TennesseeWorks Partnership Team and Employers and Providers Workgroup

Comments on LTSS Transition Plan Documents

TennesseeWorks is working to increase the number of young people with intellectual and developmental disabilities (IDD) who are employed in the state. The TennesseeWorks Partnership exists to:

1. Create a compelling, sustainable collaborative committed to this goal;
2. Raise the aspirations and capacities of young people, their families, educators, service systems, and employers to pursue integrated, competitive work as a first choice;
3. Equip families and educators across the entire state with accessible and relevant resources, training, and supports to enable them to successfully connect youth with disabilities to early work experiences;
4. Develop a shared, cross-agency data system to enable data-driven decision making;
5. Stimulate systems and policy change statewide.

Following are the comments of the TennesseeWorks Partnership and its Employers and Providers Group:

1. Please provide your comments on the state’s proposed Transition Plan here:
   a. Are the suggested time lines appropriate?
      - We commend the DIDD and TennCare for the adjusted Provider Self-Assessment timelines that incorporate time for training and technical assistance on how to complete the Self-Assessment. We believe this will result in more thoroughly and accurately completed self-assessments and will ultimately save time and produce a higher quality process for all people served and those providing service.

   b. The best methodology/process for completing assessments
      - We expect that this process will be operationalized during the training. There should be clear guidelines on where/when these assessments would be turned in and in what manner (paper/electronic format).
      - We suggest as part of the training that DIDD and TennCare create a crosswalk between data that agencies/providers already collect and how it might be used to demonstrate compliance.

   c. Strategies for initial achievement of compliance and assurance of ongoing compliance
      - We are pleased to see that you have defined the “public” that will provide “public input” in order to aid with compliance. Conflicts of interest or other relationships with the provider should be detailed in the descriptions of who participated in the self-assessment process.
      - It may be that some national accreditations will so closely match the HCBS regulations that achievement of that national accreditation could be deemed sufficient to demonstrate ongoing compliance.

   d. OTHER comments:
      - We strongly recommend that the language in the Transition Plan be changed from “plan of care” to “plan of support.” “Care” denotes a medical model. While “care” may be more appropriate for individuals who are elderly, the primary purpose of LTSS is to provide supports to individuals to live quality lives in the
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The word “care” does not reflect that outcome. Words matter, and as we continue to use the term “care” we foster a sense of dependence upon the system.

- We also feel that there should continue to be a centralized website with information related to the transition plan that is updated on a consistent basis. This would allow for all providers to have access to vital information about this process.
- We commend the inclusion of National Core Indicators data as a source of compliance monitoring, as this is consistent with national trends and the function of the project data.
- While we appreciate the responsiveness shown by providing an updated version of documents on 9/18/14, it also made for inconveniently quick turn around in gathering input and making changes to previously drafted comments.

2. Please provide your comments on the Provider Self-Assessment tool here:

a. What are the best types of evidence that can be provided to demonstrate compliance with each area of the assessment?

- The assessment areas detailed in the Self-Assessment can be addressed through the existing procedures and management plan processes defined by DIDD in the Organizational Review Tool. How each agency elects to address the elements in the Self-Assessment could be chosen from data collected in compliance with the Management Plan and Supervision Plan.
- Specific documents the agency might consult for data to demonstrate compliance include:
  - Outcome Management System,
  - Stakeholder Satisfaction Surveys,
  - agency Incident Management Trend Analysis,
  - Self Assessment Review for Protection from Harm,
  - analysis of staff turnover rates,
  - review of external monitoring results,
  - agency quality assurance systems such as peer review, utilization review and medication utilization review, and
  - internal quality assurance reviews of records.
- The specific results of the assessment is included in the agency Quality Review Plan which also identifies recommendations and target dates for system improvements.

b. If a provider is contracted with more than one MCO and DIDD for the same service type, which contracted entity should be responsible for oversight of that provider’s assessment process for that service?

- In an effort to streamline the process and ensure consistency in requirements, it would make sense for one entity to provide oversight, possibly DIDD.
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c. OTHER comments:
• The current provider requirements generally address the areas identified in the tool. Specific questions may need to be added to the current assessment, but the process itself is sufficient.
• We suggest that these questions be added to the assessments to provide clarity and documentation of the individual’s served wishes.
  o How does the individual communicate choices and preferences?
    ▪ Verbally,
    ▪ gestures,
    ▪ People who know him/her understand what he or she wants
    ▪ Signs
    ▪ Uses text instead of speech, whether with a device or not
    ▪ Uses a device to communicate
    ▪ Other, describe:
  o How is the individual provided with opportunities to be involved in self-advocacy?
    ▪ Attends local groups
    ▪ Attends yearly conferences
    ▪ Participates in online groups
    ▪ Other, describe:
• We are pleased to see that providers are required to include persons receiving services and family members as part of their assessment process. Participant and family involvement is critical throughout this process.
• We recommend that the completed provider self-assessments be reviewed by a group of stakeholders that includes persons receiving services, providers, family members, and advocacy organizations and DIDD and/or the MCOs to allow for an unbiased evaluation of compliance.
• We feel that there should be clear guidelines on penalties for misrepresentation of information on the assessments or dubious evidence used in the assessments.

3. Please provide your comments on the Person-Centered Planning Process Self-Assessment tool here:
a. What are the best types of evidence that can be provided to demonstrate compliance with each area of the assessment?
b. OTHER comments:
• The same process as the Provider self-assessment should be used for the Person-Centered Planning Process in that the completed provider self-assessments be reviewed by a group of stakeholders that
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includes persons receiving services, family members, advocacy organizations, providers and DIDD and/or the MCOs.

- We suggest that these questions be added to the assessments to provide clarity and documentation of the individual’s being served wishes.
  - How does the individual communicate choices and preferences?
    - Verbally,
    - gestures,
    - People who know him/her understand what he or she wants
    - Signs
    - Uses text instead of speech, whether with a device or not
    - Uses a device to communicate
    - Other, describe:
  - How is the individual provided with opportunities to be involved in self-advocacy?
    - Attends local groups
    - Attends yearly conferences
    - Participates in online groups
    - Other, describe:

Thank you for the opportunity to provide these comments. Should you like to speak with a representative of our TennesseeWorks Partnership Team and the Employers and Providers Workgroup, please contact Lynnette Henderson at (615) 936-0448 or Lynnette.henderson@vanderbilt.edu.

TennesseeWorks and the Employer and Provider Workgroup

The TennesseeWorks Employers and Providers Workgroup is a collaborative effort of the TennesseeWorks Partnership Members. Our mission aligns with the broader mission of the Provider Workgroup of the Governor’s Employment 1st Task Force.