



**Shelby County Board of Developmental Disabilities
Strategic Plan 2017 – 2019**

PURPOSE OF THE STRATEGIC PLAN

The Shelby County Board of Developmental Disabilities has undertaken Strategic Planning in the belief that by recognizing and preparing to respond appropriately to changes that occur, we can make improvements that matter. We also believe that by being proactive rather than reactive, we have a better chance of continually ensuring the most efficient and effective supports possible.

We further need to note that we have taken a thorough, deliberate look at the organization and the fiscal challenges we face in the future. We have evaluated the changes that have occurred in our level of responsibility, in the population we support and their needs, in the social and economic climate that surrounds us and in the pool of human and financial resources upon which our system depends. This will enable us to make needed changes in a timely, efficient and effective manner.

The Shelby County Board of Developmental Disabilities has undertaken the development of a three-year strategic plan to guide its policy making and goal setting through the year 2019. It is intended that this plan will describe the principal issues that must be addressed as the Board continues the work of accomplishing its mission in the face of ever changing needs for support, legislative mandates, and declining fiscal resources.

The enclosed goals have been developed to reflect the needs of the organization and not individual departments. Specific department goals will be reflected each year in the organization's Annual Action Plan.

GOALS

- 1. Analyze costs of each division to ensure effectiveness, efficiency, and fiscal sustainability; focused on maximizing Medicaid revenue and maintaining local waiver services.**
- 2. Ensure a smooth Superintendent transition at the beginning of 2019 through continued implementation of a planned, purposeful process.**
- 3. Continue development and implementation of a community employment process that supports all individuals across all provider systems; including employer outreach and engagement.**
- 4. Develop and implement a consistent plan to support and recruit providers of services.**
- 5. Attain outstanding accreditation/certification awards across all programs.**
- 6. Enhance community awareness of our role focused on employment as a first option for people supported by the organization and fostering the idea of community membership. Increase technology presence through the website and use of social media.**
- 7. Focus on family support through the development of increased respite options and in-home support for children.**
- 8. Maintain and protect the culture and climate of the organization for employees through continued implementation of The Good Life principles and on-going wellness initiatives.**

9. Implement the Emergency Operations Plan through comprehensive education for employees.
10. Fulfil the obligations of OAC 5123:2-1-02 related to Strategic Planning in each year's annual action plan.



**Strategic Plan Background Document
2017-2019**

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Summary of Industry Trends

The Ohio Developmental Disability system is complex, with a combination of federal, state, and local funding, and requirements for service content and quality coming from the federal and state governments; as well as from people eligible for services and supports and their families. This section of the report provides only a highlight of recent and expected changes impacting the Ohio DD System.

Process Changes

One important change is not a change in the system, but rather a continuing evolution in how case management is supposed to be performed by emphasizing the importance of Person Centered Planning. The Center for Medicaid Services (CMS) highlighted the requirement for Person-Centered Planning in its January 2014 updates to the Home and Community Based Services rule.

The State of Ohio updated the Service and Support Administration rules to require Person-Centered Planning in March of 2014 and has provided significant training throughout the state regarding implementation. However, concerns remain about consistency across the state.

Increased Community Integration

Community integration is of paramount importance and is increasingly coming under federal scrutiny. The focus on community integration began with the Americans with Disabilities Act (ADA). It was reinforced with the Olmstead Decision, Ohio's Employment First Executive Order, and the recent changes to Medicaid funding to ensure the funding stream supports the intent of the Olmstead Decision.

- The Olmstead Decision states:
On June 22, 1999, the United States Supreme Court held in *Olmstead v. L.C.* that unjustified segregation of persons with disabilities constitutes discrimination in violation of title II of the Americans with Disabilities Act. The Court held that public entities must provide community-based services to persons with disabilities when (1) such services are appropriate; (2) the affected persons do not oppose community-based treatment; and (3) community-based services can be reasonably accommodated, taking into account the resources available to the public entity and the needs of others who are receiving disability services from the entity.¹
- Ohio Revised Code 5123.022, which put Employment First into statute states:
It is hereby declared to be the policy of this state that employment services for individuals with developmental disabilities be directed at community employment. Every individual with a developmental disability is presumed capable of community employment.
- CMS regulatory requirements for home and community based settings describe the need for integration as:
The setting is integrated in and supports full access of individuals receiving Medicaid HCBS (Home and Community-Based) to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS.
- The Ohio Department of Developmental Disabilities is identifying benchmarks to measure Ohio's progress in integrating schools, increasing community employment, integrating day services for those who are not employed in the community, and moving individuals from ICFs (Intermediate Care Facilities) and Developmental Centers to more typical home settings.

