



Transformation Agreement

January 1, 2014

Quarterly Report

Submission to the Centers for Medicare
and Medicaid Services

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Introduction

In keeping with the Health System Transformation for Individuals with Developmental Disabilities Agreement as defined in the Standards Terms and Conditions of New York State's Partnership Plan Medicaid Section 1115 Demonstration, this document reports to the Centers for Medicare and Medicaid Services (CMS) the completion of the January 1, 2014 Transformation Deliverable Schedule which includes progress and quarterly updates in the following areas:

- Transition information for specific residents of Finger Lakes and Taconic Intermediate Care Facilities (ICF) including residential settings;
- Progress for increasing availability of supportive housing options and the number of housing units available to persons being transitioned from ICFs and meeting HCBS standards;
- The Final Plan to Increase Competitive Employment Opportunities for People With Developmental Disabilities and progress toward increasing the number of individuals engaged in competitive employment (Appendix 1); and
- OPWDD's Self Direction Policy provided under separate cover, the number of participant self-direction training/education sessions conducted and the number of self-direction enrollees.

In addition to the above deliverables, Progress on New York's plan to adopt practice guidelines for care coordinators based on the Council on Quality and Leadership (CQL) personal outcome measures and annual assessment of managed care quality using personal outcome is included in this report (Appendix 3). This is an update to the September 1, 2013 document shared with CMS titled "OPWDD's Affirmative Commitment to Establish an Independent Person Centered Planning Process & CQL Progress".

Residential Transitions and Supportive Housing

Residential Transitions and Supportive Housing

(from CMS Special Terms and Conditions, Attachment H)

- a. *By January 1, 2014, New York will transition a total of 148 residents from the Finger Lakes and Taconic ICFs in accordance with the following milestones:*
 - iii. *the remaining 121 persons transitioned to community-based settings that meet CMS HCBS settings standards referenced in the 1915(i) Notice of Proposed Rulemaking published in the federal register in April 2012.*
- b. *At least 30% of those persons (or a total of 44 persons) transitioned from institutions, both campus-based and non-campus-based ICFs, will qualify for MFP (i.e. can be transitioned into an MFP qualified residence). New York will transition the balance of the persons in the Finger Lakes and Taconic ICF target population (who are not transitioned to MFP qualified residences) into residential settings that comport with CMS requirements for home and community-based settings as outlined in the 1915(i) NPRM. **New York must submit quarterly reports of the total number of persons transitioned to the community, the size and licensure category of the residential settings into which persons were transitioned (e.g. 4 person group home), and an assurance that the residential settings comport with CMS requirements.***

Taconic and Finger Lakes Developmental Centers are closed. The following individuals have transitioned to home and community based settings:



Individuals Assisted to Transition to Community Settings October 1 – December 31, 2013					
Name	Date	Certified Capacity	Certification Type	Meets HCBS Standards	MFP Compliant
	10/28/13	2	Uncertified apt	Yes	Yes
	10/28/13	2	Uncertified apt	Yes	Yes
	11/18/13	4	VOIRA	Yes	Yes
	12/9/13	8	VOIRA	Yes	No
	12/9/13	8	VOIRA	Yes	No
	12/9/13	8	VOIRA	Yes	No
	12/9/13	8	VOIRA	Yes	No
	12/9/13	4	VOIRA	Yes	Yes
	12/9/13	4	VOIRA	Yes	Yes
	12/10/13	4	VOIRA	Yes	Yes
	12/11/13	8	VOIRA	Yes	No
	12/11/13	8	VOIRA	Yes	No
	12/11/13	8	VOIRA	Yes	No
	12/11/13	5	SOIRA	Yes	No
	12/11/13	8	VOIRA	Yes	No
	12/16/13	4	VOIRA	Yes	Yes
	12/16/13	4	VOIRA	Yes	Yes
	12/16/13	4	VOIRA	Yes	Yes
	12/18/13	10	VOIRA	Yes	No
	12/18/13	14	VOIRA	Yes	No
	12/18/13	14	VOIRA	Yes	No
	12/18/13	14	VOIRA	Yes	No
	12/19/13	8	SOIRA	Yes	No
	12/19/13	10	SOIRA	Yes	No
	12/20/13	4	VOIRA	Yes	Yes
	12/20/13	4	VOIRA	Yes	Yes
	12/20/13	4	VOIRA	Yes	Yes
	12/20/13	14	VOIRA	Yes	No
	12/20/13	14	VOIRA	Yes	No
	12/20/13	14	VOIRA	Yes	No
	12/30/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/30/13	6	VOIRA	Yes	No
	12/30/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No



	12/30/13	6	VOIRA	Yes	No
	12/27/13	10	SOIRA	Yes	No
	12/31/13	8	SOIRA	Yes	No
	12/30/13	10	VOIRA	Yes	No
	12/30/13	10	VOIRA	Yes	No
	12/27/13	10	VOIRA	Yes	No
	12/27/13	10	VOIRA	Yes	No
	12/27/13	10	VOIRA	Yes	No
	12/27/13	10	VOIRA	Yes	No
	12/27/13	10	VOIRA	Yes	No
	12/30/13	10	VOIRA	Yes	No
	12/30/13	10	VOIRA	Yes	No
	12/30/13	14	SOIRA	Yes	No
	11/04/13	4	VOIRA	Yes	Yes
	10/31/13	4	VOIRA	Yes	Yes
	10/31/13	4	VOIRA	Yes	Yes
	12/23/13	4	SOIRA	Yes	Yes
	12/23/13	4	SOIRA	Yes	Yes
	12/23/13	4	SOIRA	Yes	Yes
	12/23/13	4	SOIRA	Yes	Yes
	12/23/13	4	SOIRA	Yes	Yes
	12/24/13	4	SOIRA	Yes	Yes
	12/24/13	4	SOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/26/13	4	VOIRA	Yes	Yes
	12/27/13	4	VOIRA	Yes	Yes
	12/27/13	4	VOIRA	Yes	Yes
	12/27/13	4	VOIRA	Yes	Yes
	12/27/13	4	VOIRA	Yes	Yes
	12/23/13	4	VOIRA	Yes	Yes
	10/3/13	6	VOIRA	Yes	No
	10/3/13	6	VOIRA	Yes	No
	10/3/13	6	VOIRA	Yes	No



