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Recommendation #1 – Assure Effective Communication: Every person has an effective way to communicate in order to express choice and ensure his or her health and safety. All forms of communication should consider and include the individual's language preferences and use of current technology.

Current Strategy	Keep As-Is	Retire or Revise To (strikethrough for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
<u>#1</u> - Finalize and issue the communication policy bulletin.	х			
Define communication:				
a. It is a right;				
 It is expressive and receptive; 				
c. It is a meaningful interaction not just				
words/signs;				
d. It is cultural;				
e. It is foundational to leading a self-determined life,				
being a part of a community, being healthy and				
safe, and having healthy relationships;				
f. It will assert that everyone can communicate in				
one way or another (such as but not limited to				
behavior, eye gaze, visual gestural); however, not				
everyone can communicate effectively and				
meaningfully.				
Describe a communication profile and plan;				
Specify roles and expectations;				
Include the applicable 6100 regulations.				
<u>#2</u> - Incorporate a focus on communication in the		Incorporate a focus on communication first	Update to be	
individual planning process.		approach in the individual planning process	more reflective of	
		and individual support plan.	ISP redesign.	
<u>#3</u> - Identify all possible funding avenues (including		Retire	Just SO Speech	
private insurance, ACCESS (Medicaid), Medicare,			and amendment	
Person/Family Directed Services (P/FDS), waivers, etc.) to			to Assistive	
support people in exploring effective communication			Technology	
supports. These would include formal assessments to			service definition	
identify needs and appropriate approaches, techniques,			expanding	
devices, updates, and training.			options.	

#4 - Address the lack of Communication Specialists and clinicians, such as speech-language professionals and board-certified behavior analysts, with the expertise in communication to work with individuals with intellectual disabilities or autism.	Address the lack of Communication Specialists and clinicians, such as speech- language professionals and board-certified behavior analysts, Increase the number of professionals with the expertise in communication to work with individuals with intellectual disabilities or autism across the lifespan.	More direct language. Expand to all professionals. Added Communication Specialists training.
#5 - Recognize and accommodate the primary language of individuals, self-advocates, and families; provide materials and translation.	Recognize and Accommodate the primary preferred language and modes of communication of all people. of individuals, self-advocates, and families; provide materials and translation.	Expand to all communication. Look to better connect communication with Tech Task Force.
<u>#6</u> - Promote generic social change by building capacity in understanding and supporting people with nontraditional communication needs.	 Promote generic social change by building capacity in awareness and understanding and of supporting people with-complex nontraditional communication-needs. OR Promote social change by building awareness and understanding of communication. OR Promote social change by building awareness and understanding of experimentation. OR 	Refines language.

<u>#7</u> - Track progress by measuring compliance with	Retire	SC monitoring
revised regulations relating to communication.		tool question,
		Regulatory
		Compliance
		Guide, QA&I
		updates.
ISAC REC #1	- Proposed New Strategy(s)	
Identify people in service that have communication access need Plus, Health Risk Assessment Tool (HRST), Scales of Independent Evaluation (PRE), Etc.		

Recommendation #2 – Promote Self-Direction, Choice, and Control: Personal choice and control over all aspects of life must be supported for every person. Choice about where to live, whom to live with, what to do for a living, and how to have fun all are key choices in life, as are seemingly small choices: such as what to eat, what to wear, when to wake up in the morning, and when to go to bed. It is important to be able to trust the people who provide assistance, to feel confident that they respect you and your right to manage your life, and to enjoy each other's company. Self-direction works when individuals have clear and understandable information, opportunities to exercise choice, and assistance with making decisions when needed. Self-direction is only possible when family, friends, and people who provide supports respect the individual's preferences and their right to make mistakes and facilitate the implementation of the individual's decisions.

