Enhancing Health and Welfare of Individuals Receiving HCBS

HHS Panel (OIG, ACL, CMS)
NASDDDS 2018 Directors Forum & Annual Conference

November 8, 2018
Purpose & Objectives of Session

• Provide updates on the findings and model practices that were published in early 2018 in the Joint OIG-ACL-OCR report entitled, “Ensuring Beneficiary Health & Safety in Group Homes”

• Discuss actions being proposed by CMS as a result of these inquiries

• A review of effective strategies that states are deploying to address, mitigate and prevent abuse & neglect in HCBS settings through improved critical incidence reporting and monitoring, highlighting the unique roles that ACL’s funded networks can play in implementing this work.
Key Themes

• Distinctions in Scope, Methodologies and Target Populations

• Generalizability of Key Findings and Application of Systems-Change Recommendations for Broader HCBS Sector

• Ongoing Commitment of Federal Partners to work with States, Providers, and Aging & Disability Advocacy Networks on Implementing Model Practices and Effective Strategies
Panelists/Contacts

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Megan Tinker
HHS Office of Inspector General
Who Is HHS OIG

• The Office of Inspector General is an independent and objective oversight agency

• OIG is responsible for identifying fraud, waste, and abuse and promoting the economy, efficiency, and effectiveness of HHS programs
Why We Did These Audits

• Congressional request
  – prompted by series of media reports regarding abuse and neglect of individuals residing in group homes

• Performed audits in CT, MA, NY, and ME

• Reviews focused on Medicaid beneficiaries
  – Criteria: HCBS Waiver, App. G Participant Safeguards
  – Data matching
Results of Audits in CT, ME, and MA: Findings

• The State agencies did not comply with Federal waiver and State requirements on reporting and monitoring critical incidents.

• State agencies did not ensure that:
  – All critical incidents were reported.
  – All critical incident data was analyzed to detect unreported incidents.
Results of Audits in CT, ME and MA: Recommendations

We made several recommendations to the Medicaid State agencies including:

– Develop and provide training on critical incident reporting
– Update their policies and procedures
– Provide access to Medicaid claims data.
HHS OIG Planned Work

• Conducting similar audits in 9 additional States.

• May issue roll-up report to CMS regarding audit results.

• Expanding this work to look at other settings – SNFs.
Inter-Agency Partnership

- Created to address problems found during OIG audits.
- Provide multiple perspectives and depth of expertise across knowledge areas.
Inter-Agency Partnership (2)

- Members include representatives from:
  - HHS OIG
  - HHS Office for Civil Rights
  - HHS Administration for Community Living
  - Department of Justice
A roadmap for States to implement better health and safety practices

Many of which are already required in the 1915(c) Medicaid HCBS Waiver, Appendix G.
• Coordination with CMS:
• Outreach to State stakeholders
• Eye on Oversight, Panel Discussion, Congressional Briefings
4 Model Practices:

- Incident Management and Investigations
- Quality Assurance
- Mortality Reviews
- Incident Management Audits
Model Practices (2): A Roadmap for States

• Key Goals of the Model Practices:
  • Meaningful State and Federal oversight
    – Identify and report
    – Investigate
    – Remedy
    – Transparency and accountability
OCR was an active partner with OIG, ACL, and DOJ in developing the recommendations.

As the HHS enforcer of disability rights under Title II of the ADA and Section 504 of the Rehabilitation Act, Olmstead is a critical part of OCR’s enforcement, policy, and outreach efforts.

Quality of care in the community is an Olmstead issue.

Report recommendations represent first-time consensus between HHS agencies, with stakeholder input, on comprehensive quality assurance mechanisms.

Recommendations include integration in the community as one of the measurable criteria.

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ADVANCING HEALTH AND SAFETY PRACTICES IN STATE HCBS SYSTEMS

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The Need for Systemic Improvement

• Individual with developmental disabilities are at greater risk for abuse and neglect for a variety of reasons

• Abuse and neglect occurs in a variety of settings and environments and not just in group homes (the focus of the OIG reports)
Importance of Home and Community Based Services

• Research shows people living in the community have better quality-of-life outcomes related to their health, independence, privacy, and social engagement.