¹ Source: http://www.ada.gov/olmstead/olmstead_about.htm

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- The State of Ohio has put \$20.7 M of funding for additional waivers in place for County Boards to prevent individuals from moving into Intermediate Care Facilities (ICF) and to move people from an ICF into the community.
- On March 31, 2016, Disability Rights Ohio filed a lawsuit against the state of Ohio on behalf of individuals with developmental disabilities who are “trapped in institutions or are at risk of institutionalization because of Ohio's illegal service system”. The lawsuit asserts that the state is in violation of the Americans with Disabilities Act and the Supreme Court ruling in *Olmstead v. L.C.*²

Economic Challenges

Economic challenges include:

- Elimination of Tangible Personal Property Tax.
- Partially funded state waivers referenced above include substantial increases in costs for County Boards such as costs for additional Service & Support Administration staff, residential, adult day services (ADS), transportation services (NMT), and administrative fees of 1.25% of waiver service cost.
- Privatization restructuring of adult services creates an ongoing Public Employees Retirement System (PERS) obligation for carry-over employees. Additionally, county boards may not be able to divest themselves of buildings which are no longer needed depending on the local community culture and may be required to pay the balance of grant debt associated with building/upgrading school and adult facilities forty years ago.
- Potential negative environment for the passage of new levies due to the State of Ohio Rollback, requiring the local taxpayer to expend an additional 12.5% on new levies passed after 2012.
- Education is needed to dispel confusion and the perpetuation of misinformation in our new era where we continue to fund all services and supports, but are no longer a provider of direct services for adults.

Conflict Free Case Management

The CMS requirement for Conflict Free Case Management mandates that those who provide services must be separate from those who provide case management. CMS has given the State of Ohio until 2024 to be fully conflict free; five years longer than any other state in the country.

Changes in Persons Served

Many county boards are seeing an increase in the number of people they are expected to serve:

- People with DD are living longer, requiring services for a longer period of time and requiring more intensive services later in life.
- Individuals with new diagnoses that are different from our historical system (i.e. ADHD, Autism, dual-diagnosed, Fetal-Alcohol Syndrome) are entering the system.
- State-operated developmental centers and Intermediate Care Facilities (ICFs) are downsizing and residents are moving to counties with community waivers. Many of these individuals have more significant support needs.

² <http://www.disabilityrightsohio.org/class-action-lawsuit-community-integration-people-developmental-disabilities>

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New Mandates Driving County Board Planning

In addition to the changes mandated by CMS and the State of Ohio explained in the previous section, the State of Ohio has defined a strategic planning rule mandating that every County Board have a strategic plan with required minimum content in the plan.

OAC 5123:2-1-02 requires that a strategic plan address the following:

- a. "Promoting self-advocacy by individuals served the county board;
- b. Ensuring that individuals receive services in the most integrated setting appropriate to their needs;
- c. Reducing the number of individuals in the county waiting for services;
- d. Increasing the number of individuals of working age engaged in community employment;
- e. Taking measure to recruit sufficient providers of services to meet the needs of individuals receiving services in the county; and
- f. Meeting with each newly certified independent provider within sixty days of the provider being selected to provide services to an individual, for purposes of confirming the provider understands the individual service plan and the provider's responsibilities and ensuring the provider has contact information for the county board."

OAC 5123:2-2-05 contains the rules for implementing Employment First. It requires that county boards:

- (1) The county board shall adopt and implement a local policy to implement the employment first policy which clearly identifies community employment as the desired outcome for every individual of working age.
- (2) In its strategic plan, the county board shall outline and periodically update its strategy and benchmarks for increasing the number of individuals of working age engaged in community employment services.
- (3) The county board shall collaborate with workforce development agencies, vocational rehabilitation agencies, and mental health agencies in the county to support individuals to obtain community employment.
- (4) The county board shall collaborate with school districts in the county to ensure a framework exists for individuals approaching completion of a program or service under Chapter 3323. of the Revised Code such that the county board and school districts in the county use similar methods to support students with developmental disabilities to obtain community employment. Through this collaboration, the county board shall identify and attempt to resolve any duplication of efforts.
- (5) The county board shall disseminate information to individuals served, families, schools, community partners, employers, and providers of services about resources and opportunities, including Medicaid buy-in and other work incentive programs that facilitate community employment.
- (6) The county board shall collect and submit to the department individual-specific data regarding the cost of non-Medicaid employment services, employment outcomes for individuals who receive non-Medicaid employment services, and employment outcomes for individuals who do not receive paid employment services but who are engaged in competitive employment or community employment.

