

Everyday Lives: Values in Action

Information Sharing & Advisory Committee
(ISAC)

ANNUAL REPORT



2023

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“It is how we are living the vision that matters.”

Savannah Logsdon-Breakstone, Past ISAC member

INTRODUCTION

The Information Sharing and Advisory Committee (ISAC) became ODP’s Stakeholder Quality Council in 2016, following the publication of *Everyday Lives: Values in Action*, and went on to create a detailed series of recommendations, strategies* and performance measures (PMs) to guide the Office of Developmental Programs (ODP) and gauge its progress in achieving the important goals outlined in *Everyday Lives*. These recommendations and strategies have influenced the development of new waiver applications, regulations, and policies, have improved trainings, helped to launch the Supporting Families Collaborative and employment initiatives, and continue to serve as a guide for everyone engaged in developing, providing, and advocating for services in the ODP system.

The ISAC continues to serve as the entity that provides sustained, shared leadership and a platform for collaborative strategic thinking for the ODP system. Together ODP and ISAC will continue to use our quality improvement framework to assess our progress and to plan for and make improvements in the system, while imbedding successful practices. This publication offers us a glimpse of where we are today, and it will help us to continue to move forward and strive for a better tomorrow.

* The strategies for each ISAC recommendation can be found in a separate document that can be accessed by clicking [here](#) or visiting home.MyODP.org and following this path: *Everyday Lives* > *Everyday Lives Publications* > *Recommendations, Strategies, and Performance Measures*.

Managing for Quality:

Planning, Doing, Checking (performance), and Acting (to embed successful practices)





Recommendation 1: Assure Effective Communication

Every person has an effective way to communicate in order to express choice and ensure his or her health and safety. All forms of communication should consider and include the individual's language preferences and use of current technology.

ACCOMPLISHMENT HIGHLIGHTS *for #1*

- ✓ Continued to build capacity in understanding complex communication across the system
- ✓ SC Monitoring Tool results reflect that Supports Coordinators (SCs) continue to increasingly address communication needs
- ✓ Increased access to speech and language professionals

ACCOMPLISHMENTS IN DETAIL *for #1*

Capacity building in Understanding and Supporting People with Complex Communication Needs –

- ❖ Published the third annual update to the [Resource Guide for Supporting Deaf, DeafBlind, and Hard of Hearing Individuals](#).
- ❖ Held over 20 trainings on varying communication topics, over the past year, for a wide range of stakeholders internally and externally.

Supports Coordinators (SCs) Increasingly Addressing Communication –

- ❖ In December 2019 the question: “Are the individual’s communication needs being met?” was added to the SC Monitoring Tool. In 2020, results showed that 84% of SCs noted that the individual’s communication needs were being met. Since then, this number continued to increase slowly. In 2023, 90% of SCs said that the individual’s communication needs were being met.

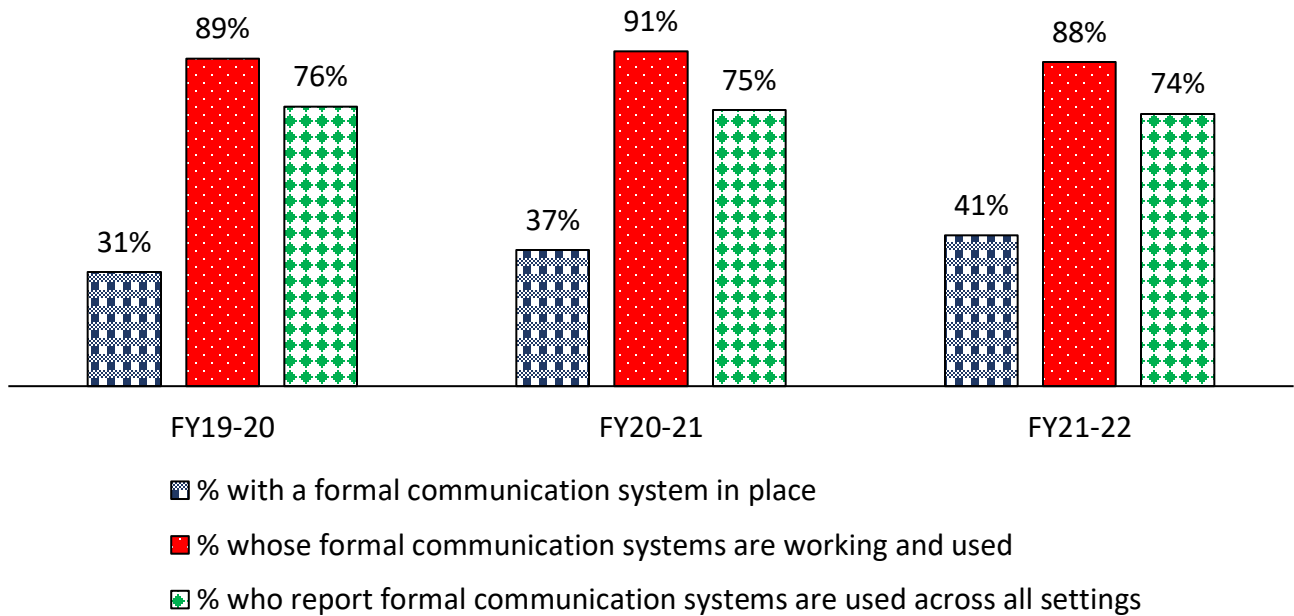
Increased Access to Speech and Language Professionals –

- ❖ At the start of 2023, ODP began funding a program at Technology for Our Whole Lives (TechOWL) at the Institute on Disabilities at Temple University called Just SO (Short-term Online) Speech for individuals registered with ODP. The program offers statewide, free access to a licensed speech-language pathologist to assess communication, make recommendations, set up a communication device if determined necessary, teach communication strategies, etc.

PERFORMANCE MEASURES *for #1*

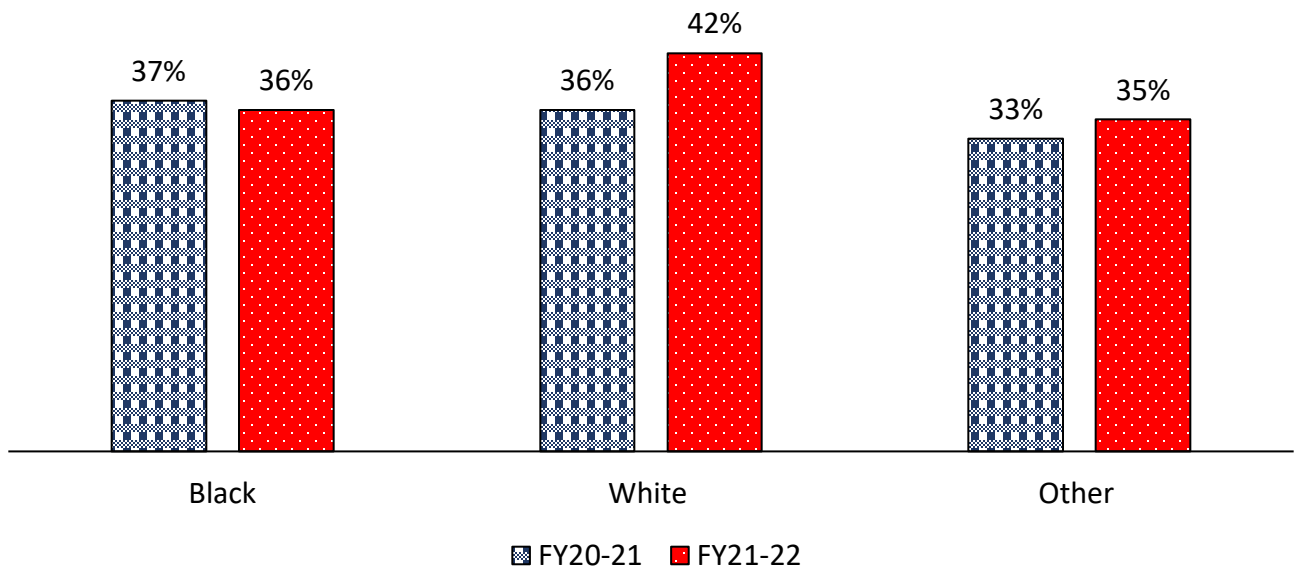
1. For people who do not communicate effectively using words, the percent of people with a communication system in place, overall and by race, age, and living situation i.e., a written plan in place that describes and documents a communication system, e.g., sign language, a picture board/system such as Picture Exchange Communication System (PECS), a voice-output communication device, or a combination of methods. A communication profile in the ISP is not sufficient in and of itself. *(IM4Q)*
2. For people with communication systems in place, the percent of systems that are in working order and being used. *(IM4Q)*
3. For people with communication systems in place, the percent of individuals and self-advocates, overall and by race, who report using them across all settings (i.e., you use the system at home, at work, at school, and in your community). *(IM4Q)*
4. Percent of individuals who report that their staff understand their communication. *(IM4Q)*
5. Percent of individuals whose ISP includes information about how the individual communicates, and the communication supports and services the individual may need to ensure effective communication. *(QA&I)*
6. The Provider implements communication supports and services as specified in the individual's ISP to ensure effective communication. *(QA&I)*

Percent of People Who Do Not Communicate Effectively Using Words (PMs 1, 2 & 3)



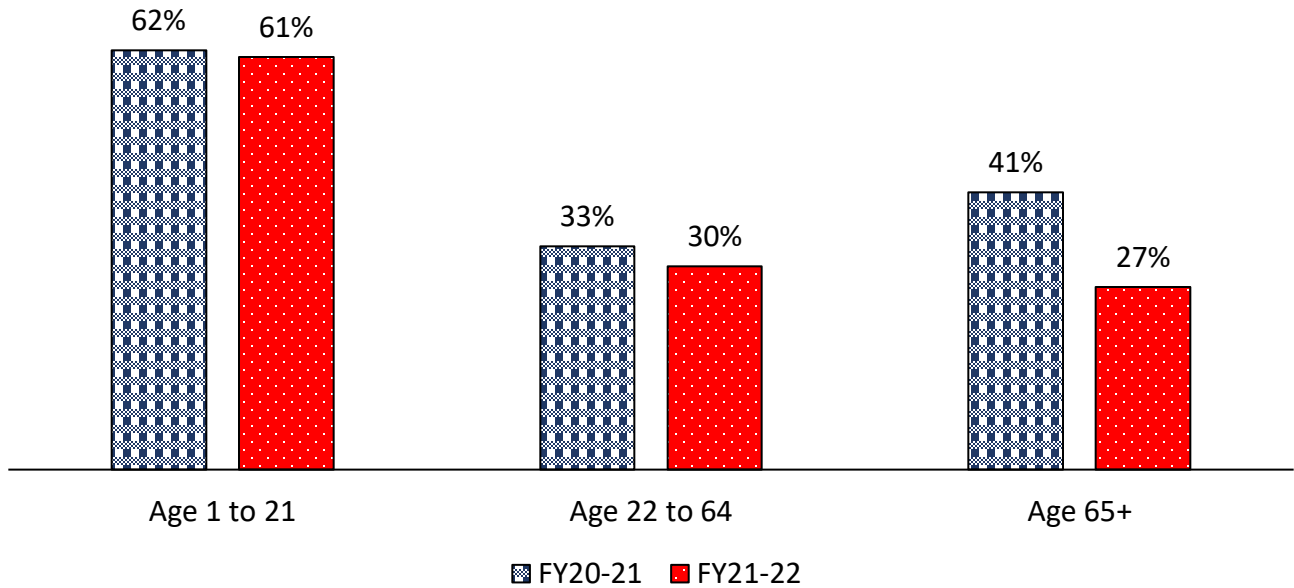
Source: Independent Monitoring for Quality (IM4Q)

Percent of People Who Do Not Communicate Effectively Using Words and Have a Communication System in Place, by Race (PM 1)



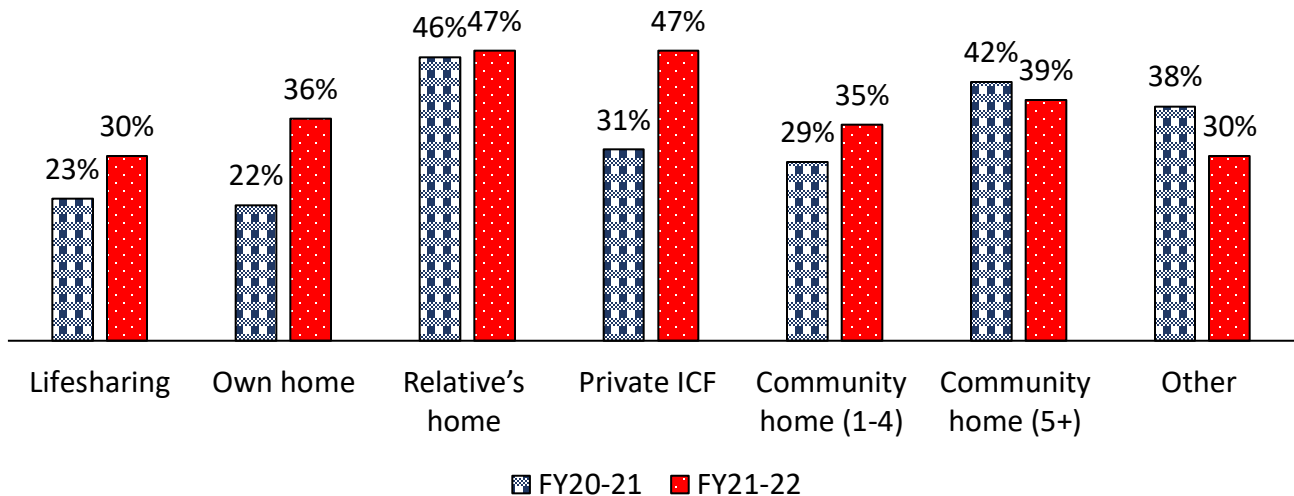
Source: IM4Q

Percent of People Who Do Not Communicate Effectively Using Words and Have a Communication System in Place, by Age (PM 1)



Source: IM4Q

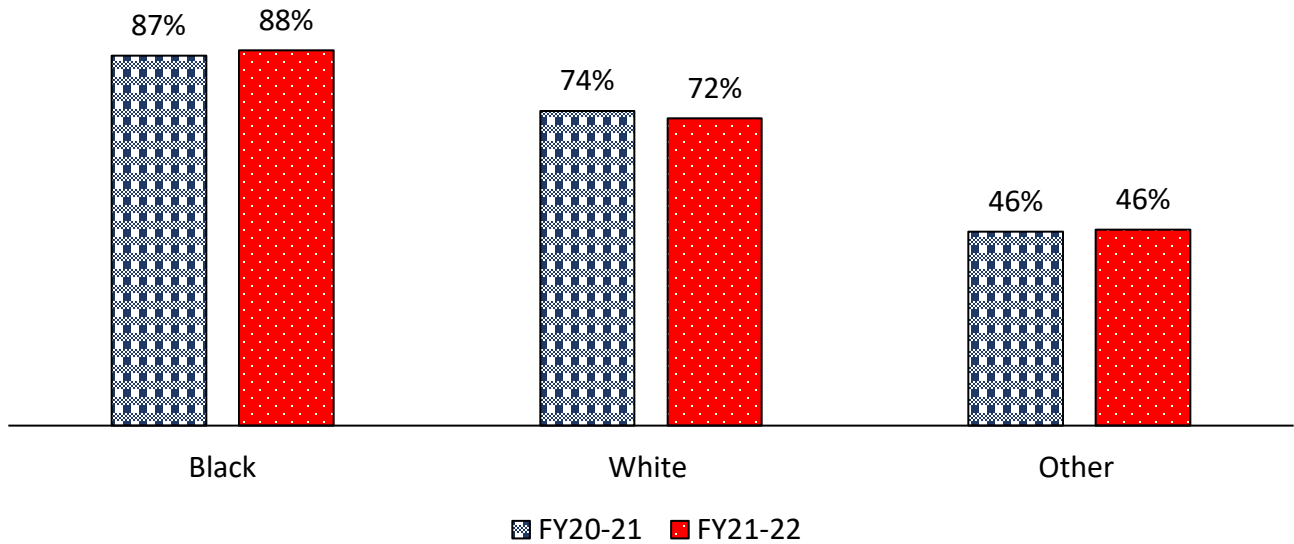
Percent of People Who Do Not Communicate Effectively Using Words and Have a Communication System in Place, by Living Situation (PM 1)



Source: IM4Q

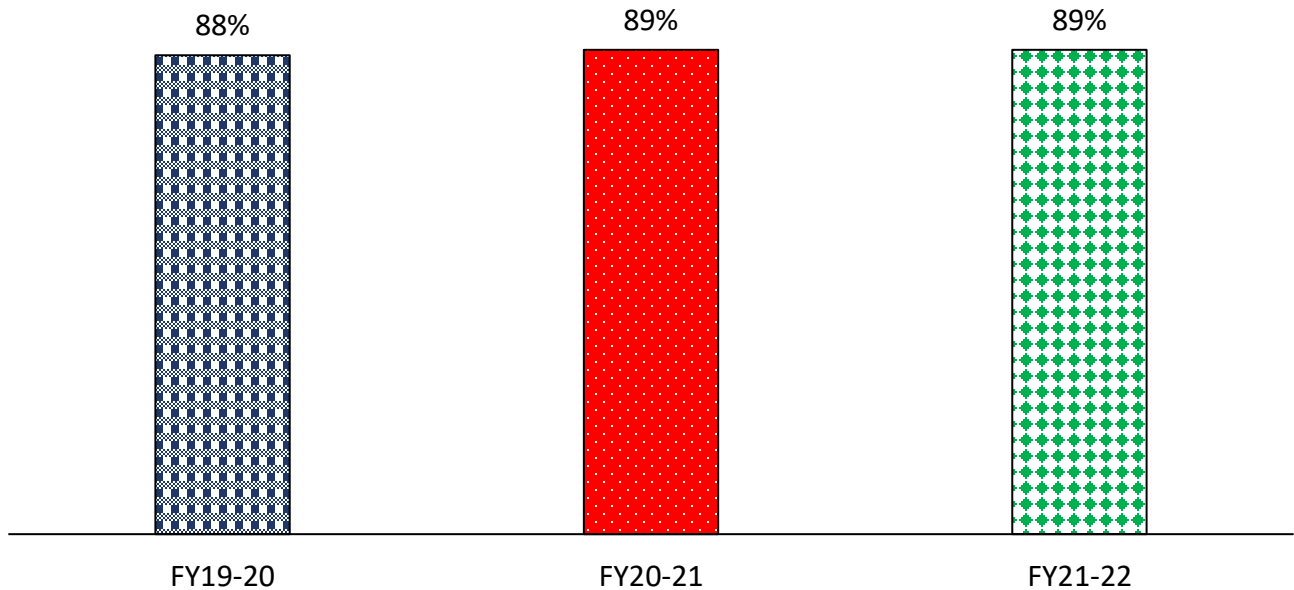
Note: CH1-4 = Community home with 1-4 residents; CH5+ = Community home with 5 or more residents.

Percent of People Who Do Not Communicate Effectively Using Words and have a Communication System in Place Used Across All Settings, by Race (PM 3)



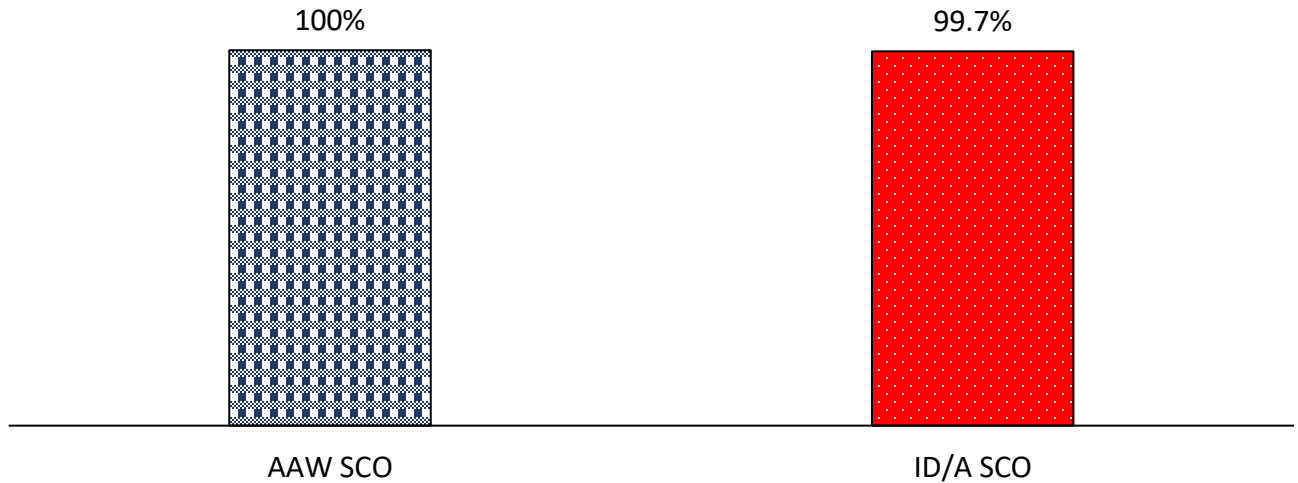
Source: IM4Q

Percent of Individuals Who Report That Their Staff Understand Their Communication (PM 4)



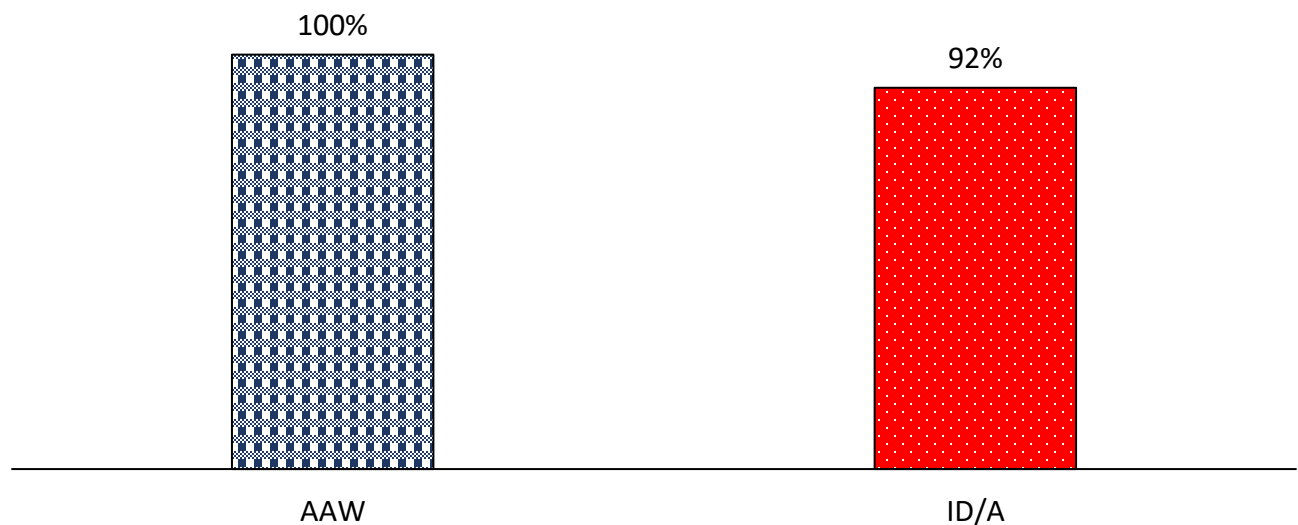
Source: IM4Q

Percent of Individuals Whose ISP Includes Information About How the Individual Communicates, and the Communication Supports and Services the Individual May Need to Ensure Effective Communication (PM 5)



Source: QA&I FY 22-23

The Provider Implements Communication Supports and Services as Specified in the Individual's ISP to Ensure Effective Communication (PM 6)



Source: QA&I FY 22-23

Note: AAW sample size was only 2.