	10/3/13	6	VOIRA	Yes	No
	10/3/13	6	VOIRA	Yes	No
	12/2/13	8	VOIRA	Yes	No
	12/2/13	8	VOIRA	Yes	No
	12/4/13	6	VOIRA	Yes	No
	12/5/13	6	VOIRA	Yes	No
	12/9/13	6	VOIRA	Yes	No
	12/12/13	6	VOIRA	Yes	No
	12/12/13	6	VOIRA	Yes	No
	12/16/13	6	VOIRA	Yes	No
	12/16/13	6	VOIRA	Yes	No
	12/17/13	6	VOIRA	Yes	No
	12/17/13	6	VOIRA	Yes	No
	12/17/13	6	VOIRA	Yes	No
	12/16/13	6	VOIRA	Yes	No
	12/19/13	6	VOIRA	Yes	No
	12/19/13	6	VOIRA	Yes	No
	12/19/13	6	VOIRA	Yes	No
	12/19/13	6	VOIRA	Yes	No
	12/18/13	6	VOIRA	Yes	No
	12/18/13	6	VOIRA	Yes	No
	12/17/13	9	VOIRA	Yes	No
	12/17/13	9	VOIRA	Yes	No
	12/17/13	9	VOIRA	Yes	No
	12/27/13	9	VOIRA	Yes	No
	12/27/13	9	VOIRA	Yes	No
	12/27/13	9	VOIRA	Yes	No
	12/27/13	9	VOIRA	Yes	No
	12/17/13	9	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/26/13	6	VOIRA	Yes	No
	12/26/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No
	12/27/13	6	VOIRA	Yes	No



Expanding Supportive Housing Options

Residential Transitions and Supportive Housing

(from CMS Special Terms and Conditions, Attachment H)

- c. **New York will provide quarterly updates on the progress for increasing the availability of supportive housing options, including “non-traditional housing models” such as the “Home of Your Own”, Family Care, Shared Living, Customized Residential Options, and AFI. Each quarterly update will include the number of new housing units that are available to persons being transitioned from ICFs, and meet CMS standards for HCBS settings.**

During the 4th Quarter of CY 2013, OPWDD implemented the CMS-Housing Capacity Building Initiative for Community Living Project in two regions: Region 1 (Western New York & Finger Lakes); and, Region 5 (Long Island). The purpose of the training was to support New York State staff in expanding access to regular, integrated housing for people who are institutionalized. This training initiative was a major step towards OPWDD’s commitment to increase supportive housing opportunities for people with intellectual and developmental disabilities. In addition, OPWDD saw this training as an opportunity to aggressively address issues around housing for persons with intellectual and developmental disabilities and to meet the goal of expanding housing options in the most integrated settings possibility.

The CMS-Housing Capacity Building Initiative for Community Living Project was not only a training, it also was an educational resource that laid the foundation for the creation of an infrastructure to support OPWDD’s entire *Continuum of Housing Options* for people with intellectual and developmental disabilities.

OPWDD collaborated with the Department of Health (DOH), Division of Long Term Care and the CMS-Funded Project Director from New Editions Consultants and Technical Assistance Consultants from Advocates for Human Potential, Inc., to plan, develop and implement a highly successful two-day in person training for key stakeholders in the OPWDD and DOH systems, local housing authorities and other housing groups.

The Community Living Project was aptly entitled, “*Accessing Housing Resources for People with Disabilities Transitioning from Institutions to the Community.*” The learning objectives were as follows:

- Participants will be able to identify at least four new sources of existing housing in their area.
- Participants will be able to analyze a Public Housing Authority (PHA) plan.
- Participants will be able to describe methods for collaborating with key housing agencies to promote/expand access to existing housing with needed services.
- Participants will be able to identify services and supports concepts.
- Participants will have action steps to continue their efforts.

The above learning objectives were introduced to participants by the consultants in three Modules:

- Module 1: Understanding housing programs & Medicaid/services program
 - Sources of funding for housing
 - Details about programs and possible uses.
 - Overview of Medicaid
 - Examples of long term services & supports that support individuals in housing
- Module 2: Resources in YOUR community.



- o Review of resources scan
- o ConPlan resources
- o PHAs in the region
- Module 3: Building a Successful Partnership
 - o The languages of Housing and Services – becoming bilingual
 - o Fair Housing and Reasonable Accommodation
 - o Getting a Fair Share of Housing Resources
 - o Services Systems’ Responsibilities
 - o Working Together: Tips & Tools

Outcomes:

- Fifty-four people attended the training sessions - 12 were members of local public housing authorities.
- The contract for the Housing Capacity Building Initiative for Community Living project has been given a three-month no cost extension to continue its work with OPWDD.

Next Steps for OPWDD:

- Work with CMS/TA and DOH to organize and implement future training statewide.
- Work with the Director and Housing Staff from Region 1 to expand an existing *Housing Consortium* to become more comprehensive and to serve as a “housing model” for other regions. The Consortium will be used to implement all of the recommendations generated by participants from each region.
- Introduce the elements of the *Housing Consortium* to all stakeholders in the OPWDD system at the first *OPWDD Office of Home & Community Living Housing Forum* in March 31, 2014.
- Follow-up on the cross systems teleconference held with George Braddock from Creative Housing Solutions as described in Appendix 1, to explore the use of technology for the Intellectual and Developmental Disabilities population to allow them to stay in communities of choice and to reduce cost for less integrated settings

Home Closings/Movement to Less Restrictive Residential Setting this Quarter.:

On December 20, 2013, New York State announced ten affordable housing awards granted by New York State Homes and Community Renewal (HCR). Four of these projects include supportive housing for individuals with intellectual and developmental disabilities:

Agency	Location	# of units
Center for Family Support Whipple Apartments	Kings County (NYC Region)	8
Living Resources Cohoes-Lion Heart	Albany County (Capital Region)	15
Independent Living, Inc. Independence Square	Orange County (Mid-Hudson Region)	14
CDS Monarch Monarch Senior Living	Monroe County (Finger Lakes Region)	10
TOTAL		47



The following provides a description of each supportive housing opportunity listed above:

- Whipple Apartments (East Williamsburg, Kings County, New York City Region): \$1.3 million investment to create 51 low-income and supportive housing units to advance both Housing Opportunity and Supportive Housing goals. Eight units are set-aside for adults with developmental disabilities. OPWDD will provide the necessary funding to support operations and services at the facility.
- Cohoes-Lion Heart Residences (City of Cohoes, Albany County, Capital Region): \$3.4 million investment to build 72 new low-income and supportive housing units for people with developmental disabilities. 15 of the total units will be for people with developmental disabilities. On-site support services will include job training and placement and training for caregivers. OPWDD will provide funding for support services and rental assistance, as well as resources to support operations and services at the facility.
- Independence Square (City of Newburgh, Orange County, Mid-Hudson Region): \$2.4 million investment to create 74 affordable housing units. The project provides workforce housing alongside 14 supportive housing units for people with developmental disabilities. Counseling, case management, and rental assistance will be provided for OPWDD’s population, along with resources from OPWDD to support operations and services at the facility.
- Monarch Senior Living (Town of Webster, Monroe County, Finger Lakes Region): \$2.9 million investment to create 50 affordable housing units for seniors and people with developmental disabilities. OPWDD will provide support services rental assistance, as well as resources to support operations and services for the 10 units serving people with developmental disabilities. Support services will include vocational opportunities and training and access to physical and wellness activities.