Current	Кеер	Retire or Revise To	Reason	ISAC
Strategy	As-Is	(strikethrough for removal and <u>underline</u> for additions)	Proposed Change	Review Date
 #1 - Simplify the process for people to direct their services to reduce time and effort needed to use the model. Revise/simplify the PA Guide to Participant- Directed Services (PDS) to make the guide more accessible to people unfamiliar with PDS models; Simplify bulletins and announcements about Vendor/Fiscal Employer Agent (VF/EA) and Agency with Choice (AWC) to establish clear and consistent expectations for VF/EA and AWC performance; Clarify the documentation required to comply with state and federal regulations regarding PDS services. 	×			
 #2 - Provide information and education about self-direction to individuals, self-advocates, families, supports coordinators, and providers. Provide training to participants, common-law employers, supports service workers, and natural supports on real world methods to manage the self-direction process in the VF/EA and AWC models through the PA Family Network and Self-Advocates United as 1; 	x			

 Conduct targeted outreach to AEs/SCOs with low participation in PDS to encourage increased use of PDS; Support the PA Family Network to educate families about the self-direction option. #3 - Assure the availability of fiscal intermediary services. Permit more than one AWC to operate within a county/AE, allowing greater access to AWC services and expanded participant choice. #4 - Provide training to Agencies with Choice on operation and ODP recommendations to 	x	Retire	Standard operating now.	
increase consistency of practice.				
 #5 - Ensure personal choice and control over all aspects of life are supported for every person. Apply the "Individual Rights" sections of Chapter 6100 to support choice and control over all aspects of individuals' everyday lives; Use data analytics to track and measure results, and to help support the provision of technical assistance and training. 		Suggest revising but keep intent. Discuss with ISAC.		
 #6 - Build capacity in understanding and supporting people with nontraditional communication needs with an emphasis on self- direction, choice, and control. Communicate expectations regarding the link between effective communication and the ability to control one's own life. 		Retire	This more or less is what Recommendation #1 is all about. <i>Consider proposed</i> <i>new strategy under Rec #1.</i>	

ISAC REC #2 – Proposed New Strategy(s)

Update the Vendor/Fiscal Employer Agent Bulletin to reflect current standards, requirements, and expectations.

For discussion:

- 1. Need for increased monitoring of evaluative activities? (to respond to concerns about quality of service provision) Look at IM data to see if individual was self-directing?
- 2. What can we do to influence growth?

Recommendation #5 – Promote Health, Wellness and Safety: Promote physical and mental health, wellness, and personal safety for every individual and his or her family. Promoting physical and mental health means providing information about health and wellness, emotional support, and encouragement. Tools that help every individual adopt a healthy lifestyle — including good nutrition, healthy diets, physical activity, and strategies to reduce and manage stress and protect oneself from all types of abuse and exploitation — must be provided.

Current Strategy	Keep As-Is	Retire or Revise To (strikethrough for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
 #1 - Direct people to existing resources with information on healthy living. Create a resource guide with available resources by region, and post online; Provide outreach and education for Supports Coordinators on these topics to promote incorporation into the ISP; Continue to promote waiver services among professionals to become eligible providers for available waiver services for wellness; Promote health literacy to increase individuals' capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. 		 Direct people to existing resources with information on healthy living. Create a resource guide with available resources by region, and post online; Provide outreach and education for Supports Coordinators on these topics to promote incorporation into the ISP; Continue to promote waiver services among professionals to become eligible providers for available waiver services for wellness; Promote health literacy to increase individuals' capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. 	Resource guides as envisioned have been problematic with attempts at developing, as well as maintaining. This may be better suited as a sub-strategy under Address Healthcare Disparities.	
<u>#2</u> - Increase the use of Mental Health First Aid (MHFA) among stakeholders across the state.		Retire	After several years of promoting and supporting MHFA sessions for stakeholders via MFP funding, this initiative was ended. Various MHFA resources exist in PA.	

