge acquisition of program rules and procedures (i.e., PUNS, eligibility requirements, Bogard, PAS file requirements, ISSA on-site monitoring visit requirements, terminating services) with summary fact sheet and knowledge test on each module

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Training Recommendations for Service Coordinators (continued) -

- Agency provided - Job shadowing, coaching and practice of skills necessary for ISC job performance:
 - a. identifies and contributes to all elements of the service planning process, (including formal and informal assessment; self-assessment; formulation of outcome goals, objectives and training methods; development of appropriate methods for determining progress; reassessment and revision of the service plan)
 - b. works within a team process (including facilitating meetings and providing follow up)
 - c. facilitates communication (including interpreting non-verbal communication, especially as presented by persons with developmental disabilities; empathizing with others' points of view, and assisting others in expressing their own viewpoints and opinions)
 - d. assists with conflict resolution (including facilitating communication, developing alternative strategies and helping restore normalcy)
 - e. communicates without bias, including interpreting technical information to persons inexperienced in the use of technical language and documenting in consumer files)
 - f. identifies, utilizes and develops resources that are important for the DD service planning process and for DD service delivery
 - g. utilizes professional assessments and service reports in the determination of eligibility for services, especially services provided through the Home and Community-Based Waiver
 - h. organizes one's professional activities so that deadlines are met, appointments are kept and non-productive time (e.g. travel and personnel reports) is minimized
 - i. maintains a professional demeanor that presents a positive approach to service issues, an
 - j. demonstrates proper billing techniques

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Training Recommendations for Service Coordinators (continued) -

- Ongoing professional development: QIDP's working as Independent Service Coordinators update their job skills and knowledge, earning at least 20 hours of continuing education annually in job-related training, including training covering topics related to all 9 QIDP certification modules within every 3 years. Continuing education may be CEU's, college courses, conferences, local training events or other relevant training with DHS/DDD pre- or post-event approval (using established criteria for approval).
- Annually the Division and all ISC agencies determine training topics offered for the next year.
- Distinguish between entry level and higher level skilled Service Coordination and separate by distinct service delivery. For example, two services within the waiver, one called Service Coordination and a second one called Enhanced Service Coordination for people who have complex medical needs, complicated behavioral health conditions along with DD, or other combinations of specific conditions (either health related or environment related) which require a higher skilled service coordination staff member.
- Specific requirements would include 20 hours of formal professional training about the specific condition, and demonstration of additional skill. (This recommendation may be for the Business Process team to consider).

Team One: Support Coordination Enhancement

- **Next Steps:**
 - Move forward with High Impact/Very Do-able recommendations
 - Move forward with phase-in schedule for Low Impact/Very Do-able recommendations for training
 - Identify what is needed to implement High Impact/Will Take More Time recommendations and move forward with plan for longer-term implementation steps