Federal Updates with CMS and ACL

- Ralph Lollar, Director DLTSS, CMS
- Jennifer Bowdoin, Director, DCST, CMS
- Jennifer Johnson, Director OIDD
- Shawn Terrell, OPAD, ACL

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CMS Updates

• Ralph Lollar, CMS/DEHPG
  – EVV
  – Settings
  – Rate/Rate Methodologies
Background and Purpose of Living Well Grants

• The number of individuals with intellectual and developmental disabilities (I/DD) living in community settings and receiving home and community based services (HCBS) increased dramatically in the last two decades, resulting in:
  – Better outcomes, including choice and community integration.
  – Wide variation in the accessibility of quality HCBS across the country.

• The purpose of Living Well – Model Approaches for Enhancing the Quality, Effectiveness and Monitoring of Home and Community Based Services for Individuals with Developmental Disabilities (Living Well) is to:
  – Increase community integration and independence of individuals with developmental disabilities; and
  – Improve the quality of HCBS

By developing and testing one or more model approaches of a coordinated and comprehensive system.
ACL Awarded Eight Living Well Grants

### Cohort 1
- University of Georgia Institute on Human Development
- University of New Hampshire Institute on Disability
- Virginia Commonwealth University Partnership for People with Disabilities

### Cohort 2
- Alaska Governor’s Council on Disabilities and Special Education
- University of Idaho Center on Disabilities and Human Development
- Indiana Family and Social Services Administration
- University of Missouri-Kansas City Institute for Human Development
- Wisconsin Board for People with Developmental Disabilities
Core Components

Each grantee designed one or more model approach including two interrelated core components for enhancing and assuring the independence, integration, safety, health, and well-being of individuals living in the community:

- **Community monitoring** – Develop and implement a coordinated system with the incorporation of partnerships to monitor the safety, health, and well-being of individuals with I/DD living in HCBS, and identifying and eliminating risk factors for abuse, neglect, and exploitation.

- **Community capacity building** – Apply evidence-based practices and innovative strategies to support individuals with I/DD living in or moving to HCBS; improve access to and quality of community services; reduce and mitigate abuse and neglect; and support individuals’ empowerment, independence, and rights.
Living Well – Model Approaches for Enhancing the Quality, Effectiveness and Monitoring of Home and Community Based Services for Individuals with Developmental Disabilities

Cross Site Evaluation, Year 1 Findings (2018-2019)
Eight Key Features

- **Partnerships**
  Initiation and coordination of partnerships or coalitions with local and state-level organizations, agencies, and other relevant stakeholders, including at least one self-advocacy organization, in the design, implementation, and replication of grantee activities.

- **Meaningful and active engagement with self-advocates and families**
  Continuous, meaningful, and active engagement of self-advocates and family members throughout the life cycle and in all stages of the project.

- **Evidence based practices for service improvements**
  Use of evidence-based and innovative strategies to (1) improve access to and quality of community services, (2) reduce and mitigate abuse and neglect, and (3) support empowerment, self-determination, and self-advocacy.

- **Building capacity of DSPs and HCBS providers**
  Prevention-based tools and technical assistance to address common needs, such as changing the "culture of abuse and neglect" in HCBS settings and transferring knowledge of positive behavior.

- **Reducing abuse and neglect through community monitoring**
  Collection, analysis, and dissemination of data to develop and implement coordinated community monitoring that builds on existing local or state infrastructure and partnerships.

- **Addressing health and safety with data tools**
  Data tools and evidence-based practices for monitoring high-risk individuals and addressing reoccurring issues of health and safety concerns.

- **Program and outcome evaluation**
  Process and outcome evaluation to analyze delivery and impact of project activities.

- **Sustainability**
  Assurance of organizational, financial, and/or community stability to continue and refine grantee work.
Preliminary Evaluation Findings

Due to overlap in the grantees’ implementation of the key features, the evaluation team organized key features into three main categories.

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Findings: Capacity Building

Capacity Building

- Forming new partnerships and expanding of existing partnerships. These partnerships include various governmental and private organizations with a wide range of specialties;
- Engaging self-advocates and family members of people with I/DD in various ways from project leadership to specific initiative development ensuring that all viewpoints are represented and included; and,
- Developing and implementing a range of trainings for a variety of audiences. Examples of trainings being developed and/or implemented include courses in professionalism for direct support professionals (DSPs) and healthy relationships trainings for people with I/DD.
Findings: Data Collection, Dissemination, and Monitoring

Data Collection, Dissemination, and Monitoring

- Diagnosing problems with current incident reporting and community monitoring systems to identify gaps in data and barriers to reporting. Once issues are identified, grantees are collaborating with partners to develop new practices and systems to address systemic shortfalls and barriers to reporting and increase the quality of community monitoring; and,
- Assessing data collection methods and use practices to address concerns regarding data fatigue and under-utilization of collected data. Grantees are using the assessments to identify strategies to efficiently use and share data between partners.
Findings: Implementation, Evaluation, and Sustainability

Implementation, Evaluation, and Sustainability

- Aligning innovative and evidence-based practices with existing practices and initiatives by building on partnerships. This includes growing previously developed evidence-based initiatives, both from their state and from other sources;
- Beginning to develop methods to evaluate the implementation processes of initiatives developed under the Living Well grant. Grantees are also beginning to evaluate the progress made toward goals of the grant by designing evaluation methods and gathering baseline data; and,
- Integrating grant initiatives into sustainable systems and ensuring the availability of resources developed by the grant team.
Quality

• JennBowdoin, CMS DEHPG
• Shawn Terrell, ACL
• Quality Overview
  – Broad Vision
  – HCBS Recommended Set
  – ACL Quality Measure Development
  – NCAPPS and maybe NQF
University of MN Measures

• 14 measures under development
• Modular – each measure is stand-alone
• Composite – each measure consists of a few questions
• NQF Endorsement
• Approximately 1 year to completion
University of MN Measures

• NQF Domains:
  – Choice and Control
  – Community Inclusion
  – Employment
  – Freedom from Abuse and Neglect
  – Person-Centered Practice and Service Delivery
  – Consumer Leadership in System Development
Our Website
ncapps.acl.gov

National Center on Advancing Person-Centered Practices and Systems

Transforming how we think, plan, and practice
National Center for Advancing Person-Centered Practices and Systems (NCAPPS)

• Central clearinghouse for all stakeholders to access useful information through a centralized website.
• Provide TA to states on the full spectrum of needs related to implementing person-centered thinking, planning, and practices in their systems
• Assist states in creating the organizational culture, processes, payment incentives, policy, and practices at all levels of state systems to support Person-centered planning.
• Support state-to-state E-Learning collaboratives to facilitate the development and sharing of best practices across state systems.
National Quality Forum: Person-Centered Planning Project

• Refine the current definition(s) for PCP;
• Develop a set of core competencies for performing PCP facilitation;
• Make recommendations to HHS on systems characteristics that support person-centered thinking, planning, and practice;
• Develop a conceptual framework for PCP measurement; and
• Conduct an environmental scan including the historical development of person-centered planning in LTSS systems to include a research agenda for future PCP research

Health and Welfare

• Jennifer Johnson, ACL
• Ralph Lollar, CMS/DEHPG
• Jenn Bowdoin, CMS/DEHPG
• Health and Welfare
  – H & W workgroup
  – Survey
  – SRT
  – Living Well