 <u>#3</u> –Update, disseminate, and provide training on sexuality guidelines. Identify experts in the field in PA available to support individuals and families with recommendations and strategies. 	 Update, disseminate, and provide training on sexuality guidelines. Support and promote resources for healthy sexuality, problematic sexual behavior, and recovery from sexual trauma. Identify experts in the field in PA available to support individuals and families with recommendations and strategies. Promote and build capacity for availability of therapists with expertise in addressing trauma in individuals with IDA. Address healthcare disparities for in dividuals with intellectual disability 	Sexuality guidelines were developed and disseminated as the result of a workgroup. Recommend broadening the scope of the strategy to include previous intent but also addressing a wider range of sexuality topics, including trauma. Work with TRAIN, which will be noted to support strategies for Rec #6, also will support this strategy. This strategy needs to be broader
 and wellness into the individual planning process. Use the Health Risk Screening Tool (HRST) to inform individual planning; Offer training on the Fatal Four to broader audiences in both live and on-line formats. 	 <u>individuals with intellectual disability,</u> <u>autism, and other developmental</u> <u>disabilities.</u> Incorporate a focus on health and wellness into the individual planning process. Use the Health Risk Screening Tool (HRST) to inform individual planning; Offer training on the Fatal Four<u>Five</u> <u>and other health conditions</u> to broader audiences in both live and on-line formats. <u>Pursue new waiver service for</u> <u>telehealth assessment availability with</u> <u>healthcare professionals with expertise</u> <u>in supporting individuals with IDA.</u> 	than just discussing the individual planning process. Suggest making this strategy #1.

<u>#5</u> - Health Care Quality Units will	х			
develop outreach to promote				
wellness to individuals and self-				
advocates living with families,				
including people on the waiting list,				
engaging partners including ASERT,				
SAPNA, the PA Family Network, and				
Temple.				
<u>#6</u> - Broaden the use of physical and	х			
behavioral health data to				
understand health, wellness and				
safety needs and risks, and to				
inform ODP planning and direction				
of supports such as waiver				
development, HCQU and ASERT				
activities.				
		ISAC REC #5 - Proposed New Strategy((s)	
Increase preparedness for bio	ogical, e	nvironmental, and other critical situations the	at require significant and potentially s	udden changes
in standard activities in order	to prote	ct health and wellness.		
Create an initiative to promote	e physica	al activity among all stakeholders		

Recommendation #7 – Develop and Support Qualified Staff: People with disabilities receiving services benefit when staff who support them are well trained. Values, ethics, and person-centered decision-making can be learned and used in daily practice through mentorship and training. Providing professional training that strengthens relationships and partnerships between individuals, families, and Direct Support Professionals (DSPs) will improve the quality of support.

Current Strategy	Keep As-Is	Retire or Revise To (strikethrough for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
 #1 - Adopt the Direct Work Force Core Competencies, which were developed by the Centers for Medicare and Medicaid Services (CMS) as an expectation. a. To further this actively support and promote the Core Competencies through the following: Policy Bulletins; Training: As a part of this, conduct a review of MyODP.org for existing course content pertaining to Core Competencies to identify areas where augmentation of course material is needed, and to help identify and promote the use of this existing material; Other Outreach. b. Incentivize Core Competencies by: Identifying if there are any providers who have adjusted pay scales to promote/incentivize completion of Core Competencies; 		For ISAC Discussion: Revise to current landscape with credentialling opportunities through ARPA and direction proposed with selective contracting.		

 Reviewing the payment models of other states to report on how Core Competencies are incentivized elsewhere; Utilizing Residential Services Learning Collaborative (RSLC) meetings to provide information on creative incentive methods. Engage families and individuals in the discussion of Core Competencies to include: An explanation of the Core Competencies; Conveying ODP's expectations regarding the implementation of Core Competencies. Facilitating a discussion as to whether or not Core Competencies should be tied to pay. #2 - Discuss opportunities to promote 	Retire	NADSP review of ODP courses for
<u>#2</u> - Discuss opportunities to promote additional credentialing and competencies.	Ketire	ADSP review of ODP courses for acceptable courses toward credentialing will be complete in October 2023 and will include almost all 6100 annual and orientation trainings.
<u>#3</u> - Maintain and encourage significant DSP participation at Residential Strategic Learning Collaborative (RSLC) meetings.	Retire	Residential Strategic Learning Collaborative (RSLC) has moved to a specialized content focus. Participating provider team composition includes lead DSP as a role.

