



NYS Office of Mental Retardation & Developmental Disabilities

Putting People First

Interim Report on
An Update to the OMRDD Five Year
Comprehensive Plan: 2006-2010

Eliot Spitzer, Governor
Diana Jones Ritter, Commissioner



Chapter 1: Background and Context

The Office of Mental Retardation and Developmental Disabilities (OMRDD) issued the *Update to the OMRDD Five Year Comprehensive Plan: 2006-2010* on October 1, 2007. This *Plan* summarized the major accomplishments that occurred in the developmental disabilities services system related to the goals set forth in the prior year's *Plan*.

In developing the *Plan*, OMRDD's new leadership team reaffirmed the agency's deep commitment to the principles of individualized services and person centered design. These are the guiding principles and values that continue to infuse the work we do, both in improving existing services and settings, and informing the design of new service proposals. OMRDD's long-standing commitment to working with all its partners, especially people with developmental disabilities and their families, in fulfilling the mission of the agency was equally affirmed.

While the 5.07 *Plan Update* reflects overall progress on goals set during the previous administration, this document also reflects OMRDD's movement towards realigning priorities to implement the agenda being set by Governor Spitzer and OMRDD. In this sense, the October 2007 *Plan Update* was presented as a transition document setting the stage for future planning and policy development this year. OMRDD's vision, mission and strategic themes for advancing Governor's Spitzer's "People First" and "One New York" agendas have begun to be articulated in multiple forums and will be more fully reflected in the Five Year Comprehensive Plan to be submitted in October 2008. However, as an important first step, OMRDD's mission was restated and reaffirmed simply and powerfully as

“We help people with developmental disabilities lead richer lives.”

The mission statement is founded on four key person-centered outcomes identified in the OMRDD vision;

People with developmental disabilities enjoy meaningful relationships with friends, family and others in their lives, experience personal health and growth, live in the home of their choice and fully participate in their communities.

During the next several months OMRDD will assess the status of these important outcomes through a public process in developing the Five Year Comprehensive Plan for 2008-2012. Various information gathering processes, including public forums with all stakeholders, will be engaged. This assessment will establish the foundation for priority activities in the next Five Year Comprehensive Plan.

This Interim Report is provided in accordance with Mental Hygiene Law, Section 5.07 (b)(3) and further details OMRDD's efforts to fulfill priorities identified through a comprehensive planning process undertaken in partnership with our many invested stakeholders, including people with developmental disabilities, their families, providers and staff. It also reflects those priorities established by Governor Spitzer and fully embraced by OMRDD.

Chapter 2: Progress Report and Stakeholder Participation

Systems Transformation

In the fall of 2007, OMRDD began the implementation phase of the *Real Choice Systems Change, Systems Transformation Grant* awarded by the Centers for Medicare and Medicaid Services. This grant is intended to advance three primary goal areas:

- To increase choice and control of supports and services, including expansion of self-directed service options
- To create a system to more effectively manage funding for long-term supports
- To coordinate long-term supports with affordable and accessible housing

Over 120 people from all OMRDD constituency groups, including self-advocates, family members, provider associations, provider agencies, advocates, OMRDD staff and staff from collaborating state agencies assisted in the development of a strategic plan to identify ways to accomplish change and outline clear measurable outcomes. Key outcomes addressed with the ongoing assistance of these parties include:

- Development of an infrastructure to assist people in accessing individualized services and supports
- Development of service and support plans that reflect culturally diverse, person-centered values, promote efficient communications, and enhance staff service
- Provision of a quality, stable workforce that supports individualized person-centered supports and services
- A strengthened emphasis on quality of life outcomes, as expressed by self-advocates and families, which will better define ways to measure provider and system success through improvements in survey procedures and outcome measurement
- User friendly public access to information on key indicators of state and voluntary provider quality and performance, as well as individual satisfaction with supports and services
- Development of funding strategies and procedures that are more flexible, responsive, transparent, and creative, with user-friendly and culturally competent information available to all individuals, families and agencies
- Increased collaboration and coordination among state agencies to meet the service and support needs of people with multiple disabilities
- Improved capacity and access to affordable person-controlled housing, with well coordinated supports and services
- Development of new partnerships with federal, state, municipal, voluntary nonprofit agencies and other organizations to foster the coordination of supports and services with affordable housing
- Development of a multimodal, multicultural marketing campaign to increase access to information on housing and supports
- Greater reliance upon electronic record keeping, to promote accuracy, portability and privacy in the utilization and coordination of individualized clinical and service plan information, and increased staff time available for face-to-face services and supports

These strategies will build the platform upon which, over the next several years, OMRDD will accomplish much of its mission to “help people with developmental disabilities lead richer lives.” The evaluation component of the *Real Choice Systems Change Grant* will establish a framework of metrics to monitor progress toward these goals.

