

Office for Citizens with Developmental Disabilities (OCDD)  
**QUARTERLY DEVELOPMENTAL DISABILITIES (DD) COUNCIL REPORT**  
 (Submitted for 4th Quarter 2017)

December 13, 2017

**SERVICES**

**Developmental Disability Waiver Activities**

The following figures reflect **waiver activities** thus far in state fiscal year 2017-2018 (July 1, 2017 – December 4, 2017):

WAIVER	Offers # **	Linkages #	Certifications
NOW	91	39	136
Children's Choice/CC-425	306	124	87
Supports	98	24	33
ROW	465***	47	5

\*\* This is the number of unique individuals made an offer or final offer during this time period.

\*\*\* Includes offers made under the ROW Pilot Project and OAAS to ROW transitions.

The following figures reflect **total waiver numbers** as of December 5, 2017:

WAIVER	Total # Slots Allocated	Total Participants linked, but not certified	Total # Certifications	Total # Vacant Slots
NOW	9,032	67	8,638	327
Children's Choice/CC-425	1,475	143	1,104	228
Supports	2,050	27	1,777	246
ROW	210	42	28	140

**Request for Services Registry (RFSR) as of November 31, 2017:**

- New Opportunities Waiver (NOW): 15,559
- Supports Waiver: 1,489

**Children's Choice (CC) Waiver / Supports Waiver / New Opportunities Waiver (NOW) / Residential Options Waiver (ROW) Notices of Intent**

Notices of Intent (NOI) for the CC Waiver, Supports Waiver, NOW, and ROW rules were published on September 20, 2017 in the *Louisiana Register*. Waiver amendments were prepared and submitted to Centers for Medicare & Medicaid Services (CMS) to align with this NOI. Comments and responses to the NOIs and CMS amendments were received by OCDD and responses were prepared and forwarded to the commenting parties. The Developmental Disability (DD) Council submitted a letter of support for the proposed amendment, which was included in the presentation to CMS. A conference call with CMS was held in December to explain the waiver amendments and new process for allocation

of waivers, with a favorable response from CMS. CMS advised that it has a target for review and consideration of the amendments within the next few weeks.

The NOIs for the waiver rules are expected to be promulgated into final rule on January 20, 2018.

### **Residential Options Waiver (ROW)**

- **ROW Amendment (ROW/OAAS transition)**

OCDD is currently engaged in the implementation phase of the CMS approved transition of Office of Aging and Adult Services (OAAS) Community Choices Waiver (CCW) and Adult Day Health Care (ADHC) participants who have an OCDD Statement of Approval (SOA) to the ROW. OAAS will no longer provide waiver services to participants who have an OCDD SOA; those individuals must access an OCDD waiver.

- This transition will affect approximately 260 people.
- Each affected individual will be transitioning from CCW or ADHC to ROW during a year-long phase-in process, based upon his/her OAAS plan of care expiration date.
- Transitions begin with OAAS participants whose plan of care expires in February 2018 and each month thereafter. Planning is already occurring for February 2018 plans of care.
- Ninety days prior to an individual's plan of care coming up for renewal, he/she will be linked to the ROW.
- Continuity of Service - Providers currently providing Personal Care Attendant (PCA) services to a transitioning participant will have the subspecialty type for ROW automatically. ADHC will be added as new service as well.

- **The Residential Options Waiver (ROW) pilot** involving the transition of individuals who reside in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID) to Home and Community-Based Services (HCBS) Waiver options has continued. To date, more than 840 offers have been extended across the state.

- The Local Governing Entities (LGEs) are near completion of hand-delivering offers to individuals/ families and helping them to understand what the ROW offers. In addition, local Community Living Ombudsmen continue to be available and attend meetings to provide additional information to the individual/family if they wish.
- To date six (6) people have transitioned and been approved in the ROW.
- Twenty-three (23) people are in the process of transition to waiver certification/approval.
- Once all offers made on a first-come, first-served basis are completed, OCDD will work with stakeholders to identify and analyze all issues/concerns identified and to refine the process for making offers in order to ensure filling of 50 slots. Initial feedback is that additional training on supports available in ROW needs

to be held for all stakeholders, including but not limited to individuals, families, LGEs, Support Coordination agencies, and provider agencies. Additionally, making offers to 2 - 3 people who currently enjoy living together in an ICF/IID and who would want to share supports in the ROW was recommended.