The above award decisions were based in part on whether or not the project advanced one or more of the state’s housing goals. Each will increase supportive housing opportunities for people with developmental disabilities and is a successful outgrowth of OPWDD’s partnership with the NYS Homes & Community Renewal (NYSCHR). Overall, these projects will increase OPWDD’s commitment to assisting people with developmental disabilities to live in a less restrictive residential setting. These projects will start construction April 1, 2014

Progress made this quarter in the development of new housing units includes the addition of 1 new home owner, totaling 7 since April 1, 2013. Based on the activities described above, OPWDD anticipates the development of several housing units to grow in early 2014.

Total Number of New Housing Units Developed	
New Home Owners	7
Available Supportive Housing Units connected to the Governor’s Medicaid Redesign Team Supportive Housing Development Program and, OPWDD’s partnership with the NYS Homes & Community Renewal (NYSCHR)	83



Increasing Supported Employment Services and Competitive Employment

*Supported Employment Services and Competitive Employment
(from CMS Special Terms and Conditions, Attachment H)*

- a. *Effective July 1, 2013, New York will no longer permit new admissions to sheltered workshops. **The state will report the number of enrollees that remain in sheltered workshops in each quarterly report as required under paragraph 62.***
- b. *By October 1, 2013, New York will submit to CMS a draft plan for CMS review, **and a final plan no later than January 1, 2014**, on its transformation towards competitive employment. Both the draft and final plans must include a detailed proposal/work plan for increases in the number of individuals in competitive employment and the number of students exiting the educational system moving directly into competitive employment. The plan must include a timeline for closing sheltered workshops, and a description of the collaborative work with the New York educational system for training/education to key stakeholders on the availability and importance of competitive employment.*

Employment Plan

The Final Employment Plan (Appendix 2) has been updated to address comments discussed and shared with OPWDD by CMS during a December 12th conference call. OPWDD continues to move ahead as described and appreciates CMS's feedback confirming support of this plan.

During this reporting period there was a focus on facilitating dialogue with stakeholders and other partners regarding the Draft Employment Plan submitted to CMS on October 1, 2013. Specific activities include the following:

- As a follow up to the Community Dialogues that were convened in an effort to obtain stakeholder input into the development of the Draft Employment Plan, meetings and workshops were convened with providers, self advocates and parents to share information about the draft employment plan submitted to CMS and discuss implementation. Specific feedback is described in more detail in Appendix 2 of this report, titled Stakeholder Feedback on Employment Transformation Plan.
- Various meetings were convened with ACCES-VR, New York State Commission for the Blind and the Office of Special Education to discuss implementation of the draft employment plan.
- A stakeholder work group was convened to make recommendations on the technical assistance that will be needed to transition work centers to alternative business models that create integrated employment opportunities for people with developmental disabilities.
- A stakeholder workgroup has also been actively involved in the design of the new Pathway to Employment service.

Baseline Data Adjustment

After the October 1, 2013 report was submitted OPWDD received additional data from provider agencies on the number of people receiving supported employment services. The additional data has resulted in an



adjustment to the March 31, 2013 baseline as follows: there were 9,972 individuals with developmental disabilities enrolled in supported employment, of these individuals 7,021 were competitively employed in an integrated setting earning at least minimum wage. As of October 1, 2013 there are 7,294 people engaged in competitive employment which is a net increase of 273.

Workshop Enrollments

As a result of the July 1, 2013 policy to end new admissions into sheltered workshops, enrollment remains constant at 8,101.

Training

In an effort to build the capacity of providers to deliver quality supported employment supports to individuals with developmental disabilities, OPWDD facilitated the following training opportunities during this reporting period:

- Continued to convene Innovations in Employment Training sessions. This training series provides participants with skills, tools and techniques that can be used to improve employment outcomes for people with developmental disabilities. The four-part series includes sessions on: Employment and Putting People First; Assessment and Planning; Job Development; and Job Coaching. During this reporting period sixteen sessions were held across the state. Ten additional advanced sessions were provided for experienced supported employment providers. These sessions are available to both voluntary agency and state operation staff.
- A training was convened to educate Medicaid Service Coordinator Supervisors about the upcoming Pathway to Employment Service and OPWDD's overall employment goals.
- A training was facilitated in Region 4 (New York City) for new supported employment providers which focused on the upcoming Pathway to Employment Service and how it can be used to transition people from day hab and workshops to competitive employment. Additional supported employment trainings for new providers will be held in other regions during the next reporting period.



Increasing Self-Direction

Consumer Self-Direction

(from CMS Special Terms and Conditions, Attachment H)

*b. New York will increase the number of people offered the option to self-direct their services through increased education to all stakeholders in a consistent manner statewide. This education will be provided to at least 1,500 beneficiaries (with designated representatives as needed) per quarter beginning on April 1, 2013. **New York will submit a quarterly report of the number of training/education sessions conducted and the number of persons attending the sessions.** New York will share training materials and curricula for these sessions with CMS, and make them available statewide by May 1, 2013.*

e. New York will provide a report to CMS no later than July 1, 2013, on the current number of persons with IDD and other disabilities who self-direct their services under this demonstration.

*ii. **By January 1, 2014, 425 new beneficiaries will self-direct services;***

*f. **By January 1, 2014, New York will submit to CMS for approval the state's policies on self-direction that demonstrate its commitment to and implementation of self-direction.***

Self Direction Policy

OPWDD is committed to provide opportunities for individuals to exercise the maximum amount of control over how they receive supports and services through self directed support options. Through employer and/or budget authority and the ability to customize plans of support, people with developmental disabilities can engage as full citizens in communities of their choosing to live and work or engage in meaningful activities.