Emerging Needs

Although the State of Ohio and CMS have mandated changes to the DD system that require different opportunities for people with DD, it can be challenging for families to embrace these opportunities and many school systems are still teaching students with DD to become an employee in a sheltered workshop. County boards must consider additional changes:

1. There is a strong need for a culture shift in families and schools that will allow individuals to develop the skills and readiness for community employment and independent living.
2. Transition programs must provide greater preparation for adulthood and work.

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3. Person Centered Planning must continue to evolve, enabling people with DD to identify their choices and opportunities, with the individual plan defining what is needed for the person to achieve his or her aspirations.
4. County boards should continue to support advocates; developing ability in increasing numbers for individuals to speak up and advocate on their behalf and to participate in county board decision making.

New and Continuing Stakeholders/Partners

County Boards must collaborate with a number of different stakeholders and partners in order to achieve the outcomes in individual service plans. CBs must develop skills in influencing others and collaborating with others to achieve the outcomes. Stakeholders include:

1. Community employers and workforce development organizations
2. Public and private schools (K-12)
3. Providers of adult day, residential, and transportation services
4. Agencies supporting elderly individuals
5. Other social service agencies

Technology Changes

Technology should enable multiple changes for County Boards and individuals receiving supports.

1. Adaptive technologies
2. Computing and telecommunications technologies
 - a. Supporting remote work such as in the person's home
 - b. Supporting improved data collection and analysis
 - c. Supporting improved efficiencies and effectiveness
3. Monitoring technologies that can change the way in-home services are provided

Summary of Expected Concerns and Challenges

Concerns and challenges expected to be long term include:

1. Funding – will the community support levies in the future?
2. Concern for the long term fiscal sustainability of the county board includes several different components:
 - a. Increasing costs to fund services and supports for people
 - b. Increasing costs shifted from the state to county boards
 - c. Waiver commitments to people with DD
 - d. The potential of a levy failure
3. What is the future role, responsibility, and authority of the county board?
 - a. The importance of maintaining the SSA function with the county board
4. How to succeed with community employment and community integration?
5. How to educate the community, which is essential to future success?
 - a. Community understanding and support of integration and employment efforts

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- b. Community understanding of how the DD system works so that levies are supported
6. Fear of full reliance upon providers.
 - a. Quality of providers
 - b. Capacity of providers – will there be sufficient capacity to serve all the people in the community?
 - c. Specific services of providers - will we have providers to meet unique individual needs?
 - d. Lack of clarity on how to recruit providers to a county
 - e. Lack of clarity on how to support and assist providers
 7. Transportation is a critical success factor for community integration, yet most counties do not have sufficient transportation infrastructure.

Summary of Future Role for County Board

- Support providers to help them become stronger and develop needed services for every person; as well as ensure quality
- Ensure people receive needed services and supports
- Provide case management/SSA services
- Support schools in providing transition services
- Strengthen Early Childhood services and supports (EI, HMG)
- Support community integration and community employment
- Educate the community, advocate for inclusion of people with DD
 - Become a more visible presence in the community
- Funder, manager of resources to support people with DD
- Foster collaborations throughout the community to meet the needs of people with DD

Conclusions from the Survey

1. **The future for county boards will be very different. Although boards and staff members understand they must change, there is not yet a common vision across counties.**

Anticipated changes include:

- CBs should have the absolute best person centered planning; have more consistency across the state; have higher quality across the state; and ensure plans really address a person's lifetime.
 - How do we structure the SSA function to foster this success?
 - Are there any tasks included in SSA responsibilities that should be removed to provide more attention on PCP?
 - Do we have any way to assess the quality of our PCP and prove the value of it? To be able to use the assessment to continuously improve the planning?
- The CB model will change far beyond privatizing direct services to adults.
 - Provider support including training, fostering partnerships and collaborations, addressing problems
 - Right caseload size for SSAs doing real person centered planning
 - School support resources
 - Transition coordinator(s)
- CBs should be focused on advocacy and education in the community – how to pave the way for people with DD to be fully included and participating in the community.