### **Electronic Visit Verification (EVV)**

Home and community-based services (HCBS) providers are in the process of implementing Electronic Visit Verification (i.e., electronic clock in/out) for in-home services. The mandatory implementation schedule is provided below:

<b>Region</b>	<b>EVV Go-Live Date</b>
3	11/13/2017
5	11/20/2017
6	12/04/2017
9	12/11/2017
8	12/18/2017
1 and 10	1/08/2018
2	1/22/2018
4	2/12/2018
7	2/19/2018

### **Pinecrest Supports and Services Center (PSSC) - Transition Status**

The following figures reflect transition activities from January 1, 2017 thru December 1, 2017:

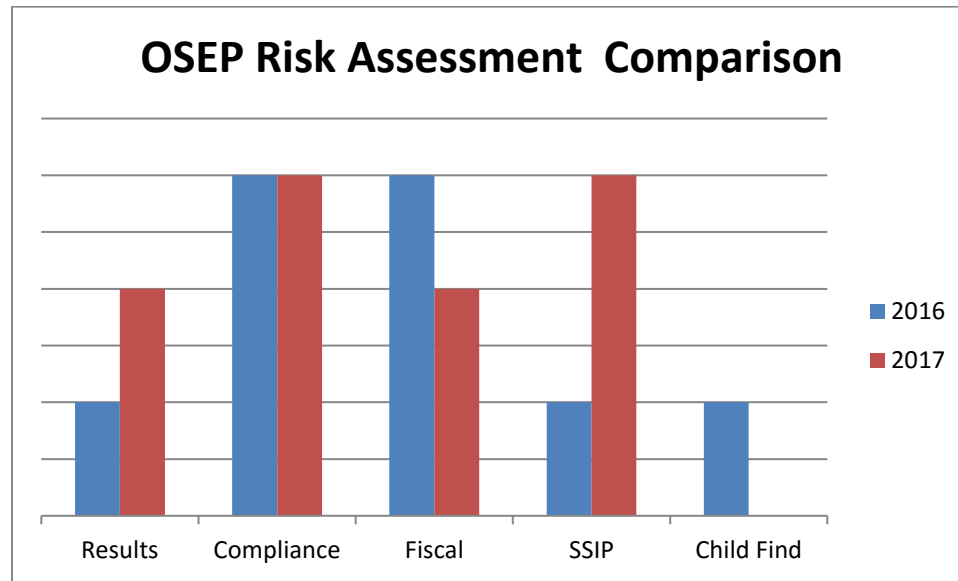
- The census of Pinecrest Supports and Services Center to date is 411.
- In 2017, PSSC has admitted 18 individuals and discharged 43.
- Additionally, 45 participants are planning for a transition from the center.
- Fifteen participants are projected to move to waiver supports or private intermediate care facilities for individuals with developmental disabilities (ICFs/IID) within the next quarter.
- The overall satisfaction rate for individuals leaving PSSC assessed one-year post-discharge is 92 percent.

### **EarlySteps**

- As of November 1, 2017, the EarlySteps program was providing services to 5,083 children, an increase of 92 children since the last quarter.
- The EarlySteps advisory council, the State Interagency Coordinating Council (SICC), will have its next orientation for new members on January 11, 2018 at 11:00 am preceding its quarterly meeting which begins at 1:00pm. New members

have proposed a series of orientation sessions by topic; the topic for January will be a “family story” to highlight the EarlySteps experiences of a family of a very preterm infant as shared by a system point of entry staff person and a support coordination agency; this orientation topic was postponed from the October meeting. The State Systemic Improvement Plan (SSIP) workgroups: Family Assessment, Services Supporting Family Priorities (SSFP) and Team-Based Practice Supports (TBS), will meet on the morning of the January SICC meeting.