New Support and Service Development

During the spring and summer of 2007, OMRDD engaged in a comprehensive evaluation of the Options for People Through Services (OPTS) initiative. A survey assessing all facets of the initiative was conducted and results were reviewed with a Steering Committee comprised of system stakeholders. While many of the outcomes of the OPTS initiative were heralded

for demonstrating innovation, flexibility and a person-centered focus, recommended improvements led to a decision to “retire” the initiative in late 2007. A new methodology for service development that is values-based, inclusive and responsive to both state and local priorities was proposed. This fresh approach will also provide OMRDD with opportunities to rebalance the services portfolio, resulting in increased individualization and an emphasis on more person-centered approaches to services and supports. The new methodology being rolled out in 2008 will:

- Bring authority and leadership activities back to local DDSO districts and closer to the people
- Re-establish local priorities as a key factor in service design and approval
- Ensure a fair, equitable, and inclusive process for identifying those local priorities

Allocated resources will be used to: (a) enhance vital services to assist families in supporting their family members with disabilities to live at home as long as it is in the best interest of the person and his or her family; (b) continue the nationally acclaimed NYS-CARES program for supporting people who are requesting residential supports and services; (c) provide for innovation and expansion of day and employment opportunities; and, (d) allow for reconfiguration of existing services to achieve greater individualization.

Inter-Agency Collaboration

People First - OMRDD participated in the “*People First Coordinated Care Listening Forums*” throughout the spring and summer of 2007. These forums were a watershed event, underscoring the Governor’s emphasis on putting people first through greater collaboration among the state’s mental hygiene and human services agencies, including the OMRDD, the Office of Mental Health (OMH), the Office of Alcoholism and Substance Abuse Services (OASAS) and the Department of Health (DOH). A final report from the forums was issued in November 2007 which outlined the critical issues individuals and families face in trying to obtain quality health and mental hygiene services. It also delineated major steps the agencies are taking to break down systems barriers and provide better coordinated, higher quality, and more accessible seamless supports and services for people with multiple disability needs. The Report of the People First Coordinated Care Listening Forums can be viewed at http://www.omr.state.ny.us/images/hp_peoplefirst_fullreport.pdf.

Dual Diagnoses - One of the most pressing issues identified was the challenge people face when they have both a diagnosis of developmental disability and a mental illness (dually diagnosed) and attempt to access services from both of these systems. In response to this concern, OMRDD and OMH have developed a model for collaboration aimed at providing supports and services that will best provide the person with services in the most integrated community setting appropriate to the person’s needs. The model presumes that both OMRDD and OMH staff at the local level are continually involved in creating solutions that work for people with dual diagnoses; that neither agency can walk away. In order to facilitate local efforts for supporting people with dual diagnoses, essential elements were outlined:

- All community providers must possess the basic competencies to serve people with developmental and mental health challenges
- The OMRDD and OMH service systems must cooperate and have the capacity and training to provide technical assistance in a timely manner
- Localities must develop systems for providing enriched short-term supports for people with dual diagnoses under those circumstances where such supports will make a difference in achieving successful outcomes
- Development of regional specialized residential programs that will serve the needs of people with dual diagnoses during times of crisis
- Ongoing leadership and management from OMRDD and OMH regional offices, and the local mental hygiene authorities which are essential to achieving the desired outcomes

Inter-Office Coordinating Council - The reinvigoration of the Inter-Office Coordinating Council (IOCC) is another key initiative intended to facilitate improved interagency cooperation around multiple disability issues. The IOCC was reconstituted in 2007 and has begun formal activities to address short- and long-term goals aimed at systematically eliminating the structural, financial, and regulatory barriers that limit access to services for people with multiple disabilities and cross-system needs. OMRDD is a partner to this Council, along with OMH and OASAS. These agencies have asked the Department of Health, State Education Department (SED), Office of Children and Family Services (OCFS) and the

Developmental Disabilities Planning Council to serve as ad hoc members of IOCC to facilitate additional coordination with these systems as well. Planning and Program Committees are being formed to address specific priority topics. Regular meetings of the IOCC are scheduled to take place in 2008, the first of which occurred on January 18, 2008. At this meeting, the IOCC's annual report to the Legislature, outlining major initiatives undertaken by the IOCC during 2007, was approved. This report can be viewed at <http://www.oasas.state.ny.us/pio/collaborate/IOCC/documents/IOCC2007Report.pdf>.