The submission of New York's policies on self direction demonstrating its commitment to and implementation of self-direction is provided under separate cover and includes three distinct sections as follows:

1. A Policy Statement describing New York's commitment to self-direction with supporting appendices
2. A demonstration of how New York is meeting transformation goals today and how the state plans to build upon their current efforts to continue to enhance opportunities for self direction, and
3. A description of the reforms the State plans to implement to meet the transformation commitments and proposed steps for moving these reforms forward.

While significant progress has been made toward the transformation goals, there are various reforms needed to meet the broader goals of transformation related to self-direction. The discovery process has begun and the ongoing dialogue between the state and CMS will be shared more broadly following CMS response and guidance to this policy.

Self Direction Education to Beneficiaries

The NYS Office for People with Developmental Disabilities (OPWDD) has promoted self direction for individuals receiving supports through educational efforts by OPWDD staff and stakeholder groups. Educational efforts include community training sessions and new staff practices at the "Front Door" which ensure that individuals coming to OPWDD to access services make an informed choice regarding self directed service options



Consistent with the transformation goal to expand education about self-direction service options in a consistent manner to all stakeholders statewide, OPWDD has educated more than 1,500 individuals and family members in self-direction sessions during the third quarter ending on December 31, 2013, with a total count of 4,440 individuals and 267 training sessions. Self-direction education sessions are actively attended by individuals and family members, and more sessions are scheduled for the fourth quarter. Specifically, OPWDD will continue to focus education activities on self-direction according to the education goals described in the table below.

Beneficiaries with Developmental Disabilities who currently Self-Direct their Services

Self-Direction Education Totals October 1 – December 30, 2013			
Self-direction Education Target	Education Goal	Total Number of Individuals	Total Number of Sessions
New people requesting supports from the OPWDD system and people who are transitioning from the education system into the OPWDD system of supports.	Increase awareness of self-direction options among the people engaging in supports from OPWDD	3,390	56
Individuals who are currently receiving OPWDD supports and services and new individuals who have expressed an interest in self-directing services.	For people who are expressing interest in self-direction, the goal is to ensure understanding of the key concepts of self-directed supports.	811	61
Individuals who are actively seeking to self-direct services with budget and employer authority	Detailed understanding of the operational components of self-directed supports; clear understanding of the responsibilities associated with self-direction.	239	150
	Total	4,440	267

Since October 1, 2013 an additional 654 individuals are self directing services. Based on eMedNY data 123 additional participants self direct using Consolidated Supports and Services (CSS). Also, an additional 531 individuals self-direct their Community Habilitation service. As shown in the table below, OPWDD has exceeded the goal of 425 new beneficiaries self-directing their services by January 1, 2014.

Number of Individuals Self Directing	
October 1, 2013	1,549
December 31, 2013	654
Total individuals self-directing	2,203



Appendix 1

Environmentally Engineered Homes Teleconference

In addition and in keeping with OPWDD's commitment to create a "Continuum of Housing Options" for people with intellectual and developmental disabilities, a cross systems teleconference was held with George Braddock from Creative Housing Solutions and a national leader on using technology to make homes that work, the environment matters and engineering independence. Mr. Braddock has been working on projects for people with developmental disabilities with a special focus on Autism since 1984 and has completed more 1500 projects thus far in states such as Oregon, California, and Illinois. The purpose of the teleconference was to learn the successes experienced in other states and how these successes can be utilized in New York as the state transforms its system for people with intellectual and developmental disabilities.

Some of the major points discussed included the following:

- The Americans with Disabilities Act (ADA) assisted with heightening consciousness about accessibility modifications for people with physical disabilities but did not include people with developmental disabilities. The issue for OPWDD was to begin the dialogue on creating a housing fabric that goes beyond the conventional thinking of the ADA.
- The concept of maximizing the capacity of people with developmental disabilities through technology and modifications to existing residential environments. Mr. Braddock discussed the following areas with OPWDD:
 - The Environment Matters – Engineering Independence;
 - The Broken Environment and the results thereof;
 - The Autism Friendly Environment; and,
 - The Caregiving Environment

Next Steps:

- OPWDD will examine its current capacity of its environmental modification funding stream;
- OPWDD will research alternative funding for environmental modification;
- OPWDD will bring developers from NYSHCR into the discussion as they develop supportive housing units for people with developmental disabilities; and,
- OPWDD will continue discussions with Mr. Braddock as it builds a supportive housing platform for people with Autism.



APPENDIX 2

NEW YORK DRAFT PLAN TO INCREASE COMPETITIVE EMPLOYMENT OPPORTUNITIES FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

The final Employment Plan is still under negotiation with CMS so the DRAFT Employment Plan submitted to CMS on October 1, 2013 is the most current version and can be accessed on the OPWDD Transformation page at

http://www.opwdd.ny.gov/opwdd_services_supports/employment_for_people_with_disabilities/draft-plan-increase-employment-ops



Appendix 3

Stakeholder Feedback on Employment Transformation Plan

September 2013

As part of the process of creating the Employment Transformation Plan, OPWDD convened an Employment Committee comprised of parents, self-advocates and providers and Community Dialogues were also convened across the state to solicit feedback from parents, self-advocates and providers. Both of these activities gave OPWDD the opportunity to share information and solicit feedback from stakeholders. This feedback was taken into consideration as the Employment Transformation Plan was drafted and has been included as an Appendix to the plan. OPWDD will engage in ongoing communication and dialogue with stakeholders as the Employment Transformation Plan is finalized and implemented. Stakeholder feedback was as follows:

Feedback from Employment Committee

The committee agreed to make the following recommendations to OPWDD as it relates to its creation of an Employment Transformation Plan:

1. Strategies to Improve Employment Outcomes
 - a. There needs to be greater collaboration between ACCES-VR and OPWDD. State agencies should work together to better align and streamline their eligibility processes.
 - b. Opportunities must be created for supported employment providers to partner with schools and start working with students and families prior to graduation to better support the transition to adult services and community employment outcomes.
 - c. Opportunities must exist with ACCES-VR and OPWDD to fund supports for summer and afterschool employment.
 - d. More information must be available to students and families about the impact of employment on their benefits and how work incentives can be utilized.
 - e. The State should build on the success of the Model Transition Program (MTP) previously funded by ACCES-VR.
 - f. OPWDD should expand the Employment Training Program (ETP) which will increase partnership with schools and increase the number of students who transition to employment upon leaving high school.
 - g. The State should increase business incentives to encourage the employment of people with developmental disabilities.
 - h. A new flexible and tiered supported employment fee structure is need that is more in-line with the true cost associated with assisting someone in achieving their employment goals. Flexibility must be built into the fee structure that would allow



voluntary agencies to provide supports that are efficiently and effectively tailored to the changing support needs of each person.