- The SICC Executive Director, Juanita Washington, left her position effective December 1, 2017. This position is filled through the Governor’s Office of Community Programs.
- SSIP Workgroup Activities underway:
  - EarlySteps is conducting training on the Division for Early Childhood (DEC) Recommended Practices (RPs) for all agencies and providers. Approximately 800 early interventionists are participating in over thirteen training dates around the state. The RPs are the evidence-based practices which EarlySteps has selected for its SSIP.
  - The Family Assessment workgroup members are interviewing System Point of Entry Staff and EarlySteps families regarding the Family Assessment process, which is part of the development of the service plan (Individualized Family Service Plan) for eligible children and families.
  - The SSFP and TBS workgroups combined their efforts to survey early interventionists representing all roles in EarlySteps to describe their current practices in the areas of family assessment and team based practice supports.
  - All three workgroups are reviewing available tools to develop “fidelity checklists” as guides for consistent practice implementation. The results of the interviews and surveys will be used to define how practices in these areas are conducted with fidelity throughout the state, and the fidelity checklists will allow early interventionists and staff to measure their practice implementation against a statewide standard. The information will also identify “bright spots” in the state where implementation is considered high quality.
- As part of its federally required monitoring with states, the Office of Special Education Programs (OSEP) conducts an annual risk assessment of each state. The process, now called Designated Monitoring and Support, was redesigned and implemented for last year. The chart below compares Louisiana’s results or *levels of engagement* for 2016 and 2017. The levels of engagement determine the type of technical assistance or engagement that OSEP provides to the state. “Universal” (the level designating the least amount of risk and shown as the highest performance in the chart) results in technical assistance provided to all states. “Targeted” (middle level of risk) results in a state’s collaboration with the federal technical assistance centers based on the area. “Intensive” results in the most intensive level of technical assistance and/or an on-site visit by OSEP. Louisiana had improvement in two areas, stayed the same in one area, and moved from universal to targeted in the fiscal area. The child find area was not used to issue designations in 2017.



## INITIATIVES

### Waiver Related Initiatives:

#### Employment First

- OCDD continues to offer technical assistance to providers and support coordinators around the state either one-on-one or in groups regarding employment. The Office is also planning sessions in each region which will allow open discussions and sharing of ideas among providers in the regions to help them with the transition process.
- OCDD is working to finalize a schedule of regional meetings for individuals and families to provide information and answer questions regarding changes to vocational and day services as a result of the CMS Settings Rule.

#### Home and Community-Based Services (HCBS) Settings Rule Activities

**Statewide Transition Plan (STP)** – Louisiana Department of Health (LDH) is working toward full compliance with the HCBS Settings Rule, and OCDD remains on target with the following activities which are identified in the Statewide Transition Plan (STP):

- Complete comprehensive site-specific assessments of all Home and Community-Based settings, implement necessary strategies for validating the assessment results, and include the outcomes of these activities within the STP;
- Draft remediation strategies and corresponding timelines that will resolve issues which the site-specific settings assessment process and subsequent validation strategies identified by the end of the Home and Community-Based Settings rule transition period;

- Outline a detailed plan for identifying settings that are presumed to have institutional characteristics, including qualities that isolate HCBS beneficiaries, as well as the proposed process for evaluating these settings and preparing for submission to CMS for review under Heightened Scrutiny;
- Develop a process for communicating with beneficiaries that are currently receiving services in settings that the state has determined cannot or will not come into compliance with the Home and Community-Based Settings rule; and
- Establish ongoing monitoring and quality assurance processes that will ensure all settings providing HCBS continue to remain fully compliant with the rule in the future.