Most Integrated Setting Coordinating Council - The Most Integrated Setting Coordinating Council (MISCC), under the continued leadership of OMRDD, has continued to facilitate planning around community-based housing challenges. As a result of these coordinated efforts, new funding and opportunities for integrated housing were recently announced for all people with disabilities. In addition, the MISCC has developed committees to address the universal challenges of transportation and employment, essential elements of quality of life repeatedly commented upon at the *People First Forums*, and highly correlated with personal satisfaction and well being. Additional information about the MISCC and its work can be found at <http://www.omr.state.ny.us/MISCC/index.jsp>.

Mental Hygiene Interagency Planning Workgroup - Over the course of the past year, a collaborative effort to assess statutorily required planning activities was initiated between the Conference of Local Mental Hygiene Directors, OASAS, OMH and OMRDD. The Mental Hygiene Interagency Planning Workgroup achieved agreement for the development of a universal web-based application for local services planning. The application, hosted by OASAS, will establish a common approach to local services planning, including overarching themes and priorities, consistent processes, timetables, and connections to statewide planning and budgeting. In addition, the joint planning activities provide new opportunities for collaboration on cross-system issues, and will reduce the planning burden on counties by reducing unnecessary confusion and duplication of effort in completing three distinct local plans.

Other Interagency Collaborations - OMRDD is working with the SED on a number of initiatives including: (a) improving transition services to those aging out of the school system; (b) returning those individuals currently in out-of-state residential school settings to New York; and, (c) improving supports and services to those with significant behavior challenges and with autism spectrum disorders. OMRDD is collaborating with OCFS to assure the smooth implementation of the OCFS Bridges to Health, Home and Community Based Services Waiver. OMRDD is also working to with OCFS to better support those with developmental disabilities who reside in Youth Facilities Programs.

Workforce

The availability of a quality workforce continues to be at the forefront of challenges faced by human services systems. More than 60,000 men and women carry out the day-to-day services and supports to the individuals with developmental disabilities we support. While OMRDD continues to address the workforce needs through salary increases and health benefit initiatives, recruitment, retention and training are increasing concerns, particularly given looming national population demographics about overall workforce capacities and anticipated increased demands resulting from the health care needs of the aging. In 2006, OMRDD was awarded a grant by the Centers for Medicare and Medicaid Services for Technical Assistance from the National Direct Service Workforce Resource Center to examine direct support workforce training issues, direct support career development issues, and the unique job challenges faced in providing services to people through self-directed program models. A report called *Ensuring Stability and Quality in New York State's Direct Support Workforce* was issued by OMRDD in December 2007. Key findings derived from national, state and local experience in workforce support are outlined in that report. As a follow up, in November 2007, OMRDD issued a Request for Proposals for Quality Improvement Demonstration Programs aimed at enhancing direct support worker quality, career path options, and retention. This was done as a result of a legislatively initiated grant project. Over 100 letters of intent were received in response to the call. In addition, OMRDD's Central Office now includes a new Division of Workforce and Talent Management to focus our workforce efforts. OMRDD plans to establish an Advisory Committee on OMRDD Talent Management. This group will reach out to experts from the field, including nonprofit providers, who are already doing outstanding work in this area. As well, OMRDD will bring to the table representatives from research institutes and universities, and partner with self-advocates and parents, to chart a future course that will result in a high quality, stable and valued workforce.

National Core Indicators

OMRDD is committed to ensuring the highest quality of government performance and accountability by adopting system-wide, metrics-driven self management tools. One of the new initiatives OMRDD is embarking on to measure system performance using nationally recognized standards is the National Core Indicators (NCI) project. In January 2008, OMRDD became the 27th state to join the project spearheaded by the National Association of State Directors of Developmental Disability Services. Participation in this project allows states to benchmark the performance of their state's developmental disabilities service system against the performance of other states. The overall performance of state developmental disabilities agencies is assessed through consumer and family satisfaction surveys, and assessment of data on employment, staff turnover, mortality, incident reporting, and Boards of Directors compositions and other indicators. By providing annual comparative data on benchmarks, the NCI project will help OMRDD monitor and improve system performance resulting in better outcomes for people, families, providers and other key system stakeholders.

