



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.

Profile and Provider Selection

- Purpose
- Tasks assigned:
 - Team will continue efforts to develop a person centered profile that describes individual abilities, preferences, goals and support needs. This team will also develop guidelines for assessment and development of the profile and determine training needed prior to the requirement for service coordinators to develop the profile.

Profile and Provider Selection

- Membership –

- Chairperson: Dawn Imel CSO-RIM
Michelle Maxwell DDSME
- Communicator: Marissa Kirby IARF
- Members: Ann Yaunches SICCS
Lisa Humke CISA
Christine Myers LCMHB
Don Henzlik Guardian/Family
Wanda Sumler CSO
Nicole Jorwic The Institute
Sheila Lullo Clearbrook
Emily Vincent DD/BQM
Kevin Byrd DD/BCS
Jennifer Elders DD/BTS
- Facilitator: Vicki Stillman-Toomey ICDD/NASDDDS

Profile and Provider Selection

The team reached consensus to recommend that the Illinois ID system agree upon a single annual plan which incorporates the elements of a person centered plan, plan outcomes, the provider's implementation plan and the service details necessary to approve, authorize and monitor services.

The team's desire is to:

- Enhance the knowledge and understanding of the individual
- Enhance planning based on the individual's visions and needs
- Assure consistency by eliminating multiple plans
- Use a team approach for the input and update of information
- Eliminate redundancy
- Ease of reference and access to all necessary stakeholders

Profile and Provider Selection

- The team recommends the following recommendations to the 'As is – To Be' process. The attached chart has been revised as follows:
 - Following the development of the plan by the individual, ISC, family/guardian and people who know and care about the individual, the SC will send referrals to 'all qualified and eligible providers'.
 - Despite the hesitation of the challenge of this task, the team considered expedited methods to accomplish this and embraced the potential of increasing choice to individuals
 - The proposed process would need technological assistance to develop an online notification to providers that a referral is available. Interested providers would then be directed to a secure site to view the plan.

Profile and Provider Selection

The team recommends the following changes to the As Is - To Be Guideposts chart.



Profile and Provider Selection

- The team recommends a 'response plan' be required from interested providers for the individual to make their choice.
 - The response plan does not need to be standardized, but DDD should establish minimum requirements for completing the response plan. For example:
 - How the provider will honor the individual's personal preferences?
 - How the provider proposes to support the individual?
 - How will the provider involve the individual and their family in selection of roommates, if applicable?
 - What is the transition plan?
 - Who will be responsible during the transition period?
 - It was suggested that the response plan and the transition planning area of the annual plan could serve as the 30-day plan to be used by providers

Profile and Provider Selection

- The team could not recommend yet a name for the plan document they envisioned. But, there was consensus that there should be one plan for all services. What still needs to be demonstrated is how the team can function focused on the individual rather than discreet roles of each stakeholder. Language is important and how the introduction to a single plan gets and training will be critical to gain acceptance and commitment from all stakeholders.

Profile and Provider Selection

The team also recognized the obstacles related to natural supports and recommend a policy is needed regarding supervision and liability issues

Profile and Provider Selection

The team recommends to simplify the plan approval and rate approval process and responsibilities. The anticipated changes in the eligibility determination process should prompt a crosswalk of overlapping and redundant practices related to the plan. Use of technology can eliminate paper processes that are inefficient and unreliable.