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- The biggest soft barrier to integration is lack of understanding and acceptance in the community. The CBs can make a huge difference by embracing the education role.
- The biggest hard barrier appears to be transportation. What can the CB do to find solutions to the transportation problem?
- Through this advocacy and education, we tell our own story and prove our own relevance and importance.
- CBs become resources for all of the entities that provide services or supports – not just those with the title of provider. CBs have expertise on how to support people with DD and they have access to best practices.
 - Paid providers
 - Schools so that they can provide the best possible education and transition experiences
 - Employers so they know how to successfully work with an employee who has DD
 - Other county agencies such as mental health, substance abuse, criminal justice, and elder support
 - Social, faith, service, other organizations that may have people with DD as members
- CBs should have oversight of providers, but this should be supportive rather than punitive. Consensus has not yet been reached regarding whether the CB role should be primarily supportive moving forward.

Open questions include:

- Role of CB in employment services – what are the kinds of activities (Employment Navigation, soft skills training, other) that make sense for the CB?
- Role of CB in early childhood – EI, HMG, home based services after the age of 2 or 3, pre-school.
 - What are the best practices?
 - Who should do what ideally (this is so different across the state)?
 - Many CBs want to retain this and are planning to increase resources in this area
- Role of CB in serving elderly - While the importance of early childhood is well known, identifying supports for elderly individuals is often not as great an area of focus, yet we all inevitably grow older.
 - What is the role of the CB in providing supports to the elderly?
 - This is a huge deficit in attention

Challenges include:

- CBs have limited PR capability, varying levels of skill in PR and communications, and difficulty in articulating their future story since many do not understand it.
 - OACB assistance in communications is essential.
- As a system we do not have a vision of how to support elderly individuals
- As a system we do not have a common answer about the best way to support early childhood programs

2. Provider recruitment, support, and development is a critical success factor for county boards. While this does include oversight and quality assurance, that is not the entire responsibility.

County boards should be helping providers:

- Develop services that are truly integrated, not just outings and events
 - What are the different expectations for providers of HPC (Homemaker-personal care); providers of day or employment services; providers of transportation; or providers of specialized services such as nursing, PT, or OT?
- Develop and deliver services that truly meet individual needs (not everyone wants employment, not everyone wants a big workshop, some people have specific significant needs)

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- Provide outstanding employment services
- Understand and adopt best practices
- Develop staff

Challenges and questions include:

- Can a CB sustain, support, and manage relationships with multiple providers in its county?
 - How can a person/family make an informed choice?

3. The DD system is more cumbersome than it needs to be.

Challenges include:

- Difficulty getting understandable information about system change
- Requirements such as waiver wait list that do not provide useful information to a county
- Lack of useful data with which to make informed decisions
- Rules such as free choice of provider that are not easily or usefully implemented locally (ex: hundreds of providers to choose from; SSA unable to advise which providers might provide specific specialized service and individual needs)
- Lack of clarity on how to address provider issues when there are multiple or major concerns
- Mandates to the DD system about issues that are not totally within the system's ability to address; issues that should be shared throughout multiple Ohio agencies and organizations.
 - Ex: Employment First is a requirement for CBs, but not for public schools. The state did not engage any business organizations such as the Ohio Chamber or the Business Roundtable to ensure demand would be available to hire persons with DD.
- Administrative complexity of waiver administration
- A system that is not person centered

4. The long term financial sustainability for county boards is not guaranteed. Although not all boards recognize this, those that do are very concerned.

Challenges include:

- The challenge of helping communities understand the importance of county boards as the continuing funder and monitor of service delivery when counties no longer provide direct services.
 - This is the biggest fear for many counties
- Multiple unfunded mandates are impacting the CBs finances
- Some changes underway may result in unfunded long term costs to the county Board (ex: TDD waiver change, move of individuals from ICFs and DCs)
- There is a need for increased pay for direct service personnel to improve recruitment, retention, and quality of personnel
- With the Department of Labor changes in overtime rules, the potential for CB staff and provider staff overtime increases; if/when these changes are implemented
- Long term commitment to people when a waiver is given
 - Increased needs and costs of people who have waivers

(This document is an updated/amended version of one created by Mel Marsh of Acorn Consulting as part of OACB's Strategic Planning Process.)