- i. If needed, transportation should be included in supported employment fees.

2. Strategies related to Workshop Transformation

- a. Since the policy decision was made to end new enrollments into workshops effective July 1, 2013, consideration should be given to allow for the natural attrition of workshop participants especially since 40% of workshop participants are over the age of 50.
- b. For the remain 60% of workshop participants annual goals in the range of five to ten percent a year should be identified to transition people out of workshops to competitive employment.
- c. Consideration should be given to the large number of people who are currently employed in workshops and the time it will take to engage in the discovery and transition planning needed to assist them in the transition to either competitive employment or other meaningful community activities, therefore OPWDD funding for workshops should phase out over 9-11 years. This timeline is in line with what has been done in other states.
- d. Given the concerns of families and the feedback received from the Community Dialogues the elimination of funding for workshops should be reconsidered. Workshops should continue to be an option for individuals who are retirement age but want to continue to work or have medical, behavior or other support needs that create employment barriers. Workshops should also be viewed as a safety net for people who lose their jobs.
- e. As people transition from workshops to competitive employment funding must be available for providers to address their property costs.
- f. Supported Employment must be restructured to fund the supports people will need as they transition to competitive employment. Job coaching supports must be available whether a person needs one-on-one or lifelong coaching supports.
- g. Options must be available for people who lose employment that allow them to become engaged in the discovery process to find new employment.
- h. Data systems should be created to track workshop transformation, including the number of people who transition to competitive employment, the number of hours per week they are employed, the number of support hours they receive, what happens to people who are not working and the how satisfied individuals and families are with the their post workshop options.
- i. As people transition to competitive employment attention must be paid to case management which will be essential in assisting individuals and families navigate employment and community inclusion options.



- j. Technical assistance and financial support must be available to voluntary agencies with large physical plant infrastructures, mortgages or equipment obligations. Assistance will be needed in finding alternative usages for properties. Technical assistance will also be needed to retrain staff and upgrade their skill set so they are successful in assisting individuals in the transition to competitive employment.
 - k. The business community should be engaged in discussions about ways to increase the employability of people who will be transitioning from workshops.
3. Discovery, Assessment and Transition Planning
- a. Discovery is an essential part of the process of transitioning people to competitive employment. It will provide baseline information on a person's skills, abilities, interests, etc. This information should be used to establish benchmarks related to what a person needs in order to successfully transition to employment or other meaningful community activities.
 - b. Discovery should be a process that is used to learn about the individual and their unique needs. From the individual perspective there should be a review of soft skills including: social behaviors, job performance and work ethic. An individual's situation should also be assessed and include a review of their transportation needs, family supports, social relationships, mental and physical health and the impact that work will have on their lives.
 - c. There should be opportunities for periodic reassessment and reevaluation of a person's progress and continuing needs.
 - d. The discovery process should be used to create individualized employment plans.
 - e. The transition process should include opportunities for people to engage in integrated work sampling, work try outs, internships, situational worksite assessment, job sharing, etc.
 - f. A staff team approach should be utilized to engage in the discovery, assessment and transition planning process. Training opportunities must be available for workshop staff and to the extent possible they should have opportunities to work with supported employment staff as individuals transition to competitive employment. A person's circle of support must be included in the discovery, assessment and transition process.
 - g. There must be a recognition that additional funding will be needed due to increased staffing supports that will be needed to assist people in the transition to competitive employment.
 - h. Mechanisms must be in place for post job placement follow up which will enable providers to assess how satisfied people are both mentally and physically with competitive employment. It will also be important to create ways for social networks that have been created in workshops to stay connected.



- i. Ongoing supports must be available to address any barriers or concerns that arise after job placement including fears, isolation, transportation difficulties, benefits problems, health and safety, etc.
 - j. Benefits counseling should be available families.
 - k. The Social Security Administration should be encouraged to incentive employment by allowing people to earn income without immediate reductions to their monthly benefits.
4. Volunteerism as the Bridge to Employment
- a. Volunteering should be used as part of the discovery process and transition planning process as an opportunity to work on soft skills and identify interests.
 - b. The provision of volunteerism as a bridge to community inclusion creates an opportunity for workshop staff to upgrade their skill set to better align with community-based support options.
 - c. Volunteerism may also create opportunities to address family concerns and fears related to the transition to competitive employment.

Feedback from Community Dialogues

The following is a summary of stakeholder feedback from the eight Community Dialogues convened between September 16 and 26:

- Concerns were raised by parents with children in their 40s who have attended workshops for over 20 years. Parents gave examples of the emotional and psychological stress that would be caused by the transition to community employment.
- Concerns were raised about whether state and federal expectations regarding transition to competitive employment are realistic.
- It was suggested that the current workshop model be changed to meet state and federal employment expectations rather than be eliminated.
- Self advocates raised concerns about transportation and stressed that community employment is not possible if people do not have reliable transportation. OPWDD was strongly encouraged to work with local transportation authorities to create better options for people with disabilities who want to be engaged in their community.
- It was suggested that transportation be covered in SEMP rates because the cost in the long-term would be less than supporting someone in day hab.
- It was suggested that financial incentives should be available to encourage providers to change their business model which will create jobs in integrated settings.
- Concerns were raised about the need for a safety net for people who may not be successful in employment and the need to provide sufficient supports on the job.
- Concerns were raised about the lack of choice available to people if they want to remain in a workshop.



