



EXECUTIVE BRIEFS

An Update on CT DMR Initiatives

January 10, 2007

Issue 15

DMR Name Change Legislation

Public Act 06-92 (HB 5478), An Act Concerning the Department of Mental Retardation (DMR), passed the Connecticut General Assembly during the 2006 legislative session. The act required DMR to solicit input regarding a name change for the Department from clients and families receiving services provided by the department, advocates of persons with mental retardation and other interested parties. The report was due to the Governor, the Office of Policy and Management and the Public Health Committee not later than January 1, 2007. The report was delivered on Friday, December 29, 2006.

The recommendation is to change the name of DMR to the **Department of Developmental Services**. Key considerations for the recommendation can be found in the 19-page report available on the DMR website. The report of findings and recommendations on this issue is not the final decision. DMR will be asking the Legislative Public Health Committee to raise a bill with the agency's recommendation. If a bill is raised, a Public Hearing will be scheduled and the public will have an opportunity once again to weigh in on the issue. Any proposed name change will have to be voted on and approved by at least the Public Health Committee, the Government Elections and Administration Committee, both the House of Representatives and the Senate and then signed by the Governor. The report recommends that the change be carried out in a manner and timeframe prescribed by the Commissioner. In addition, the report clarifies that eligibility criteria for services will not change.

DMR would like to thank everyone who took the time to share their thoughts and opinions on this issue. The Department looks forward to working with the legislature in the upcoming 2007 session to carry out the agency name change.

DMR Five Year Plan 2007-2012

The department is in the process of developing its new Five Year Plan for the time period 2007-2012. A draft of the Plan and goals will be emailed to a diverse group of stakeholders for their review and input during the month of January. As another means of input, DMR will hold a public hearing on the Plan in January. The Plan document also will be posted on the DMR website for comment. Feedback and comments will be gathered through these various mechanisms to ensure broad input. Individuals do not need to go to the public hearing to comment, they can comment by email, or view the document and comment on the DMR website. The plan will be completed for dissemination in early February and available on the

DMR website. As required, it will be submitted to the Legislature.

The department's Five Year Plan continues to be organized according to Four Strategic Commitment Areas. These four commitments are the same as in the 2002-2007 Five Year Plan. The DMR also implements an annual Business Planning process undertaken by the various divisions of the central office in conjunction with the department's three regions and Southbury Training School to set goals and milestones for the coming year that will advance service enhancements outlined in the Strategic Commitment Areas. The Business Planning process ensures system integration of goals, timely review of department accomplishments and access to relevant data analysis. Below are the Strategic Commitment areas and the content areas for goals in the 2007-2012 Plan:

1. **Commitment to Families and Individuals**

- Family Support
- Children's Services
- Aging
- Waiting List
- Birth to Three System
- Autism

2. **Commitment to Choice and Control**

- Self-determination & Self Direction
- Self Advocacy and Consumer Leadership
- Supported Employment
- Systems Change

3. **Commitment to Quality**

- Basic Protections
- Quality Review and Improvement
- Risk Assessment and Management
- Technology Enhancements
- Systems Improvement & Best Practices

4. **Commitment to Workforce Development**

- Recruitment & Retention
- Cultural Competency
- Human Resources Enhancements
- Educational Support
- Higher Education Partnership

CMS Review of the IFS Waiver

CMS sent us a summary of their recent review of the DMR IFS Waiver to assess our quality management activities. The reviewers were very complimentary of DMR's efforts and found that we substantially met all six assurances of HCBS Waivers. In fact, the letter from Richard McGreal, Associate Regional Administrator, states:

“We commend you on the development and implementation of many fine programs and activities that provide the type of individualized services that people need and want.”

In a 17-page review, CMS had only one recommendation. They noted that DMR self-identified a problem in its quality review that indicated that assessments were not consistently available or addressed in the individual plans. As requested by CMS, we will follow-up with DSS to respond to the need to engage in continuing activities to assure quality standards and methods for the provision of targeted case management to assure eligible clients receive case management services in sufficient amount, duration and scope. The oversight for TCM is the responsibility of DSS but we will help them to develop the strategies that will be most effective.

Commissioner O'Meara and Deputy Commissioner duPree extend their deep appreciation to the public and private provider community for the fine work that they do to ensure the success of our service delivery system.

DMR Unit Rate Implementation

Since the fall of 2004 the Department, in collaboration with the Provider Council, has been working on the timeframes and expectations for implementing and transitioning to a new rate system over a period of up to five years. A Waiver Work Group was established in April 2005 to review rate methodology and implementation issues. At the September 2006 meeting the Council reviewed goals and objectives presented by the Waiver Workgroup that would guide the transition process. The following goals, objectives and timelines were adopted and will be reviewed periodically:

1. Move all providers to an established unit rate system
 - Implement a pilot project to study the impact of uniform rates on a sample of day and supported living providers. This has begun and the results will be available by June 30, 2007.
 - Establish cost estimates and alternative methods to address agencies that have a higher unit rate than the established rate.
 - Implement an interim step of reimbursing all contracted day and supported living providers based on utilization by July 1, 2008.
 - Determine and recommend the timeframe to move all providers to an established rate.

