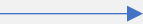

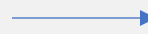



Maine DHHS Reform Plan for Intellectual and Developmental Services

Reform Topics/ Work Groups  Timeframe 	1. Community Membership This addresses greater inclusion in the community through employment, access to community resources and places, self- advocacy, person-centered thinking, supported decision making and implementation of the federal HCBS settings rule.	2. Quality Assurance (QA) and Quality Improvement (QI) This addresses the health and safety of participants and the effectiveness of services. Components include on-boarding and monitoring of providers, training, quality measurement, value-based payment and streamlined business processes.	3. Innovation This addresses the need for a fair and consistent needs assessment, flexible supports for families and individuals over the lifespan, prevention and de-escalation of crises, innovative living options and technology to enhance independence.	4. Communication This addresses the need for better information and networking, use of plain language and accessibility, ongoing stakeholder feedback loops, and communication about reform.
Completed	<ul style="list-style-type: none"> • Home & Community Based Services (HCBS) settings consultant & stakeholder group engaged • Self-advocacy RFP • Supported decision making training with DRM • Section 21 renewal application posted publicly • 167 Section 21 offers made 	<ul style="list-style-type: none"> • 9 district positions devoted to QA/QI • Critical incident dashboards • Reportable events training • QA/QI gap analysis consultant engaged 	<ul style="list-style-type: none"> • Technology training for staff, school systems and providers • 8 crisis positions authorized • Report on rate for challenging behaviors 	<ul style="list-style-type: none"> • HCBS website and scheduled monthly provider meetings • Reform meetings with 10 different stakeholder groups between December 2019 and January 2020
In Progress	<ul style="list-style-type: none"> • Post state transition plan for HCBS settings (target release of early March) • Plan Employment First conference • Engage person-centered thinking consultant • Make Section 29 offers as enrollees move to Section 21 or cycle off 	<ul style="list-style-type: none"> • Strengthen link between Adult Protective Services (APS) and QA staff • Licensing of 1- and 2-bed homes 	<ul style="list-style-type: none"> • Establish a shared living pilot • Establish a Developmental Disabilities (DD) Council consumer direction stakeholder group • Expand and train crisis staff • Implement direct intake for crisis system 	<ul style="list-style-type: none"> • Overhaul OADS / Department website

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FY 21 (7/1/20-6/30/21)	<ul style="list-style-type: none"> • Implement priority recommendations from 2016 Employment First Report • Update person-centered manual • Transition to compliance for HCBS settings • Community habilitation system reform • Clear the Section 29 waitlist through 12/31/19 if the supplemental budget proposal is funded • Expand training, flexible family support and respite services if the supplemental budget proposal is funded 	<ul style="list-style-type: none"> • Improve provider on-boarding and monitoring • Implement mortality review panel • Develop value-based payment model for employment • Implement mortality review panel if the supplemental budget proposal is funded • Complete licensing of 1- and 2-bed homes 	<ul style="list-style-type: none"> • Develop standardized assessment and plan for implementation • Host an innovation summit • Implement direct intake by crisis services • Join National Community of Practice 	<ul style="list-style-type: none"> • Establish reform work groups • Establish reform communication channels • Develop information and networking improvement plan
Out Years	<ul style="list-style-type: none"> • Develop person-centered training platform • Secure HCBS settings compliance and plan to maintain compliance 	<ul style="list-style-type: none"> • Review, prioritize and implement QA/QI system changes recommended by consultant 	<ul style="list-style-type: none"> • Adopt standardized assessment • Adopt shared living changes based on pilot • Develop 1 or more service innovations based on summit and research • Consolidate service offerings in single lifespan program 	<ul style="list-style-type: none"> • Operate functioning feedback loops for continuous stakeholder input and quality improvement