As OMRDD has undertaken each step necessary to achieve the accomplishments outlined above, it has continued to give the highest regard and credence to the partnerships and relationships established through the Mental Retardation and Developmental Disabilities Advisory Council, the Family Supports Services Statewide Committee, the Provider Council, Parent to Parent of New York, the Self-Advocacy Association of New York State, the New, Emerging and Multi-Cultural Provider Association, and the many other participatory venues through which information and feedback are gathered for the purposes of furthering its vision and mission. Opportunities for enhancing stakeholder participation to ensure representation of New York State's rich diversity are always sought, and procedures for gathering and processing this input are assessed to ensure diversity has been achieved and valued.

Chapter 3: Executive Budget and Related Legislative Proposals Highlights

It is essential to underscore that OMRDD's central mission, key priorities, and immediate activities are supported by and wholly consistent with the Governor's 2008-09 Executive Budget Recommendation. OMRDD and its sister mental hygiene agencies have worked closely over the past twelve months to ensure Governor Spitzer's vision is being realized through specific program initiatives, restructuring, collaborations, and identified action plans and products, some of which have already been discussed. While these previously noted initiatives and activities are significant, accomplishment of priority goals is contingent on continued work in a number of key areas proposed in the 2008-2009 OMRDD budget.

To support these outcomes, the 2008-09 Executive Budget Recommendation for OMRDD:

- Puts people first, by expanding opportunities for individualized, person-centered services while creating an environment of fiscal prudence and accountability
- Promotes cross-agency collaboration that creates integrated solutions to help build "One New York"
- Initiates Medicaid rationalization and restructuring resulting in efficiencies through both internal and collaborative efforts
- Enhances the capacity, quality, and stability of the developmental disabilities workforce, as well as reaffirms OMRDD's partnerships with other stakeholders, including individuals with developmental disabilities, families, and nonprofit providers and their workforces
- Supports the creation of an Autism Spectrum Disorders Consortium, to be coordinated through the Institute for Basic Research, that will bring together academic and research facilities along with program providers, parents, advocates and educational programs to address the needs of people with autism in New York State. The Consortium will take a coordinated approach in such areas as epidemiology, brain pathology and tissue research, treatment approaches and training

Specific budget requests that support the above five critical strategies for system improvement are outlined below.

Individualized, person centered, and community-based services and supports

- **Continued Downsizing and Redefinition of Institutional Capacity** - Closure of the West Seneca Developmental Center will result after the transition of approximately 80 individuals from the institution into the surrounding communities over the next three years. This is part of a larger, ongoing, multi-year strategy to transition people into community settings from institutional facilities. OMRDD will proceed, cognizant of the need to serve people appropriately in the community, while continuing to make the best use of our valuable staff.
- **NYS- Creating Alternatives in Residential Environments and Services (NYS-CARES)** - Continuation of the nationally acclaimed NYS-CARES initiative that provides for out-of-home residential needs of individuals with developmental disabilities who are waiting to move into their own homes. While continued service expansion is needed, OMRDD will initiate a rebalancing of the system of supports and services to achieve greater individualization of services in ways, while simultaneously enhancing the quality of care throughout the entire system.
- **Individual Supports** - The provision of additional supports for individuals with developmental disabilities living with their families (e.g., respite, crisis intervention) is crucial in order to preserve family unity. The 2008-09 Executive Budget Recommendation provides \$7 million in full annual resources to expand family supports and services to some 4,300 families, including \$2 million to support families who care for individuals with developmental disabilities who have autism or other challenging behaviors.
- **Employment and Personal Growth Opportunities** - OMRDD proposes an increase in supported employment reimbursement, a measure that will provide an incentive for nonprofit providers to start, or expand, supported employment opportunities. In addition, 128 new self-advocate internships within both state and voluntary human service agencies will be made available to bolster the workforce and provide employment opportunities for people with developmental disabilities.
- **Research** - Provision of important research efforts and other services for individuals who have autism or autism spectrum disorders.
- **Ensuring Excellence** - A stronger quality of life emphasis on outcomes for the individual, organizational quality improvement, and new training and technical assistance to service providers to ensure an enhanced and system-wide standard of excellence.

Interagency collaboration

- OMRDD will continue to collaborate with other state agencies in the development of residential and other programs statewide to serve: (a) children with developmental disabilities who have intensive medical or behavioral needs; (b) children and adults with Autism Spectrum Disorder; and, (c) to address the needs of other young people who are eligible for OMRDD services, particularly those who are currently being served out-of-state.
- Building on the recommendations of the People First Forums report, collaboration among government agencies to ensure that people get the services they need, and that they receive those services in a coordinated, timely and cost-effective manner.

