### DD ADVISORY COUNCIL

Committee Structure

## DD Advisory Council

#### **CORE PURPOSE**

- Assist with adherence for standards of "best practice"
- Assist with facilitation of communication at all levels of system
- Make recommendations for improvements to current services
- Make recommendations for new and additional services
- Assist with assurance for quality services that are cost effective
- Review policy, and policy revisions

### DD Advisory Council

#### **MEMBER RESPONSIBILITIES**

- Attend all meetings; notify Chair the day of the meeting if not able to attend.
  Respond to all requests from Council.
  Actively participate and contribute.
  Focus on freedom, independence and happiness of the people we support.
  Complete all assignments and come to meetings prepared.
  Maintain confidentiality.
  Support the final decisions and recommendations made by Council.
- Avoid personal involvement in peoples' lives
  Practice objective listening
  Maintain State and Regional consistency across the whole state.
  Communicate the work of the Council to the group you represent.
  Use meeting minutes to be consistent.
  Bring feedback to the Council.
  Respect and demonstrate sensitivity to varied perspectives.

### **DD** Advisory Council Priorities

### Quality Improvement

### Communication

Family and Self-Advocate Involvement

### System Improvements

### **Committee Structure**

# System Design

### System Structure

### System Performance

Customer Focus

### System Design

This committee will work on issues that relate to the design the services system.

Activities would include the interrelationships of the DD system.

### Council Member: Eve Bogan, Heidi Moore, Lynnette Bragg, and Bruce Lindemann.

- Strategic Planning
- Exceptional Rate Development
- Development and definition for state and waivered funded services
- Provider enrollment and development
- Transition of persons out of institutions
- Improving access to services
- Eligibility

## System Design-Priorities

Enrollment	Waiver Services	Contracts/Rates/Other
Out of the box options for people while on the Planning Lists.	SIS	Strategic planning Supported Employment Leadership Network Defining best practice
Timely access to services.	Methodology for awarding waivers.	Vacancies in Grant in Aid contracts need to be filled more quickly.
Shorten Process for new providers /current to add new services.	Developing incentives for providers to accept Medicaid.	Viable rate structure that supports best practice and cost of delivery community based day services and supported employment.
Develop a network of services/providers/employees that can be accessed by families via a database.	ABD population-switched to redesign Medicaid Program by 2014. Complex needs-specialty care continued coordination of benefits.	Viable structure reflective of needs, acuity and cost of service provision- including unfunded mandates Incentives that are tied to best practice.
Broadening provider base and ensuring quality provider enrollment.	Need for a comprehensive survey to solicit input from all stakeholders on how Medicaid better serve individuals .	Rates need to established rates and consistently across state-includes exceptional rates.

# System Structure

Activities related to sustaining, administrating and supporting the work necessary for service delivery to occur

Communication

### Council Member: June Dipolito, Twana King, and Sheryl Arno.

- Contract development
- Roles of Support Coordination
- Reporting requirements
- Rules and operations relative to qualifying providers
- Policy development: new and revisions

## System Structure

Information, Assistance & Administration	Communication
Consistencies in doing business across regions and Support Coordination agencies.	Transparent communication for policy changes for Participant Directed.
Development of an online FAQS about provider manual for families and individuals that is customer friendly.	Effective information sharing DBHDD website.
Universal access to information on DBHDD website. Easy search function for DD manual to look up specific items.	Communication with families about changes to system.
Consistency in regard to training and implementation of policies, process, protocols and requirements for all parties.	Clear consistent information to all parties regarding changes to policy and protocol changes.
More description in Waiver manual regarding documentation and tracking.	An effective way to communicate with those on planning list.
Support Coordination-back to the original intent of the service- See full details on priority spreadsheet (mentioned 5 times).	Consistency in information communicated to regional offices, Support Coordination agencies, and providers.
Successful transition of individuals out of hospitals.	Streamlining all paperwork. Review of current forms and documents.

# System Performance

Activities related to measuring or reporting on the results or workings of the full system

Quality Improvement

### Council Member: Debbie Conway, Estelle Duncan, and Rita Young.

- > Review of Quality measurement system
- Provider report cards
- Fechnical assistance and training strategies
- Activities related to measuring of outcomes and end results

## System Performance

Quality Management	Quality Improvement
Quality Management system that is streamlined and that eliminates multiple oversight.	Review ways to improve quality of care.
Information and data collection should be utilized for system and provider enhancement.	Review the level of documentation required now and assess its efficiency.
Over regulation, redundancy and contradiction of regulations ( 4 times).	Safety-concerns in homes and communities for people with DD receiving services.
CR Teams-data usage, effectiveness, and is coordinated.	Enhanced provider training and support.
The system that includes oversight at all levels, needs to be re- vamped.	Real choice-roommates, staff, and food . Services reflect continuum of choice.
Categorize all policies and procedures by statutory, waiver, regulatory and discretionary.	Offer technical support and development in person centered thinking and building Persons Centered organizations.
Providers are financially accountable for errors created by others- recoupment.	

## **Customer Focus**

All things relative to the individual receiving services

Self advocates and families

### Council Member: Scott Crain, Mitzi Proffit, and Nandi Isaacs.

- All engagement with people with DD and their families
- Efforts to increase the opportunities and capabilities through knowledge and skill development
- Access and dissemination of information
- Assurance of cultural sensitivity
- Multiple methods of communication

### **Customer Focus**

#### **Families and Self Advocates**

Make recommendations that address parent's lack of understand for the process.

Review ways to improve schools transition into adult services to include pediatric doctors, vocational rehabilitation services.

Define strategies for educating families and Criminal Justice professionals on developmental disabilities.

Review policies and procedures to support families experiencing crisis.

Improve access to behavioral health supports.

Review strategies to improve training for individuals and DSP's on self determination and role of advocacy in supports.

Review current ISP expectations for aging population and determine services needs.

Develop and support customer service culture and capacity at all levels of the system that includes a focus on training for families and self advocates regarding navigating the system.