Recommendation 2: Promote Self-Direction, Choice, and Control

Personal choice and control over all aspects of life must be supported for every person. Choice about where to live, whom to live with, what to do for a living, and how to have fun all are key choices in life, as are seemingly small choices: such as what to eat, what to wear, when to wake up in the morning, and when to go to bed. It is important to be able to trust the people who provide assistance, to feel confident that they respect you and your right to manage your life, and to enjoy each other's company. Self-direction works when individuals have clear and understandable information, opportunities to exercise choice, and assistance with making decisions when needed. Self-direction is only possible when family, friends, and people who provide supports respect the individual's preferences and their right to make mistakes and facilitate the implementation of the individual's decisions.

ACCOMPLISHMENT HIGHLIGHTS *for #2*

- ✓ **Increased use of Participant Directed Services (PDS)**
- ✓ **Increased use of the Supports Broker service**

ACCOMPLISHMENTS IN DETAIL *for #2*

Sustained Use of Participant-Directed Services (PDS) Model –

- ❖ PDS use in Agency with Choice (AWC) increased 4.9% in FY 22-23.
- ❖ PDS use in Vendor Fiscal/Employer Agent (VF/EA) increased 9.3% in FY 22-23.

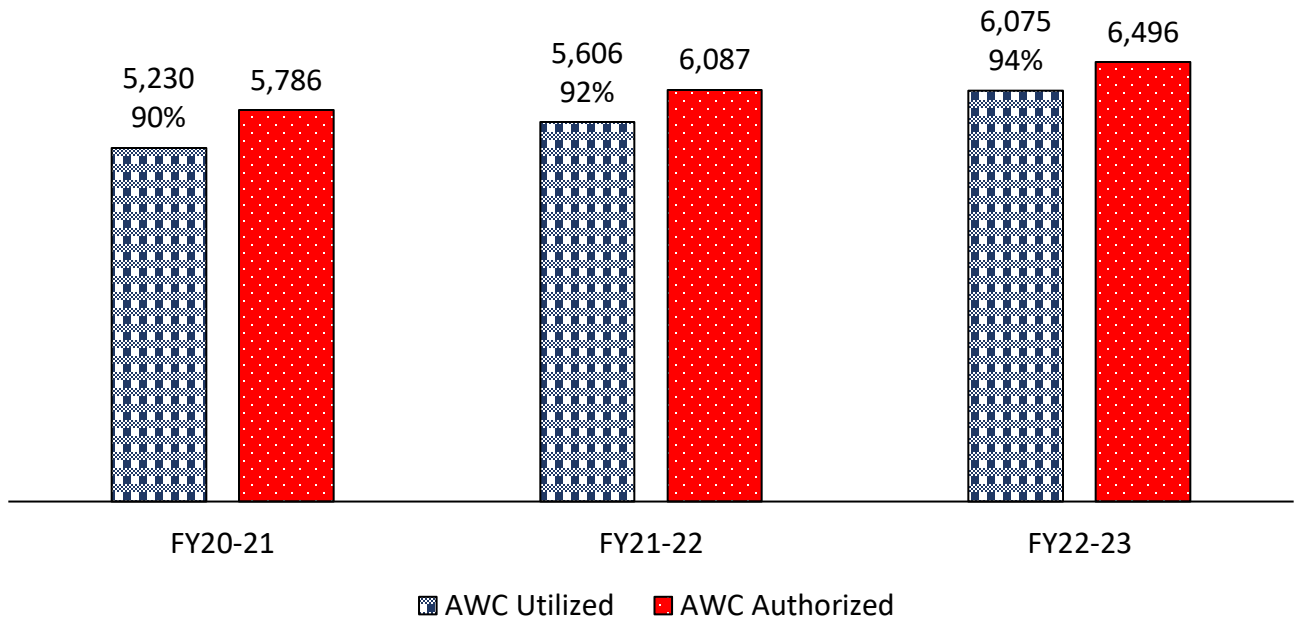
Increased Use of the Supports Broker Service –

- ❖ The Supports Broker service is designed to assist participants, or their designated surrogate, with employer-related functions to be successful in self-directing some or all of the participant's needed services. Participants who use the Supports Broker service usually have a more positive experience using PDS.
 - ✓ In 2018, 100 participants received Supports Broker services; that number increased to 390 in 2019, to 519 in 2020, to 632 in 2021, to 656 in 2022, and to 842 in 2023.

PERFORMANCE MEASURES *for #2*

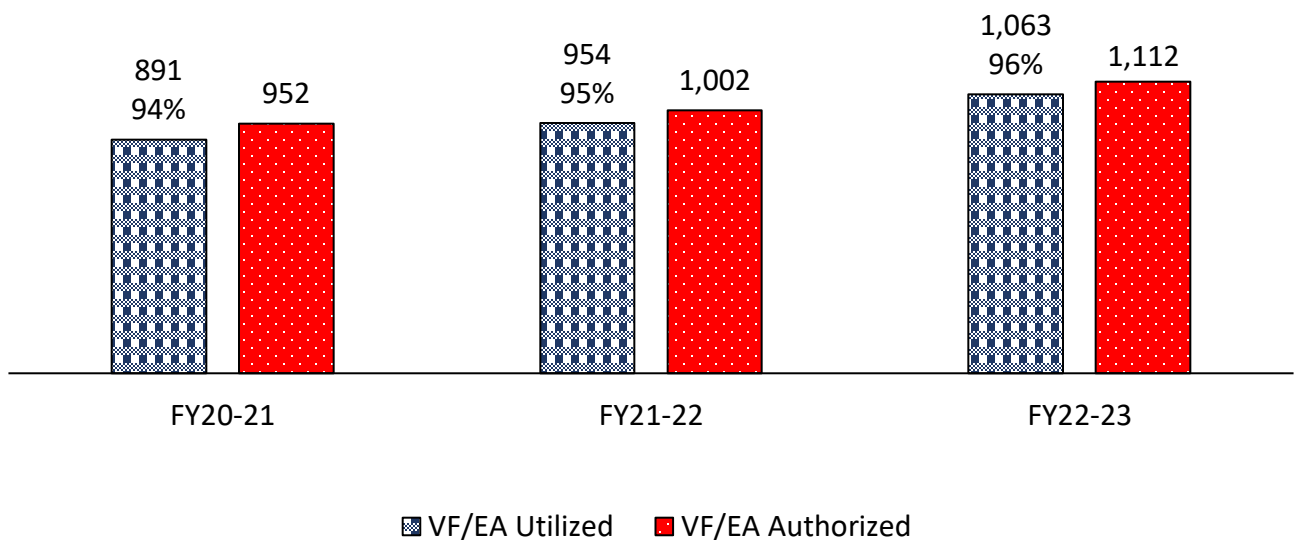
1. Number and percent of Individuals and Self-Advocates authorized for and who use Participant-Directed Services (PDS), by AWC and VF/EA, overall and by race. (*Home & Community Services Information System - HCSIS*)
2. Number of Self-Directed services per individual/self-advocate; will include Supports Broker Service. (*HCSIS*)
3. Percent of individuals who reported they vote, overall and by race. (*IM4Q*)
4. Percent of individuals surveyed who had a key/way to get into their house or apartment on their own. (*IM4Q*)
5. Percent of individuals interviewed who reported they chose what they do during the day. (*IM4Q*)
6. Percent of individuals who said they were given a choice to live where people without disabilities live, overall and by race. (*IM4Q*)
7. Percent of individuals surveyed who saw no other places before they moved into their residence. (*IM4Q*)

AWC - Number of Individuals and Self-Advocates with Services Authorized vs Number and Percent Used (PM 1a)



Source: EDW HCSIS Consumer Demographics Fact and Services and Support Fact as of 10/25/2023

VF/EA - Number of Individuals and Self-Advocates with Services Authorized vs Number and Percent Used (PM 1b)

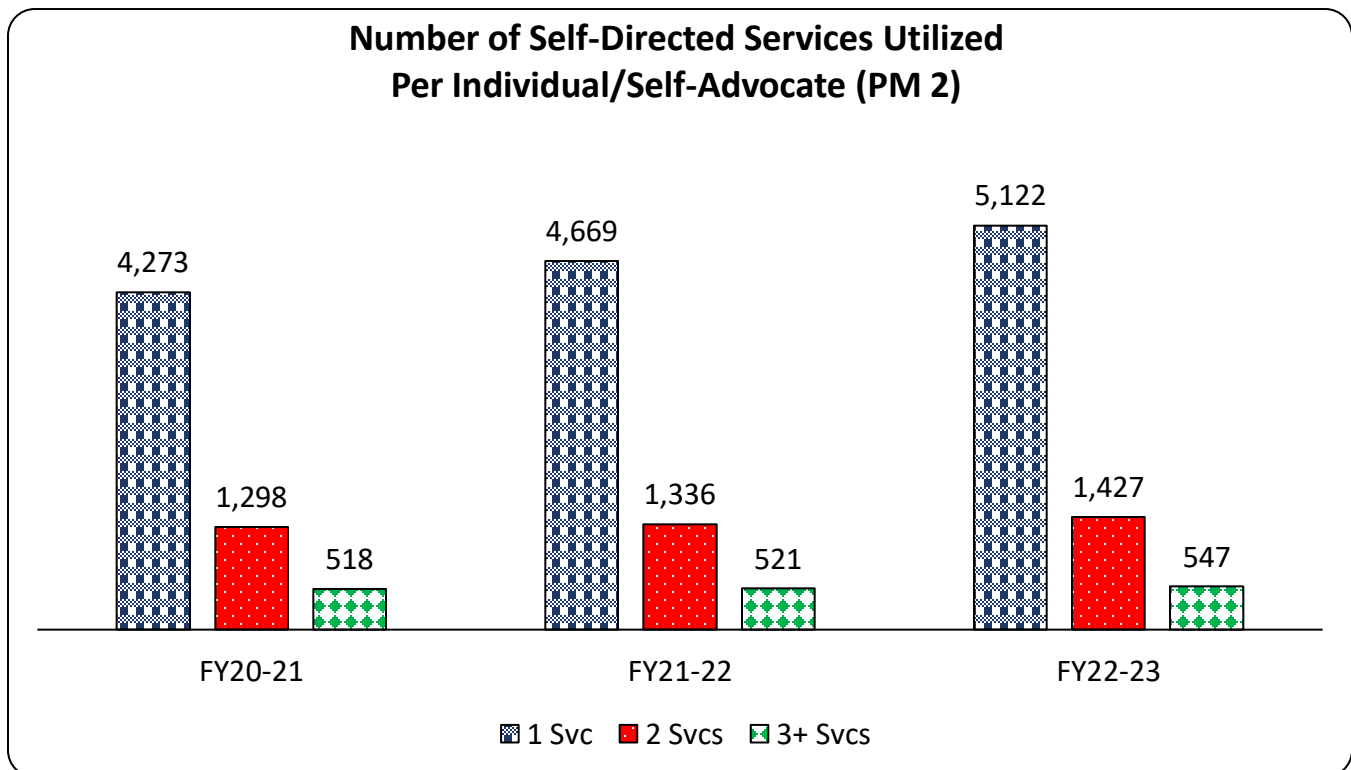


Source: EDW HCSIS Consumer Demographics Fact and Services and Support Fact as of 10/25/2023

Individual Utilization of AWC and VF/EA Services by Race (PM 1)	FY 21-22		FY 22-23	
	Number	Percent	Number	Percent
American Indian or Alaskan Native	<11	0.2%	15	0.2%
Asian	131	2.0%	147	2.1%
Black or African American	542	8.3%	605	8.5%
Native Hawaiian or Other Pacific Islander Indicator	<11	0%	<11	0%
White	5,324	81.6%	5,767	81.3%
Other	482	7.4%	515	7.3%
Unknown	13	0.2%	13	0.2%
Multi-Race	23	0.3%	31	0.4%

Source: EDW HCSIS Consumer Demographics Fact and Services and Support Fact as of 10/25/2023

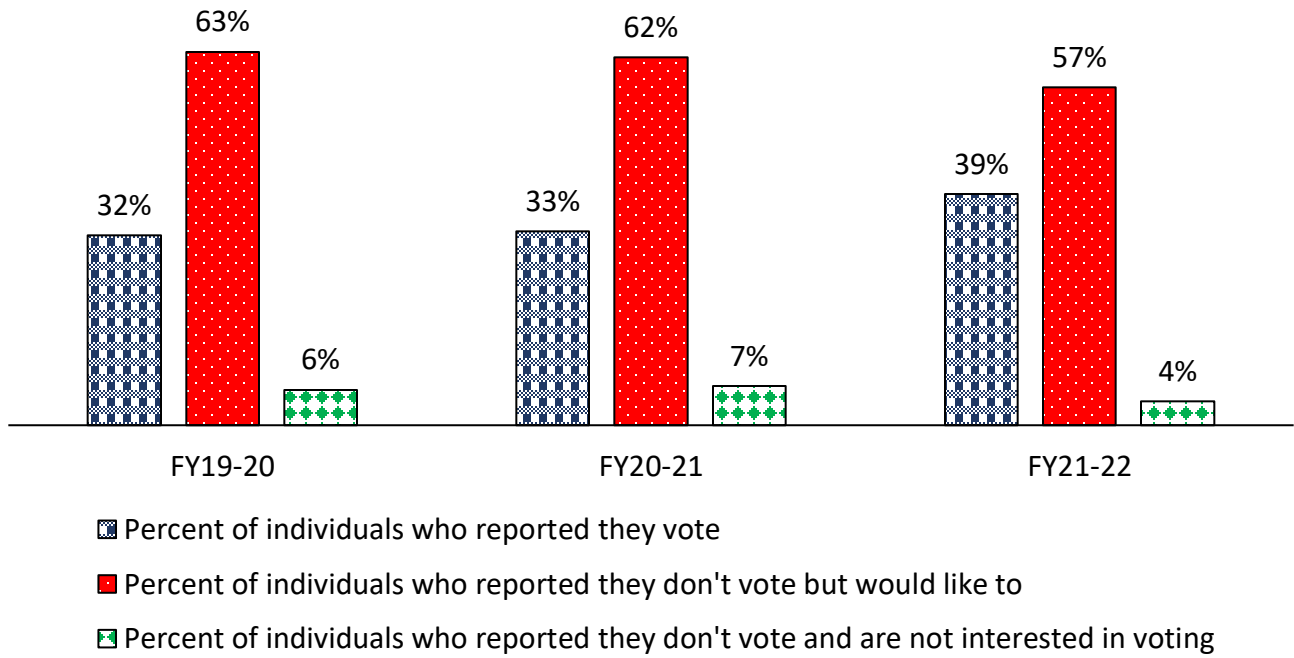
Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.



Source: HCSIS as of 10/25/2023

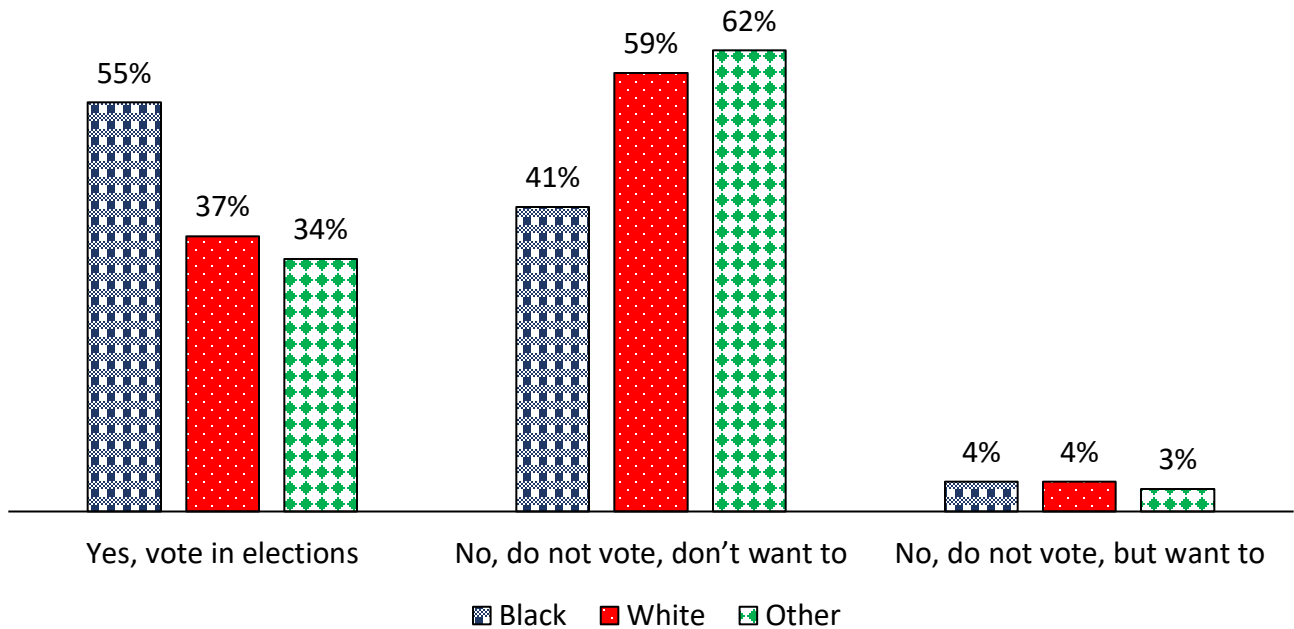
Note: Includes Supports Broker service.

