Developmental Disabilities Administration (DDA)

Facility Based Day Habilitation
Re-Opening Discussion

March 23, 2021
Welcome and Agenda

- Introductions
- Objective
- NASDDDS Presentation
- Support Available - Funding
Introductions

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Objective

• To have an open dialogue about re-opening facility based services with lessons learned from COVID-19 impacts.
• This is an opportunity for providers to discuss their experiences with soft openings, virtual supports, and flexible schedules, and learn from national trends.
Seizing Opportunity for Service Innovation: Supporting Meaningful Lives

Rie Kennedy-Lizotte, NASDDDS Director of Employment Policy

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Facility Based Day Re-opening Discussion
Efforts to Return to “Regular” Services:

Systems Level Considerations

Provider Level Considerations

Individual and Family Considerations

NASDDDS published resources to assist in these deliberations:

LINK
## Top Issues in State I/DD Systems: Ongoing Challenges

<table>
<thead>
<tr>
<th>Need to Address</th>
<th>Working to Achieve</th>
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<tbody>
<tr>
<td>HCBS Regulatory Compliance</td>
<td>Increase availability of technology solutions</td>
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<tr>
<td>EVV Implementation</td>
<td>Empower individuals/ Supporting families – create systems that default to those principles</td>
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<tr>
<td>DSP Workforce Shortage</td>
<td>Increase opportunities for self-direction; reduce reliance on congregate models of support</td>
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<td>Supporting individuals with complex medical needs and individuals with co-occurring mental health/IDD</td>
<td>Supporting individuals with co-occurring mental health support needs and I/DD</td>
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<tr>
<td>Increase employment opportunities</td>
<td>Improve and Incentivize quality – not volume</td>
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All of this work must be informed by efforts to increase the cultural and linguistic competency of our service systems.
## Employment and Day Providers

### Ongoing Challenges

<table>
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<th>Need to Address</th>
<th>Working to Achieve</th>
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<tbody>
<tr>
<td>Financial Stability</td>
<td>Increase availability of technology solutions</td>
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<td>Business Model</td>
<td>Individualized service delivery or program designed service models</td>
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<td>Expanding virtual service modality</td>
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<tr>
<td>DSP Workforce Shortage</td>
<td>Increase opportunities for self-direction; reduce reliance on congregate models of support</td>
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<tr>
<td>Increase individual competitive employment opportunities</td>
<td>Shift from facility employment to supporting individual pathways to competitive integrated employment</td>
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<tr>
<td>“Meaningful Life” – Supporting adult life activity outside employment</td>
<td>Differentiate support for socialization and adult learning in inclusive environments,</td>
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All of this work must be informed by efforts to increase the cultural and linguistic competency of our service systems.
What We Learned/Learning from Families and Self Advocates during the Pandemic
What Families Said Was Helpful During COVID-19 and Wish to Keep/Adapt/Expand

While many families of people with disabilities have found the pandemic stressful, disruptive and difficult as it has been for most Americans, some themes have emerged in what has helped—and considerations for keeping for the long term.

Peer to Peer
Self Advocacy Peer to Peer
More Individualized
Person Learned New Skills

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Some states have waivers with peer-to-peer services for both family peer-to-peer and self advocacy peer-to-peer. Depending on state definitions, these supports help individuals and families navigate systems, explore how to best support each other, their loved ones, look at possibilities such as employment, etc. During the pandemic, many states irrespective of having a waiver-funded peer service, expanded peer support through-

- Calls, webinars, zoom and other platforms
- Family to family centers
- Self advocacy groups

Sharing strategies, ideas, recreation, navigation, exploration, information and planning, employment ideas
More Individualized

- “Pandemic” services aren’t in groups – more opportunities to listen to what I want to do and where I can learn to do that both virtually and the community.
- I am able to explore new ideas, new places and new possibilities for work and volunteering through virtual services and I am ready to have time in person, though. When things “open up”, I want to do
Learned New Skills

• Learned to use apps that I can use on the job
• Liked more privacy with staff and others
• Learned to use a debit card
• Learned to type
• Took a class through zoom and found out I like xxxxxx and met xxxxx
  • Developed relationships
  • Found out jobs I might be good at and like to do
  • Had fun and might want to take some classes on line and some in person

*Need support with equipment, phone, tablet, wireless, upgrading apps*

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What would you need to track hourly activities of support you provide for each individual?
Balancing

- Comfort with returning
- Needs of families
- Level of Risk (underlying and spread)
- Staffing levels
- Plans including for infection control
- Transportation
- PPE availability and tolerance
- Social distancing and physical plant
- Phase in management: Working with CMs
- Overall program and participant/family readiness
Approach to Reopening Services in the Community

1. Align with State’s Reopening Guidelines
   - Governor’s Proclamations
   - County Guidance
   - Public Health Framework

2. DDD Framework
   - Phased-in approach
   - Assessment of risk
   - Self-assessment- TQM
   - Based on course of COVID-19

3. Support Individual Transitions
   - Readiness for participants and families
   - Things have changed; people may be rethinking
   - Listen/have conversations
Dignity of Choice As People Leave Home

