

# Presentation to the Task Force to Study the Needs of Persons with Intellectual Disability



**Department of Developmental Services**  
**Commissioner Jordan Scheff**  
**October 30, 2019**

# Special Act 18-2



Section 1 of the Act establishes...

*“a task force to study (1) the short-term and long-term needs of adults with intellectual disability, including, but not limited to, such adults with significant behavioral health issues or significant issues related to aging, including Alzheimer's disease, dementia and related disorders, and (2) ways in which the services and support such adults need may be provided.”*

- The Act did require the task force to submit a report on its findings no later than January 1, 2019. However, Section 12 of Public Act 19-56 extended the reporting deadline to January 1, 2020.

# DDS Responsibility



The Department of Developmental Services (DDS) is responsible for the planning, development and administration of complete, comprehensive and integrated statewide services for persons with intellectual disability and persons medically diagnosed as having Prader-Willi Syndrome.

DDS provides services, within available appropriations, through a decentralized system that relies on private provider agencies under contract or enrolled with the department in addition to state operated services.

Services include residential services and in-home supports, day services and employment supports, family support, respite, case management, and other periodic services such as transportation, interpreter services, and clinical services.

# Eligibility for DDS Services



In order to be eligible for supports or services from DDS, an individual must:

- 1) Be a resident of the State of Connecticut; and
  - 2) Have an intellectual disability as defined in Connecticut General Statutes Section 1-1g OR have a medical diagnosis of Prader-Willi Syndrome that is diagnosed by a physician.
- Individuals who have a diagnosis of autism spectrum disorder, but do not have intellectual disability may be eligible for services from the Autism Spectrum Disorder Program administered through the Department of Social Services.
  - Per Connecticut General Statutes Section 1-1g provides the statewide definition for intellectual disability. The statute defines intellectual disability as a significant limitation in intellectual functioning and deficits in adaptive behavior that originated during the developmental period before 18 years of age.

# DDS Budget: FY 2020-2021



The FY 20-21 state budget funds DDS over both years of the biennium. The DDS budget includes:

- Annualized funding for Emergency Placements. DDS will continue to use this funding to develop crisis prevention and intervention strategies to deescalate crisis situations and prevent long-term hospital emergency department stays. Current initiatives include the Step Up/Step Down Unit and Enhanced Family Support teams. (more detail later on in the presentation)
- Annualized funding for Housing Supports and Services. This funding will provide 70 new supportive housing units for individuals with intellectual disability and autism spectrum disorder. (more detail later on in the presentation)
- Funding for case load growth for employment opportunities and day service placements.
- Funding for case load growth in the Community Residential Services account. This account funds room and board payments for DDS residential services and can be found in the Department of Social Services budget.

# DDS Budget: FY 2020-2021



## **DEPARTMENT OF DEVELOPMENTAL SERVICES**

<b><i>Fiscal Year</i></b>	<b><i>2019-2020</i></b>	<b><i>2020-2021</i></b>
Personal Services	200,282,835	209,745,951
Other Expenses	15,133,419	15,069,356
Housing Supports and Services	350,000	1,400,000
Family Support Grants	3,700,840	3,700,840
Clinical Services	2,340,271	2,337,724
Workers' Compensation Claims	14,598,415	15,404,040
Behavioral Services Program	23,044,686	22,571,979
Supplemental Payments for Medical Services	3,233,467	3,008,132
ID Partnership Initiatives	1,529,000	1,529,000
Emergency Placements	5,630,000	5,630,000
Rent Subsidy Program	4,782,312	4,782,312
Employment Opportunities and Day Services	277,945,780	289,183,217
<b>AGENCY TOTAL</b>	<b>552,571,025</b>	<b>574,362,551</b>

## **DEPARTMENT OF SOCIAL SERVICES**

<b><i>Fiscal Year</i></b>	<b><i>2019-2020</i></b>	<b><i>2020-2021</i></b>
Community Residential Services	622,412,127	638,014,602

# How Many People Does DDS Serve?

7

- According to the [DDS Management Information Report](#), which is published quarterly, 17,126 individuals were active in the DDS system as of June 2019.

