

Orange County Community Supports Initiative (OCCSI)

A Collaborative, Systematic Approach to Optimize
Delivery of Quality Supports to Children and Adults with
Developmental Disabilities

Information Session



People are Not Getting What They Need

The process of obtaining eligibility and service authorization from the NYS Office for People with Developmental Disabilities (OPWDD) can be difficult, confusing and take a long time.

Authorization ≠ Service Delivery

Providers do not have staff waiting to be assigned.

The System is Not Meeting the Demand for Quality Respite & Community Habilitation

Workgroup Formed to Examine the Issues

The Job, the Need, Current Practices, Policies, Regulation, Rate Structure, Rates of Pay, Infra-structure Required to Support Service Delivery, Relationship of These Jobs to Others within Agencies & More

Data was Needed

Factors

Competing Priorities For The State & Non-Profit Providers

Major Systems Transformation Of The Developmental Disabilities System In New York

Difficulty Recruiting Potential Staff

NYS Justice Center

Minimum Wage Increase

The National Staffing Crisis



Competing Priorities System Transformation

Medicaid Service Coordination → Care Coordination

MSCs → Employees of Care Coordination
Organizations

Preparing for Managed Care and a Fiscal Changes

Major Shift

How & Where People Are Supported

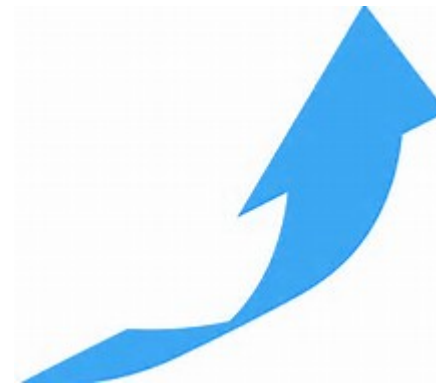
CERTIFIED SETTINGS

SHRINKING

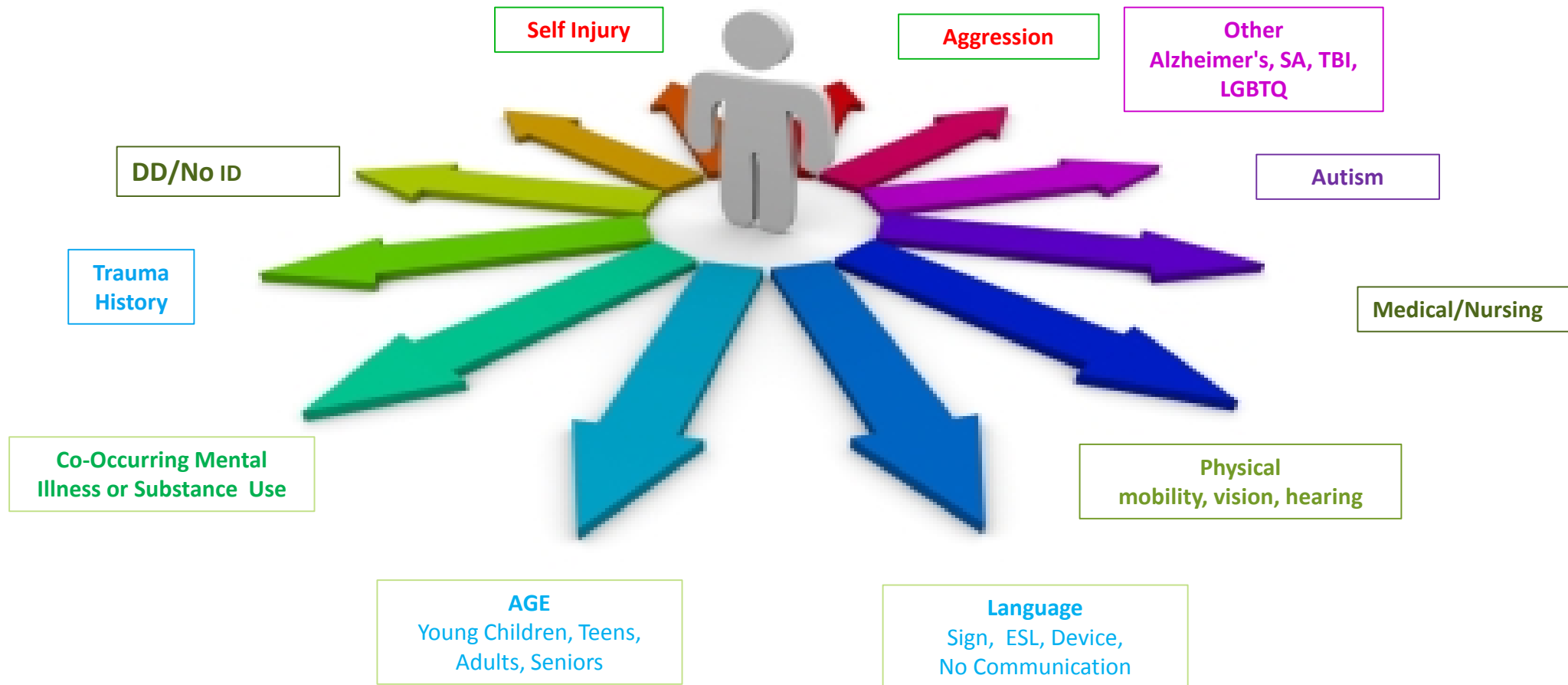


COMMUNITY SUPPORTS

RAPID GROWTH IN DEMAND



Increased Complexity Of Those Needing Support



Growing Demand For Community Supports Requires a Higher Skill Set

Staff known as Direct Support Professionals (DSPs) used to work primarily in group homes and day programs with adults under direct supervision implementing scheduled, routine activities.

Community Support DSPs work with complex children and adults independently, with little supervision and they are responsible for filling the time with billable interventions.

Funding Available To Meet the Need

Service Authorizations for Community Supports



Number of Hours Authorized



Additional Factors

Justice Center Clearances Take Time

Minimum Wage Increase Fast Food Workers

National Staffing Crisis for Entry Level Human Service Jobs

- Personal Care Aides
- Nursing Home Aides
- Home Health Aides
- Direct Support Professionals

2016 Survey Data

MSC & Community Support Supervisors All Reported the Same 396 Unique People Under-Served or Unserved

Support Provider Supervisors Reported 131 Unique People On Rosters Unserved All 12 Months
Majority Under-Served by 75% or More

MSC Data-*Additional* 141 People

Not on a Provider Roster !

396+141=537 Unserved & Under-Served

131+141=272 Unserved All 12 Months

Outcome of the Study

Orange County Community Supports Initiative (OCCSI)
A Collaborative, Systematic Approach to Optimize the
Delivery of Quality Supports to Children & Adults with
Developmental Disabilities

Initial Focus is on Community Habilitation