Percent of Individuals and Voting Status (PM 3)



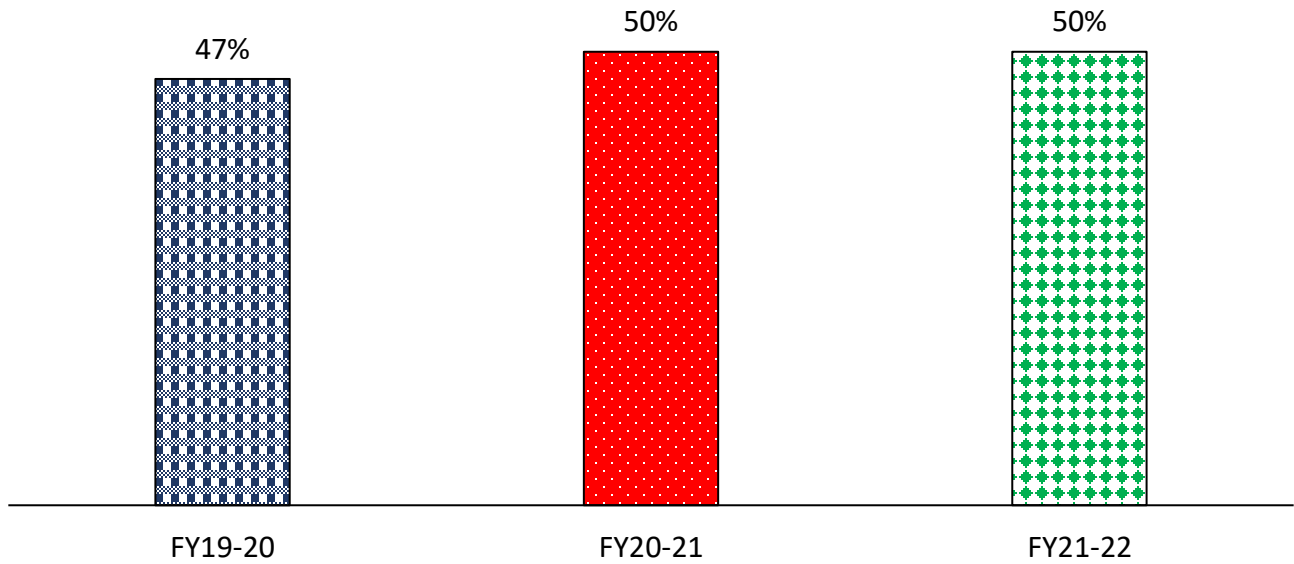
Source: IM4Q

Percent of Individuals and Voting Status, by Race (PM 3)



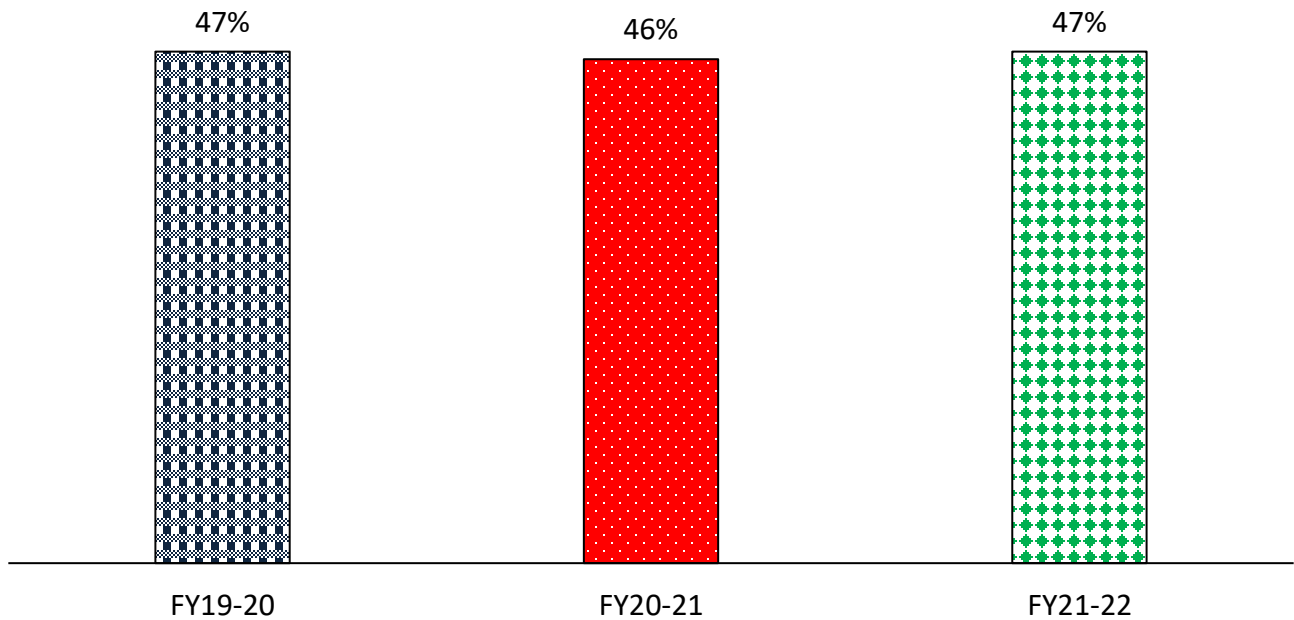
Source: IM4Q FY 21-22

**Percent of Individuals Who had a Key/Way to Get into Their House
or Apartment on Their Own (PM 4)**



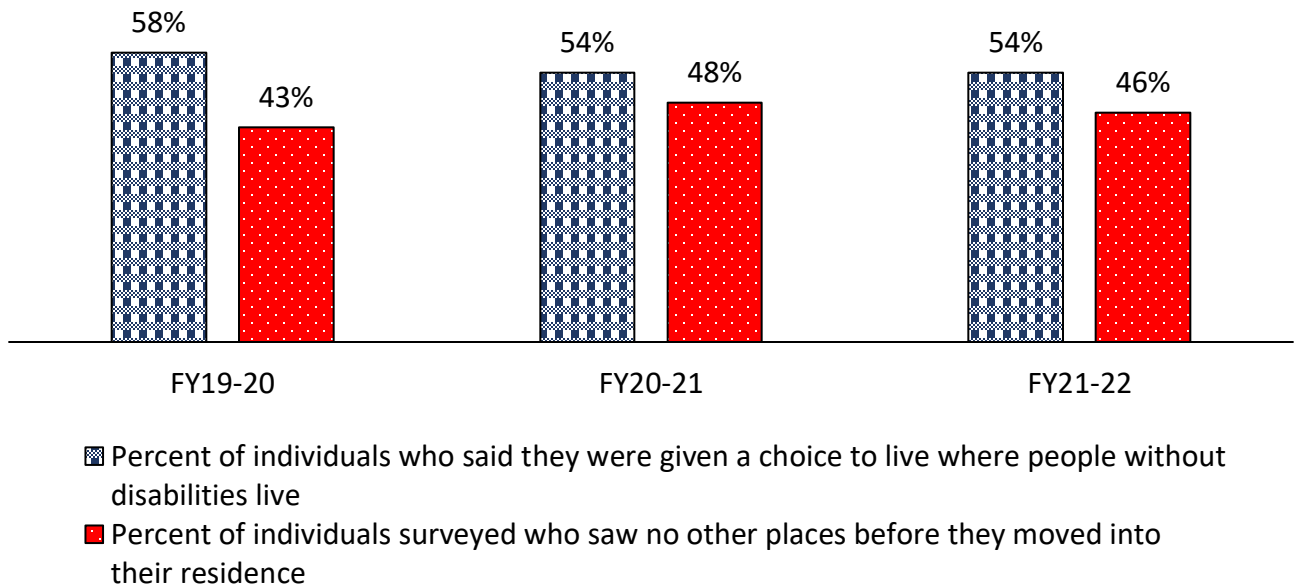
Source: IM4Q

**Percent of Individuals Who Reported They Chose What They Do
During the Day (PM 5)**



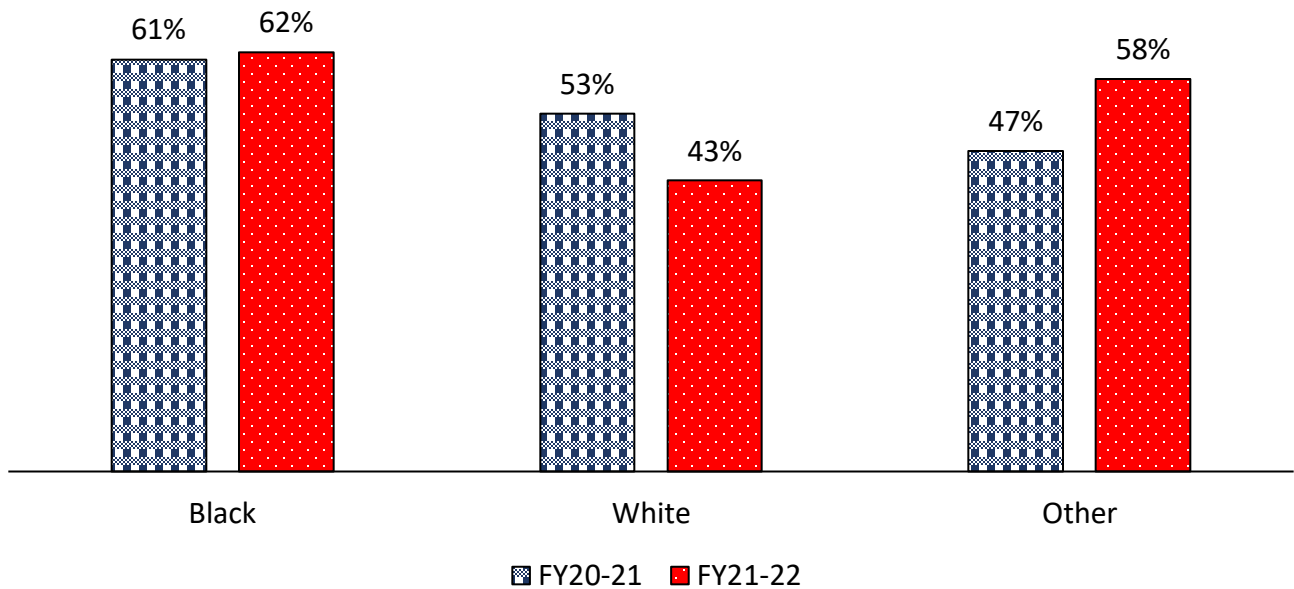
Source: IM4Q

Percent of Individuals Who Reported They Have Choice and Control on Where to Live (PM 6 & 7)



Source: IM4Q

Percent of Individuals Who Reported They Were Given a Choice to Live Where People without Disabilities Live, by Race (PM 6)



Source: IM4Q



Recommendation 3: Increase Employment

Employment is a centerpiece of adulthood and must be available for every person. The benefits of employment for people with disabilities are significant and are the same as for people without disabilities.

ACCOMPLISHMENT HIGHLIGHTS *for #3*

- ✓ Partnered with the Office of Vocational Rehabilitation (OVR) to provide Regional Employment Symposiums to PA employment service providers
- ✓ Provided employment data by race to each county/county joinder
- ✓ Partnered with the PA Department of Education (PDE), OVR, Pennsylvania Training and Technical Assistance Network (PaTTAN), Local Education Agencies (LEAs), Intermediate Units (IUs), and Centers for Independent Living (CILs) on the Pathways to Partnership Demonstration Model Grant
- ✓ Distributed approximately \$5 million in recovery payments in 2023 to 95 providers of Supported Employment, Benefits Counseling, or Small Group Employment services
- ✓ Partnered with OVR and PDE to facilitate the Connecting4Employment follow-up pre-conference event at the Secondary Transition Pre-Conference

ACCOMPLISHMENTS IN DETAIL *for #3*

Increase in People with Competitive Integrated Employment (CIE) –

- ❖ There was a 1% increase, from FY 21-22 (17%) to FY 22-23 (18%), in the number of ODP-enrolled individuals, ages 18-64, who are competitively employed. That translates to 443 more individuals who obtained CIE in the past year.

Regional Employment Symposiums –

In April and May 2023, 3 in-person symposiums were held where tangible opportunities for networking, sharing resources and learning best practices for employer engagement were provided, with the goal of working to increase employment rates for people with disabilities. The symposiums were designed to engage employers on the benefits of hiring people with disabilities using a dual-customer approach. The target audience included employees in leadership roles at County ID Programs/Administrative Entities (AEs), Supports Coordination Organizations (SCOs), providers enrolled with ODP to provide employment-related services,

including community participation support (CPS) prevocational services, OVR district offices and Intermediate Units (IUs). Attendees were given the opportunity to gain an understanding of each other's roles, build collaborative working relationships, examine current agency and employer gaps, and create an action plan.

Benefits Counseling –

- ❖ In 2022, with the goal of building provider capacity to provide benefits counseling services, ODP contracted with Cornell University to deliver the Work Incentives Practitioner credentialing program to PA providers. ODP covered the cost of the program for up to 50 provider staff (up to 2 staff persons per provider). As of October 2023, 32 provider staff have been credentialed, 10 have obtained provisional credentials, and 6 are taking the exam to be credentialed.

Dissemination of Employment Data by Race –

- ❖ In April 2023, ODP released county specific data related to CIE, employment services, and employment goals, evaluated by race. ODP requested that each county/county joinder review their data and, for any significant disparities in rates of employment between races, determine if a reason for the disparities could be identified, and then develop strategies to address systemic issues.

Pathways to Partnership Demonstration Model Grant

- ❖ OVR, in partnership with ODP, PDE, PaTTAN, LEAs, IUs and PA federally funded CILs were awarded a 5-year grant in 2023 entitled The Pennsylvania Transition Partners: Pathways to Partnership Demonstration Model. The goal of this grant is to improve the transition of youth with disabilities from the education system to the vocational rehabilitation system by increasing transition planning, work-based learning competencies, and work-based learning experience opportunities. This effort will enable partners across PA to raise the bar and set expectations that will result in CIE, post-secondary education, and self-sustaining economic outcomes for all youth with disabilities.

Employment Services Recovery Payments –

- ❖ In 2023, 95 providers of Supported Employment, Benefits Counseling, or Small Group Employment services were determined eligible to receive payments for serving more people in FY 22-23 than they did prior to the COVID-19 pandemic in FY 19-20. These providers received approximately \$5 million in 2023, in an effort to stabilize supported employment providers and the workforce.

Transition from Subminimum Wage to CIE –

- ❖ ODP continues to partner with OVR to implement the Integrated Vocational Engagement and Supports Team (InVEST) project, a wraparound model for assisting individuals with disabilities, who are considering or currently engaged in employment for subminimum wage, to transition to CIE. The following activities have been completed in the past year:
 - ✓ ODP Grant Liaison position has been filled.
 - ✓ PA Family Network is in the process of hiring 6 InVEST Family Advisors across the state. These positions will provide peer-to-peer education, technical assistance, and mentoring to families of individuals with ID/A who wish to seek employment.
 - ✓ OVR staff are being trained on the PA Charting the Life Course (CtLC) framework.
 - ✓ An advisory panel including ODP and OVR staff, staff from the Arc of PA, PA Developmental Disabilities Council, Disability Rights of PA, Statewide Independent Living Council, Client Assistance Program, the PA Workforce Development Board, and provider associations has been formed. Three quarterly meetings have been held as of the end of November 2023.

Connecting 4 Employment (C4E) Initiative –

- ❖ In August of 2023, the PA Department of Education (PDE), OVR, and ODP facilitated the Connecting4Employment follow-up pre-conference event at the Secondary Transition Pre-Conference. Attendees included representatives from the IUs, employment leads, OVR District Offices, County ID/A Programs, and SCOs, among others. This critical work continues at the local level and will remain a high priority for PDE, OVR and ODP in the coming years.

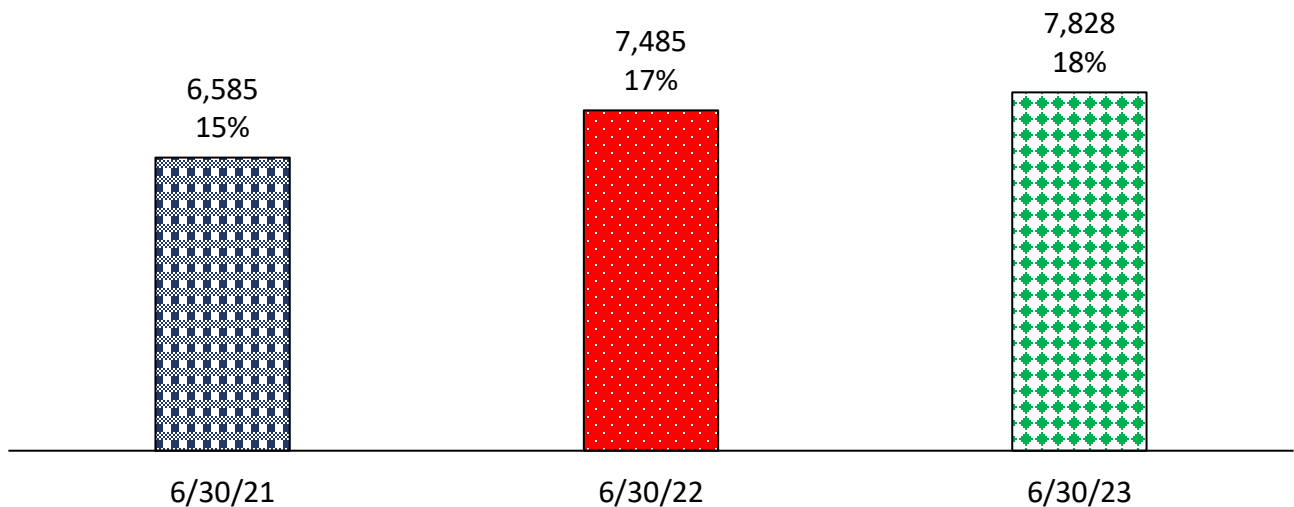
Attendees were given the opportunity to:

- ✓ Gain an understanding of each other's roles, build collaborative working relationships, and examine current programming gaps.
- ✓ Identify successful implementation practices from across the state.
- ✓ Discuss and implement sustainability practices.
- ✓ Explore opportunities for continuous improvement and action planning at the local level.

PERFORMANCE MEASURES *for #3*

1. Number and percent, overall and by race, of individuals ages 18-64, working in Competitive Integrated Employment. *(HCSIS)*
2. Number of individuals employed vs. number of individuals employed and authorized to receive ODP employment services. *(HCSIS)*
3. Number and percent of people, overall and by race, with authorized employment services and/or an employment goal in their ISP. *(HCSIS)*
4. Number of people receiving employment services. *(HCSIS)*
5. Percent of Administrative Entities (AE) having a designated employment lead. *(QA&I)*
6. Percent of SCs providing education and information to the individual about employment services. *(QA&I)*
7. Percent of people reporting their supports coordinators talked with them about employment at their most recent planning meetings. *(IM4Q)*
8. Number and percent of individuals enrolled with ODP and receiving subminimum wage. *(OVR Data Sharing Memorandum of Understanding)*

**Number and Percent of Individuals Ages 18-64 Working in CIE
(PM 1)**



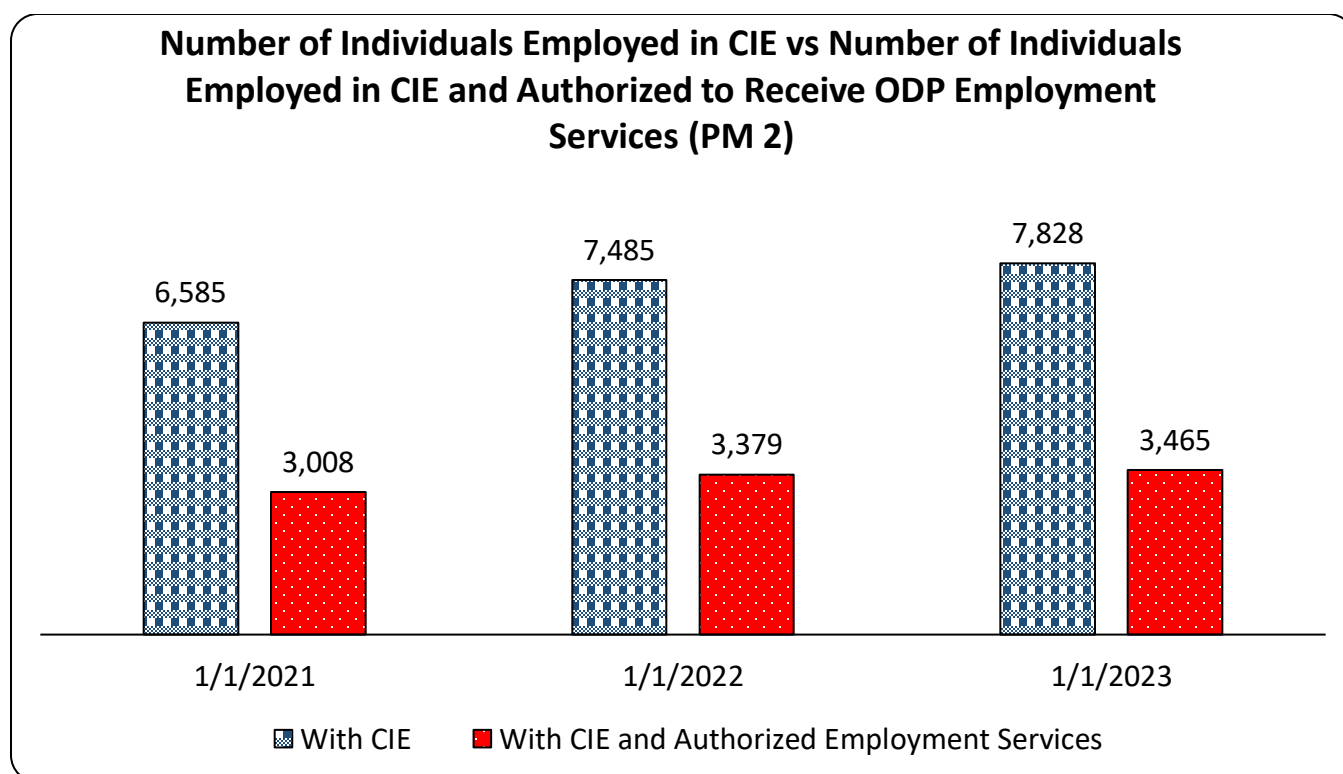
Source: EDW HCSIS Consumer Demographics Facts and SCO/Individual Monitoring Facts
Data extraction date: 10/25/2023

Number and Percent of Individuals Ages 18-64 Working in CIE, by Race (PM 1)				
	FY 21-22		FY 22-23	
American Indian or Alaskan Native	<11	0.1%	<11	0.1%
Asian	83	1.1%	95	1.2%
Black or African American	1,228	16.4%	1,262	16.1%
Native Hawaiian or Other Pacific Islander	0	0%	<11	0%
White	5,701	76.2%	5,959	76.1%
Other	411	5.5%	433	5.5%
Unknown	24	0.3%	34	0.4%
Multi-Race	29	0.4%	37	0.5%
No To All Options	<11	0%	<11	0%
Total	7,485	100%	7,828	100%

Source: EDW HCSIS Consumer Demographics Facts and SCO/Individual Monitoring Facts

Data extraction date: 10/25/2023

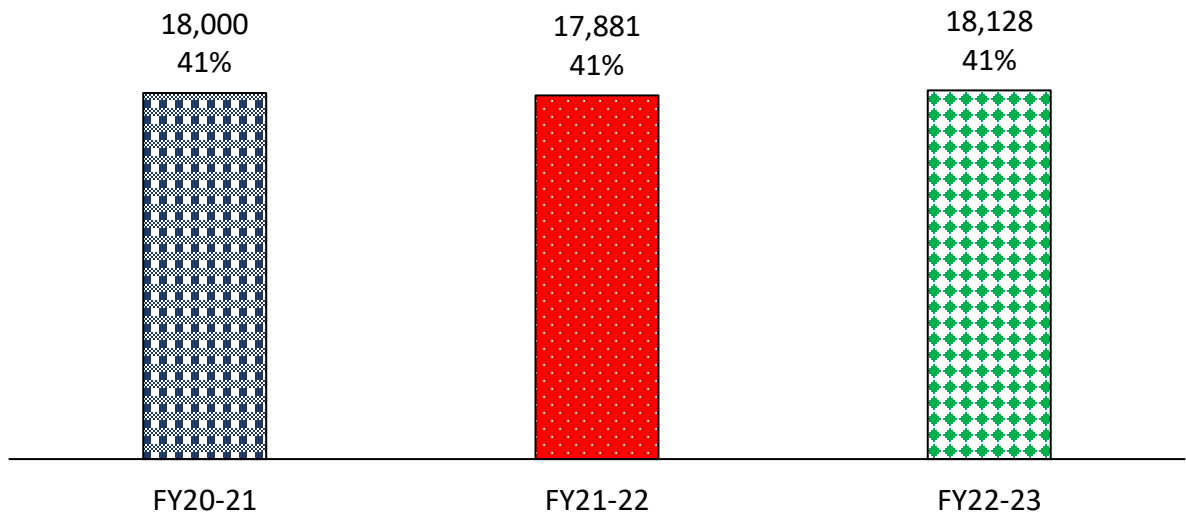
Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.