## Section I: Services and Supports

June 2019

### A. Where People Live and How They Are Supported

#### STATEWIDE

Total Individuals with Intellectual Disability who are active with DDS: 17,126

#### How They Receive Support

Where People Live		DDS	Private Provider	Self Direct	Private ICF	No Annual Funds	Grand Total	% Total
<b>At Home</b>	Family Home		502	1,042		8,135	9,679	56.52%
	Own Home (IL)	129	858	312		379	1,678	9.80%
	Sub-Total	129	1,360	1,354		8,514	11,357	66.31%
<b>DDS Operated/ Funded</b>	CCH (Companion Home)		390				390	2.28%
	CLA (Group Home)	180	3,216		350		3,746	21.87%
	CRS (24 hr Supports)		718				718	4.19%
	DDS Center	151					151	0.88%
	STS (Southbury)	173					173	1.01%
	Sub-Total	504	4,324		350		5,178	30.23%
<b>Other</b>	Blank		40				40	0.23%
	Long Term Care		337				337	1.97%
	Not DDS Funded		49				49	0.29%
	Residential School		97				97	0.57%
	Sub-Total		523				523	3.05%
<b>Other State Agencies</b>	DCF		57				57	0.33%
	DMHAS		3				3	0.02%
	DOC		8				8	0.05%
	Sub-Total		68				68	0.40%
<b>Grand Total</b>		633	6,275	1,354	350	8,514	17,126	100.00%

# Level of Need



Once an individual is determined eligible for DDS services, DDS uses a standardized assessment tool to assess each individual's level of need for DDS funding and services.

The Connecticut Level of Need Assessment and Screening Tool was developed in conjunction with the University of Connecticut. The original web-based LON assessment tool was launched in 2008 and was funded through a Centers for Medicare and Medicaid Services (CMS) Systems Change Grant.

This web-based tool assesses an individual's needs in key areas including, but not limited to:

- health and medical
- personal care activities
- daily living activities
- behavior
- safety
- support for waking hours
- overnight support
- comprehension and understanding
- communication
- transportation
- social life
- recreation
- community activities
- unpaid caregiver support



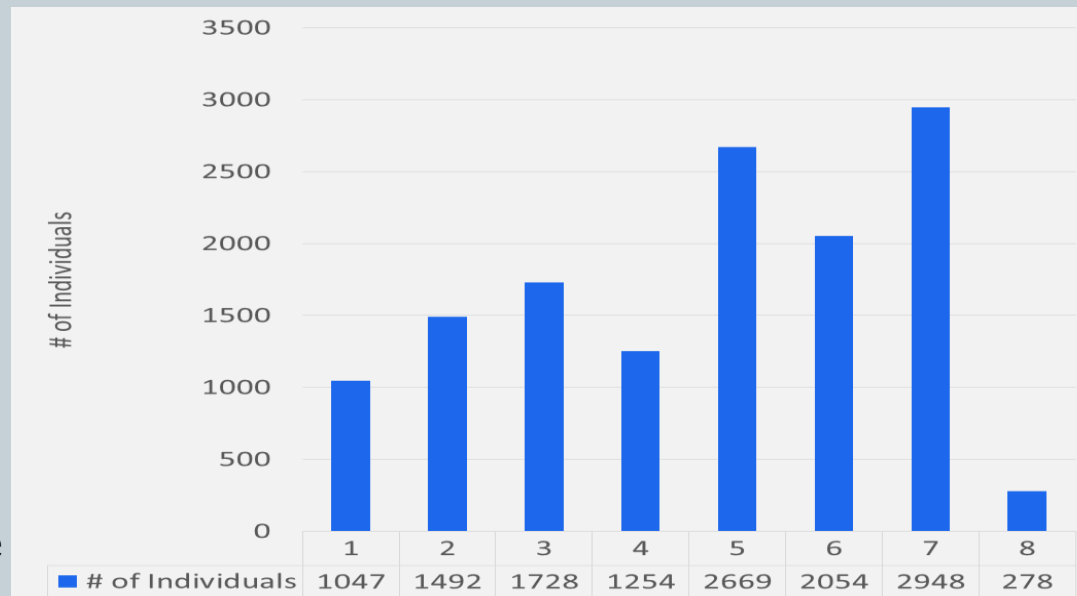
# Level of Need



Utilizing a scoring algorithm, the individual's completed LON assessment is then given an overall score ranging from 0 to 8 (8 being the highest level of need).