• People with developmental disabilities and their families have an increasing desire to live in the community

• Ensuring group homes are an option to support people to live in the community is a vital strategy for reducing the risk of abuse and neglect
Protecting Rights & Preventing Abuse
Pillar: Living Well Grants

• Living Well-Model Approaches for Enhancing the Quality, Effectiveness and Monitoring of Home and Community Based Services for Individuals with Developmental Disabilities projects to develop and test one or more model approaches of a coordinated and comprehensive system that includes two interrelated core components:
  – (1) Community Monitoring and
  – (2) Community Capacity Building.
Two inter-related core components for enhancing and assuring the independence, integration, safety, health, and well-being of individuals living in the community:

Community Monitoring:
Reduce abuse and neglect of people with developmental disabilities

Community Capacity Building:
- Supporting DSPs
- Leadership of individuals with ID/DD & families
- Evidence-based & promising practices
Current grants

• 2017 Grantees
  – The University of New Hampshire
  – The University of Virginia
  – The University of Georgia

• 2018 Grantees
  – Wisconsin DD Council
  – ALASKA DD Council
  – UMKC UCEDD
  – Idaho UCEDD
  – Indiana Family and Social Services
Living Well Model Approaches - GA

• The Institute on Human Development and Disability at the University of Georgia is working with five HCBS provider organizations to:
  – Increase staff knowledge and skill in supporting people with IDD to be self-determined through targeted training in Supporting Informed Decision Making and Supporting Social Roles;
  – Create career paths for direct support staff through the implementation of Directcourse’s College of Direct Support and engagement with the NADSP;
  – Enhance monitoring using Therap’s Business Intelligence platform for data aggregation and trending
Partnership for People with Disabilities at Virginia Commonwealth University is creating a replicable and sustainable model of regional leadership teams that is centered on four core elements:

- Capacity building (e.g., training, support, coaching),
- Monitoring (e.g., facilitated review of multi-level data to make changes, for quality continuous improvement, and to develop benchmarks).
- Policy feedback loops connect policy to practice. Regional successes, barriers, and outcomes learned through ground level implementation will be translated to state-level policy and regulatory conversations and decision-making.
- Organized, expert implementation support
Living Well Model Approaches - NH

• The Institute on Disability at the University of New Hampshire:
  – Developing self-advocate led trainings and improving training for service providers
  – Evaluating and improving the use of the Health Risk Screening Tool for monitoring
  – Developing quality indicators to apply to the components of the state’s quality assurance system using indices outlined in the OIG and National Association of State Directors of Developmental Disabilities Services report as a beginning framework.
Year One Accomplishments

GEORGIA
• Conducted two direct Course/College of Direct Support (CDS) Administrator trainings. The trainings covered how to manage sub-users (provider partners) as well as all learners.
• Conducted a Supporting Informed Decision Making (IDM) train-the-trainer
• Administered a Staff Stability survey to all their provider partners.

VIRGINIA
• Conducted 43 Qualify of Life interviews with people residing in residential or day support services.
• Presented new regulatory definitions for critical incidents to the leadership team
• Collected benchmark data for project staff and State leadership team.
Year One Accomplishments

- **NEW HAMPSHIRE**
  - With partners and stakeholders reviewed draft quality indicators based on indices outlined in the OIG and NASDDDS report and data sources and identify NH data sources and additional data collection strategies.
  - Conducted a literature review to find instruments shown to be effective from the standpoint of psychometric properties, or they otherwise lend opportunities for comparative analysis with other states.
  - Conducted training for both Service Coordinators (primary data entry staff) and the agency nurses (who complete clinical reviews) to increase competency regarding the Health Risk Screening Tool and how it is used to ensure optimal health for the individuals being served.
ALASKA

Goals

• Strengthen the knowledge and skills of direct support professionals to use evidenced-based and/or promising practices related to culturally and linguistically person-centered thinking and supported decision-making which may improve workforce stability, retention, and advancement.

• Strengthen and elevate the leadership roles that self-advocacy organizations, Centers for Independent Living and other peer support networks, working together with families and others, play in improving and assuring the quality of home and community based services.

• Enhance the effectiveness and coordination of efforts by the state, the DD Act network and others to implement the HCBS settings rule and address rights violations in the HCBS service delivery system for people with DDs.