2. Finalize the development of a methodology for establishing residential rates. This will be completed by June 30, 2007.
3. Incorporate the Level of Need (LON) with funding allocations. All DMR consumers will have had a LON completed by June 30, 2009. The committee has developed a methodology for determining an individual's funding based on the level of need and merging it with the established rates. An analysis comparing existing and proposed funding levels is being undertaken. Timeline for implementation of this process is still to be determined.
4. Establish a methodology to redistribute individual allocations based on LON. Process and timelines are still to be determined.
5. Determine the need and funding necessary for a Risk Pool. Timeline to be determined.
6. Design a transition process by June 30, 2007 to help stabilize agencies during the transition to the unit rates.
7. Plan to integrate a utilization-based reimbursement system with the billing and payment process by June 30, 2007.
8. Develop a formal plan to train individuals, families, case managers, and providers on the new system. Timeline is still to be determined.
9. Analyze the data to determine the correlation between rates, Level of Need assessment and quality indicators as an ongoing objective.

In upcoming Executive Briefs, Regional Leadership Forums and Statewide Provider Forums these steps, and their implications for providers, will be discussed in more detail.

State Employment Leadership Network—SELN

DMR has recently joined a new national initiative, the State Employment Leadership Network, made up of 13 participating states. The SELN is a project jointly sponsored by the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and the Institute for Community Inclusion at UMASS Boston (ICI). The SELN was started to reinvigorate employment outcomes for people with developmental disabilities.

Nationally, numbers of individuals employed in integrated settings has stagnated in the last 10-15 years. There are wide variations among states in employment rates of people served by state DD systems (less than 10% in five states to over 45% in five other states.) NASDDDS, ICI and the participating states believe significant potential exists to expand employment in integrated settings and that the coordinated efforts of the SELN will help to accomplish this expansion. The 13 states identified the following reason for joining the Network

- Rekindle excitement and innovation around supported employment
- Improve employment outcomes
- Improve data systems
- Improve QA systems
- Improve payment systems and create incentives to promote employment
- Provide better access to benefits counseling

- Improve relationships with stakeholders—families, providers, business community, school systems, VR agencies
- Manage more effectively the challenge of launching employment initiatives in midst of other systems change

Benefits of participating in the Network include training and technical assistance; sharing of best practice information through the members only SELN website and teleconferences; access to improved data reporting systems to track employment outcomes, research and issue papers on relevant topics; and interstate collaboration and joint problem solving. To date, DMR has participated in the SELN self assessment process with the guidance of SELN staff who visited CT in August. SELN staff conducted similar site visits to all participating states throughout the fall. SELN staff prepared reports documenting the states' site visits, including summaries of strengths and possible areas to include in each state's strategic plan for employment. The SELN staff and state representatives met in Arlington, VA on November 8 – 10, 2006 to explore crosscutting state issues and priorities that the Network would address. DMR staff also participate in monthly SELN Steering Committee calls.

DMR's preliminary employment goals include:

- Participate in the self assessment process and set goals as a result
- Improve the substance and availability of data related to employment and use it to make decisions about policy and funding decisions
- Identify exemplary programs and employment providers in ct and share techniques, program design and training with other providers
- Continue to participate in the NGA (National Governor's Association) and YVT (Youth Vision Team) to enhance interagency coordination of employment initiatives for youth
- Identify and measure the job opportunities afforded school graduates transitioning to DMR in FY07. Use this information to set goals for FY08.

These goals will be further refined in 2007 as we develop our Strategic Plan for Employment.

Quality News And Notes

Quality Service Review (QSR) and Case Management

DMR Case Managers have initiated the use of a set of questions found in the QSR tools to structure their assessment of individuals experiences during case management visits. Case manager reviews will focus on individual plan service implementation, consumer satisfaction and safeguards. Service providers should expect to receive copies of those findings and observations from the Resource Manager (Private) or Quality Coordinator (Public). Case Manager findings will be shared in the same manner as Regional Quality Review visits have until the web system is in place. Please contact Terry Cote at terry.cote@po.state.ct.us for more information.

QSR Web-Based Application Update

The new DMR information system environment to support web-based applications has been established. Final testing is underway to evaluate the performance of the production system. The QSR application program experienced problems in the new environment that are being addressed before full production. It is anticipated that rollout of the new system will begin at the end of February. Training sessions were held in the West Region during December for providers and DMR staff who will be interacting with the new QSR web-based information system. Training will be delivered in one region at a time so all providers and staff who may be interacting regarding an individual consumer or service location will be introduced to the computer system at the same time. Several more sessions will be scheduled for the West Region. Training on the web-based QSR application for the North and South Regions will follow. Please contact Laura Nuss at laura.nuss@po.state.ct.us for more information.