Source: EDW HCSIS Consumer Demographics Facts and SCO/Individual Monitoring Facts

Data extraction Date: 10/25/2023

Number and Percent of Individuals with Authorized Employment Services and/or an ISP Employment Goal (PM 3)



Source: EDW HCSIS Consumer Demographics Fact and SCO/Individual Monitoring Facts

Data extraction date: 10/25/2023

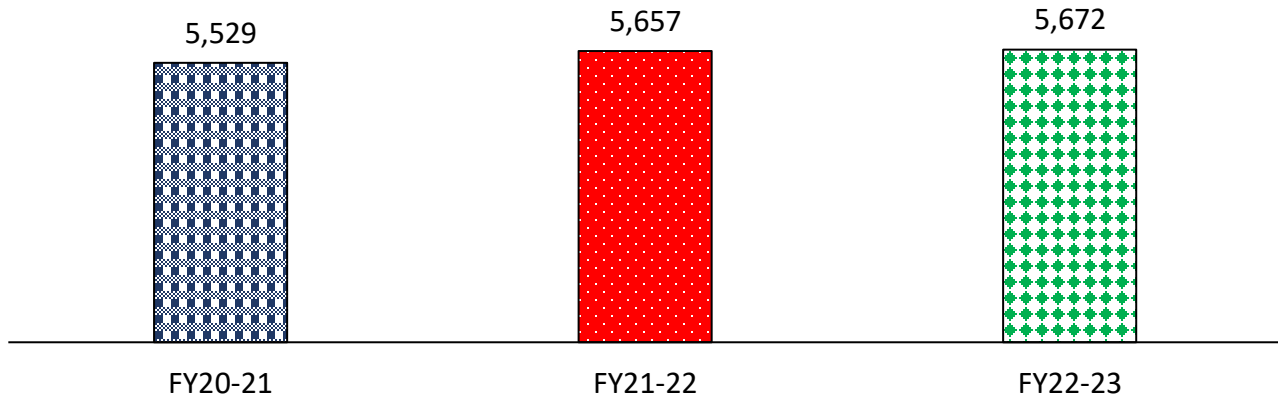
Number and Percent of Individuals with Authorized Employment Services and/or an ISP Employment Goal, by Race (PM 3)						
Race	6/30/2021		6/30/2022		6/30/2023	
American Indian or Alaskan Native	23	0.1%	29	0.1%	31	0.1%
Asian	228	1.3%	236	1.3%	269	1.5%
Black Or African American	3,174	17.6%	3,124	17.5%	3,218	17.8%
Native Hawaiian or Other Pacific Islander Indicator	<11	0.03%	<11	0.03%	<11	0.03%
White	13,446	74.7%	13,342	74.6%	13,414	74%
Other	1,020	5.7%	1,036	5.8%	1,072	5.9%
Unknown	47	0.3%	48	0.3%	50	0.3%
Multi-Race	56	0.3%	61	0.3%	68	0.4%

Source: EDW HCSIS Consumer Demographics Fact and SCO/Individual Monitoring Facts

Data extraction date: 10/25/2023

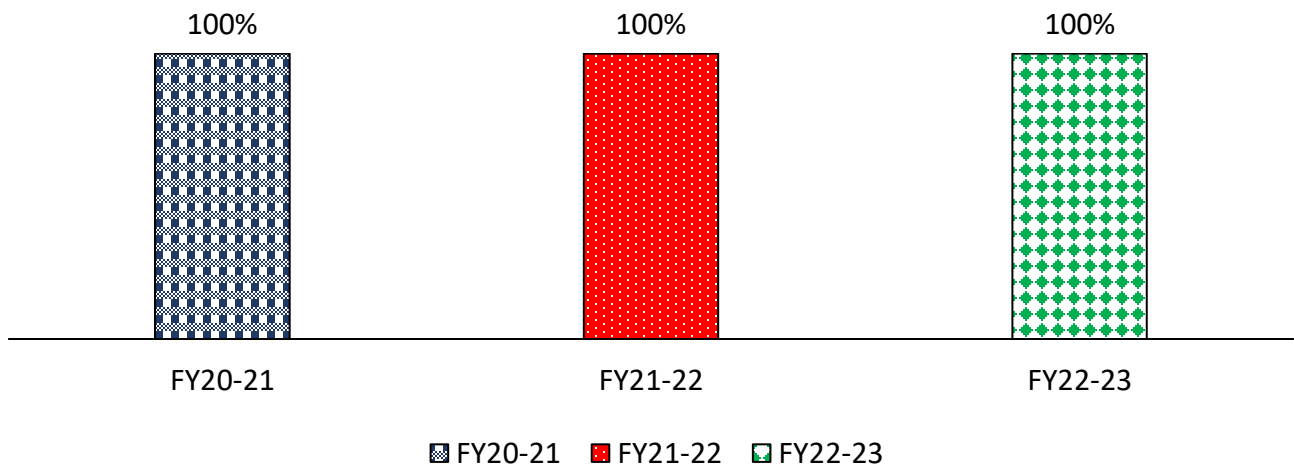
Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes. Column totals are also not provided for privacy purposes.

Number of People Receiving Employment Services (PM 4)



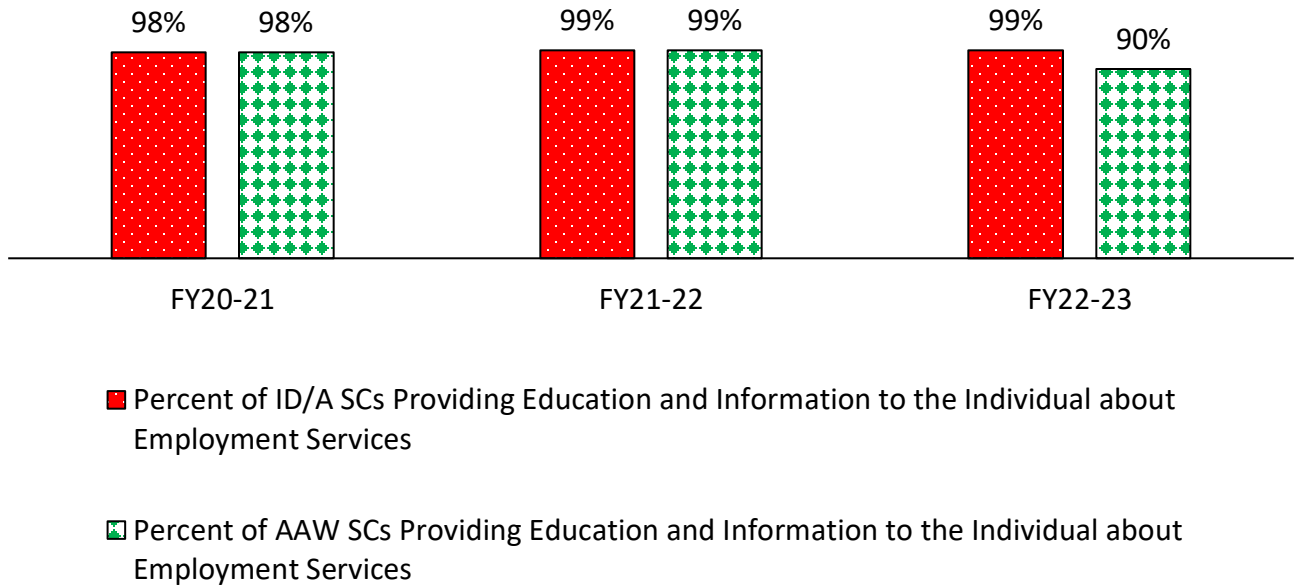
Source: EDW HCSIS Service authorizations and PROMISe™ Paid Claims, PROMISe paid claims through remittance advice date of 10/16/2023; Extraction Date: HCSIS: 10/23/23—PROMISe:10/26/2023

Percent of AEs with a Designated Employment Lead (PM 5)



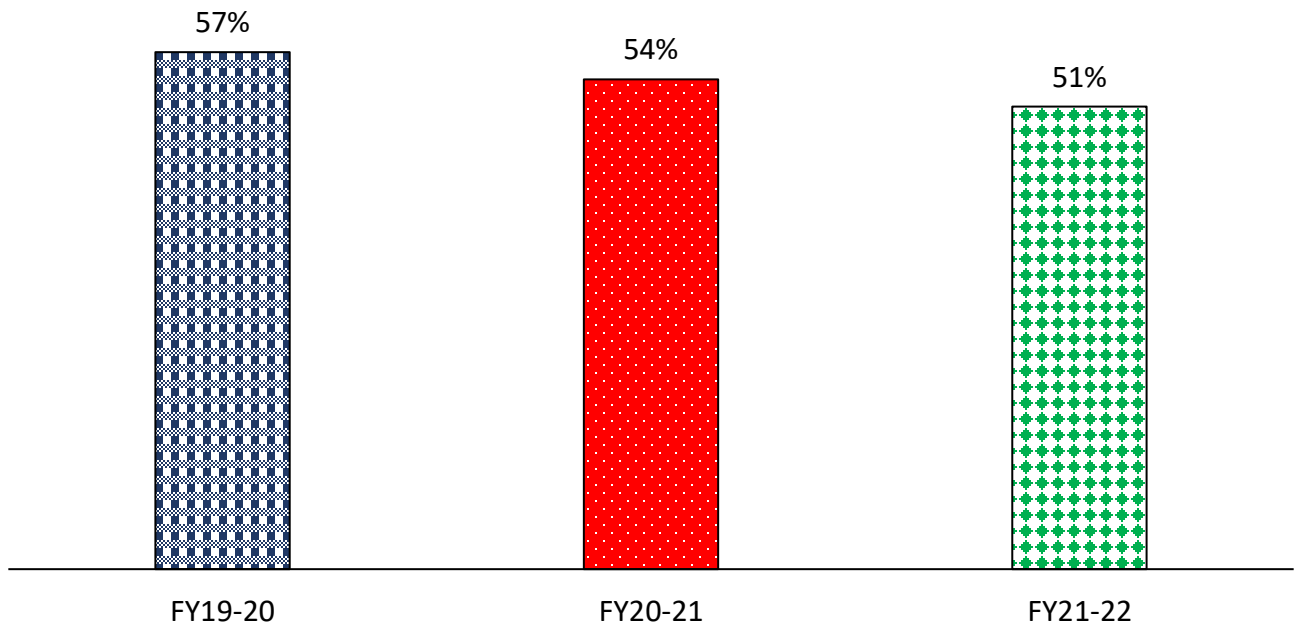
Source: QA&I

Percent of SCs Providing Education and Information about Employment Services (PM 6)



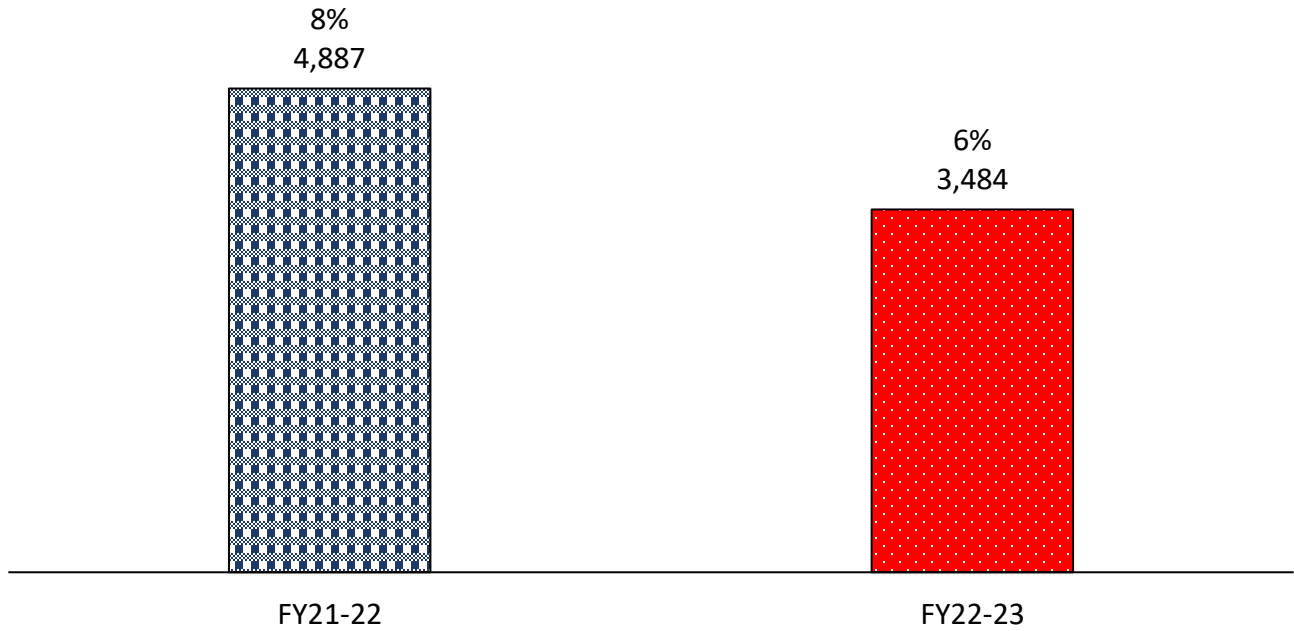
Source: QA&I

Percent of Individuals Who Reported SC Talked to Them about Employment in the Planning Meeting (PM 7)



Source: IM4Q

**Number and Percent of Individuals Enrolled with ODP and
Receiving Subminimum Wage (PM 8)**



Source: OVR Data Sharing Memorandum of Understanding



Recommendation 4: Support Families throughout the Lifespan

The vast majority of people with disabilities in Pennsylvania live with their families. Families need support in order make an everyday life possible throughout the person’s lifetime. Families need information, resources, and training. They need connections with other families and support services. Listening to people with disabilities and their families is key to providing supports that help them achieve an everyday life.

ACCOMPLISHMENT HIGHLIGHTS *for #4*

- ✓ **PA Family Network (PAFN) and Self-Advocacy Power Network for All (SAPNA) virtually conducted workshops and hosted events for connecting and networking**
- ✓ **ODP hosted the 4th Regional Collaborative Summit for 150+ people featuring the Community of Practice for Supporting Families Across the Lifespan (CoP)**
- ✓ **ODP hosted the 3rd annual PA Charting the LifeCourse (CtLC) Ambassador and Champion Event**
- ✓ **Published an updated “Gold Book: Understanding the Office of Developmental Programs”**

ACCOMPLISHMENTS IN DETAIL *for #4*

Collaborated with Communities, Stakeholders, and Cross-System Partners –

- ❖ ODP published an updated “[Gold Book: Understanding the Office of Developmental Programs](#)” with contributions from the Disability Rights Network of Pennsylvania, PAFN, and Self-Advocates United as 1 (SAU1).
 - ✓ This important resource is intended to assist people with ID/A, along with their families and those who provide support, to better understand what services and supports are available and how to access them.
- ❖ ODP hosted the 4th Regional Collaborative Summit for 150+ people and the 3rd annual CtLC Ambassador and Champion Event.
- ❖ ODP held quarterly Innovation Workgroup calls for all interested stakeholders on diverse topics such as employment, self-advocacy, and family engagement.
- ❖ ODP increased outreach to families with Deaf, Hard of Hearing, and DeafBlind individuals by:
 - ✓ Building relationships with transition-age youth and their families through PaTTAN, Intermediate Units, and the 2 Deaf schools in PA.

- Hosted information tables at the DeafBlind Family Learning Conference and at the PA School for the Deaf Community Day, where CtLC tools were shared.
- Presented at the PaTTAN Transition Conference.
- ❖ ODP hosts quarterly trainings for professionals on CtLC.
- ❖ Administrative Entities (AEs) and the Regional Collaboratives engaged in many activities to support the objectives of CoP, including, but not limited to:
 - ✓ Bradford/Sullivan hosted a Public Safety/Emergency Responder Open House in June that allowed individuals and families to connect with different agencies.
 - ✓ Schuylkill/Berks recently combined efforts to maximize family and organizational participation, became a sponsor of the I Am Able Foundation, and were involved in Community Connections in Berks County.
 - ✓ Montgomery hosted monthly informational sessions for families on a variety of topics, including a training for SCOs and providers on how to use the Life Course tools attended by over 50 people CtLC.
 - ✓ The Butler Collaborative (Armstrong/Indiana, Beaver, Butler, and Lawrence) – Beaver’s family group presented at a roundtable in the courts for the special committee for Autism, including judges, to improve their mutual understanding. In addition, Armstrong/Indiana, Beaver, and Butler partnered with their local Emergency Management System and Health Care Quality Unit (HCQU) for a 911 training for first responders to learn more about community members with ID/A.
 - ✓ Huntingdon/Mifflin/Juniata (HMJ) Regional Collaborative met monthly with a diverse membership group and offered a training for educators on the topic of CtLC - High Expectations for Transition in February.
 - ✓ Allegheny County supported 3 high schools to ensure that educators support students to develop meaningful goals and have high expectations for graduation.

Championed the Work of PAFN Partners–

- ❖ Worked with PAFN management and Family Advisors to accomplish the following:
 - ✓ Ensured all PAFN management and Family Advisors are certified PA LifeCourse Ambassadors or are in the process of receiving certifications, including bi-lingual and sibling advisors.
 - ✓ Engaged Family Advisors with ID/A in advanced LifeCourse and leadership training in accordance with their individual visions for their PAFN roles.
 - ✓ Facilitated a twice-monthly Trauma Support Group for family members led by Vision for Equality’s Trauma Program Manager and an ETA trained Family Advisor. In addition, approximately 50% of PA Family Advisors have received trauma training and certificates in Enhanced Trauma Awareness.
 - ✓ PAFN Family Advisors delivered over 200 hours of mentoring to families.
 - ✓ Partnered with the Office of Vocational Rehabilitation (OVR) and ODP to implement the 5-year “Disability Innovation Fund - Subminimum Wage to Competitive Integrated Employment” (SWtCIE) Innovative Model Demonstration Project.

- ❖ Reimagined PAFN to meet the needs of ALL families, including the person with ID/A and those thought of as family, to be more reflective of the diversity of lived experience; this includes those with complex medical needs, mental health issues, physical disabilities, members of the Black and Brown and LGBTQ+ communities, as well as those in various life stages and/or engaged in Lifesharing, home-schooling, and/or CIE.
 - ✓ Conducted many workshops and forums for families and individuals, including 166 workshops for connecting with professionals; 30 workshops to assist families just entering the system; an advanced curriculum for those already receiving waiver services, 12 virtual Family Forums, and 12 Good Life Groups led by and for adult siblings. (Note: Some of these were ARPA-funded.)
 - ✓ Provided numerous trainings and presentations, including ODP's Capacity Building Institute (CBI), the Everyday Lives conference, Temple's Competence and Confidence: Partners in Policymaking (C2P2 and C2P2EI) leadership development programs, PaTTAN's Transition Conference, the Philadelphia Autism Conference, and the National Charting the LifeCourse Showcase.
 - ✓ Launched a 2-year Community Engagement Project, made possible through ODP and an ARPA grant, to feature virtual and in-person workshops and summits (in English and Spanish) across PA; this project includes a robust media plan, a weekly podcast, and an enhanced social media presence. 12 self-advocates were hired to present side-by-side with family members.
 - ✓ Reached over 7,486 stakeholders during the last fiscal year.

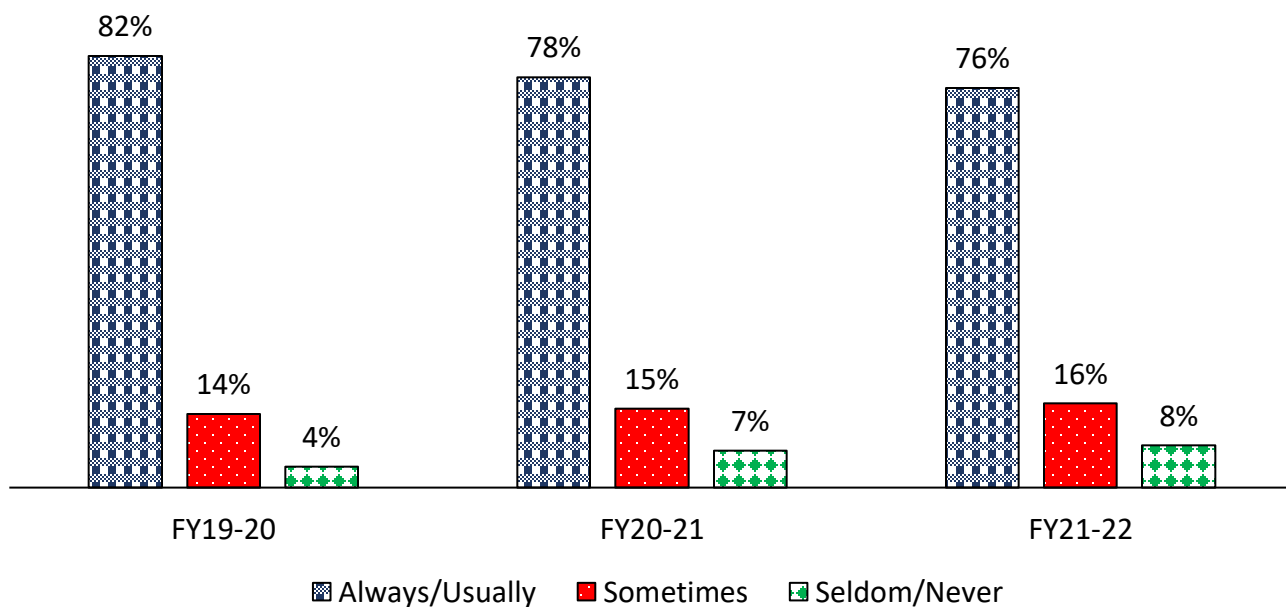
Championed the Work of SAPNA Partners –

- ❖ Worked with SAPNA partners to accomplish the following:
 - ✓ SAPNA's Supporting Families Leadership team members continued to teach the LifeCourse tools to SAU1 staff and 3 SAPNA power coaches and professional self-advocates participated in national and statewide CoP families' teams and workgroups.
 - ✓ Power Coaches from SAU1 engaged 347 self-advocates, 61 families, and 156 other individuals through Power Events, many of which incorporated LifeCourse tools, and SAPNA continues to provide technical assistance for the LifeCourse tools after events.
 - ✓ Created 3 new trainings that incorporate LifeCourse tools.