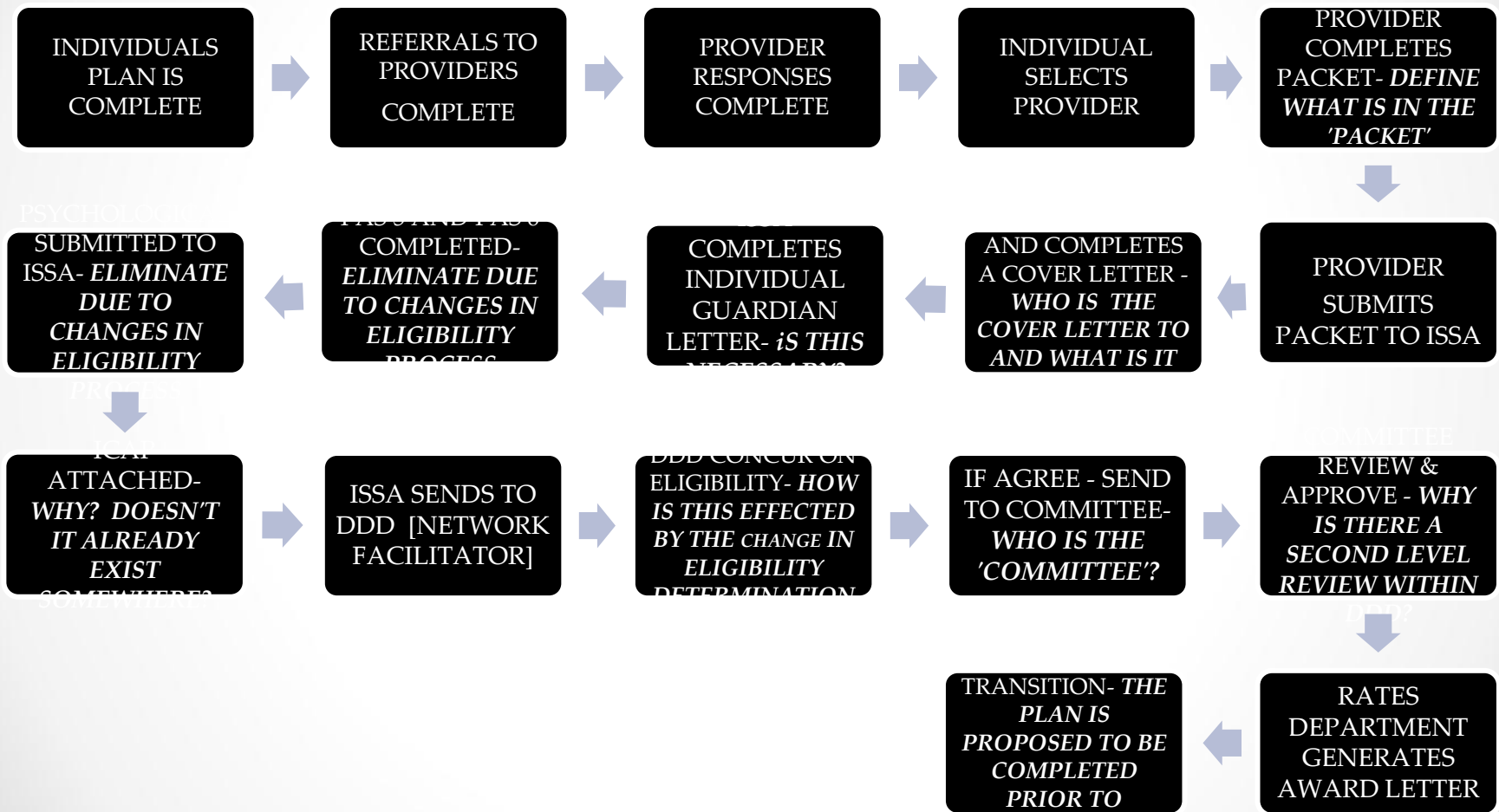
Profile and Provider Selection

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Profile and Provider Selection



Profile and Provider Selection



Profile and Provider Selection

The team recommends that DDD develop a reliable methodology for maintaining an updated list of providers that is essential to the referral process

Profile and Provider Selection

The team recommends that planning teams explore natural supports and assist individuals and families to build unpaid relationships and how to sustain them.

It is recommended that some of the current standard service 'packages' and service matching requirements or encouraged be unbundled. For example, teams should explore alternative day supports even if an individual is moving to a 24 hour residential program [CILA, ICF/DD]

The Team also recommends that family-friendly waiver service descriptions be developed for individuals and families



Profile and Provider Selection

The Team recommends that the training address new process as a culture change and not get lost in the details of the plan document alone. The team's vision was a single annual plan and at the plan meeting, successes, progress, problems, updates and changes are addressed, outcomes and goals are modified as needed

Profile and Provider Selection

Train ISC's specifically on:

- The plan development
- Team process
- Person Centered Approaches
- Plan accountability
- Natural Supports
- Use of technology [automating the plan]

Profile and Provider Selection

Train Providers specifically on:

- Referral Process
- Response Plans to referrals
- Blending the ISP with the plan and planning process
- Modified 'As is – To be'
- Accountability for implementing the plan
- Role of ISC
- Developing and supporting Natural Supports

Profile and Provider Selection

- Team 5 will need to be aware of the plan changes to determine what is being monitored
- Team 2 or the Senior Staff need to finalize the 'As is - To be' chart after considering the recommendations of Team 4 regarding the addition of the provider referral and response plan as well as the recommendation to move when the rate letter is issued.
- Team 6 should address the IT resources and demands on supporting the recommendations of Team 4, specifically:
 - Link plans electronically to individuals, families, ISC's and Providers
 - Provider database
 - Methodology for notification to providers of referrals [e-mail blast]
 - Security and confidentiality

Profile and Provider Selection

- 'Revise Profile' or define components of a comprehensive plan
- Develop specific procedure and protocol on provider referrals and selection
- Finalize a plan review process with written procedures
- Submit revisions to Steering Committee feedback and request for clarification on Team 4 recommendations.

