



Medicaid Service Coordination (MSC)

# E-VISORY



ISSUE # 20-14

July 14, 2014

The MSC E-VISORY is an electronic publication which provides information on policies, guidance, available programs and services and training opportunities related to MSC. In order to receive an email notification when a new MSC E-Visory is posted, or to view past issues visit the following link: [MSC E-Visory Mailing List](#).

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## In This Issue:

### **New Optional Tool for Service Coordinators to Use in the Person Centered Planning Process**

On July 10, 2014 The Division of Person Centered Supports and the Division of Quality Improvement issued a memorandum, which is attached to this E-Visory, announcing the release of OPWDD's new Strengths and Risk Inventory tool. This is an optional tool to be utilized by any individual receiving services from state and voluntary providers. The inventory tool is designed to help generate meaningful person centered discussion in conjunction with the individual's circle of support on areas of health and well-being to be considered during person centered planning and service delivery based on the person's informed choice(s). This tool is just one of several that are planned for roll out over the next several months. We strongly urge providers to use this tool in its programs as we believe that effective use of this tool will be helpful in meeting the person centered process and planning requirements outlined in the new HCBS settings regulations. The Division of Quality Improvement welcomes any feedback about this inventory tool. You may share your experience, feedback and comments at the following mailbox: [quality@opwdd.ny.gov](mailto:quality@opwdd.ny.gov).

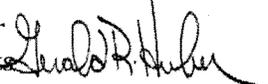
### **Proposed Regulations – Amendments to Community Habilitation**

On July 8, 2014 OPWDD issued notice regarding proposed regulations amending requirements for the HCBS waiver service, Community Habilitation (CH). As part of ongoing efforts to increase the availability of self-directed services within the system, OPWDD is modifying CH to allow individuals residing in certified settings appropriate for HCBS Waiver enrollment to access this service. It is expected that this change will allow individuals more service options and will increase the ability for those individuals to receive a highly individualized service and to more readily participate in activities in the community in lieu of more traditional day services. OPWDD expects to finalize these regulations effective October 1, 2014. Please refer to the memo and text of the proposed regulations for more detail on the requirements, which can be accessed on the OPWDD website at [www.opwdd.ny.gov](http://www.opwdd.ny.gov). Look under "Regulations & Guidance."

The deadline for public comment on the proposed regulations is the close of business on Monday, Sept. 8, 2014.



TO: Executive Directors, Provider Agencies  
Directors, Developmental Disabilities Regional Offices  
Directors, Developmental Disabilities State Operation Offices

FROM: Gerald Huber, Deputy Commissioner  
Division of Person Centered Supports 

Megan O'Connor-Hebert, Deputy Commissioner  
Division of Quality Improvement 

DATE: July 10, 2014

SUBJECT: Strengths and Risk Inventory

Over the past few years, OPWDD has been making a substantial effort to increase the availability of information on our website to assist the field in enhancing the quality of supports and services and with continuous quality improvement initiatives. In November 2013, OPWDD designed a person-centered planning page for its website which offers resource information on the process, methodology, and hallmarks of person-centered planning ([http://www.opwdd.ny.gov/opwdd\\_services\\_supports/person\\_centered\\_planning](http://www.opwdd.ny.gov/opwdd_services_supports/person_centered_planning)). More recently, OPWDD has posted important information on the new federal Home and Community Based Services (HCBS) Settings Standards for public comment that became effective on March 17, 2014 (<http://www.opwdd.ny.gov/node/5406>).

At this time, we are pleased to share with you the attached **Strengths and Risk Inventory** as an optional tool to be utilized by any individual receiving services from state and voluntary providers. The inventory tool is designed to help generate meaningful person-centered discussion in conjunction with the individual's circle of support on areas of health and well-being to be considered during person-centered planning and service delivery based on the person's informed choice(s). This resource can assist individuals, along with their advocates and staff who support them, to identify and discuss what risks are non-negotiable, the safeguards that are necessary, and the informed choices that may involve tolerable risk.\*

This tool is just one of several that are planned for roll out over the next several months. We strongly urge providers to use this tool in its programs. We believe that effective use of this tool will be helpful in meeting the person-centered process and planning requirements outlined in the new HCBS Settings regulations, including the following requirement related to what needs to be included in the Person-Centered Plan: "The written plan must (vi) 'Reflect risk factors and measures in place to minimize them, including individualized back-up plans and strategies when needed'."

The following provides further details on the Strengths and Risk Inventory Tool and tips for using it.