Both the LON score and the information collected in the assessment is used to develop a comprehensive Individual Plan (IP) that identifies areas of assistance to meet personal goals and address any potential health and safety risks. The IP determines what services and funding are needed.

- Per the June MIR, DDS supports 17126 people.
- A total of 13470 individuals have a recent LON.
- A total of 4267 supported individuals fall between a score 1 to 3 (Low).
- Within the medium category, 5977 individuals score 4 to 6.
- Additionally, 3226 individuals have a score between 7 and 8 (High).



# DDS Residential Waiting List

## Understanding the Categories



As of September 2017, DDS residential needs were presented using new categories. To determine priorities the following categories were created:

List	New Category	Description
Waiting List	Emergency	The individual has an immediate need for residential placement, support or services
Waiting List	Urgent	The individual is requesting placement within 1 year and has been determined to have the most pressing need for services
Planning List	Future Needs	The individual wants or will need services in two or more years

In addition, individuals were also categorized into one of these two target groups:

No Services	No Services/Resources - Individuals who do not receive any annualized funding.
Underserved	Individuals who currently receive services or supports but need increased resources in their current placement and does not want or need to move.

# DDS Residential Waiting List

As of June 2019



Waitlist- No Services- Emergency	36
Waitlist- No Services-Urgent	541
<b>Waitlist- No Services TOTAL</b>	<b>577</b>
Waitlist-Underserved-Emergency	37
Waitlist-Underserved- Urgent	145
<b>Waitlist-Underserved- TOTAL</b>	<b>182</b>
Future Needs (want/need services in two + yrs)	1,079
<b>Waitlist TOTAL</b> (no services, underserved and future needs)	<b>1,838</b>

# DDS Initiatives

## Emergency Placements



In FY 2019 DDS received a \$5 million appropriation for emergency placements. This funding was used to develop crisis prevention and intervention strategies to deescalate crisis situations and prevent long-term hospital emergency department stays.

- Step Up/Step Down Unit- DDS launched a six bed unit to support individuals in crisis and in need of behavioral stabilization, who are coming from community-based settings or hospital emergency departments.
- Enhanced Family Support Teams- DDS expanded our current Individual and Family Support Teams to focus on increasing capacity and providing rapid support to individuals living in community-based settings who may be experiencing crisis.

In both programs, DDS acts as an intermediate support focused on stabilization, ultimately transitioning individuals to community-based providers for ongoing services.

# DDS Initiatives

## Housing Supports



- Intellectual Disabilities & Autism Spectrum Disorder Housing (IDASH) Program-The IDASH program is an interagency collaboration between DDS, DOH and CHFA to fund the development of mixed-use, affordable housing units. Interested developers apply for the program and are awarded on a rolling basis. Awardees partner with DDS qualified providers to develop innovative housing models in fully integrated community settings.
  - Currently, projects in Canton and Bloomfield are underway with 19 combined units serving approximately 39 individuals upon completion.
- Housing Innovation Pilot Project- Pursuant to section 2 of Special Act No. 18-2, DDS launched a Housing Innovation Pilot project at the beginning of FY19. The purpose of this pilot is to establish and evaluate alternative service models in which individuals who are currently receiving residential services may move from their existing residential settings (with consent) to a more independent, less restrictive residential setting.
  - In total, the housing pilot is projected to provide supports to approximately 37 individuals with intellectual disability.

