

Lifesharing W. Region meeting Minutes

September 21, 2017 10 AM to 1:30 PM

Please refer to attached agenda and PA Lifesharing Coalition meeting Minutes from August 17.

S.E.T. Communication Training was presented by Amy Tobolski, Northwest Health Connections.

Introductions

Note Taker: Marilyn Shiwarski

Information from ODP:

Jared Roser, W. Region LS lead, was not able to be in attendance. In November Licensing Administrator Amy Scharp and ODP Regional Administrator, Michelle O'Toole have agreed to attend and share information and answer questions. Please send questions to Carrie and Anne: arankin@stepbystepusa.com; and/or CarrieKontis@barberinstitute.org.

Federal Gov. updated and adjusted SNAP benefits, the net income limit to qualify is going up so more people may qualify for SNAO, however the benefit is being reduced.

ODP 100-17: For those individuals who receive Residential Habilitation services with 6-month authorizations (7/1/17 – 12/31/17) in their ISPs, the plan must be updated with new residential hab codes by 9/30/17.

ODP 098-17: Clarifies when ISP meetings are needed for CPS revisions.

By 9/9 Needs level and group from SIS scores will be on the PRINT page of ISP.

ODP 099-17: ODP has a process for ISPs whose PFDS budget will exceed the \$33,000 cap on an annual basis. The process is broken down for 2 different scenarios: (1) If the cap is projected to be less than \$2000 over the \$33,000 annual cap (2) If the cap is projected to be greater than \$2000 over the \$33,000 annual cap. In addition, ODP will consider an Individual Cap Exception.

Community Living Waiver open for comments until 9/25/17. Please forward comments. See agenda for how to provide comments.

PAR Mtg. 9/20/17

Nancy talked about the Cassidy Graham Health Care Bill and how it would dramatically impact ODP services cutting Medicare and using block grants and a lot less money. ID would have to compete for fewer dollars. Please contact Senators.

Some agencies are confused because SCOs are asking for a cross walk to SIS group/need level from Life Sharing provider agencies. Yet, the levels are already known by the SCOs.

PA State Lifesharing Coalition Meeting Minutes were reviewed. See attached. Ron Melusky ODP lead talked about provider profiles at that meeting, but since then it seems that there has been further

discussion of publishing provider profiles. Some agencies are concerned about how families will interpret the data. There is a work group working on improving quality that is looking at Provider Profiles. Information included may include incident reports, IM4Q data, performance measures, licensing data, recommendations for questions families could ask agencies, family and consumer satisfaction data, description of agency.

See agenda for notes on inaccurate SIS scores and contacting Ascend.

Imagine Different Coalition- representative would like to find providers who are willing to work with birth families who have children currently in institutional care but would prefer them to be served in a family care setting. Setting is unique because the family provider setting takes a majority of direction from the birth family that is involved.

PAR Conference RCPA Conference: see agenda Par Conference will focus THINKING BIG related to provider and individual quality, using measures, certification options for staff, workforce development, Leadership, Fiscal and Employmentfirst.

ODP is looking at using OVR data to see how employment is going.

Lifesharing Leadership Survey: See agenda

Discussion Comments

It is hard to see how having biological families providing Lifesharing will lead to growth in Lifesharing. How will a person ever get to a PUNS level that requires services when they are living at the biological family home with a large amount of services being delivered in the home. What families will want to end those services to be Lifesharing providers.

Some possible questions for November when Amy Scharpf and Michele O'Toole attend meeting:

What does the ideal plan of correction look like? Explain the standards for acceptance of a Plan of Correction.

What standards are used to determine a plan of correction is not good enough? Tell everyone what you are looking for in a POC.

What trends do the inspectors see? Things all agencies are struggling with Explain Trends in Issues that IDL sees during inspections.

How does IDL choose the % to review?

What can be done to make the survey go more smoothly from the ODO perspective.

Discuss comments on Draft 6100. Where is ODP with the process?

The entire system of ID , Behavioral Health Care and Medical Health Care is moving toward Electronic Client records. This is mandated by Federal Law. Many Provider agencies are moving records from Paper forms to Electronic systems and formats. ODP has a states of acceptance for Electronic Records that was put forth by former Deputy Secretary Kevin Casey. It is counter-productive to have survey teams arrive at agencies and refuse to look at any electronic records, requiring providers to take time to print out the records on paper.

Possible Tip suggested by one of the attendees: Look at community living waiver Appendix on Quality Improvement. This maybe a guide to quality, outcome driven direction that is being sought.