**Background on the Strengths and Risk Inventory Tool:**

The inventory tool was developed by the Person-Centered Quality Committee, a stakeholder group comprised of individuals receiving services, self-advocates, provider representatives, parents and state staff that met between spring 2013 through fall 2013. The Committee focused on providing recommendations and strategies for enhancing informed choice for individuals while continuing to address health and safety

concerns. The inventory tool aligns with person-centered planning practices that encourage individuals to live their lives the way that they choose and to make meaningful choices based on informed decision-making.

Sometimes, opportunities for success and personal growth in life are accompanied by the potential for harm. By focusing on positive, innovative approaches to safeguard planning, the responsibilities and consequences associated with specific risks to individuals can be discussed, negotiated, and mitigated in an individualized way while still enabling people to pursue the outcomes that are most important to them.

#### **Tips for Using the Strengths and Risks Inventory Tool:**

Utilizing a Strengths and Risk Inventory Tool is a best practice that can help in the development of comprehensive, flexible, and individualized safeguards with individuals.

The inventory tool can be completed during any person-centered planning and service delivery process. It can be re-visited over time as an individual's needs and supports evolve and change. It is recommended that it be reviewed on an annual basis or whenever significant changes in a person's life circumstances or informed choice may arise.

If an area identified on this inventory tool is considered to be unmet for the person or if the person requires further support to foster their well-being, the identified need should be further addressed in the service planning process and should be reflected in the person's Plan of Care.

Vulnerability and concerns in one domain of life does not necessarily mean that a person requires similar safeguards in other domains. Risks should be measured based on their potential for harm to the individual, and flexibility in negotiating the need for safeguards is essential.

#### **Feedback on the Tool:**

We welcome any feedback about this inventory tool from individuals, advocates/circles of support, parents and family members, MSCs, direct support professionals, agency personnel and others. We would also like to know more about your experience using it so that we can improve the quality of the tool.

Please send any comments or feedback to the Division of Quality Improvement's e-mail at:  
[quality@opwdd.ny.gov](mailto:quality@opwdd.ny.gov).

**\*Please note** that individuals who self direct their **services using self hired staff** must also adhere to the documentation requirements for risk identification and development of safeguards. This tool may be helpful in the plan development process. In addition, **this inventory is not intended to replace any process for determining risk for individuals who display behaviors that rise to a level warranting an offender-specific or specialized clinical risk assessment.**

cc: Provider Associations  
Willowbrook Task Force  
Central Office Leadership  
DQI Staff

## **Strengths and Risk Inventory**

### **Intent\*:**

The person-centered planning process should address the challenges, risk factors, and rewards inherent for each person to live his/her life the way that he/she chooses. This Inventory is a tool that can help to generate meaningful conversations with a person regarding the possible risk areas in his/her life. It is important to remember that not all risks are real. Some potential risks are imagined, abstract, or over-generalized from one specific area of the person's life to another area where the person might not actually be vulnerable. Acting on risks that are not real can sometimes lead to preventing a person from participating in activities that are the most meaningful to him/her and that can best contribute to growth, development, and quality of life. A true person-centered planning process defines the risks that are real and tolerable and offers an explicit and justifiable rationale for those informed decisions. This Inventory is an opportunity to employ decision-making as a team in deciding what risks are real and tolerable and what risks are also non-negotiable. Risks must be measured based on their potential for harm vs. growth and improved quality of life. Flexibility in negotiating risks is essential to improve individual quality of life.

***\*Please note: This Inventory is not intended to replace any process for determining risk for individuals who display behaviors that rise to a level warranting an offender-specific or specialized clinical risk assessment.***

## **Strengths and Risk Inventory**

**Instructions:** This worksheet should be completed by the individual and his/her team, as part of the person-centered planning and/or service delivery process. It should be reviewed **annually** and updated as a person's needs, goals, and supports evolve and change. Not all risks are preventable, but it is important to demonstrate that thoughtful and meaningful discussion occurred and that there is agreement on appropriate safeguards that can mitigate tolerable risks. **LISTENING TO THE PERSON IS KEY!** If an area is identified on this Inventory as unmet or is an area requiring further support in order to mitigate risk, it is expected that the identified need will be further addressed in the service planning process and will be reflected in the person's Plan of Care. Once an area is identified by the individual and his/her circle of support as a concern or unmet need, document the following in the person's Plan of Care:

- What does the individual's circle of support consider to be non-negotiable risks? Which safeguards are essential to ensuring the health and safety of the individual?
- Potential barriers and factors that impact the area of concern
- Strategies that can address the unmet need, such as training and education, increased supports and services, and/or increased supervision
- Short-term strategies specific to the area of concern, and
- Long-term goals specific to the unmet need

## Strengths and Risk Inventory

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
<b>AUTONOMY, DECISION-MAKING, AND SUPPORT NETWORK</b>			
1. I have <b>opportunities</b> to make decisions and act upon preferences in <b>all</b> areas of my life.  (Includes the right to make informed choices about care, and the right to refuse interventions; also includes if you have support identified in your service plan to assist in making decisions).			
2. There is a way (or <b>method</b> ) for me to make decisions and express preferences as well as <b>act upon</b> those preferences in all areas of my life.  (May also be through use of a communication device, and through non-verbal preferences such as a change in behavior).			
3. I have <b>access to information and resources</b> that assist me in making decisions about my life.			
4. I have <b>access to family, friends, and natural/community supports</b> in addition to paid service providers for information and assistance in making decisions.  (note if the person is completely dependent on their advocate or guardian for making major decisions)			
5. I am aware of my <b>civil rights</b> as an American and know how to exercise them. I am able to ask support staff for help or assistance with exercising these rights when I need to.  (includes the right to vote, freedom of speech, freedom from discrimination and many others)			
6. I am able to make <b>back-up plans</b> and can adjust to changes in my schedule.			

## Strengths and Risk Inventory

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
(staff cancellation, changes in someone’s work schedule, etc)			
7. I am <b>comfortable telling staff</b> when I am unhappy with their performance or behavior and know who to contact if I have concerns regarding my plan or the services that I receive.			
8. I am comfortable with talking to my <b>family and/or advocates</b> about concerns and <b>decisions</b> that are important to me.			
PERSONAL INCOME, MONEY MANAGEMENT, AND FINANCIAL SUPPORT			
9. I have <b>a stable source of income</b> that covers basic living needs like shelter, food, transportation, and clothing.			
10. I have enough <b>support</b> to effectively manage my <b>income</b> in order to ensure that my basic needs are met and budget my expenses adequately.  (support can be through examples such as having a double signature bank account, a rep payee, or assistance with budgeting).			
HOUSING			
11. My <b>living arrangement</b> is safe, and has adequate heat, hot water, and electricity.			
12. I have <b>basic furnishings</b> necessary for daily living (including bed, chairs, table, lighting, and appliances).			
13. I live in a neighborhood where I feel <b>safe</b> and have access to needed and available resources.			
PHYSICAL AND MENTAL HEALTH			
14. My health is maintained through <b>access</b> to appropriate medical monitoring for preventative testing and medication therapy when needed.			

## Strengths and Risk Inventory

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
15. I receive <b><i>prompt and up-to-date</i></b> treatment for physical and mental health concerns.			
16. I know how to <b><i>identify and report any health concerns</i></b> that I have to the appropriate people, such as my staff, my family, or my doctor.			
17. I receive <b><i>assistance with personal care</i></b> when I need it.  (if you have a physical disability that limits your ability to provide self-care)			
18. I can <b><i>maintain a diet</i></b> that meets my nutritional needs and keeps me healthy.			
19. I can provide <b><i>informed consent</i></b> for my own healthcare decisions.  (such as for psychotropic medications, major medical procedures, and emergency treatment)			
20. I take my <b><i>medicine</i></b> on time, as prescribed by my doctor and know what to do when my medicine runs out.			
21. My medications are stored <b><i>safely</i></b> .  (Unless a medication has specific storage instructions, all medications should be kept in a location that is safe and easy to access). The following are some good reminders about medication storage: don't keep your medications near sources of heat, or in the bathroom medicine cabinet (too much humidity), keep your medications in the container they came in, heat and direct sunlight can affect your medication, and remember to keep ointment tubes and toothpaste separate.  In instances when a person who is self-medicating lives with people who cannot safely handle medications, it is necessary to ensure that the medications are accessible to the individual, while secured/inaccessible to their housemates.			
22. I have a <b><i>list</i></b> of all of the <b><i>medications</i></b> I take and I know why I take them.  (Everyone should have a list that includes all of their medications, including the name and phone number for the prescribing doctor and the pharmacy that fills the prescription.)			