OCCSI Providers

All Agree To Support People With Complexity

Choose OCCSI, Connect with a Diverse Team of Providers Working Together in Collaboration with Orange County Government to Monitor and Address Needs

Access : Supports for Living	CRVI	Greystone Programs
Inspire	The Mental Health Association of Orange County, Inc.	The Arc of Orange

Three Overarching Goals

Reduce the Number of Unserved & Under-Served By
Managing the Need As a System

Deliver Quality Services Matched to Complexity & Acuity
With Rates of Pay Tied to Skill

Build Capacity Required to Meet the Demand

Reduce the Number of Unserved & Under-Served by Managing the Need as a System

This Requires a Single Referral Process and Database
Consistent Data Sets Used to Quantify, Track and Monitor
Better Accountability

Everyone Wishing to Receive Services From the Six
Providers is Identified & Counted

Supports Choice—Preferred Provider or Provider Exclusion

Managing the Need

Providers Commit to Meet Regularly to Monitor, Plan,
Problem Solve, Share Cases

MSCs Can Be Scheduled to Present Crisis Cases

Conversations with Those Unserved by Choice

Right-Size Authorized Units and Type of Service



Unserved by Choice

Sometimes, Preferences & Expectations Do Not Align with Service Deliverables and Complicate or Prevent Service Delivery

Preference for a Certain Type of Staff

Multiple Last Minute Cancellations

Refusal to Accept Multiple Staff Offered

Individual is Not Available to Receive the Service

Service Offered is Declined

Services Wanted at a Time That is Unlikely to be Staffed e.g., 6-8 am on Sunday Mornings

Home Environmental Concerns

“Right- Size” the Hours/Units of Service Authorized to Meet Current Need

In the past, CH has been authorized in hours or units weekly or annually. Moving forward, authorizations will be in units based on a weekly schedule.

Example

There are four units in one hour.

Convert an authorization of 780 annual hours to units: $780 \times 4 = 3,100$

Convert 780 annual hours to weekly hours: $780 \div 52 = 15$

Convert 15 weekly hours to weekly units: $15 \times 4 \text{ units} = 60$

Convert 60 units per week to annual units: $60 \times 52 = 3,100$.

Schedules change. Do the hours or units match current need? Are there too few to accomplish the desired outcomes? Are there too many to use within the week?

“Right- Size” the Type of Service

Community Habilitation vs. Respite

Community habilitation supports the child or adult develop or maintain skills through goal-oriented activities in their home and surrounding community based on Medicaid allowable services.

Respite is a service that provides caregivers with a break from the 24/7 care and supervision. Skill building is not required.

Caregivers get “a break” when CH is provided;
they do not need to be present

Understanding Community Habilitation

WHAT IT IS

Scheduled sessions to deliver and document professional Medicaid billable supports to improve outcomes.

Staff work for and under the supervision of their employer.