PERFORMANCE MEASURES *for #4*

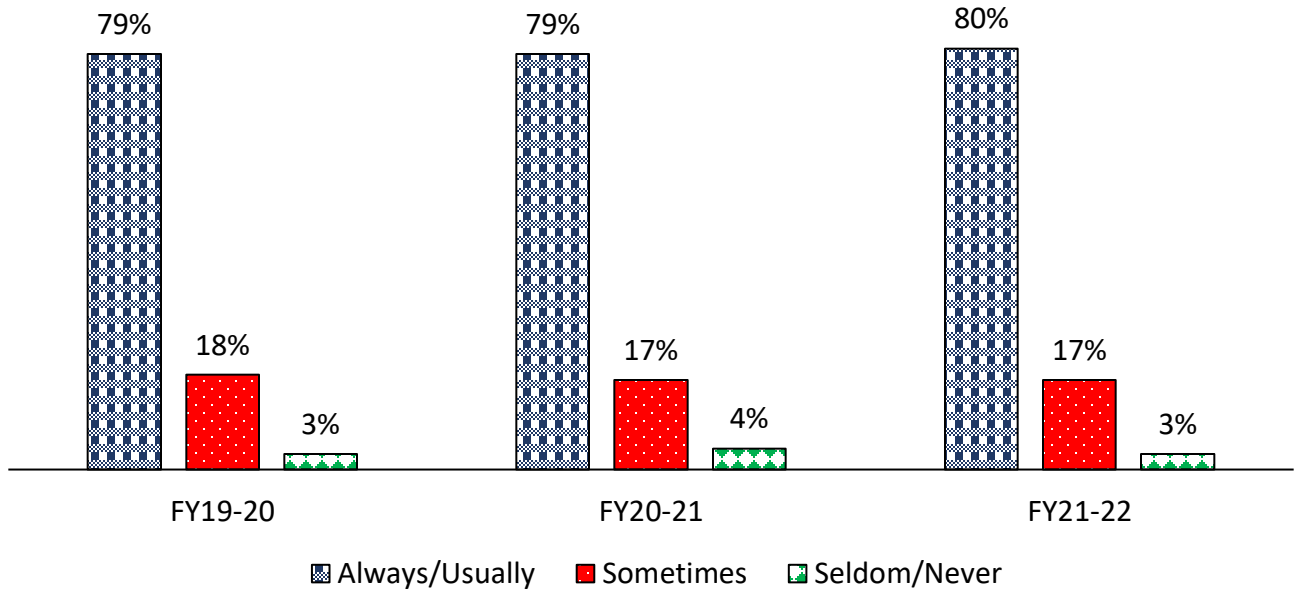
1. Percent of family members who receive enough information that helps them participate in planning services for their family. *(NCI PA Adult Family Survey)*
2. Percent of family members who report that the information received is easy to understand. *(NCI PA Adult Family Survey)*
3. Percent of family members, overall and by race, reporting the Supports Coordinator tells them about other public services for which their family is eligible (food assistance, SSI, housing subsidies, etc.). *(NCI PA Adult Family Survey)*
4. Percent of relatives who reported they have an opportunity to connect and network with other families with relatives at similar life stages. *(IM4Q)*
5. Percent of relatives who said they were aware of the PA Family Network. *(IM4Q)*
6. Of those relatives who said they were aware of the PA Family Network, the percent who reported they had attended a workshop led by the Network of Family Advisors. *(IM4Q)*
7. Percent of respondents whose family member transitioned from school to adult services in the past year who were happy with the process. *(IM4Q)*
8. Percent of respondents who reported they had learned about the LifeCourse framework and tools. *(IM4Q)*
9. Percent of relatives, overall and by race, who reported the Supports Coordinator asks about their vision for an everyday life for their family member. *(IM4Q)*

**Percent of Family Members Who Receive Information
to Help Plan Services (PM 1)**



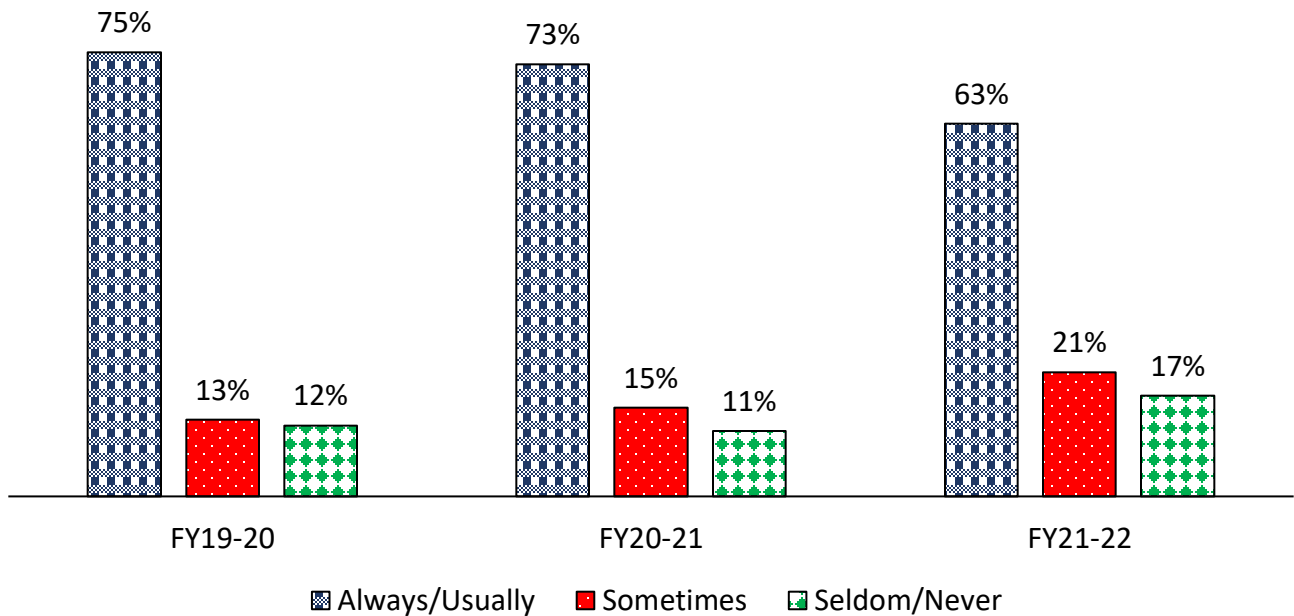
Source: National Core Indicators (NCI) PA Adult Family Survey

Percent of Family Members Who Report Information About Services is Easy to Understand (PM 2)



Source: NCI PA Adult Family Survey

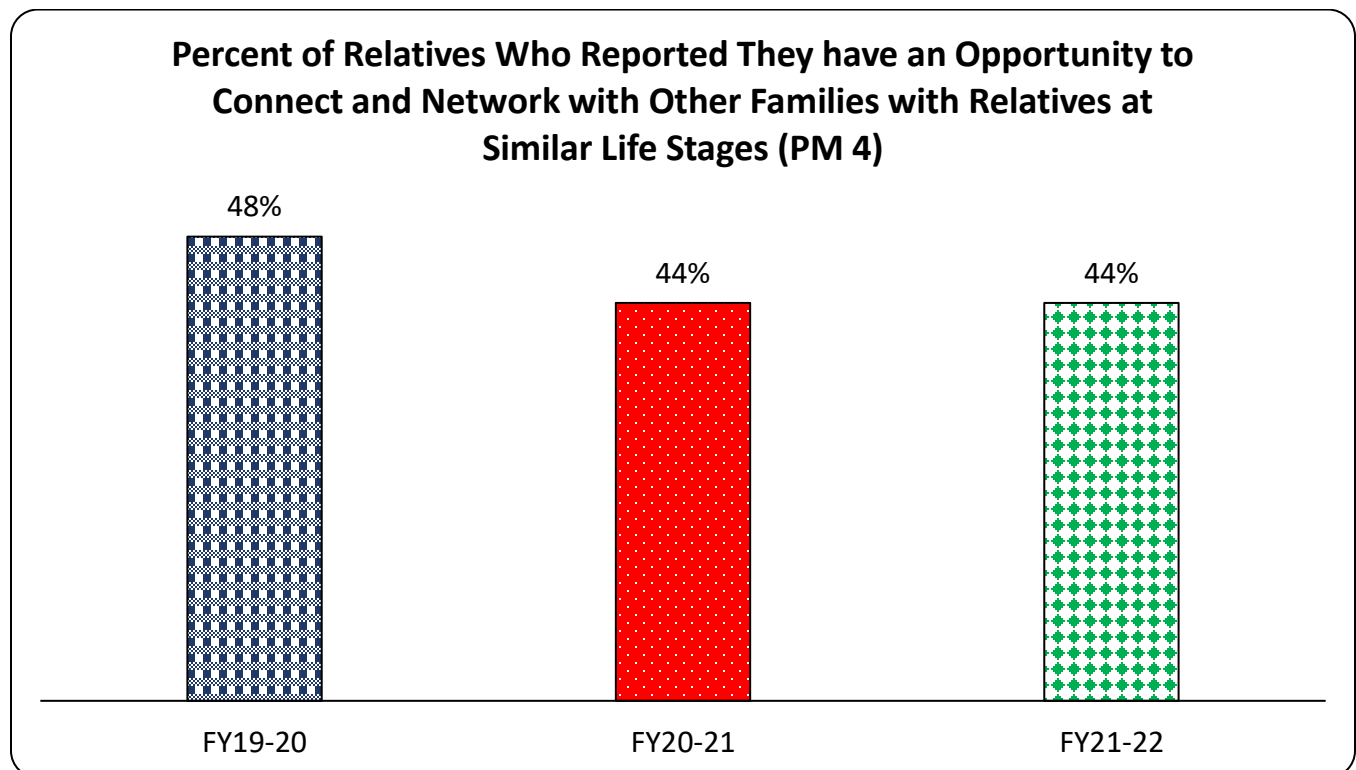
Percent of Family Members Who Report SCs Tell Them about Other Public Services (PM 3)



Source: NCI PA Adult Family Survey

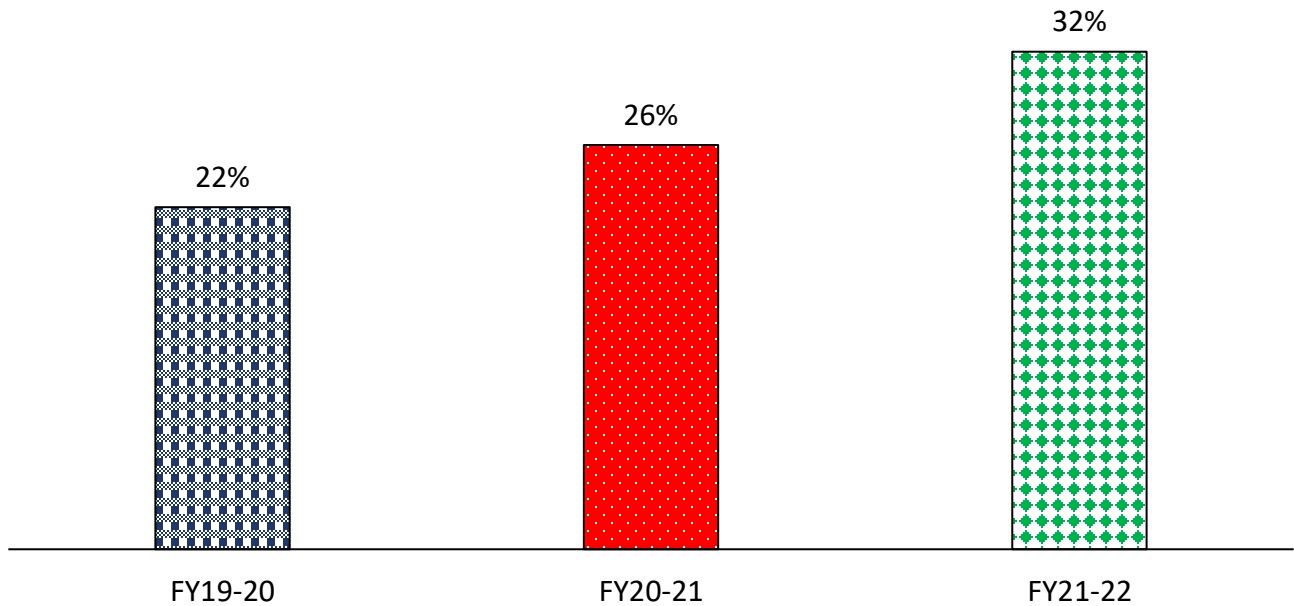
Percent of Family Members Who Report SCs Tell Them about Other Public Services, by Race (PM 3)	FY 20-21	FY 21-22
Black or African American	75%	71%
White	67%	79%
Other	75%	70%

Source: NCI PA Adult Family Survey



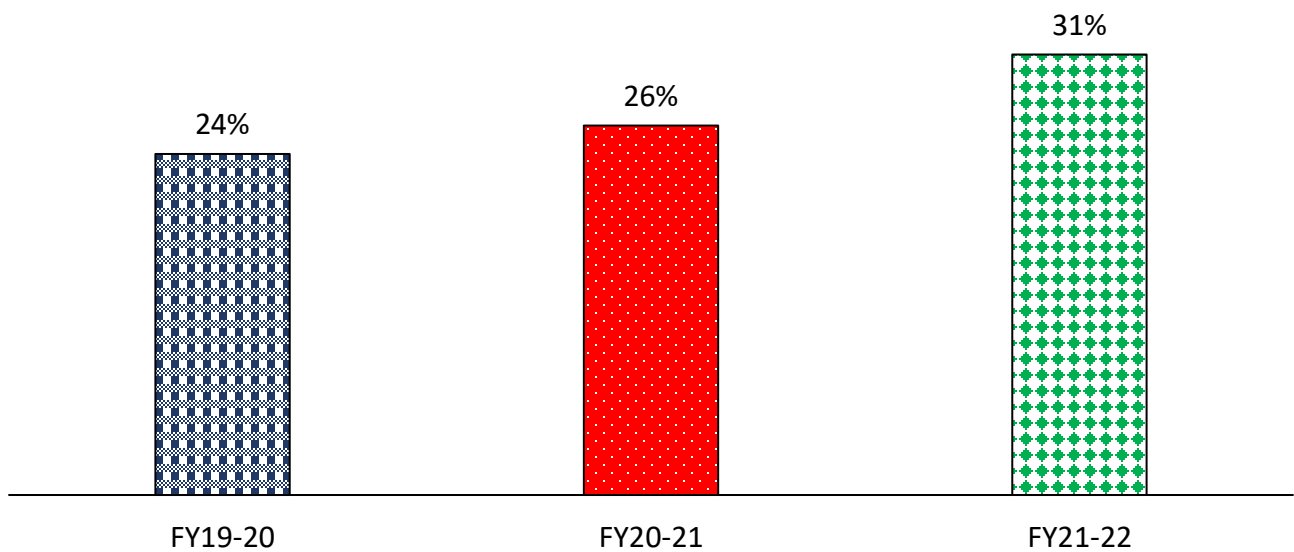
Source: IM4Q

Percent of Relatives Who Said They Were Aware of the PA Family Network (PM 5)



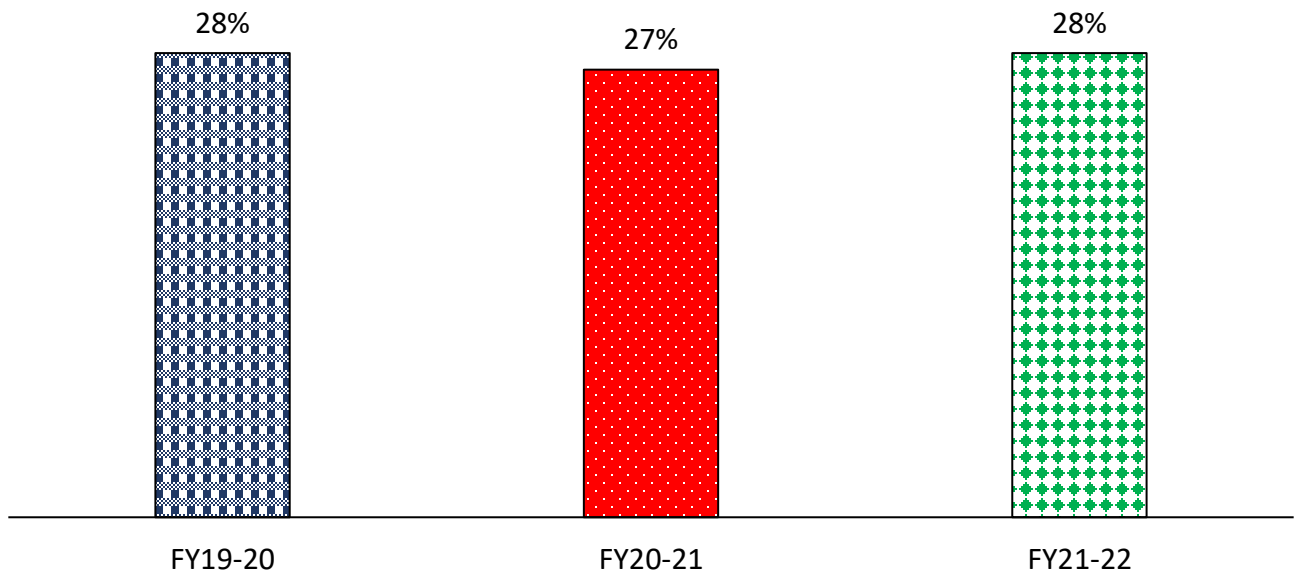
Source: IM4Q

Of Those Relatives Who Said They were Aware of the PA Family Network, Percent Who Reported They Had Attended a Workshop Led by the Network of Family Advisors (PM 6)



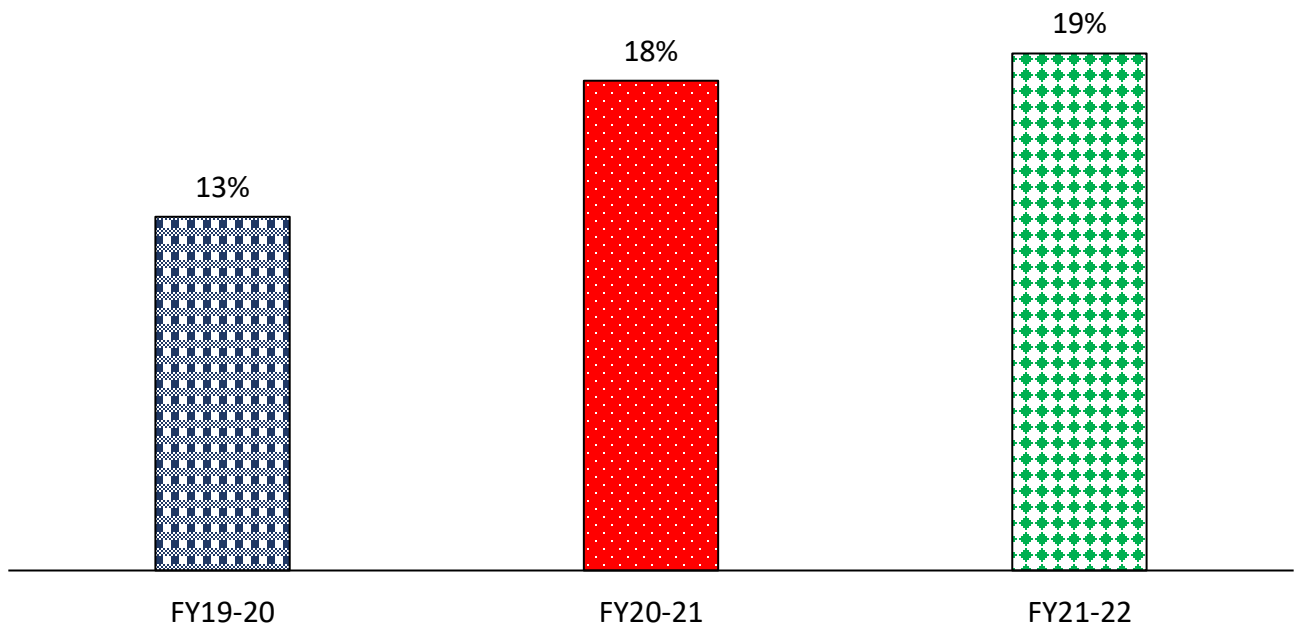
Source: IM4Q

Percent of Respondents whose Family Member Transitioned from School to Adult Services in the Past Year Who Were Happy with the Process (PM 7)