<u>#4</u> - ODP will establish and implement credentialed training programs based on standard curriculum and testing in an attempt to maintain and develop qualified staff, decrease the rate of turnover, and promote staff retention and provider capacity. This strategy will include training for DSPs as well as other professionals, such as Benefits Counselors.	x		NADSP review of ODP courses as acceptable courses toward credentialing will be complete in October 2023 and will include almost all 6100 annual and orientation trainings.	
 #5 - Build incentives into the reimbursement system to promote staff credentials, encourage professional growth and development, and adopt incentive-based training and credentialing. This includes: Reviewing other states' models, where success has been achieved, to learn from those who have attempted and have identified hurdles to progress; Obtaining consultation from The National Alliance for Direct Support Professionals (NADSP) as a mean of considering their extensive credentialing system. 		 #5 - Build incentives into the reimbursement system to promote staff credentials, encourage professional growth and development, and adopt incentive-based training and credentialing. This includes: Reviewing other states' models, where success has been achieved, to learn from those who have attempted and have identified hurdles to progress; Obtaining consultation from The National Alliance for Direct Support Professionals (NADSP) as a mean of considering their extensive credentialing system. 		
<u>#6</u> - Promote the use of and improve the usability and functionality of MyODP.org, to include allowing for greater access, upgrading the Learning Management System (LMS) software, and promoting the College of Direct Support and other courses available via the site.	x		Although improvements have been made, this is important to keep, to ensure we stay on top of maintaining its efficiency and continued access for all professionals and stakeholders.	

ISAC REC #7 - Proposed New Strategy(s)

Recommendation #8 – Simplify the System: The system of supports and funding of those supports must be as straightforward and uncomplicated as possible. This will allow for greater understanding and use of the system by everyone — most importantly the individual needing and receiving supports.

Current Strategy	Keep As-Is	Retire or Revise To (strikethrough for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
 <u>#1</u> - Redesign the ISP process and format to reduce the time, simplify the document and increase the positive experience of individuals, self-advocates and families, and all stakeholders. <u>#2</u> - Provide a user-friendly useful planning tool and document that increases flexibility and ease of access for the individual, self-advocate, family, and supporters to manage services and supports. 	X	Redesign the ISP process and format to reduce the <u>maintenance</u> time, streamline <i>simplify</i> the <i>document</i> <u>individual plan</u> , and increase the positive experience of individuals, self-advocates and families, and all stakeholders.	Provides clarification on the activities we are aiming to save time on related to the ISP process. Seeks to use more precise language on how we intend to simplify the ISP.	
		ISAC REC #8 - Proposed New Strategy(s)	·	
# 3 (Proposed) - Design an enterprise ca	-	ISAC REC #8 - Proposed New Strategy(s) ment system to optimize and automate (where Il as other Medical Assistance (MA) systems, vi	. ,	

For Discussion: Should we create a new strategy specific to the Services and Supports Directory (SSD)?

Recommendation #9 – Improve Quality: Together we must plan and deliver services and supports that adhere to our values, measure personcentered outcomes, and continuously improve an individual's quality of life. All stakeholders must be engaged in the process of measuring how well services assist people in achieving an everyday life.

Current	Кеер	Retire or Revise To	Reason	ISAC
Strategy	As-Is	(strikethrough for removal and <u>underline</u> for additions)	Proposed Change	Review Date
#1 - Maintain the Information Sharing and Advisory Committee (ISAC) as ODP's Stakeholder Quality Council, the entity that creates a detailed series of recommendations, strategies, and performance measures to guide the Office of Developmental Programs (ODP) and gauge its progress in achieving the important goals put forth in Everyday Lives. The ISAC will continue to use the quality improvement framework to plan and implement improvements, assess whether we achieve outcomes as intended, make changes as needed, and embed successful practices in the system.		Maintain the Information Sharing and Advisory Committee (ISAC) as ODP's Stakeholder Quality Council. the entity that creates a detailed series of recommendations, strategies, and performance measures to guide the Office of Developmental Programs (ODP) and gauge its progress in achieving the important goals put forth in Everyday Lives. Publish an ODP ISAC annual report to show the results of implementation of approved recommendations and strategies across the system. The ISAC will continue to use the quality improvement framework to plan and implement improvements, assess whether we achieve outcomes as intended, make changes as needed, and embed successful practices in the system.	Merged strategies #1 and #3. The strategies remain the same with more concise language.	
#2 - Continue to offer ODP's Quality Management (QM) Certification Curriculum to build system capacity in applying quality management principles and practices across the system.	X			