Workforce enhancement

- **Salaries and Benefits** - Enhancements to the salaries and benefits of direct support professionals to assist in recruitment and retention efforts continue. Resources in the form of cost of living adjustments (3.52% in trended OMRDD programs or 3.2% in all other OMRDD programs) are included. The cost of living adjustment commitment is extended for an additional three years, through 2012. Also, continuation of the healthcare enhancement for direct care staff is included as well.
- **New Internships** - The addition of 128 new internships within both state and voluntary human service agencies to

bolster the workforce and provide employment opportunities for people with developmental disabilities. This will double the capacity of the current internship initiative.

- **Exploring Improved Approaches** - Funding through an RFP process to enhance quality of care through improved direct support professional recruitment and retention is included. This funding will support pilots and demonstration programs that are designed to achieve positive outcomes for direct support professionals.
- **Renewed Focus** – OMRDD will create a new Division of Workforce and Talent Management to attract and deploy the most qualified staff possible.

Medicaid rationalization and restructuring

OMRDD recognizes that providing high quality supports and services demands a high level of personal responsibility and fiscal accountability. To responsibly maximize revenues, OMRDD will:

- Work with partnering nonprofit provider associations, families and individuals with developmental disabilities to facilitate applications for benefits (Medicaid, Medicare, etc.)
- Ensure that clear billing and documentation standards are established and that appropriate training is provided on these standards
- Continue to conduct on-site billing and claiming reviews to ensure appropriate billing
- In support of the Governor's Health Care Reform, implement a multiyear effort for OMRDD to reform its financial platform through a series of rate/price setting restructurings, beginning with under-31-bed Intermediate Care Facility (ICF) services, HCBS Waiver day habilitation services and Article 16 clinic services, and assessment of the licensure and utilization of clinics with sister agencies
- Evaluate and modify, where appropriate, the levels of administrative reimbursement in all rate/price/fee based programs expected to produce significant savings and efficiencies while supporting the policy and program direction of OMRDD
- Realize savings in State Operations related to a reduction in overtime hours and non-personal service savings, to be achieved through enhanced expenditure controls and conversion of contract resources to less costly State staff

Summary

OMRDD has embarked on an ambitious agenda. This agenda is moving forward as the process of reenergizing and refocusing the agency's leadership and management capacity is being restructured. Business process analyses and reengineering activities are being used to reduce inefficiencies and increase performance. This includes a stronger emphasis on workforce training and talent management, strengthening and expanding quality management functions to enhance service quality and delivery, and expanding the use of Minority and Women-owned Business Enterprises. The process also addresses emerging priorities for OMRDD which include: enhanced access to individualized supports and services using a person centered approach; performance measurement; enhanced workforce diversity; development and training for both state and voluntary workforces; reimbursement reform; improved interagency collaboration; and true program reform. The outcome of these actions will result in more individualized and integrated services for people with developmental disabilities, in better opportunities for the workforce, and in improved processes for service providers.

OMRDD remains committed to person-centered outcomes related to home, relationships, work and health. The methods for achieving these goals are enhanced through the Governor's budget proposal and related reorganizational activities at OMRDD. OPTS has been officially retired as the central process for new services development in favor of a decentralized approach to service prioritization and expansion. OMRDD has renewed and expanded its commitment to afford individuals with developmental disabilities the opportunity to live in community-based settings where they can receive supports and services to meet their needs at the appropriate time. With necessary budget support, a plan will be initiated to close the Western NY Developmental Center over the next several years, and other developmental Centers are being considered for downsizing. OMRDD will also continue its efforts to move individuals from nursing facilities to community settings. Multicultural and emerging providers will be better supported to access technical assistance through a realignment of staff support at OMRDD. A commitment to support families through increased provision of respite and crisis

services is recognized. New opportunities for individualized supports, including self-directed service options, housing, flexible funding streams, and enhanced choice will be explored through Real Choice Systems Transformation grant activities. Interagency collaboration activities have been significantly enhanced through participation in the MISCC, IOCC, OMH/OMRDD Collaborative, and Interagency Planning Workgroup, and should result in improved service access for people with multiple disability needs. System performance will be benchmarked against national standards through participation in the National Core Indicators project.

Lastly OMRDD's strong partnerships with self-advocates, families, and providers, for which OMRDD is lauded, will continue to guide the agency in defining and accomplishing its mission, and helping all people with developmental disabilities to achieve meaningful and contributory lives in their communities.