Keep Plan Current, Relevant, and Effective
How to assure the plan remains relevant to any risks identified at any time?
- Identify new risks identified
- Determine risk strategies that were helpful
- Decide on risks strategies that did not work or were not helpful

Do A Risk Assessment
What risks could be encountered during a visit with family?
- Being exposed to COVID-19
- Contracting COVID-19
- Spreading COVID-19
- Transportation

Identify Tolerable Risks & Risk Mitigation Strategies
What strategies can be used to reduce the risk associated with visiting family?
- Check temperatures
- Visit outside on patio
- Keep 6 feet distance
  - Wear a mask

Collaborate
Who needs to be involved in developing the plan?
- Family
- Friends
- Case Manager
What is your reopening plan?
Other Considerations

• People don’t seem to want all virtual or all in person—whether a person has labels or not

• Going back to a large day program wasn’t high on anyone’s list—safety, wanting to work, flexibility in schedules, interested in exploring other ideas, seeking work and activities that fit well within the context/rhythm of the family home

• Takes strong person centered planning—we are still learning to listen!

• People feel things are still in flux—what works? Communicate, communicate, communicate—even if there are not always clear answers. Share what you know.
Virtual Service Delivery

What are your concerns?
Can this be an opening to reinvent services?
a meaningful life is a construct having to do with the purpose, significance, fulfillment, and satisfaction of life.
Employment is a basic part of how we connect many of the “important to” aspects of life such as relationships and social roles, status, routines, places to go, enjoyable or activities that allow for increased opportunity in life.

Our work is not isolated from the rest of lives, rather it is woven into it.
Let’s Talk about Staffing

Do you have staff prepared to return to work?

Are you recruiting?

Are you planning to revise job descriptions to meet new service demands?
Figure 4. Support the People Who Support the People

**BE FLEXIBLE**
Motivate your team by giving them the ability to decide when and how they do their work. Have the team determine and agree on operating rules and responsibilities. Remember that trust begets trust.

**FOCUS ON WELL-BEING**
Stabilize the environment by making sure your team’s basic needs are met first. Consider their non-work obligations and affirm family responsibilities. Be aware of and provide available crisis resources.

**GIVE KINDNESS**
Treat each other with grace. Designate time and space for team bonding. Ensure people feel cared for and have a sense of belonging.

**BE TRANSPARENT**
Communication should be your constant. Remember, the same story is better than no story. Stay visible and accessible. Involve your team in decision making.

**TUNE IN**
Reassure your team and proactively check on people. Ask them the right questions – how can we help you now or do you have ideas for how we can do better? Provide them with individualized support. Listen and listen some more.

**CELEBRATE!**
Recognize wins – big and small. Use genuine and heartfelt rewards. Remember that a simple thank you or team shout out goes a long way to make people feel appreciated and validated.

**SET YOUR NORTH STAR**
Establish a vision; a clear sense of purpose. Communicate that vision relentlessly and use it to ground all decision making.
High # staff
High demand for service

Low # staff
High demand for service

High # staff
Low demand for service

Low # staff
Low demand for service

Staff Capacity

100% Staff

100% Participation

0% Staff

0% Participation

Service Participation
HCBS Setting Rule

Do your reopening plans bring you in compliance with the HCBS settings rule?
Compliance with minimum standards punches your ticket to get in the door. Meeting these standards is the floor, not the ceiling. Go beyond for systemic improvement.
Beyond COVID

- RETHINK
- REINVENT
- REOPEN

Change is not a criticism of the past
Now is the time for great advances in the acquisition of full civil rights for people with disabilities – the culmination of decades of effort

Competitive integrated employment and meaningful community engagement is key to the inclusion of people with disabilities as valued members of society

Perception change is critical to culture change and we all play a significant role in making this happen

We are fortunate to be civil rights workers and advocates for people with disabilities – celebrate your role and recognize your power to promote change!
Questions?

For More Information Please Contact:
Rie Kennedy-Lizotte
rklizotte@nasddds.org
Funding Opportunities

• The Community Health Resources Commission (CHRC) requests for information from MDH/DDA for the CHRC DDA RFP, for the funding ($5M) provided under the Relief Act. This is an opportunity for you as providers to support your transformation efforts from a prospective payment to a fee for service. The funds also support pandemic related opening and revenue loss.

• Information will be shared with providers as RFP launches
Funding Opportunities

• The Maryland Developmental Disabilities Council (Council) seeks proposals from community service providers, licensed, certified, or approved by the Developmental Disabilities Administration (DDA). The goal of this project is to ensure people with developmental disabilities receive services in a seamless, individualized, and sustainable, way, whether they are at home, on-site with a provider, or in the community.
Funding Opportunities

• A maximum of five diverse providers will be selected to receive technical assistance from a subject matter expert selected by the Council. Each of the providers will work with the selected subject matter expert to transform service delivery models and business practices, recover and rebuild as needed due to the COVID-19 pandemic, and identify effective strategies that can be replicated.

• To learn more about this opportunity please visit [here](#).
Thank you for your continued support

Questions?