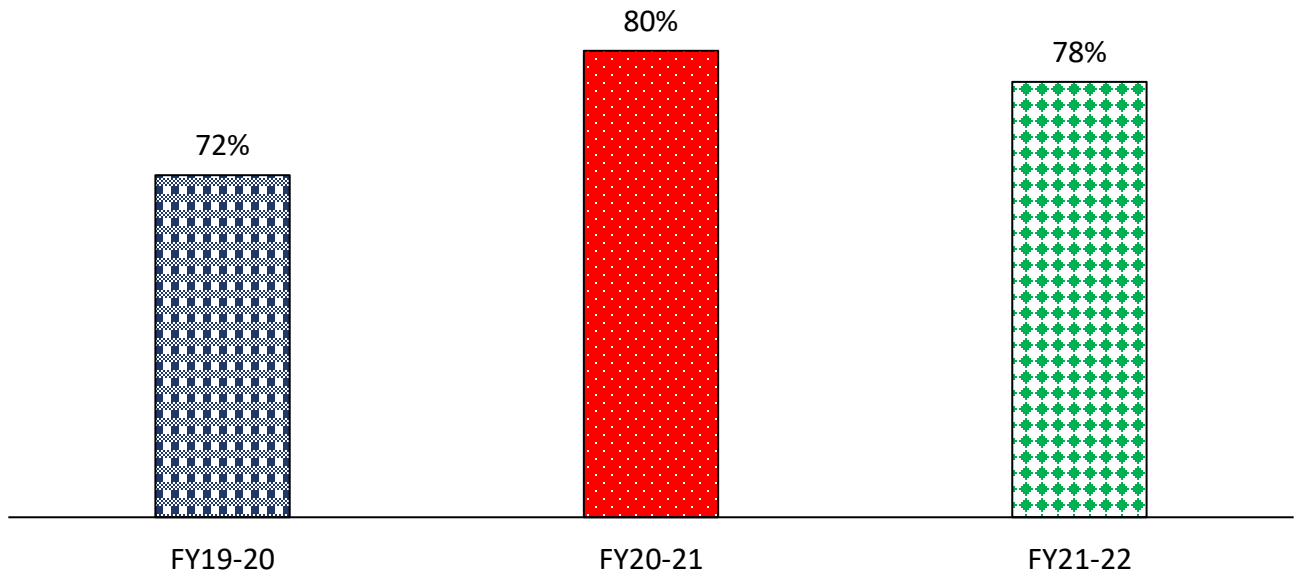
Source: IM4Q

Percent of Respondents Who Reported They Learned about the LifeCourse Framework and Tools (PM 8)



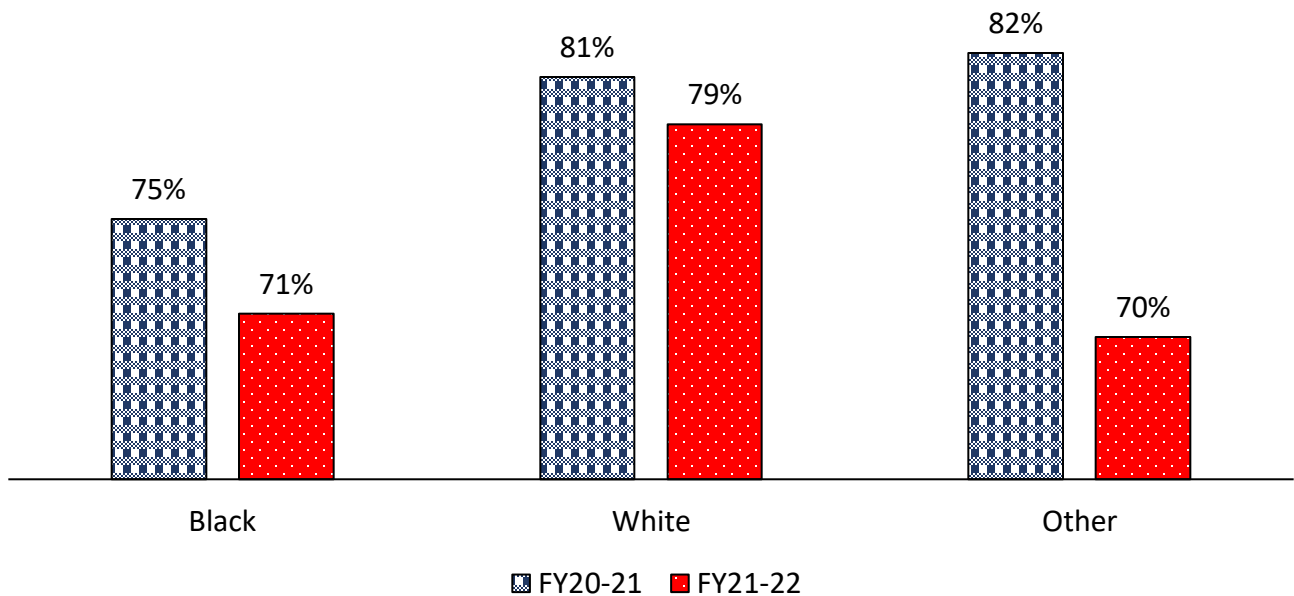
Source: IM4Q

Percent of Relatives Who Report That the SC Asks about Their Vision for an Everyday Life for Their Family Member (PM 9)



Source: IM4Q

Percent of Relatives who Report the SC Asks about their Vision for an Everyday Life for their Family Member, by Race (PM 9)



Source: IM4Q



Recommendation 5: Promote Health, Wellness, and Safety

Promote physical and mental health, wellness, and personal safety for every individual and his or her family. Promoting physical and mental health means providing information about health and wellness, emotional support, and encouragement. Tools that help every individual adopt a healthy lifestyle — including good nutrition, healthy diets, physical activity, and strategies to reduce and manage stress and protect oneself from all types of abuse and exploitation — must be provided.

ACCOMPLISHMENT HIGHLIGHTS *for #5*

- ✓ Created a new waiver service, *Specialty Telehealth and Assessment Team*, to be implemented in March 2024
- ✓ Amended waiver service to allow for Music Therapy, Art Therapy, and Equine Assisted Therapy to be delivered in group settings
- ✓ Began planning process and early implementation of statewide initiative to promote physical activity among ODP's stakeholders
- ✓ Continued outreach regarding the Skin Integrity Project to promote awareness of pressure injuries

ACCOMPLISHMENTS IN DETAIL *for #5*

Specialty Telehealth and Assessment Team (STAT) –

- ❖ Created and received approval from CMS for a new telehealth service to allow for the provision of right-on-time health assessments to determine the best clinical course of action when the participant's primary care physician is unavailable or unable to determine best course of action.
 - ✓ This service will begin in March 2024.
 - ✓ The goal of this service is to avoid unnecessary emergency room visits.
 - ✓ Providers can communicate with the emergency department directly, ensuring advance preparation for a visit and decreasing the chances of hospital admission.
 - ✓ This service is consultative and provides disability-specific advice on when best to seek additional or in-person medical treatment for the participant.

Health Risk Screening Tool (HRST) –

- ❖ HRST continues to be useful in identifying health risks, including risks associated with more severe outcomes for those with COVID-19.
- ❖ Implemented in 2019, more than 13,000 individuals receiving residential services have been screened as of November 2023.

Skin Integrity Project –

- ❖ Continue to promote awareness of pressure injuries—also referred to as pressure ulcers, pressure wounds, bed sores or decubiti—as part of ongoing efforts to ensure participant health and safety.
- ❖ This initiative is an ongoing project informed by claims data and direct outreach by the Health Care Quality Units (HCQUs).

Infection Prevention Specialist Support –

- ❖ Continued to provide infection prevention specialist support via funding obtained to “prevent, prepare for, and respond to coronavirus” through PA’s Department of Health (DOH), from a Centers for Disease Control and Prevention (CDC) appropriation to:
 - ✓ Continue to build upon existing infrastructure to grow capacity with HCQUs.
 - ✓ Continue to support the HCQUs to contract with ID Connect, a team of infectious disease physicians and other professionals affiliated with the University of Pittsburgh Medical Center (UPMC).
 - ✓ Continue to provide information related to COVID-19 and other infectious disease concerns via town hall meetings and information distribution on best practices and policy review for providers.

Children with Medically Complex Conditions –

- ❖ ODP collaborated with Office of Medical Assistance Programs and the HCQUs to begin planning for implementation of Pediatric Complex Care Resource Centers (PCCRCs) to increase capacity to support children with complex medical conditions and to support caregivers in the non-medical aspects of supporting a child with complex medical conditions receiving in-home nursing services. The purpose of the services of the PCCRCs are to meet the needs for information and support through focused services to build family and caregiver capacity and efficacy.

Increase Access to Creative and Expressive Therapies –

- ✓ Amended waiver service was created to allow for Music Therapy, Art Therapy, and Equine Assisted Therapy to be delivered in group settings, thereby increasing capacity to serve a greater number of individuals.

Outreach for Healthy Living –

- ❖ Continued to develop outreach to promote health and wellness through multiple training sessions via the HCQUs.

Initiative to Promote Physical Activity –

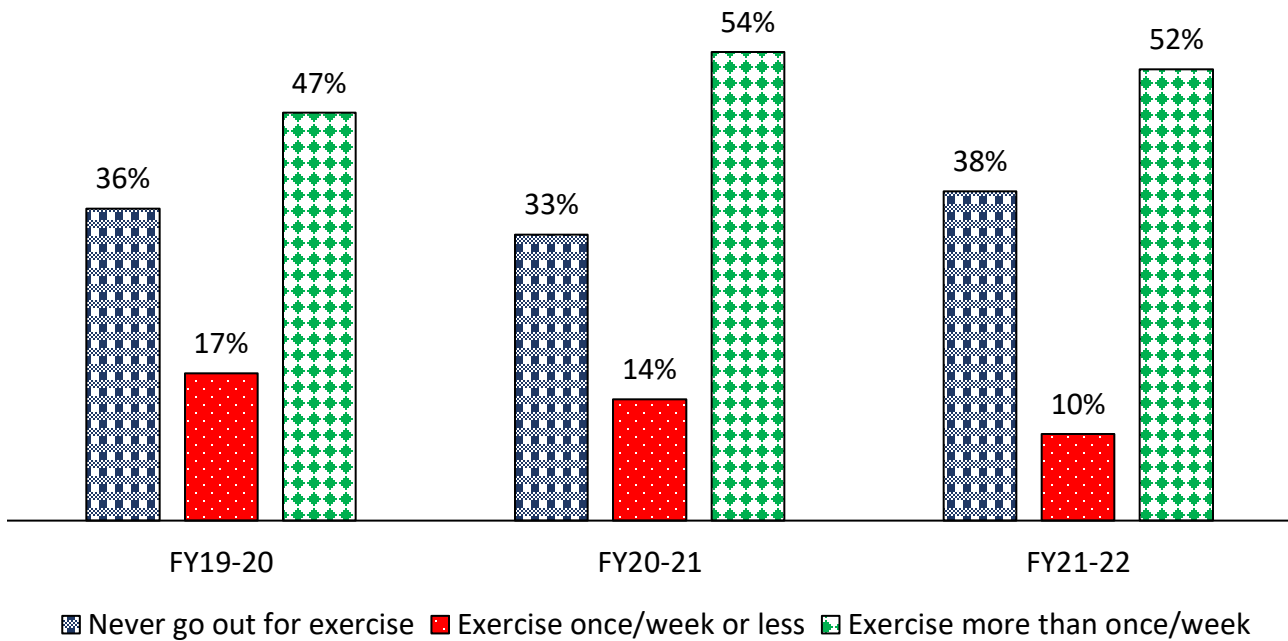
- ❖ Began the planning process for an initiative to promote physical activity among stakeholders, in recognition that improved health status increases resilience and improves quality of life.
- ❖ ODP will promote the Move Your Way Campaign developed by the Office of Disease Prevention and Health Promotion (ODPHP), US Department of Health and Human Services (HHS).

- ❖ Planned initial promotion activities for late 2023 with a broader promotion anticipated during the 2024 Everyday Lives Conference in early January 2024.

PERFORMANCE MEASURES *for #5*

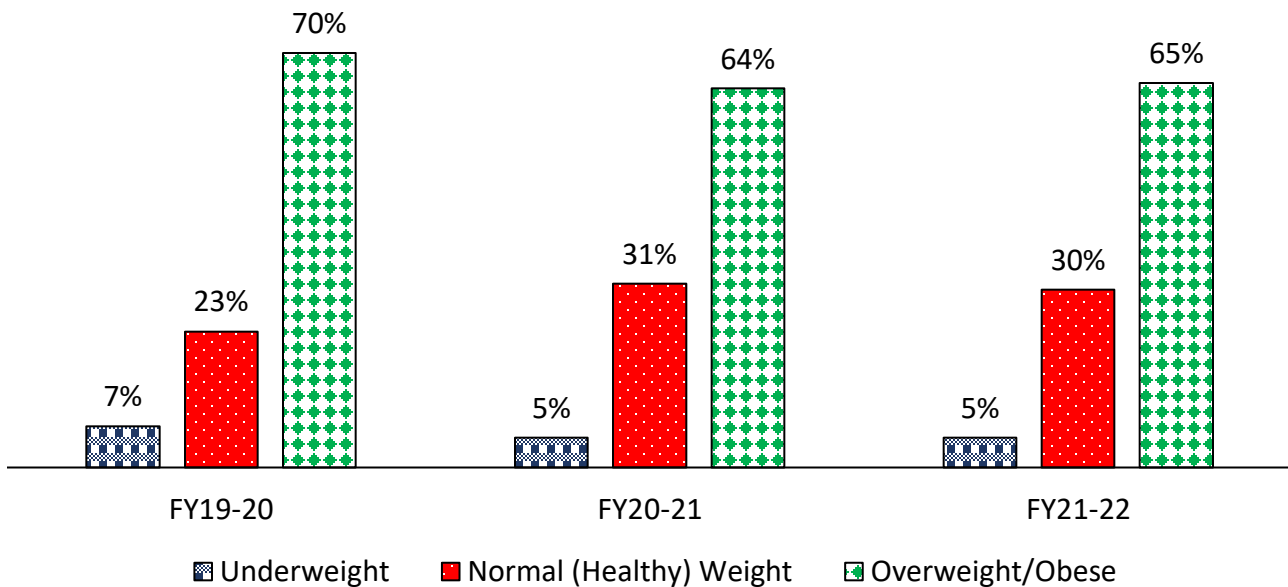
1. Regarding monthly exercise, percent of individuals who report they:
 - Never go out for exercise.
 - Exercise less than weekly.
 - Exercise once a week.
 - Exercise more than once a week. *(IM4Q)*
2. Percent of individuals, overall and by race, who are underweight, normal weight, overweight, and obese. *(NCI PA In-Person Survey)*
3. Percent of individuals, overall and by race, with medical, dental, and eye exams in the past year. *(NCI PA In-Person Survey)*
4. Percent of individuals who report that communication in their doctor's office is effective, including:
 - Percent who report if they needed help communicating at the doctor's office, it was available
 - Percent who reported they have the opportunity to discuss health with their primary care provider
 - Percent who reported their doctor speaks directly to them during appointments
 - Percent who feel they understood their doctors' instructions
 - Percent who reported they feel their doctor understands them. *(IM4Q)*
5. When asked how hard it is to get dental services in their community, percent of individuals, overall and by race, who reported it was very easy or easy, in-between, or very hard or hard. *(IM4Q)*
6. Percent who reported they have not been prevented from receiving medical and dental services because of their disabilities. *(IM4Q)*
7. Percent of individuals in residential services with diabetes, hypertension and/or obesity. *(HRST)*
8. Number of individuals identified to have a pressure injury, overall and by race. *(Medicaid Claims Data)*
9. Percent of individuals who reported they do not have a psychiatrist but want one. *(IM4Q)*
10. Percent of individuals who reported they are able to provide consent for medical treatment. *(IM4Q)*
11. Of those able to provide consent for medical treatment, percent who said their doctor accepts their consent. *(IM4Q)*

Percent of Individuals Who Exercise (PM 1)



Source: IM4Q

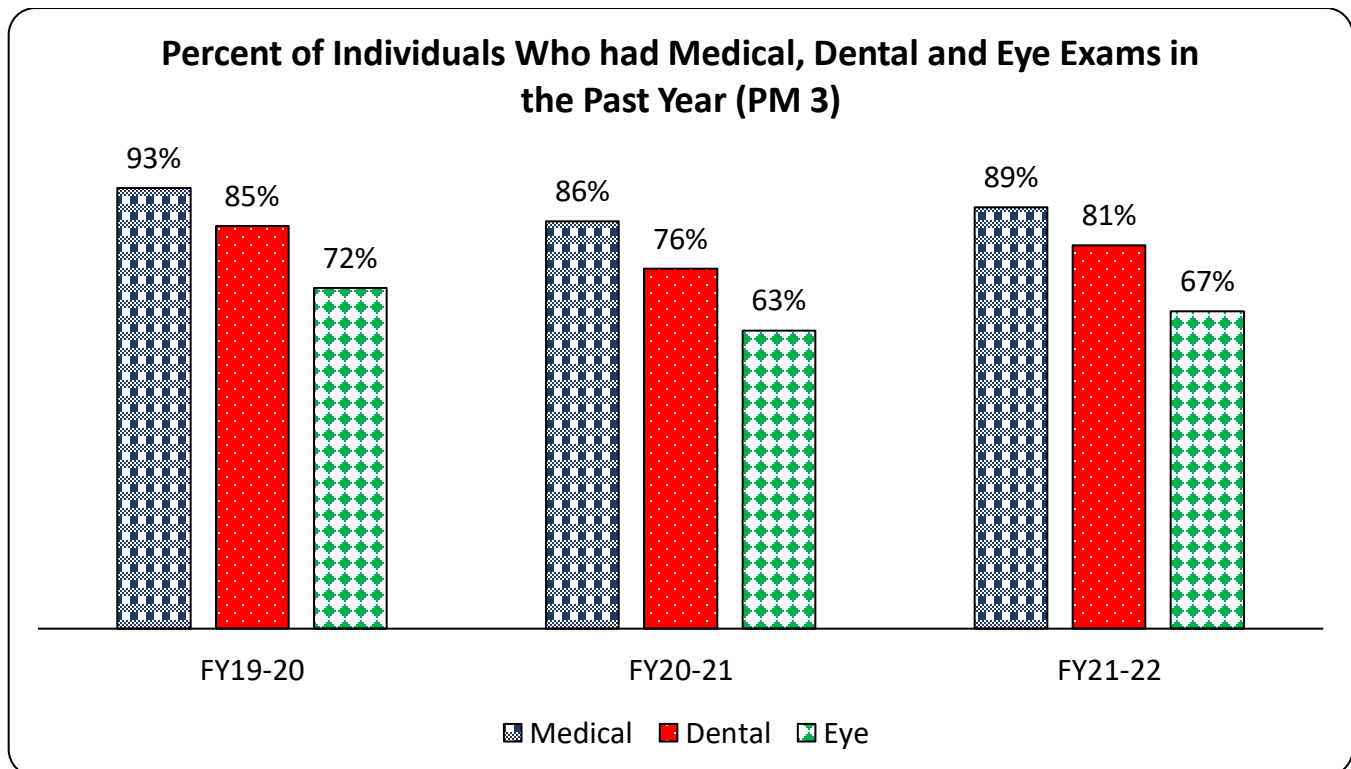
Percent of Individuals who are Underweight, Normal Weight, Overweight, or Obese (PM 2)



Source: NCI PA In-Person Survey

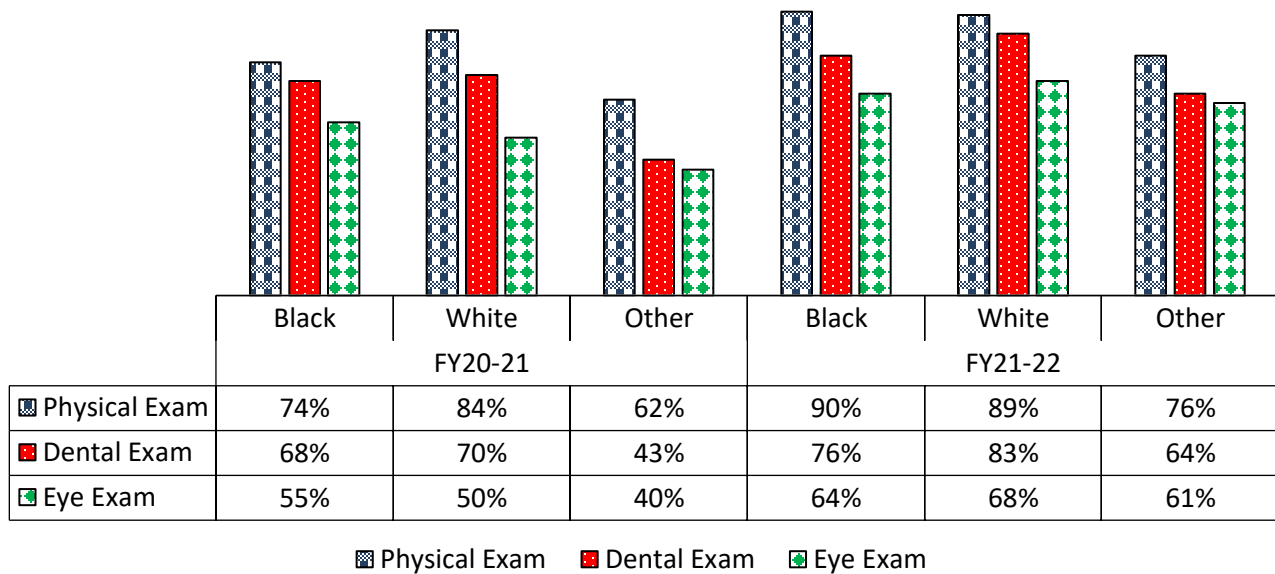
Percent of Individuals Who are Underweight, Normal Weight, Overweight, or Obese, by Race (PM 2)						
	FY 20-21			FY 21-22		
	Black	White	Other	Black	White	Other
Underweight	5%	4%	20%	2%	4%	13%
Normal Weight	35%	30%	40%	26%	31%	38%
Overweight	23%	27%	20%	33%	33%	13%
Obese	37%	39%	20%	38%	33%	38%