# DDS Initiatives

## Qualified Provider Wages



Special Act No. 18-5 AN ACT CONCERNING MINIMUM EMPLOYEE WAGES FOR PROVIDERS OF STATE-ADMINISTERED SERVICES FOR PERSONS WITH INTELLECTUAL DISABILITIES allowed OPM to allocate funds to increase the wages of certain employees of DDS qualified private providers.

- Specifically, the Act makes funding available for providers to pay a minimum wage of not less than \$14.75 per hour to employees who work in DDS-funded programs. Wages for these employees must be increased to \$14.75 or by up to 5%, whichever is greater.
- DDS has updated private provider reimbursement rates and the payment system to include the minimum wage funding and the September provider payments included the minimum wage funding.

# DDS Initiatives

## Employment Services



Employment is an integral part of the continuum of services that provide meaningful opportunities for individuals supported by DDS.

- In cooperation with the ID Partnership, DDS recently announced the 21 recipients selected to participate in the **Intellectual Disability Partnership Innovative Employment Outcomes Pilot**. Interested entities were asked to submit business plans for an innovative business model that employs or encourages the employment of individuals with intellectual disability. The program focuses on providing support and resources to ensure the success of new business ventures that integrate individuals with intellectual disability.
- DDS has also continued the **Project SEARCH initiative**, which connects businesses and individuals in an internship program. Individuals learn marketable skills in an occupational setting with the ultimate objective of securing competitive employment post-internship. There are 42 interns set to start in the 2019-2020 program year with 21 out of 22 Project SEARCH graduates from previous years currently employed.
- DDS is also hosting 18 focus groups around the state to engage with families, providers and staff about **the future of employment and day services**. The purpose of the meetings is to hear what is working, areas for improvement and creative suggestions for a path forward. Suggestions shared will provide a framework for DDS to improve day service options.

# DDS Initiatives

## Waiver Amendments



DDS and DSS recently proposed numerous amendments to the three DDS Medicaid Waivers.

The focus of the amendments is to expand our service array to include options to enhance the independence and quality of life of the individuals we serve. Amendments include:

- Increasing the limits on **Assistive Technology** and **Vehicle modifications** and **Environmental modifications** to promote community inclusion.
- Adding **Remote Supports** as a new service. Remote supports allows for real-time, two way communication through an off-site direct service provider that monitors a person's health and safety needs while promoting independent living.

Pursuant to Connecticut General Statutes Sec 17b-8, the Appropriations and Human Services Committees approved the waiver amendments on September 20, 2019.

The amendments are now under review with the Centers for Medicare and Medicaid Services (CMS). Anticipated effective date of the amendments, contingent upon CMS approval, is January 1, 2020.



# DDS Participation- Committees and Councils



## **Legislative Committees:**

- The Medical Assistance Program Oversight Council (MAPOC)
- Complex Care MAPOC subcommittee
- Developmental Disabilities Workgroup
- Autism Spectrum Disorder Advisory Council
- Behavioral Health Partnership Oversight Council
- Long Term Supports and Services Rebalancing Initiatives Steering Committee
- Task Force to Increase Employment Opportunities for Persons with Disabilities
- Task Force to Study Voluntary Services Program Operated by the Department of Children and Families (DCFVSP)

## **Governor's Councils:**

- Governor's Task Force on Housing/Supports for Vulnerable Populations
- Governor's Council on Women and Girls
  - Health and Safety Subcommittee
  - Leadership Subcommittee
- Governor's Committee on Employment for People with Disabilities

# DDS Participation- Committees and Councils

18

## **DDS Meetings:**

- Regional Advisory and Planning Councils (RACs)- Section 17a-273 of the Connecticut General Statutes allows for the establishment of three RACs. The RACs engage in education and advocacy on issues regarding individuals and their families in the region. The RACs meet at least six times annually. All meetings are open to the public. For a schedule of meetings or to review minutes of past meetings, choose the appropriate region on the DDS's webpage.
- The Council on Developmental Services-The Council was developed to advise and consult on issues affecting and its programs and services for individuals with ID. At each meeting time is set aside for public participation. A schedule of meetings and minutes from the meetings can be found on the DDS webpage under "Boards and Councils".



DDS is happy to answer any questions.