- Concerns were raised about the interpretation of the Olmstead Decision and whether it requires workshops to be closed.
- It was suggested that assessments should not only focus on ability but also include what a person wants to do with their life and should factor in the perspectives of a person's circle of support.
- Concerns were raised about whether businesses are willing to hire people with disabilities.
- Questions were raised about the willingness of community members to accept people with disabilities.
- Self advocates shared their successful transition from a workshop to employment but stressed that it is important for others to have the workshop option.
- It was suggested that the decision to close workshops be reconsidered and that state and federal entities renegotiate that section of the Transformation Agreement.
- Work centers were described as vocational training centers that not only prepare people for competitive employment but provide a safety net if people are not successful.
- Concerns were raised that people will either attend day habilitation or stay home if workshops are closed.
- Families questioned why the choice of being employed in a workshop is being eliminated.
- There were questions about whether the Olmstead Decision really requires the elimination of workshops if it is the most integrated setting appropriate to a person's needs.
- It was suggested that self employment be an option for people interested in transitioning from workshops.
- Concerns were raised about people with forensic backgrounds and the prevocational training role that workshops currently provide. There was a question about how people with forensic histories will be supported to obtain jobs in the community.
- Concerns were raised about the decision to end new enrollments in workshops.
- Concerns were raised about people with medical and behavioral needs. There was doubt that businesses would be willing to hire people with complex needs.
- Concerns were raised about the availability of the staffing supports that will be needed to successfully transition people from workshops to competitive employment. It was suggested that the concept of fading job coaching supports should be eliminated.
- A Long Island self advocate described how there are some people employed at workshops who earn at or above minimum wage depending on their productivity. It was explained that the workshop is a better employment option for someone who needs personal care assistance. The need for reliable transportation was also raised.
- A Broome sibling raised concerns about how unrealistic it is to expect people in their 60s to find employment in the community. Concerns were also raised about the unemployment rate across the state and how challenging it will be for people with disabilities to be hired.
- In Finger Lakes, it was suggested that the decision to close workshops be reconsidered and alternatives to workshops should be developed before talking about closure. Concerns were raised about the definition of "integrated setting" because for some people the workshop is the most integrated setting appropriate to their needs. Concerns were also raised about people with behavioral challenges who will have difficulty finding a business willing to hire them.
- A Long Island self advocate and support staff shared their experience with self direction and how CSS has been used to create the live envisioned by the circle of support. They shared how CSS was used to identify employment interest and led to finding a job.



- A Long Island parent talked about self direction as a very person centered option for people who want to work. The importance of doing good person centered planning was stressed. It was also suggested that OPWDD work more closely with the State Education Department and reach out to the Department of Labor regarding rules for volunteering in for-profit companies. The importance of person centered assessment was stressed along with the need to end agency and programmatic silos.
- Concerns were raised about the impact of workshop closure on businesses that have contracts with provider agencies. It was argued that this decision could erode the relationship and trust that providers have with local businesses.
- A suggestion was made to allow providers who are in the process of converting to either an affirmative business or social enterprise to enroll new participants.
- In Long Island, a parent talked about his experience with Consolidated Supports and Services and how it can be used to help people obtain community employment as long as flexibility is maintained. Concerns were raised about language in the plan that is focused on job readiness instead of focusing on what people with developmental diversity can do. It was also suggested that OPWDD think creatively about ways to get businesses to foster acceptance and tolerance within their companies and hiring practices. The need for public service announcements about hiring people with developmental diversity was also suggested.
- Concerns were raised about the future of staff employed at workshops.



Appendix 4

OPWDD's Affirmative Commitment to Establish an Independent and Person Centered Planning Process & CQL Progress Report

Introduction

In accordance with the Health System Transformation for Individuals with Developmental Disabilities Agreement as defined in the Standards Terms and Conditions of New York State's Partnership Plan Medicaid Section 1115 Demonstration, this document reports updated information to the Centers for Medicare and Medicaid Services (CMS) the following Transformation Deliverables:

- The state's affirmative commitment that it will establish an independent process for assuring that individual person-centered plans meet the needs of individuals served in community-based settings. This topic is a component of the Conflict Free Case Management objective of the BIP work plan to establish a protocol for removing conflict of interest (section 9.2). Consistent with CMS's suggested
- timeframe for submission of this deliverable as outlined in the BIP work plan, a final implementation plan and schedule will be submitted prior to May 30, 2014.
- OPWDD's progress report on the development of CQL measures including the state's work plan for the implementation and roll-out of specific outcome measures.
- The charts below identify the activities associated with this commitment; the relevant updates are highlighted to show progress.

OPWDD's Affirmative Commitment to Establish an Independent Person Centered Planning Process

OPWDD's Affirmative Commitment to Establish an Independent Person Centered Planning Process (from CMS Special Terms and Conditions, Attachment H)

2. a. To demonstrate its implementation of successful person-centered planning, New York must provide an affirmative commitment that the state will establish an independent process for assuring that individual person-centered plans meet the needs of enrollees served in community-based settings, a description of the process the state will use to ensure that person-centered plans are implemented with fidelity to the established process, and a timeline for implementation of the process. New York will implement the approved process for person-centered planning for demonstration participants in accordance with a timeline approved by CMS and subsequently incorporated into this attachment

NYS is committed to ensuring that Person Centered Planning practices, which result in desired outcomes most important to individuals with developmental disabilities, are at the core of the transformation activities. Through consistent focus on Person Centered Outcomes in stakeholder discussions, system education and guidance development as we initiate the key activities outlined below OPWDD will be supporting the cultural shift needed to result in the system reform that has been defined.



Activity	System Change Focus	Status Report
<p>Develop Care Coordination practice guidelines defining Person Centered Planning expectation</p>	<p>Clear standards for person centered planning practices are drafted within the <i>Care Coordination Practice Guidelines</i>. The expectations are reinforced in the <i>Person Centered Outcomes; Person Centered Planning</i> curriculum and on the website (see below).</p> <p>Inclusion of guidance related to Personal Outcome Measures identified in the Practice Guidelines - see section below.</p> <p>Additional work from the Person Centered Quality Committee to inform the planning process through additional guidance and tools for safeguarding considerations. Portions of the Committee’s recommendations have been included in the updated curriculum and will be available on the website.</p>	<p>Practice Guidelines have been drafted; the guidelines will be implemented as OPWDD transitions to Managed Care however the Person Centered Outcomes and Planning focus will be initiated as a foundational activity.</p> <p><u>Update:</u></p> <p>Committee work is complete and new guidance and education is in implementation phase. This remains an ongoing activity</p>
<p>Updated Curriculum: <u><i>Supporting Person Centered Outcomes; Person Centered Planning</i></u></p>	<p>The curriculum developed to support person centered practices and outcomes will focus on the following goals:</p> <ul style="list-style-type: none"> • Consistent practices and clear expectations defined for outcome focus and planning expectations. • Reinforcement of person centered outcome expectations from the plan of support • Reinforce opportunities for self direction in support models and principles of self determination • Incorporation of the 21 POM domain areas for consideration in the planning process • Incorporation of pertinent portions of the recommended safeguard areas for consideration from the Person Centered Quality Stakeholder Committee. 	<p><u>Update:</u></p> <p>Upon review from members of the Person Centered Quality Committee and content expert Beth Mount, the curriculum has been finalized and is in implementation stage.</p>
<p>Launch Person Centered Outcomes Web Page with</p>	<p>OPWDD has developed a dedicated web page focused on Person Centered Outcomes and the Planning Process. The primary message and core content on the site focuses on people with developmental disabilities who share their experiences and outcomes from a person centered planning process. The stories and video content will change periodically.</p>	<p><u>Update:</u></p> <p>The Person Centered Outcomes Web Page has been launched with related resource material available to viewers. The</p>