### **Request for Services Registry Prioritization Project and Tiered Waiver - Screening Activities**

- A total of 9,047 Screening of Urgency of Need (SUN) tools have been completed.
- OCDD has a target of December 2017 to screen everyone on the RFSR who can be located and is willing to participate in the screening.
  - Based on information available and reporting completed thus far:
    - Local Governing Entity (LGE) offices and OCDD have contacted or made at least one attempt to contact 99% of the people on the RFSR;
    - 53% of the persons on the RFSR have had a screening completed;
    - 24% have been identified as not being able to be located;
    - 14% have been identified as persons that the LGE/OCDD are continuing to attempt contact and schedule screenings;
    - 6% have been identified as incarcerated, deceased, not eligible, refused redetermination, requested removal from the RFSR, or moved out of state;
    - 1% identified are currently admitted to a state facility; and
    - 1% have been identified as refusing to participate in the screening process.
- Of the 9,047 screenings completed thus far, the category of support needs are as follows:
  - No unmet needs - 43%
  - Planning needs (supports needed in 2 - 5 years) - 22%
  - Critical needs (supports needed in 1 - 2 years) - 20%
  - Urgent needs (supports needed within 12 months) - 8%
  - Emergent needs (supports needed within next 90 days) - 7%

**Other Initiatives:**

**Money Follows the Person (MFP) Rebalancing Demonstration (My Place Louisiana) as of December 4, 2017**

- MFP activities provided:
  - Pre- and post-transition assistance requests total 467 with 232 My Place participants receiving assistance (Note: Many participants have made multiple requests.)
  - Direct Service Worker (DSW) Specialization Training for 292 provider staff and family members
- Housing Relocation Assistance Program (HRAP) activities included:
  - 91 referrals for HRAP
  - 28 families or individuals have moved into housing located by the contractors
  - Another 58 people received lists of appropriate housing options for their review
- Total of 413 people have transitioned to the community with My Place supports:
  - New Opportunities Waiver (NOW): 345 individuals
  - Children’s Choice (CC) Waiver: 58 children
  - Residential Options Waiver (ROW – My Place): 9 children
  - Residential Options Waiver Pilot (ROW Pilot): 1 individual

**ICF/IID Programmatic Unit**

The OCDD Intermediate Care-Facilities for Individuals with Intellectual Disabilities (ICF/IID) Programmatic Unit was created at the direction of Louisiana Department of Health Secretary, Dr. Rebekah Gee, following several reported incidents of poor quality of services in ICF/IID facilities. The lack of programmatic oversight was identified as a key reason for the poor service quality in these facilities. Although Health Standards conducts regulatory and complaint surveys of ICF/IID facilities with focus on regulatory requirements outlined in Title XIX, there has been no programmatic oversight. Through programmatic guidance, technical assistance, training, and on-site quality evaluation, the ICF/IID Programmatic Unit will assist providers to enhance quality of life, satisfaction and overall health outcomes for persons served. The OCDD ICF/IID Programmatic Unit will engage providers in a partnership with OCDD to ensure that supports and services are planned and provided in a person-centered manner that supports the desired outcomes of people being served in these facilities.

**OCDD ICF/IID Programmatic Unit updates follow:**

- Completed development of Programmatic Unit Handbook, which is currently being reviewed by OCDD Management Team. Once approved, the handbook will be uploaded onto the OCDD website for provider access. A link will be created and disseminated to all providers to access this location.

- Completed Satisfaction Surveys with a random sample of 400+ individuals residing in private ICF/IID facilities. Currently waiting on data from the most recent National Core Indicator Louisiana survey to analyze and compare with results from the ICF/IID Programmatic Unit's survey results.
- Developed training modules in these core areas: Positive Behavior Supports, Person-Centered Planning/Thinking, and Recognizing Signs & Symptoms of Illness. Core areas of Team Process and Meaningful Activities are in the development process.
- Developing a Provider Interest Survey and Letter to ICF/IID providers for use in initiating a pilot of the unit's technical assistance approach with interested providers. Continuing to work with assigned OCDD staff on initiating the new critical incident system for ICF/IID providers.

**Actions completed in the development and implementation of the unit follow:**

- Held in-person meetings with ICF/IID provider agencies to introduce the programmatic unit and obtain feedback.
- Identified Unit Director.
- Identified unit staff with no new positions established.
- Completed meetings with Local Governing Entities (LGEs) to update DD Directors of the progress of the unit development.
- Developed draft internal administrative procedures for unit operation.