## Strengths and Risk Inventory

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
<p>23. There are other people who know about my <b>medications</b> and who can <b>assist</b> me if I have questions or need help with them.</p> <p>(This person could be a family member, friend, advocate, neighbor, certain staff, or a circle of support member)</p>			
<p>24. I use the <b>same pharmacy</b> for <b>all</b> of my medications when possible.</p> <p>(Using the same pharmacy is important. The pharmacist has a list of all of the medications taken, along with any known allergies. The pharmacist has to look at all of the medications taken with each refill or new prescription. The pharmacist can answer any of your medication questions.)</p>			
<p>25. I need <b>more support</b> to take my medication.</p> <p>(Can you open the bottle by yourself? Can you remember what time to take your medication?, can you swallow pills easily? If you need help, some solutions are: easy open containers, tablet splitters, pharmacy pre-split pills, order pre-filled weekly/monthly pill boxes, large print labels, medication calendar with pill box, blister packs, inhaler assisted devices and cream/ointment applicator, talking devices---these are all examples of items that can help with medication administration. You should also know what to do when you miss a dose of your medication.)</p>			
<p>26. I know the <b>side effects</b> of my medications.</p> <p>(You should know what to expect from all of your medications and know when you should talk to someone, or call your doctor when you think something is wrong)</p>			
<p>27. When my <b>medication runs out</b>, I know what to do.</p> <p>(If extra assistance is needed, you may want to: see if your pharmacy offers an automatic refill service, make a chart, use an electronic alert device, ask someone for help such as a family member, advocate, certain staff, neighbor, circle of support member, etc).</p>			

## Strengths and Risk Inventory

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
<b>SAFETY</b>			
<p>28. <b>Potential dangers</b> in my environment are <b>minimized</b>.</p> <p>(look for examples of when the person’s safety might have been in danger, such as walking home alone in the dark from work, having a building that is not safely secured with functioning locks, or having significant fire hazards.) Use careful thought and discussion to identify things that may jeopardize the person’s safety in the environment where he/she lives.</p>			
<p>29. I do not participate in <b>illegal</b> behaviors or activities.</p> <p>( such as using illegal drugs, prostitution, or theft.)</p>			
<p>30. I do not threaten, harass, or physically abuse other people and understand <b>personal boundaries</b> of others.</p>			
<p>31. I know how to <b>protect myself</b> from abuse and exploitation by others.</p>			
<p>32. I know what a <b>serious incident</b> is and tell my agency staff about it</p> <p>(may also include family member, advocate, or close friend)</p>			
<p>33. I have a plan in place for <b>emergencies</b> and natural disasters.</p>			
<p>34. I <b>receive prompt and appropriate emergency services</b> when needed, such as police, fire department, ambulance, or crisis line.</p> <p>(This item also includes whether there has been emergency planning with you and your support network to know which emergency services should be contacted for what reasons.)</p>			
<p>35. I am aware of and have access to all possible exits that I can use during a fire and am able to <b>safely evacuate my home in an emergency</b>.</p> <p>(there should be ongoing discussion and a plan in place for how to evacuate your home in an emergency)</p>			
<p>36. I am aware of <b>safety rules</b> for using a computer and for <b>sharing my personal information</b> with other people.</p>			

## Strengths and Risk Inventory

Conditions That Help Me To Succeed:	UNMET NEED TO BE ADDRESSED or AREA OF CONCERN	NO FURTHER SUPPORT NEEDED	N/A
<p>37. I have <b>no hearing or vision problems</b> that remain unaddressed.</p> <p>(includes whether there is a need such as visual aids and hearing aids, and whether the home might need equipment for you to get around your home easily and safely.)</p>			
<b>APPEARANCE/HYGIENE</b>			
<p>38. I make choices related to <b>good personal hygiene and clothing</b> that are appropriate for weather conditions and minimize potential health related problems.</p> <p>(You should be able to maintain acceptable hygiene and appearance so as to not restrict where you can work and socialize)</p>			
<p>39. I am able to and have a <b>means to communicate</b> on a regular basis with the primary people in my life, including paid and unpaid supports.</p> <p>(may include speech, signing, and communication devices)</p>			
<p>40. I have ways <b>to move about my home and community</b> and my basic needs in this area are satisfactory.</p> <p>(do you have sufficient transportation to have the job or day opportunity of your choice, meet friends and family for recreational events, and obtain basic supplies for living?)</p>			

## Strengths and Risk Inventory

### Signatures:

Individual: \_\_\_\_\_ Date: \_\_\_\_\_

MSC: \_\_\_\_\_ Date: \_\_\_\_\_

Advocate/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

### Other Circle of Support Members: Note relationship to the individual

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_