Source: NCI PA In-Person Survey



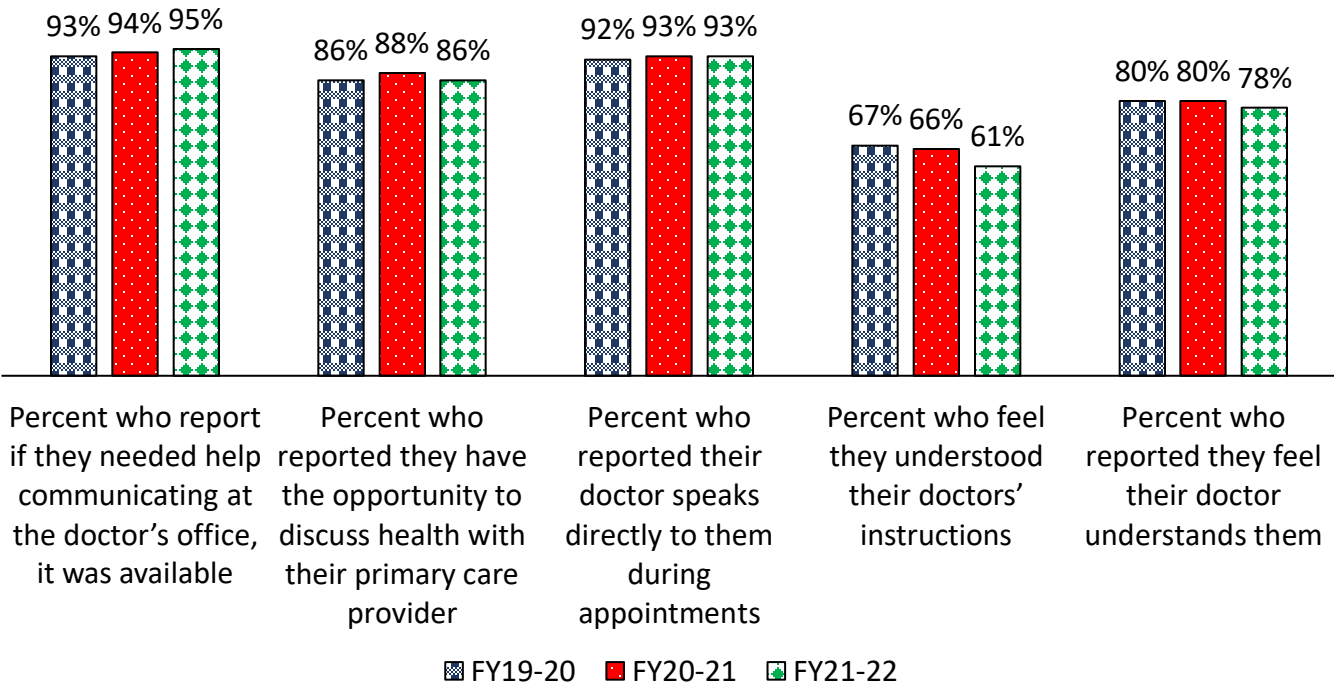
Source: NCI PA In-Person Survey

Percent of Individuals Who had Medical, Dental & Eye Exams in the Past Year, by Race (PM 3)



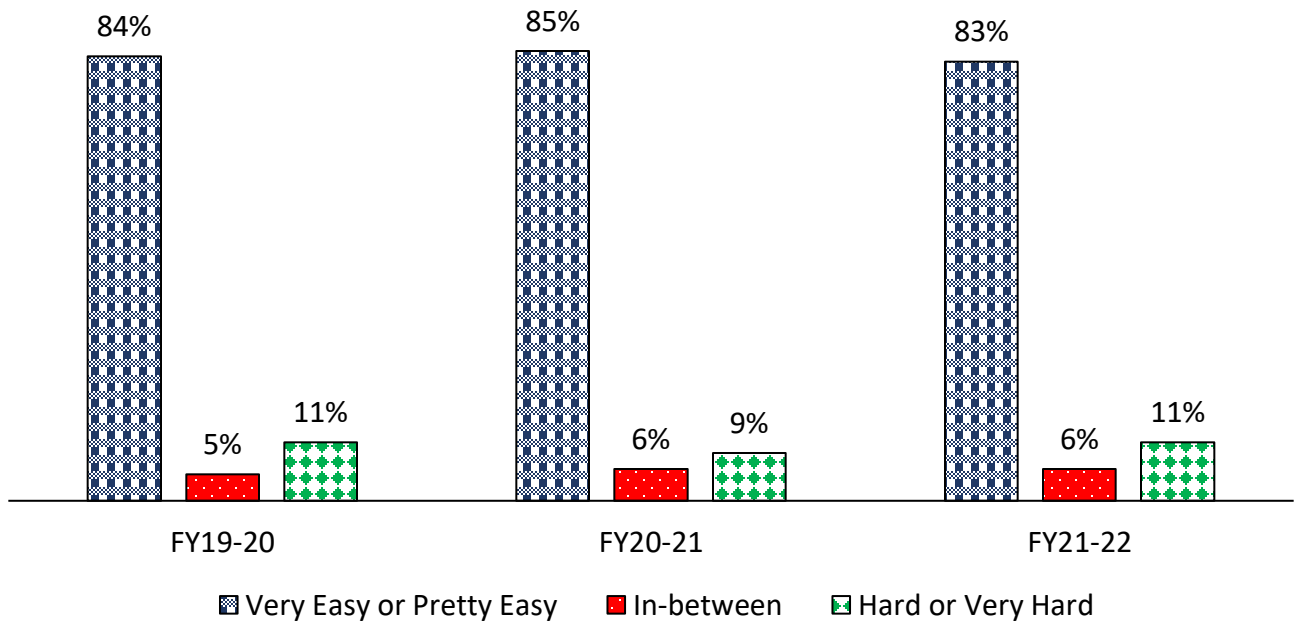
Source: NCI PA In-Person Survey

Percent of Individuals who Report that Communication in Their Doctor's Office is Effective (PM 4)



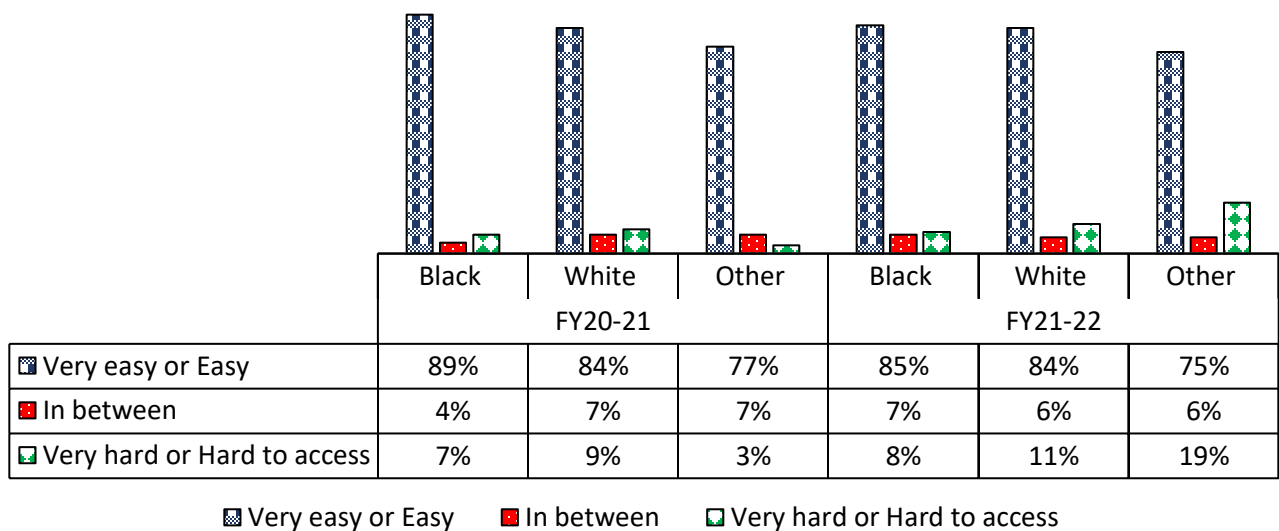
Source: IM4Q

Percent of Individuals Who Reported it was Very Easy or Pretty Easy, In-between, or Hard or Very Hard to Access Dental Services (PM 5)



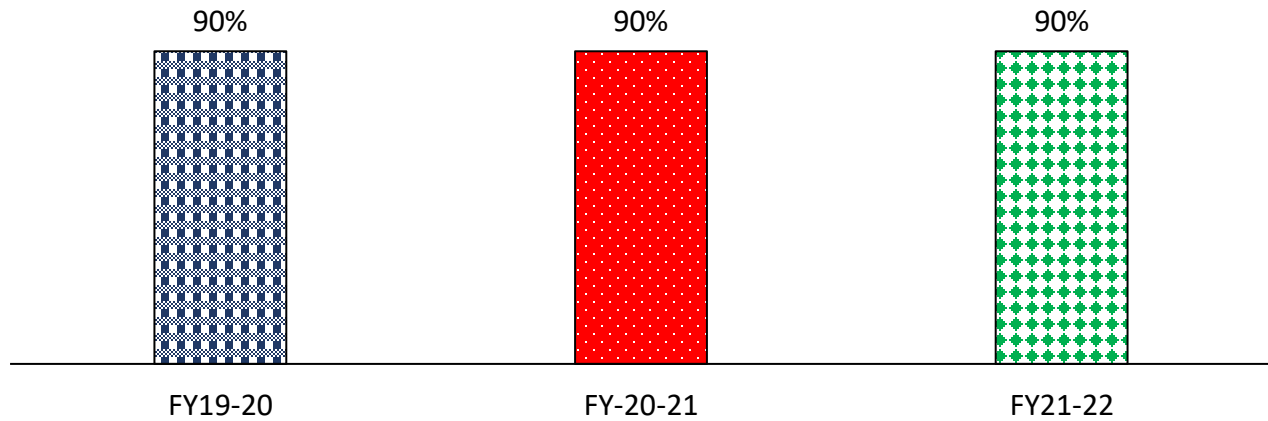
Source: IM4Q

Percent of Individuals Who Reported it was Very Easy or Pretty Easy, In-between, or Hard or Very Hard to Access Dental Services, by Race (PM 5)



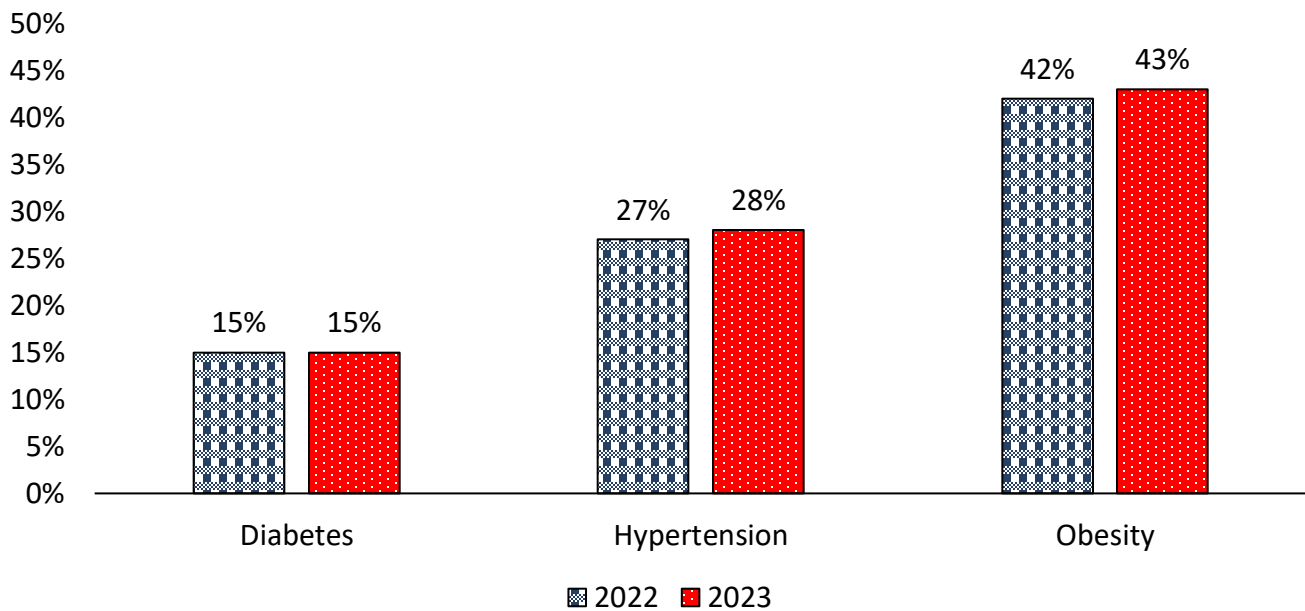
Source: IM4Q

Percent of Individuals Who Reported They Have Not Been Prevented from Receiving Medical and Dental Services because of Their Disabilities (PM 6)



Source: IM4Q

Percent of Individuals in Residential Services with Diabetes, Hypertension and/or Obesity (PM 7)

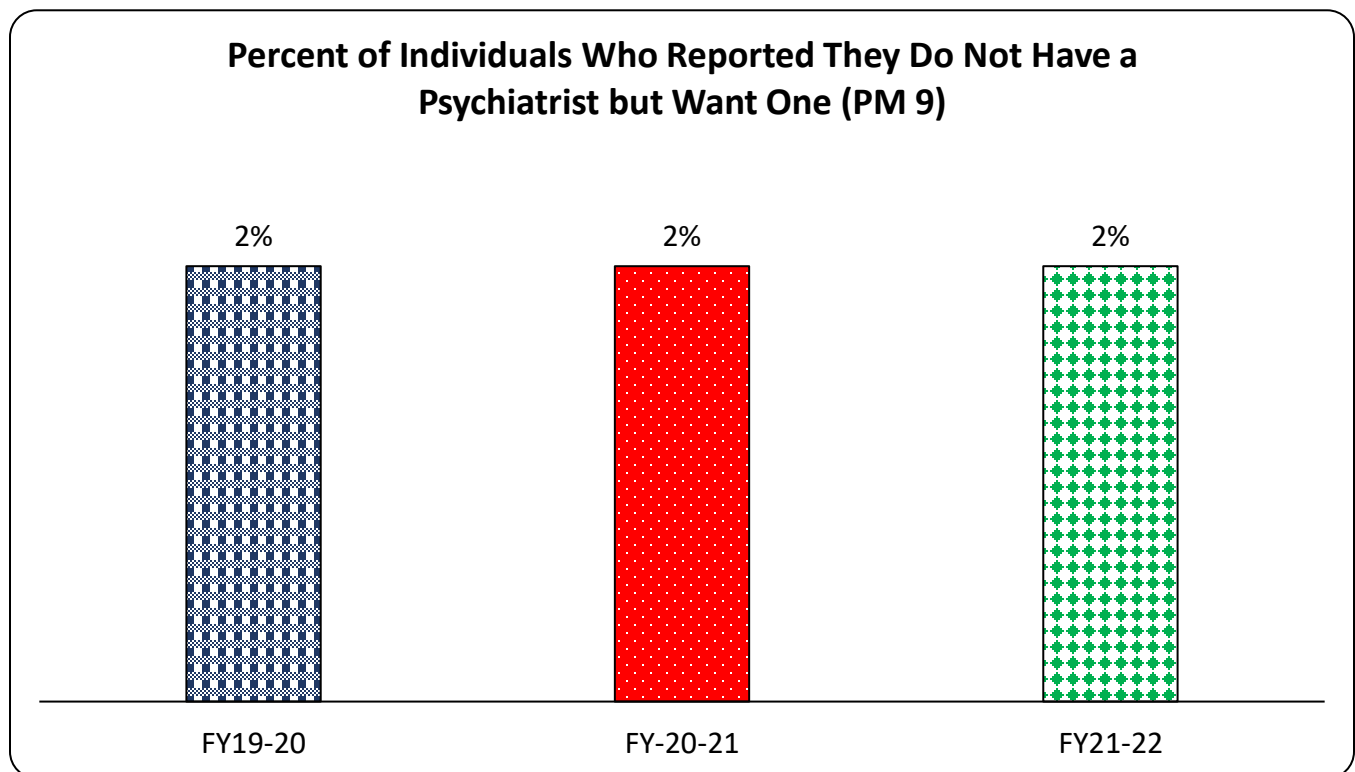


Source: HRST December 2023

Number of Individuals Identified to have a Pressure Injury, Overall and by Race (PM 8)	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Black or African American	16	17	78
Native Hawaiian or Other Pacific Islander	<11	<11	<11
White	193	251	429
Other	<11	11	32
Multi-Race	<11	0	<11
Total Number of Individuals	218	279	544

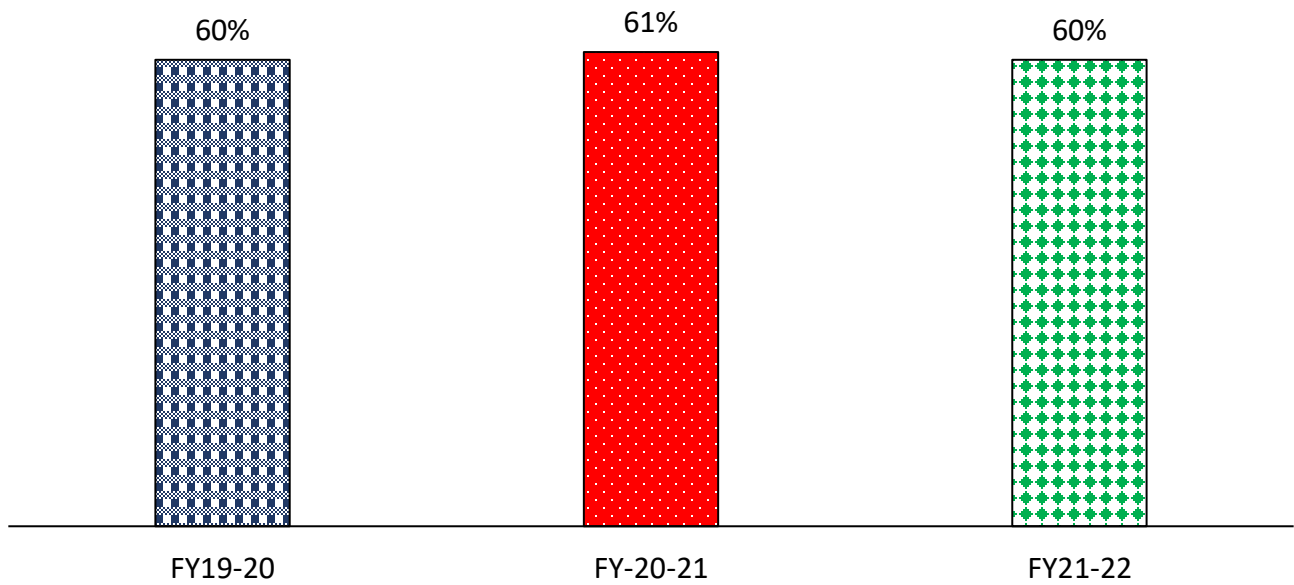
Source: HCSIS and Medicaid claims as of 12/5/2023

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.



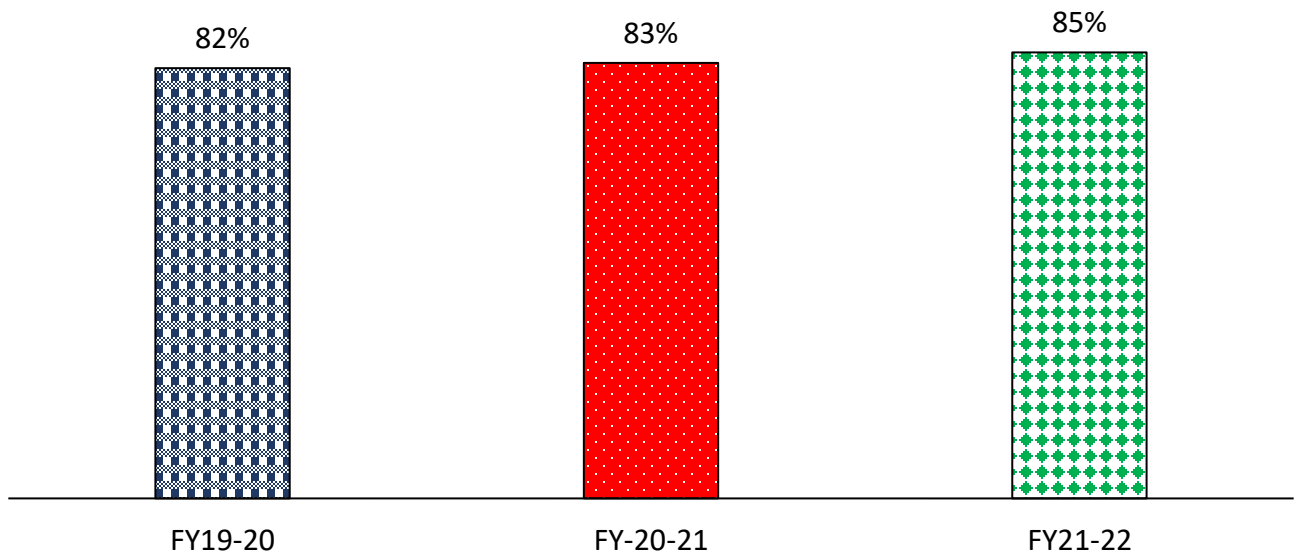
Source: IM4Q

Percent of Individuals Who Reported They Are Able to Provide Consent for Medical Treatment (PM 10)



Source: IM4Q

Of Those Able to Provide Consent for Medical Treatment, Percent who Said Their Doctor Accepts Their Consent (PM 11)



Source: IM4Q



Recommendation 6: Support People with Complex Needs

People with disabilities who have both physical and behavioral health needs receive the medical treatment and supports needed throughout their lifespan. People are more able to live an everyday life when individuals, families, and providers plan and prepare to provide and modify supports as needs and challenges change. Opportunities for a full community life are dependent on adequate supports and the commitment to build capacity within the larger human service delivery system.