	<p>The site provides clear definition of planning expectations with outcome focus and Person Centered practices.</p> <p>Information on the CQL POMs is included in the web based content. Additional material and links to pertinent sites and content are incorporated within the site.</p>	<p>resources reinforce the transformation culture shift underway and have a focused section on CQL's 21 Personal Outcome Measures and how they relate to person centered practices.</p>
<p>Incorporate Conflict Free Case Management standards into the Care Coordination role within Managed Care Entities</p>	<p>OPWDD is in the process of designing several measures to mitigate conflict of interest to be implemented upon transition to managed care as Care Coordination within the managed care entity is implemented.</p> <ol style="list-style-type: none"> 1. Eligibility determination will remain the responsibility of OPWDD. 2. Functional Assessment, both initial and ongoing (which will be used to determine acuity levels and identify needs for service planning), will be the responsibility of OPWDD; not the DISCO. 3. DISCOs will have separate departments that perform case management functions and service authorization. Supervisory lines between departments will not cross. 4. If a DISCO chooses to contract with an entity for CM functions the entity must either NOT participate as a network provider OR have appropriate firewalls between its CM and service provision functions. 5. DISCO will have personnel policies in place that do not reward staff for developing care plans that financially benefit the DISCO or penalize those whose planning results in higher financial demands on the DISCO. 6. The DISCO will have clear grievance procedures in place to address participant concerns. DISCOs will be required to report to the State on a quarterly basis a summary of all grievances and appeals that were received in that quarter. OPWDD and DOH will monitor the DISCOs' processing and resolution of grievances. 7. OPWDD oversight will include annual care coordination reviews of all DISCOs and will continue to review network providers. 	<p>Defined practices part of NYS Balancing Incentive Program (BIP) coordination;</p> <p>Practices into the Care Coordination Practice Guidelines; and</p> <p>Clear commitment to the practices will be memorialized in contracts with the ultimate managed care entities.</p>



	<p>8. OPWDD will develop and implement a specific satisfaction survey for all DISCO enrollees.</p>	
<p>Process description for ensuring that plans are implemented with fidelity to the established process and timeline for implementation of the process</p>	<p>OPWDD has been working on the development of a person centered review tool that will integrate the use of CQL POMs. This review tool will be piloted in COMPASS agencies between October 2013 and March 2014 as a learning experience for DQI/OPWDD on the integration of CQL POMs in OPWDD surveys. Note: all existing reviews will continue as described in the HCBS waiver for these agencies.</p> <p>Once the review tool has been modified based on this learning experience and there has been statewide training on personal outcome measure reviews, OPWDD will incorporate the person centered outcome review into its existing fee for service survey process (SFY 2014-15).</p> <p>At the same time, OPWDD is working on an RFP to obtain expert assistance to develop care coordination quality review tools and processes that will ensure that there is a strong review of the person centered planning process resulting in delivery of supports and services designed to meet individualized needs, interests, and goals for personal outcome achievement as well as adherence to managed care requirements. The first draft of this RFP is anticipated in Fall 2013. Issuance of the RFP in early 2014. Reviews anticipated to begin the second quarter of 2015, i.e., approximately six months after the DISCOs begin operations anticipated to start October 2014.</p>	<p>In progress</p> <p><u>Update:</u></p> <p>OPWDD DQI completed its initial survey protocol for the review of person centered support planning and delivery, based upon the use of CQL POMs for the pilot.</p> <p>50 DQI survey staff participated in two workshops on the project – the first was May 1 and 2nd, 2013, the second workshop was September 26, 2013. Through these workshops, DQI surveyors were exposed to and trained on self-determination/self-direction principles, person centered quality expectations and outcomes, quality improvement approaches expected in agencies; CQL POMs, and other related information. The second workshop was a brief review of the above, and a nuts and bolts session on the development of the person centered protocol and the process for surveys.</p> <p>Pilot reviews using this tool and process commenced on November 1, 2013 and will take place through the end of March 2014. As surveys using the pilot tool are completed, information on the pilot protocol, both the results, and the experience of surveyors in using the tool will be submitted to DQI's Bureau of Continuous Quality Improvement for analysis.</p> <p>OPWDD has completed a draft sole source contract. This draft is under internal OPWDD Counsel Review. OPWDD hopes to be able to engage with CQL in early 2014 on activities</p>



		<p>related to training OPWDD staff and surveyors on CQL POMs; engaging with CQL to review quality indicators that OPWDD has been working on with a stakeholder group that integrates the CQL POM philosophy and CQL basic assurance indicator philosophy into DQI's review processes.</p> <p>OPWDD DQI has begun the research into the development of a care coordination review tool. Given that OPWDD is in the process of hiring a Medical Director with expertise in managed care/long term care and OPWDD quality staff have developed a knowledge base on managed care/care coordination and quality measurement in long term care, OPWDD has decided not to develop an RFP to secure a contractor to develop review tools for care coordination at this time as this will be a lengthy process that can better be spent in the design and development of the tools. Once OPWDD develops draft tools, we will engage with experts to review and advise OPWDD on recommendations related to this.</p>
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Progress toward the Development of CQL Measures

Progress toward the Development of CQL Measures
(from CMS Special Terms and Conditions, Attachment H)

*3. a. iv .6. New York will adopt practice guidelines for care coordinators based on the Council on Quality and Leadership (CQL) personal outcome measures will annually assess managed care quality using personal outcome data. New York will provide a report on its progress toward the development of CQL measures by September 1, 2013. The progress report will include the state's work plan for the implementation of the measures, including the roll-out of the measures, the specific outcome measures to be used, and the baseline against which the measures will be compared. **New York will provide quarterly updates on its progress in implementing the work plan.***



OPWDD has initiated significant activity focused on the education and implementation of the CQL POMs. The specific activity areas are identified below and are referenced within the Person Centered Outcome section above. The initial activities are focused on creating the foundation for the use of the POMs and on defining the expectations that will be a part of the managed care/care coordination quality measures.