Partners

Alaska Association on Developmental Disabilities (AAD); Alaska Governor’s Council on Disabilities & Special Education (GCDSE); Alaska Mental Health Trust Authority; Center for Human Development, (SAIL); State of Alaska Division of Senior & Disability Services (DSDS); and Statewide Independent Living Council University of Alaska; Disability Law Center of Alaska (DLC); Key Coalition of Alaska Peer Power, Inc.; Southeast Alaska Independent Living
INDIANA

Goals

• Collaborate with and empower self-advocates, families, and key stakeholders throughout this project, ensuring full involvement in the development of practices, policies, and procedures to elevate Home and Community-Based Services (HCBS);

• Develop and implement an improved process for analyzing data from HCBS providers to influence practices, policies, and procedures for increasing quality of and access to services that improve positive outcomes for individuals with I/DD;

• Develop and test toolkits for providers, individuals, and their families to improve monitoring of safety, health, and well-being of individuals with I/DD as well as reduce risk factors for abuse, neglect, and exploitation; and,

• Identify, develop, and implement an innovative approach to build the capacity of community supports for individuals with I/DD, bolstering paid and non-paid community services and supports

Partners

Indiana Family and Social Services, IIDC (UCEDD), SAI, Arc of Indiana, the Indiana Governor’s Council for People with Disabilities, IDR, the ICADV State-Level Abuse Prevention Task Force, and the Mental Health Waiver Home Workgroup, Indiana Association of Rehabilitation Facilities, Indiana Association of Behavioral Consultants, the Indiana Governor’s Council for People with Disabilities, Indiana Disability Rights, the Indiana Coalition Against Domestic Violence, State-Level Abuse Prevention Task Force, and the Mental Health Waiver Home Workgroup
IDAHO

Goal

- To build an innovative, self-advocate led health and safety monitoring system designed to protect adults living in HCBS settings against abuse, neglect, and exploitation; and to create a comprehensive system of training and career pathway to ensure that
  - Providers support individuals through the use of evidence-based approaches aligned with principles and practices of person-centered thinking and self-determination; and
  - Individuals, together with family members, have the tools necessary to advocate, protect, and guide their own lives.

Partners:

MISSOURI

Goals

• Engage diverse partners and promote meaningful engagement of self-advocates and families;
• Develop and implement a coordinated system for monitoring and improving safety, health, and well-being of individuals with DD receiving HCBS;
• Design, identify, and implement evidence based practices and innovative strategies, including training to build the competencies of direct support professionals, designed to improve services and reduce risk factors;
• Disseminate project results, products and materials statewide and nationally; and
• Sustain the model system of community monitoring and capacity building

Partners

Missouri Association of County Developmental Disability Services, Living Well County Collaboratives, Human Services Research Institute, People First of Missouri, and National Association of State Directors of Developmental Disabilities Services
WISCONSIN

Goals

- Implement an intervention package in 5 pilot communities;
- Provide coaching to pilots to ensure full implementation and fidelity;
- Create policy and practice recommendations;
- Develop a statewide peer leadership network to maximize independence and conduct health/safety monitoring;
- Determine a sustainable model of capacity building and community monitoring to benefit individuals with I/DD living in the community

Partners

DD council, P&A, State Division of Long-Term Care, Arc, and Long-Term Care managed care organization, self-directed consulted agency, providers, CQL
Cross-site Evaluation

• To determine how the Living Well grants are being implemented across the grantee sites
• Whether the grants are meeting the goals for the projects
• Whether the models implemented across the sites impact the quality of life of individuals with developmental disabilities
• Features of scalability, sustainability, quality and effectiveness
• Contract awarded in September 2017 to New Editions
Technical Assistance

• Support the design and development of effective and efficient training and technical assistance (T/TA) for the Living Well grantees to enhance grantee outcomes in creating comprehensive model systems in states that will enhance the safety, health, and well-being of individuals with intellectual and developmental disabilities.

• Broaden dissemination of projects results by creating effective and efficient national technical, training and informational resources on the replication of promising practices and strategies identified through the grantees that state systems, providers, and advocacy groups can deploy based upon the key learnings and successes of the Living Well grantees.

• Funded contract with Mission Analytics September, 2018
Questions?