QSR Provider Certification Reviews

An orientation to the new QSR Provider Certification Review was held in December for West Region providers. Certification reviews are scheduled to begin in the last week of January. Notices were sent to ten West Region providers who do not offer CLA services at this time. In the future, notices will be sent to providers within 60-90 days of a planned review. Scheduling time frames are estimated, as we have not been able to determine exactly how long each type of review will take to complete. Training on the QSR Provider Certification Review for the North and South Regions will follow. Information regarding the QSR Provider Certification Review, including the quality measures and questions for each service type, has been posted to the DMR web site at <http://www.dmr.state.ct.us/QSR/QSRindex.htm>. Please contact Dan Micari at Daniel.Micari@po.state.ct.us for more information.

Provider Service Documentation

Recent audits and discussions with field staff and service providers have highlighted weaknesses in provider service documentation. Please be reminded that in addition to attendance or time sheet records, providers are expected to maintain regular documentation of actual service related goals, activities and supports provided that directly relate to the person's Individual Plan. This includes all services; day, vocational, in-home and individual supports, that are being provided to directly address a person's needs, desired outcomes and service objectives as described in the Individual Plan. Please refer to the DMR HCBS Waiver Manual for specific guidance. Mickey Verno, Operations Center Manager, is also working with service provider representatives in this area. Please refer questions to his attention at Michael.Verno@po.state.ct.us

DMR Selects Vendor for New e-Learning Program

We are pleased to announce that CT DMR has selected MC Strategies Inc. (MCS) to provide a comprehensive web-based learning system for direct support and other professionals who deliver services to individuals receiving support from the department. MCS is a company that provides consulting and training services to healthcare, educational, and governmental entities. MCS has been providing the College of Direct Support on-line curriculum to state-level departments, private agencies, community service boards, micro-boards, and individuals providing services to people with intellectual and developmental disabilities since June of 2003. Currently eight states and 319 agencies have purchased the CDS System. To date, more than 40,000 learners have taken and/or completed the CDS lessons on-line. This web-based curriculum will supplement and in some cases replace classroom-based training, and will be accessible from any computer with an Internet connection. Some of the benefits of web-based learning include consistency of instruction, competency-based learning, around-the-clock availability, reduced travel costs, and more efficient use of resources.

We will be working with department staff and private providers on implementation in the coming months. The web-based curriculum will be available to DMR employees and employees hired directly by individuals and families in the spring. Provider agencies will also be able to make the curriculum available to their employees by registering with DMR and CDS and paying an annual administrative fee. More information on this option will be available soon.

The CDS curriculum is developed and updated by the University of Minnesota Research and Training Center on Community Living, the U.S. Center for Excellence on Community Integration. It currently includes over 15 on-line training courses, each with multiple lessons and competency assessments, on topics such as Developmental Disabilities, Services and Policies, Supporting Safe and Healthy Lives, Individual Empowerment and Self-Direction, Cultural Competency, Community Service and Networking, Positive Behavioral Supports & Crisis Intervention, Documentation and Record Keeping, Building and Maintaining Friendships, Direct Support Professionalism, Medication Supports, Employment Supports, Person-centered Planning, and Frontline Supervision and Management. Additional training courses are in development. The CDS System also includes a learning management system to assign and track completion of courses and produce management reports.

We would like to thank the following individuals for their participation on the e-Learning Proposal Review Committee:

Bill Ale – DMR WR Staff Development Coordinator

Karen Davies – DMR CO Agency Personnel Director

Joe Drexler – DMR SR Assistant Regional Director for Public Programs

Clair Lary – DMR NR Residential Manager

Terry Macy – SARAH Tuxis Executive Director

Jim Pellino – CIB/Oakhill Training Director

John Tierney – DMR CO Curriculum Manager

For more information on the CDS System, visit their website at <http://www.collegeofdirectsupport.com/>

Please contact John Tierney, DMR Curriculum Manager, at john.Tierney@po.state.ct.us or (860) 418-6137 for more information.

Project Lifesaver International

Project Lifesaver International, “The Experts That Bring Your Loved Ones Home,” is a non-profit organization founded by public safety officers for public safety officers. Specially trained teams locate and rescue missing persons using reliable radio technology.

Project Lifesaver International was recommended during a recent training for CT law enforcement personnel on autism spectrum disorders. Although the program was originally designed for individuals with Alzheimer’s disease who have issues with wandering, the program has expanded to work with any individuals who have similar issues. Many children and adults with autism use the service. Visit their web site for more information at <http://www.projectlifesaver.org/site/>

Upcoming Provider Events

Look for more information on provider events to be scheduled from January to June 2007.

- QSR Provider Certification Orientations – February to April 2007
- QSR Data Application Training – February to April 2007
- e-Learning Curricula Demonstrations – March - April 2007
- HCBS Waiver Provider Panel Event – April 2007
- Emergency Management Event – May 2007
- Employment Event – May 2007
- Supported Living Events – June 2007

Please contact Charlan Corlies at char.corlies@po.state.ct.us for more information.