**Certified Medication Attendant (CMA) Program**

- The statewide CMA Committee is near completion of the revised instructor training materials. The revisions align with current best practices and the new CMA rule. The new materials will be posted on the website after the pilot phase is complete.
- The next CMA training will be conducted once the new materials have been finalized and are ready for distribution. OCDD is currently keeping a contact list so that nurses who wish to attend the next training will be notified as soon as it is scheduled.
- To date, there are 4,156 active CMAs in the CMA database. There are currently 1,732 CMAs whose certificates are expired. It is incumbent upon providers to have a system in place to track expiration dates for their CMAs and to ensure the requirements for recertification are met. All providers are urged to check the CMA expiration dates on their certificates to ensure that they are in compliance with the rule.
- In order to comply with Section 915 A of the CMA Course Guidelines, providers are required to keep one original certificate on file and distribute the second certificate to the CMA. Agencies must adhere to these guidelines. Processing a third certificate for the CMA strains OCDD resources and increases our processing time for other requests. If an agency hires a CMA who was trained by a previous employer, the agency that hires the CMA must request a CMA verification form rather than a re-printed certificate. CMAs who request a



duplicate certificate for a prospective employer will be instructed to refer the prospective employer to CMA program staff in order to comply with our verification process.

### **Access to Behavioral and Medical Intervention in the Community**

The following information outlines Resource Center activities inclusive of crisis referral and trends associated with placement requests to OCDD Central Office for the 2017 calendar year (covering the period of January 1, 2017 - December 4, 2017), as well as provides a current update on the Resource Center and Local Governing Entity collaboration on the Non-Consensual Sexual Behavior (NSB) process as of December 4, 2017.

- For the period noted above, there were 84 crisis referrals. Diversion efforts for 12% of these persons are underway, so these cases remain open at the current time and will not be included in the Resource Center consultation or resolution data report. Out of the remaining 74 cases that have reached resolution, 19% of these individuals have required admission to Pinecrest Supports and Services Center (PSSC).
- Sixty-five cases (89%) referred for admission received a crisis consultation from the Resource Center, with the ability to divert 82% of these individuals from long-term institutionalization. As previously noted, some cases are still open and diversion efforts underway, and the Resource Center remains engaged in the cases to assure that no diversion efforts are missed.
- The last two year's trend relative to persons being referred from other more intensive and institutional-type settings has continued for the period noted above, with 77% of referrals coming from institutional/acute care settings. Further breakdown within these settings reveals that 57% of these referrals were from psychiatric hospital settings, 13% were for persons who were incarcerated, 20% were supported in ICF/DD settings, 7% were in an acute care setting, 2% of persons were in a psychiatric residential treatment facility, and 1% was in a nursing facility at the point of referral.
- Efforts toward assuring that persons with a history and/or current challenges related to non-consensual sexual behavior (NSB) have access to the needed supports remain ongoing. This period's data revealed that 218 persons are receiving follow up by the local oversight team. During this quarter's reporting, no individuals had a subsequent incident of NSB involving direct contact.

OCDD continues to collaborate with the Office of Behavioral Health (OBH) and Medicaid relative to triaging and coordinating services for persons with complex support needs. As noted in the prior update, OCDD in partnership with OBH was awarded a Transformation Transfer Initiative (TTI) grant to provide cross-system training and education for clinicians, administrators, and direct-support professionals to develop expertise to support persons with co-occurring intellectual/developmental disabilities (IDD) and mental health needs. Current focus is on intensive technical assistance and consultation for youth whose needs overlap the IDD and behavioral health systems.

Additionally, the initiative between OCDD and the DD Council to develop training and consultation to build provider capacity to support persons with complex needs continues to progress. The pilot provider and Monroe provider have moved into the second year of participation and continue to achieve improvements and outcomes. The Lafayette provider is nearing the end of Phase 3 of the initial year and outcomes will be evaluated as this Phase closes. OCDD and the DD Council have begun implementation of a pilot with use of core modular program to support base knowledge for Direct Support Professionals, evaluate for possible inclusion in routine 16-hour annual training, and extend participation in project to those in self-direction. These trainings have been scheduled through early January 2018. Additionally, two additional providers have been recruited, one in the New Orleans area and one in the Alexandria area.