#3 - Develop and disseminate an ODP annual report to show the implementation of approved recommendations and strategies	Revised and merged with strategy #1.	Merged strategies #1 and #3. The strategies remain the same with more concise language.
across the system. <u>#4</u> Create a provider profile to assist individuals, self advocates, families, and supporters to make informed choices about providers and services.	Retire	Provider profiles created and available on MyODP. Selective contracting will include preferred status/tiers based on comprehensive quality metrics and these tiers will be available to stakeholders for decision- making.
<u>#5</u> - Develop, implement, and maintain Quality Assessment and Improvement (QA&I) process as ODP's annual monitoring of the system's performance in supporting individuals and families.	Develop, implement, and Maintain Quality Assessment and Improvement (QA&I) <u>as</u> <u>ODP's annual</u> process <u>for</u> as ODP's annual monitoring of the system's performance in supporting individuals and families. <u>Publish</u> <u>a QA&I annual report to show the results.</u>	Strategy remains the same with more concise language. Added commitment to publish QA&I results annually.

ISAC REC #9 - Proposed New Strategy(s)

4) Continue to engage in annual participation of Independent Monitoring for Quality (IM4Q) and National Core Indicators (NCI) surveys as valuable tools for collecting satisfaction data about how individuals and families feel about services received from the ODP system. ODP will: a) continue to use this data to measure the progress of identified ISAC performance measures,

b) continue to scan the environment for additional opportunities for use of this data, and

c) adjust data collection practices, as needed, to address any new Center for Medicare and Medicaid (CMS) Home and Community-Based Services (HCBS) Quality Measure Set requirements.

5) Improve quality of services through establishment and application of performance standards, use of standardized quality metrics, and aligning payment with outcomes.

6) Develop and refine an ODP Risk Management (RM) Framework. This involves mapping and evaluating existing RM activities for opportunities for improvement, in the system intended to help keep individuals safe. Goals of this work include use of a framework to develop a common language and shared understanding across the system, having effective strategies and efficient tools to address various risk types within the system, and overall reduced harm to individuals.

7) Revise the Quality Management (QM) Strategy Bulletin and include incorporation and alignment with Risk Management (RM) strategies to support greater understanding of ODP's Culture of Quality and Safety.* Fostering a Culture of Quality and Safety can lead to better outcomes for people receiving services.

*For quick reference in discussion: A **Culture of Quality** involves a set of common characteristics that include desire to understand contributors to quality issues, recognition that mistakes occur, and blame is not useful, shared responsibility for identifying and acting on improvement opportunities, and ongoing feedback across all levels to achieve quality. A **Culture of Safety** fosters a culture that is focused on preventing, detecting, and minimizing exposure to danger and errors without blaming others. In a **Culture of Quality and Safety** there is a shared understanding of trust and learning, as well as a deep commitment to the common mission, vision, and values among all agencies and stakeholders. Fostering a Culture of Quality and Safety can lead to better outcomes for people receiving services and those caring for them to ensure freedom from harm.

Recommendation #10 – Expand Options for Community Living: Expand the range of housing options in the community so all people can live where and with whom they want to live. Listening to people with disabilities and their families, providers, and Support Coordinators will help people locate affordable and accessible housing, find house mates, and identify housing resources/supports and other government benefits that, when blended with natural supports, will promote an everyday life.