The specialized managed care DISCOs for people with developmental disabilities will be expected to use the CQL POMs interview methodology, in accordance with OPWDD CQL POM guidelines, for a defined representative sample of individuals selected randomly by OPWDD. . As a major element of the DISCO’s Quality Assurance and Improvement Plan, the DISCO will be expected to aggregate the CQL POM data and use the information for continuous quality improvement initiatives across the DISCO network. The DISCO will also be expected to ensure that each individual’s CQL POM information is integrated and used in the individualized person centered planning and development process. OPWDD and/or the EQRO will validate the CQL POM data during the annual reviews of DISCOs. OPWDD also plans to integrate a review of the DISCO’s use of the CQL POM information for quality improvement in these annual reviews. As OPWDD and DISCOs gain experience with the CQL POMs through the DISCO pilots, OPWDD will be exploring how best to analyze and use the CQL POM data at a for systems improvement purposes at the developmental disability system level.

Activity	System Change Focus	Status Report
<p>System Education on Person Centered Outcomes and CQL Personal Outcome Measures (POMs)</p>	<p>OPWDD has embarked on a culture shift in quality expectations that will, over time, shift the focus of quality from a compliance focused process to an outcome focused process. One of the critical measures to determine the individualized quality of life for people supported is the Personal Outcome Measures developed by CQL which will be used as an individual and organizational measure in the managed care environment that will facilitate a focus on how well the Care Coordination function meets the individualized goals and outcomes of individuals.</p> <p>OPWDD has publicly embraced the 21 Personal Outcome Measure domains identified by CQL as the critical individualized quality of life measure for people with developmental disabilities. OPWDD has provided system education through statewide video conferences, conference presentations, and website updates with Frequently Asked Questions summarized. OPWDD has defined the Care Coordination quality review plans based, in part, on the POMs completed by certified interviewers.</p> <p>Provider organizations have engaged in a variety of activities focused on implementation of POMs. These activities include:</p> <ul style="list-style-type: none"> • CQL accreditation • POMs training and use of POMs within 	<p>Ongoing</p> <p>Ongoing</p>



	<p>organization for both planning and quality improvement activities</p> <ul style="list-style-type: none"> • Education for Service Coordinators on POMs and person centered outcomes <p>Number of Agencies accredited by CQL: 9</p> <p>Number of Agencies with certified interviewers or in process of certification: 26</p> <p>OPWDD is in the process of submitting a sole source contract request to the Office of the State Comptroller (OSC) requesting approval to work with the Council on Quality and Leadership exclusively to more broadly educate the system on Person Centered Outcomes and POMs. This contract will include sufficient OPWDD staff certification to develop a sufficient base of experience to implement the use of the POMs in state operations and in the Division of Quality Improvement.</p>	
<p>Development of defined specifications for an Electronic Individualized Service Plan (E-ISP) that incorporates CQL Personal Outcome Measures</p>	<p>As OPWDD transitions to a managed care environment the use of an electronic Individualized Service Plan will be implemented. While planning will be person centered and focused on supporting individuals to achieve desired outcomes, the electronic format of the plan will allow for integration of the Coordinated Assessment System (CAS), consistent organization of consideration for safeguards, and consistent organization around POM domains.</p> <p>The elements of an electronic Individualized Service Plan (E-ISP) have been drafted. Key elements include:</p> <ul style="list-style-type: none"> • Consistency with the seven essential standards for Person Centered Outcomes outlined in the Care Coordination guidance. • Development of one consolidated plan, reflective of the person’s interests and needs, for use across all settings. By including all support plans and habilitative plans in one system there is greater consistency in plan implementation and pertinent data collection to ensure a person centered approach. • Electronic sharing of plans and information will support the most timely and accurate information for individuals, advocates and providers. • The E-ISP specifications will require that 	<p>Draft Specification and defined data elements in progress</p>



	<p>goals be organized around the 21 domain areas identified in CQL’s Personal Outcome Measures. This organization will create greater consistency and align with expressed individual interest.</p> <ul style="list-style-type: none"> • The E-ISP will incorporate the results of certified POM interview data for care coordination monitoring. 	
<p>Care Coordination Practice Guidelines which include defined expectations for Personal Outcome Measures Use</p>	<p>Care Coordination guidance has been drafted outlining the care coordination entities responsibility in the development of a person centered plan of care that is built upon information collected through assessment and active participation of the individual and others to develop achievable personal outcomes.</p> <p>The development of the plan of care is based on the utilization of a person centered planning process that identifies the areas that are most meaningful to the individual. Through the planning process those areas identified as most important to the individual will be categorized into one of the 21 Personal Outcome Measure domains identified by CQL in the e-ISP.</p> <p>Through ongoing monitoring and discussion between the care coordination team and the individual the plan and personal outcome measures are adjusted as appropriate.</p>	<p>In Progress</p>
<p>Use of CQL POMs within the managed care infrastructure to drive individualized quality of life and continuous quality improvement</p>	<p>OPWDD is in the process of developing CQL POM implementation guidance which articulates that OPWDD will provide the DISCO a sample of its members for the DISCO to proceed with implementation of the CQL POMs interview methodology on a statistically valid representative sample of its members.</p> <p>This implementation guidance will describe how the DISCO will track and report to OPWDD on the CQL POM data for its sample.</p> <p>OPWDD and/or the EQRO will also be validating the CQL POM data during the annual DISCO reviews.</p> <p>During the annual DISCO care coordination and/or contract reviews, NYS will review the DISCOs internal use of the CQL POM data in their continuous quality improvement/quality assessment and performance improvement processes and will</p>	<p>In progress</p> <p><u>Update:</u></p> <p>A first draft of the CQL Implementation Guidance for DISCOs has been developed.</p> <p>A core set of NCI indicators has been chosen to measure performance of both the state as a whole, and in DISCO to DISCO comparisons. The set is detailed across OPWDD’s Accountability and Evaluation Plans.</p>



	<p>also verify that the DISCO has ensured that all of the information obtained from each member is provided to the Care Coordination team for integration in the persons care planning process.</p> <p>Through experience gained by OPWDD and DISCOs in using the CQL POM methodology and aggregating and analyzing results at an individual and DISCO level, OPWDD will be exploring the efficacy of using the CQL POM information for continuous quality improvement at the developmental disability system level.</p> <p>OPWDD is also exploring the use of NCI as a system measure for comparing DISCOs and for tracking progress with transformation performance measures.</p>	
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