WHAT IT'S NOT

Sitter Service

On-Call Service

Transportation Service

Nanny

Cleaning Service

Confidante, Friend

Not “your worker”

Deliver Quality Services Matched to Complexity &
Acuity With Rates of Pay Tied to Skill
People Seeking Support Come with Complexity
One Size Does Not Fit All



OCCSI Tiered Community Habilitation

Traditional, Enhanced , Enhanced + *

Entry Level, No Experience → Person with No Significant Needs

Enhanced (includes CIHS) → Person with Complexity

CH Enhanced +* (optional)

Providers Agree to Base Rate of Pay For Each Based on Training
& Demonstration of Skill

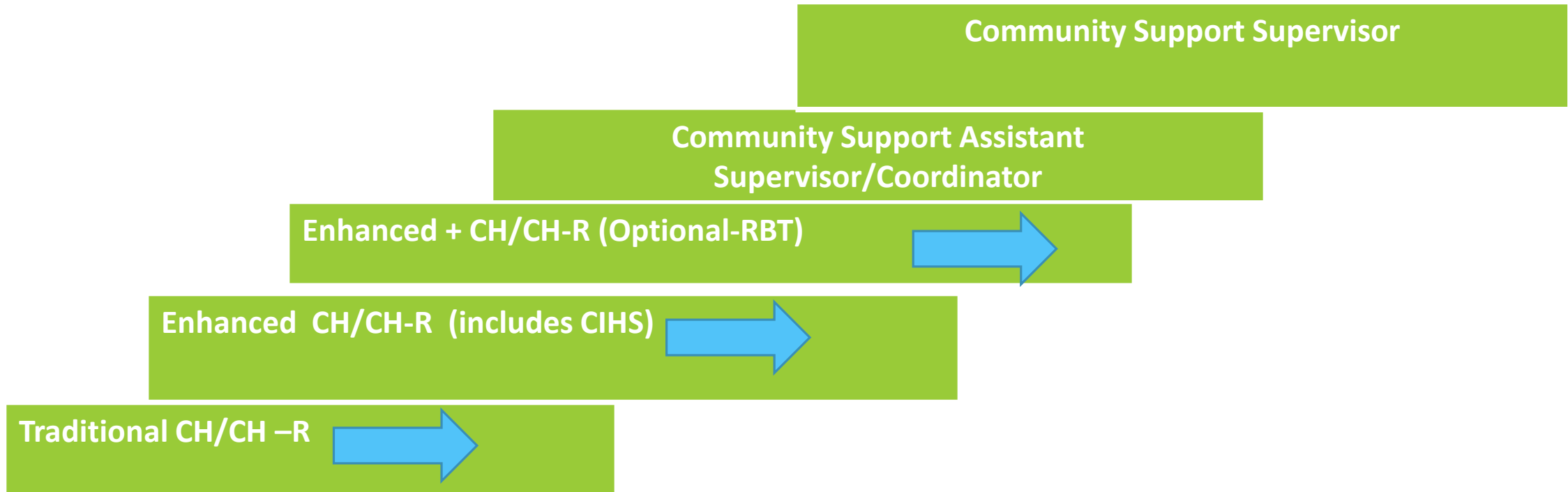
*Optional -Registered Behavior Technician™ (RBT®)

Criteria for Matching to CH Levels

Criteria Under Consideration

DDP Scores, CCO Tiered Payment Rate Methodology (Currently Proposed At Three Levels-standard, Enhanced, Enhanced Plus), Data from Our Profile Form Or Combination, and Eventually--the CAS
Your MSC Should be Able to Explain These

Career Ladder



Career Ladder vs. “Your worker”

Staff Motivated to Move Through the Continuum Would be
Re-Assigned to Someone in Need of Their Skill Set Once A
Replacement Has Been Identified

Benefits

Opportunity to Gain Experience and Skills

Enhanced Staff Motivation & Retention

Individuals Are Exposed To Greater Diversity

Facilitates Generalization of Skills and Behavior

Helps To Maintain Boundaries & Ethical Behavior



Build Competence-Orientation Is Not Enough

Key Core Training Content for All DSPs and Supervisors

Annual Continuing Education Required

Build in Adequate “On the Job Supervision”

Build Capacity Required to Meet the Demand Orientation, Human Resources, Supervision Practices

272 Unserved All 12 Months of 2016

45 Part Time New Hires Needed Per Provider!

Streamline Orientation More Recommendations

- Promote Online Orientation
- Streamlined Standardized Orientation & Training Content
- Offer Collaborative Orientation Locally Evenings & Weekends
- Allow a Window of Time to Complete So Staff Can Start Working

Strategies

Traditional Recruiting Strategies Don't Work

People Aren't Coming to Us---Go to the People

Collaborative Recruiting Specific to This Work

Share Best Practices

Identify Geographic Areas for Targeted Recruitment

Develop Pre-Hire Job Exposure Opportunities

Cap Caseloads Per Supervisor at Reasonable Number

Add Supervisor Assistants



Proposed Timeline of Initiative

Fall 2017

Prep for Phase I- Information Sessions and MSC Training

January 2018

Official Launch Phase I (Goal 1)

March/April 2018

Begin Phase II (Goals 2 and 3)



If We Can't Do This,
It Can't Be Done!