Current Strategy	Keep As-Is	Retire or Revise To (strikethrough for removal and <u>underline</u> for additions)	Reason Proposed Change	ISAC Review Date
#1 - Review the Housing Transition and		Retire	Revisions completed during waiver renewal.	
Tenancy services to determine if it is		Kethe	It should be standard operating procedure	
meeting the needs of individuals			to review effectiveness of services.	
#2 - Develop a training for SCOs, AEs and	x			
providers on the Housing Transition and				
Tenancy service.				
• The training should include more				
information on the financial impact.				
 Provide training to on the varied 				
options for community living.				
<u>#3</u> - Expand understanding of what is	х			
possible.				
 Promote development and 				
distribution of				
education/training/technical				
assistance to individuals and self-				
advocates to increase knowledge of				
options and ability to make informed				
choices.				
• Ensure development and distribution				
of education/training/technical				
assistance for families through the				
Supporting Families initiative. This				
should include planning for the future so that families can explore what is				
possible. The education should				
include items like ABLE accounts,				

suctaining boucing, and community			
sustaining housing, and community			
support.			
Evaluate and improve the education			
and support for individuals to budget			
for their housing needs.			
<u>#4</u> - Expand the Life Sharing service to	Retire	Completed	
allow for the enrollment of birth families			
as Life Sharing providers.			
Begin to develop material to help SCs			
and families understand the benefit			
to delivering this service.			
Hold listening session with life sharing			
providers and individuals and their			
families to brainstorm on how to			
expand the supports.			
<u>#5</u> - Continue to develop supported living	<u>#5</u> - Continue to develop	Added the Independent Living transition	
service availability that enable individuals	supported living service	payments as another sub-strategy to	
and self-advocates to live in their own	availability that enables	promote supported living. The incentive	
homes with the support of an agency	individuals and self-advocates	payments were added since the last revision	
available to provide guidance and	to live in their own homes with	to the strategy.	
assistance as needed.	the support of an agency	57	
Continue to promote this service as	available to provide guidance		
an alternative to residential	and assistance as needed.		
habilitation.	• Continue to promote this		
Develop more specific material to	service as an alternative to		
help SCs explain the benefit of the	residential habilitation. Use		
services to individuals and families.	the transition incentive		
	payment to assist in		
	promoting the supported		
	living service.		
	 Develop more specific 		
	 Develop more specific material to help SCs explain 		
	the benefit of the services		
	to individuals and families.		

 #6 - Expand choice of options to include creative housing alternatives. Continue to work on developing more integrated options that support the Everyday Lives (EDL) philosophy. 	 <u>#6</u> Expand choice of options to include creative housing alternatives. Continue to work on developing more integrated options that support the Everyday Lives (EDL) philosophy. 	Merges intent of strategies #6 and #7 and replaces them.	
	Replace #6 and 7 with: <u>Explore implementation of</u> <u>ODP HCBS housing vouchers to</u> <u>support affordable accessible</u> <u>housing options for individuals</u> <u>with IDD.</u>		
 #7 - Support the development of safe and affordable housing options that meet the individual's and self-advocates personal preferences. Work with the providers of the Housing transition and pre-tenancy service to identify options that support individual preference. 	<u>#7</u> -Support the development of safe and affordable housing options that meet the individual's and self-advocates personal preferences. Work with the providers of the Housing transition and pre- tenancy service to identify options that support individual preference.	Merges intent of strategies #6 and #7 and replaces them.	
	Replace #6 and 7 with: <u>Explore implementation of</u> <u>ODP HCBS housing vouchers to</u> <u>support affordable accessible</u> <u>housing options for individuals</u> <u>with IDD.</u>		

 #8 - Provide access to home modifications, transportation, and assistive technology to support people to live in their homes. Continue to help SCs and providers learn how to access technology to promote independence. 	х			
		ISAC REC #10 - Proposed New Str	ategy(s)	
Monitor and evaluate the number of qualif	ed provi	iders of Housing Transition and Te	nancy Services across the state to ensure suffici	ent access.