ACCOMPLISHMENT HIGHLIGHTS *for #6*

- ✓ **Trauma Recovery for Autistic, Intellectually Disabled, and Neurodiverse Individuals (TRAIN) continued training licensed professionals**
- ✓ **Systemic, Therapeutic, Assessment, Resources and Treatment (START) Model pilot programs are underway**
- ✓ **The 2023 Dual Diagnosis Conference had over 1,100 people registered to attend**
- ✓ **A capacity building institute has been developed to focus on the support of children with complex needs and multi-system involvement**

ACCOMPLISHMENTS IN DETAIL *for #6*

TRAIN—

- ❖ This pilot project was launched in 2021 to address the fact that there are few providers across PA equipped to offer support through both the trauma and neurodiversity lenses.
 - ✓ Developed by psychologists with diverse backgrounds in both trauma and ID/A populations, and under the leadership of Central Region ASERT director, Andrea Layton, the program is comprised of live webinars and self-paced learning activities which take place over a span of 12 weeks.
 - ✓ To provide a fully robust learning experience, TRAIN offers access to discussion boards and live supervision for additional communication with and between learners.
 - ✓ TRAIN began the fifth cohort of licensed professionals in September 2023. To date and including this cohort, 63 therapists have been trained, across 35 counties.

Dual Diagnosis Conference —

- ❖ The 2023 Dual Diagnosis Conference, Perspectives on Trauma and Support was held in May. Over 1,100 individuals registered to attend this conference which was conducted as a collaboration between ODP and the Office of Mental Health and Substance Abuse Services (OMHSAS) and offered diverse voices in the support of individuals with ID/A and mental health needs.

Capacity Building Institute (CBI) –

- ❖ CBI continues to focus on promoting best and promising practices for increased capacity to support individuals with complex needs in the community setting.
- ❖ The 7th annual class began in September 2023. CBI resumed in-person sessions and will be conducted as a hybrid model using an online platform for sessions during the winter months.
- ❖ CBI has been adapted for use on a national level by the National Association of State Directors of Developmental Disabilities Services (NASDDDS).
- ❖ A separate institute is under development to target the pediatric population and will commence in January 2024.

Dual Diagnosis Curriculum –

- ❖ ODP continues to utilize this curriculum and all new providers are required to complete it. The curriculum contains 40 hours of material in 20 modules and is available on the [MyODP website](#). Participants earn a course certificate after completing all modules.

Project Reassure –

- ❖ This project provides trauma education and resiliency-building resources aimed at neurodiverse communities.
- ❖ A key aspect is that all stakeholder groups, including community members, have access to the same information and skill building materials and are formatted to best meet stakeholders' learning styles/preferences, based on feedback received from stakeholder collaborators.
- ❖ Formats include video animations, narrated slide decks, infographics, social stories, 1-page summaries, and printable job aids. All course modules are self-paced, meaning the individual can go as quickly or slowly as they like.
- ❖ This project continues with development of the website material and launch of these educational materials is anticipated in 2024.

Expanding Community Health Options (ECHO) -

- ❖ ECHO, a component of Project Reassure, is a nationally used model of capacity building that uses a video conferencing platform and is underway. Thus far, 4 cohorts have participated, with 2 more cohorts currently planned for January and April of 2024.
- ❖ The focus is "Fostering Resilience for Neurodiverse Communities."
- ❖ This 7-week intervention covers topics such as trauma and trauma expressions, anxiety and intolerance of uncertainty, resilience skills, crisis risk reduction and safety considerations, adapting skills for those with brain differences, and fostering community re-engagement.

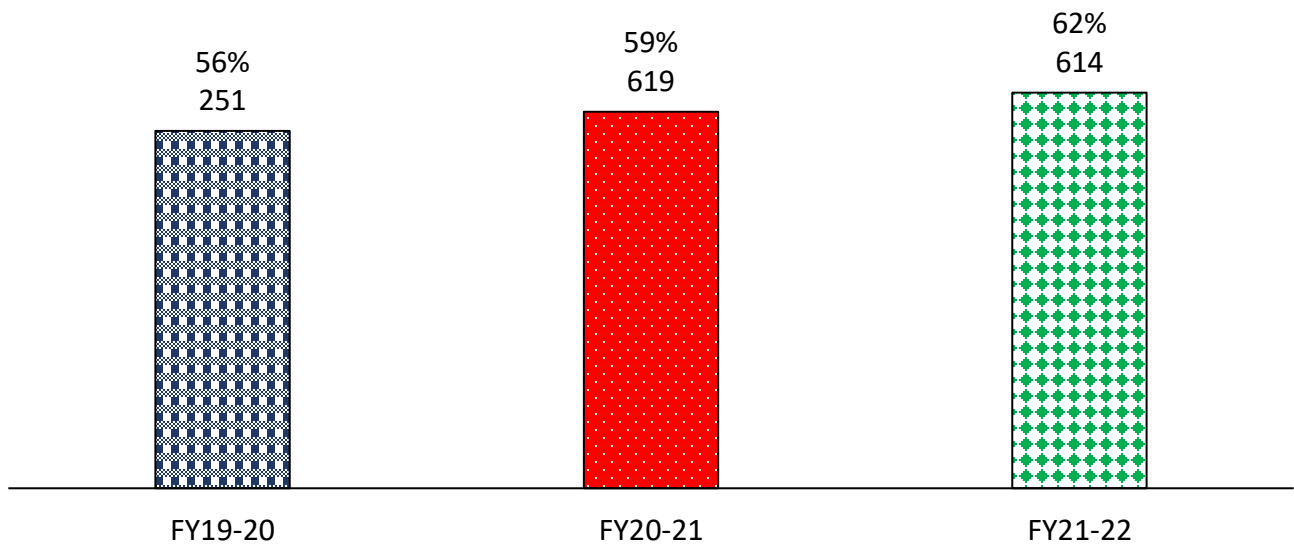
START Model Pilots –

- ❖ START is a comprehensive, evidence-informed model of service supports that optimizes independence, treatment, and community living and utilizes a national database. By design, it builds upon existing resources and services.
- ✓ Developed in 1988, START provides community-based crisis intervention for individuals, ages 6 and older, with IDD and behavioral health needs and was cited as a model program in the 2002 U.S. Surgeon General’s Report on mental health disparities for persons with IDD.
- ✓ A 3-year model pilot program was implemented in 2021 in Allegheny County and began taking referrals in July 2023.
- ✓ Secured additional funding through Money Follows the Person to support a second START pilot in Philadelphia; the development and planning process for this pilot is underway and a site visit occurred to two programs in New York which may serve as models for development as part of the Philadelphia pilot.

PERFORMANCE MEASURES *for #6*

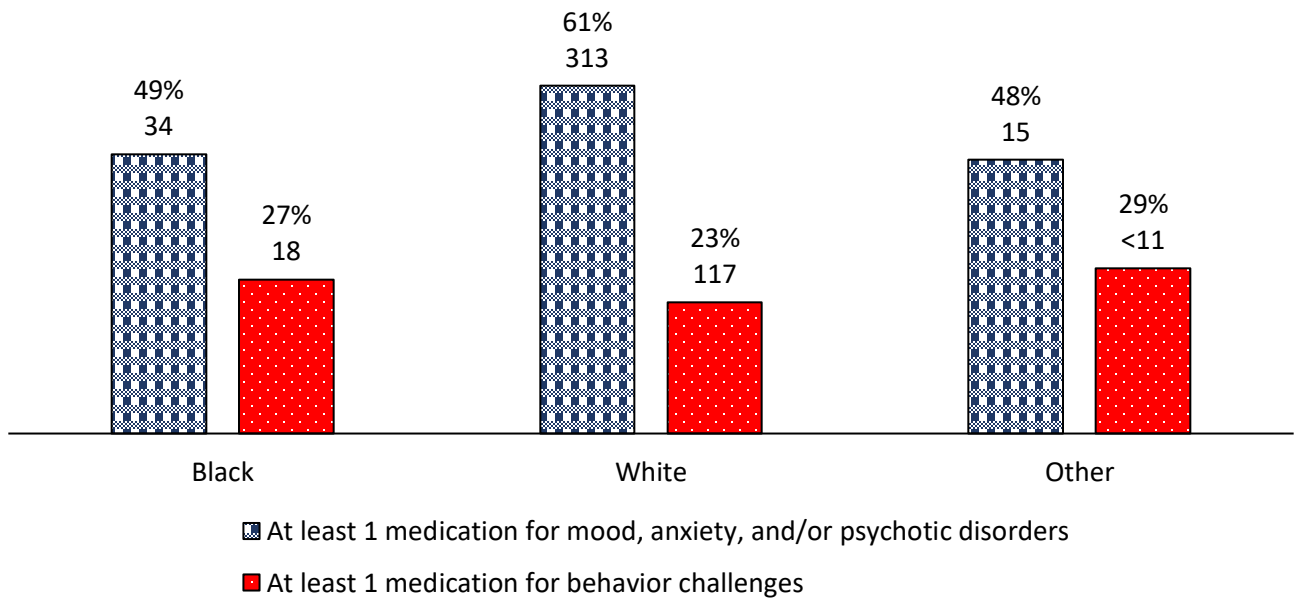
1. Number and percent of people who take at least one medication for mood disorders, anxiety, behavior challenges, and/or psychotic disorders, overall and by race. *(NCI PA In-Person Survey)*
2. Number of individuals in residential service who require treatments which are considered inherently *high risk. *(HRST, Item Q)*
3. Number of children with medical complexities registered with ODP. *(HCSIS & PROMISe)*
4. Percentage of ODP registered children with medical complexities living in family settings. *(HCSIS)*
5. Number of providers qualified to provide behavior support services. *(HCSIS & PROMISe)*
6. If the individual has complex needs, the percent for whom the SC ensures there are strategies for supports in place to address those needs. *(QA&I)*

Number and Percent of Individuals Who Take at Least One Medication for Mood Disorders, Anxiety, Behavior Challenges, and/or Psychotic Disorders (PM 1)



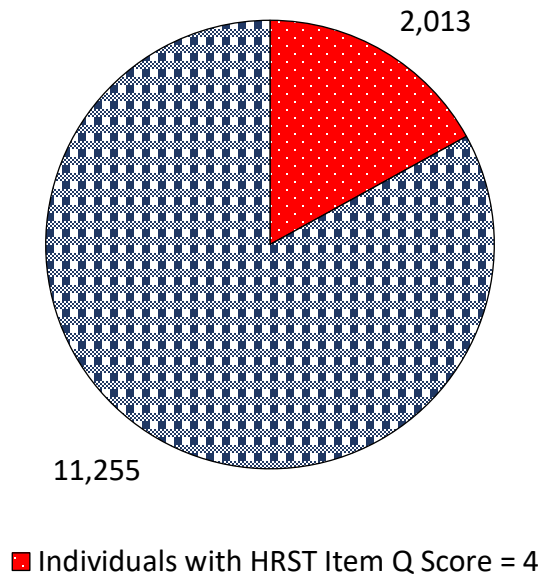
Source: NCI PA In-Person Survey

Number and Percent of People Who Take at Least One Medication for Mood Disorders, Anxiety, Behavior Challenges, and/or Psychotic Disorders, by Race (PM 1)



Source: NCI PA In-Person Survey FY 21-22

Number of Individuals in Residential Service Who Require Treatments Considered Inherently High Risk (PM 2)



Source: HRST as of 12/5/2023

NOTE: High risk treatments are defined through HRST as including: 1) Tracheotomy that requires suction; 2) Ventilator dependent; 3) Nebulizer treatments one or more times daily; 4) Deep suction; 5) Requires complex medication calculations for insulin given via insulin pump or injection; 6) Has an unstable condition that requires ongoing (usually daily or more frequent) assessment and treatment by a licensed health care professional; 7) 1:1 staffing for behavioral issues: Requires 1:1 staffing 16 or more hours EACH day due to behavioral issues.

Number of Children with Medical Complexities (CMC) Registered with ODP (PM 3)		
Snapshot Date	Children < Age 21	CMC < Age 21*
6/30/21	9,712	18
6/30/22	9,350	31
6/30/23	9,517	93

Source: EDW HCSIS Consumer Demographics Fact. Extraction Data: 10/25/2023

Note: *Represents children that meet **new** level eligibility criteria for CMC or those enrolled under CMC reserved capacity. Not representative of all children who meet CMC criteria and receive services.

**Percentage of ODP Registered Children with Medical Complexities (CMC)*
Living in Family Settings (PM 4)**

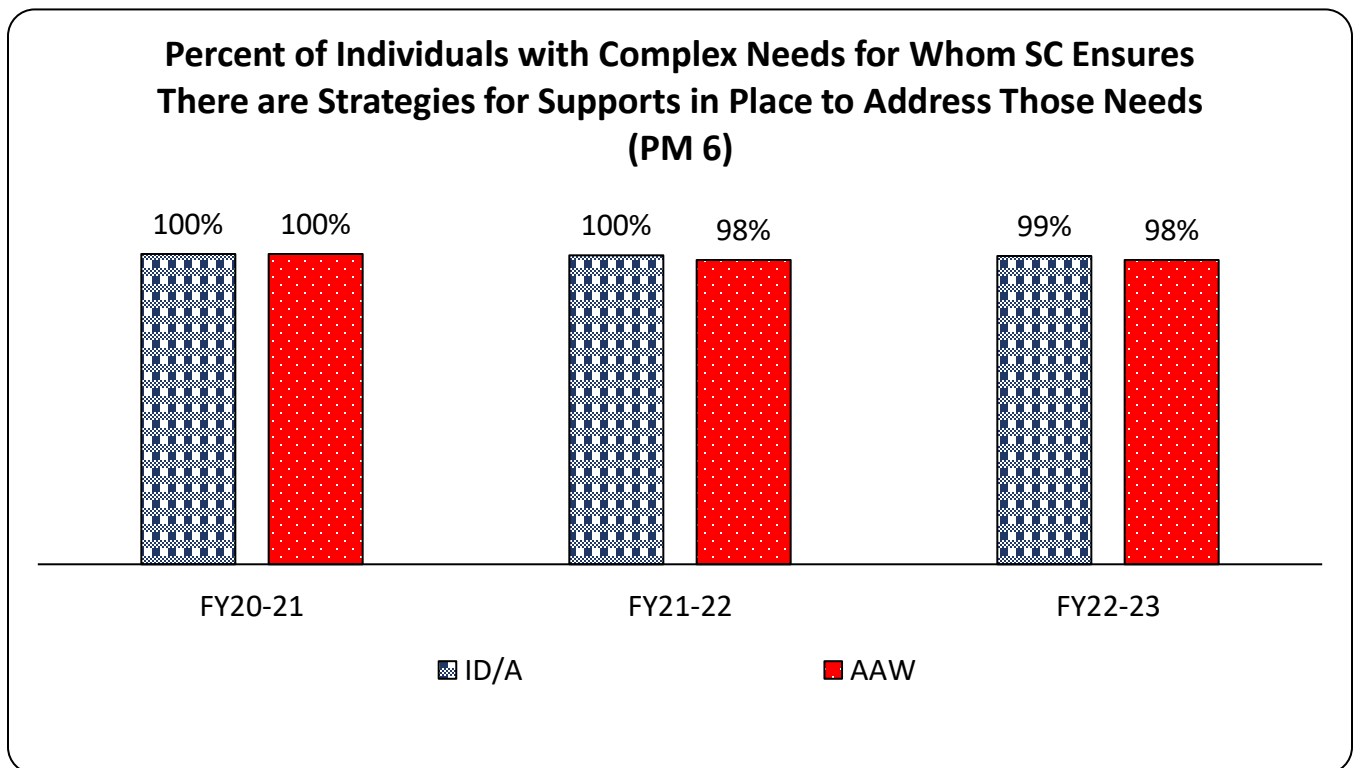
*Note: *The data below represents only children that meet **new** level eligibility criteria for CMC or those enrolled under CMC reserved capacity. It is not representative of all children who meet CMC criteria and receive services. As ODP works with facilities that serve CMC, more children living in facilities are enrolled for services so are likely over-represented in the table below.*

LIVING ARRANGEMENT	% of Total as of 06/30/22	% of Total as of 06/30/23
Family Settings:		
Children's Residence Foster Care	0%	2.2%
Family Living (ID) Unlicensed	0%	2.2%
Friend's Home	0%	1.1%
Own Residence	0%	1.1%
Relative's Home	90.3%	68.8%
Family Settings Total	90.3%	75.4%
Congregate and Non-Family Settings:		
Children's Residence	3.2%	4.3%
Community Home (ID)	0%	1.1%
Community Home (ID 2 to 4 persons)	3.2%	2.2%
Nursing Home/Nursing Facility	0%	3.2%
Private ICF/ID(16 or more persons)	0%	3.2%
Private ICF/ID (5 to 8 persons)	0%	2.2%
Congregate and Non-Family Settings Total	6.4%	16.2%
Other/Not Found:		
Other	3.2%	6.5%
Not Found	0%	2.2%
Other/Not Found Total	3.2%	8.7%

Source: EDW HCSIS Consumer Demographics Facts. Data Extraction Date: 10/25/2023

Number of Providers Qualified to Provide Behavior Support Services (BSS) (PM 5)			
	FY20-21	FY21-22	FY22-23
Total providers enrolled for ID/A waivers only	183	260	295
Total providers enrolled for AAW only	24	19	13
Total shared providers enrolled for AAW and ID/A waivers	64	72	72
Total enrolled BSS providers across all ODP waivers	271	351	380

Source: HCSIS as of 12/5/2023



Source: QA&I

Note: This PM is informed by data gathered via individual record review to answer SCO tool question 46, which is “If the individual has complex needs, the SC ensured there are strategies for supports in place to address those needs.” Complex needs are defined as multiple (2 or more) needs across personal, physical, mental, social, and financial well-being that require significant attention or resources. Data results are only reflective of a subset of the QA&I sample who were determined to meet the definition of complex needs.



Recommendation 7: Develop and Support Qualified Staff

People with disabilities receiving services benefit when staff who support them are well trained. Values, ethics, and person-centered decision-making can be learned and used in daily practice through mentorship and training. Providing professional training that strengthens relationships and partnerships between individuals, families, and Direct Support Professionals (DSPs) will improve the quality of support.

ACCOMPLISHMENT HIGHLIGHTS *for #7*

- ✓ College of Direct Support (CDS) had a total of 55,262 active learners
- ✓ ODP completed the second phase of the National Alliance for Direct Support Professionals (NADSP) accreditation application and submitted it for approval
- ✓ 34 PA providers were enrolled in the NADSP tiered credentialing program for their DSPs
- ✓ 705 certifications were awarded to DSPs and frontline supervisors (FLSs) in the NADSP tiered credentialing program as of October 2023

ACCOMPLISHMENTS IN DETAIL *for #7*

CDS Courses –

- ❖ As of the end of November 2023 there were 55,262 unique active users enrolled in CDS.
- ❖ The CDS courses align with the Centers for Medicare and Medicaid Services (CMS) set of Core Competencies for the Direct Service Workforce.
- ❖ Assigned topics vary by month and providers are using a variety of the course materials that are offered.

NADSP Credentialing –

- ❖ ODP completed the second phase of the NADSP accreditation application and submitted the application for review and approval. Once approved, DSPs will receive credit towards E-Badge Academy certification for ODP courses listed in the Orientation and Annual Training Catalog on MyODP.
- ❖ As of October 2023, 3% of ODP providers were enrolled in the NADSP certification program (PM7). Of those enrolled, 36% of DSPs have achieved the DSP-I credential, 20% have achieved DSP-II, and 13% have achieved DSP-III. The remaining 31% have not yet obtained a credential.

MyODP Updates –

- ❖ MyODP continued to be updated throughout 2023 with special attention to enhancing resources and reorganizing information, including MyODP News.

- ✓ The total registered users for MyODP reached 178,000 as of June 2023, with 676 training and resource offerings.

MyODP Training –

- ❖ Once a training is completed on MyODP, a certificate of completion is awarded to the trainee. During FY 22-23, a total of 60,914 unique certificates were issued. (Note that a user may obtain multiple certifications.)
 - ✓ The Columbus Organization delivered a total of 81 live training sessions in FY 22-23.
 - ✓ ODP issued the largest number of certificates for Community Participation Support for DSPs, Person Centered Practices, Individual Rights, Addressing Day to Day Risks with the Team, and Abuse: Detection, Reporting and Prevention of Abuse, Suspected Abuse, and Alleged Abuse.
 - ✓ Additional learners utilizing the MyODP learning management system include Supports Brokers, SC supervisors, provider fiscal staff, Adult Community Autism Program (ACAP) staff, and Behavior Specialist License applicants.

ODP Training Webinars –

- ❖ Throughout FY 22-23, ODP utilized the GoToWebinar virtual platform to deliver 119 training and outreach webinars to staff who support individuals in the ODP service system.
- ❖ ODP-facilitated sessions accounted for 92 of the total training webinars, while the Columbus Organization facilitated 27 sessions.

Everyday Lives (EDL) Conference –

- ❖ After a pause in 2023, due to the pandemic, the EDL conference will return as an in-person event in January 2024. Conference themes will include professional development for providers, wellness/resiliency, and behavioral/communication supports.

Pennsylvania Autism Training Conference (PATC) –

- ❖ The 16th annual PATC took place over 3 days in November 2023.
 - More than 450 virtual attendees were able to choose from 10 different sessions.
 - Topics included Aging, Dementia and Autism, Neurodiversity-Affirming Approaches to Echoing and Scripting, Teaching Self-Care Using Behavioral Skills Training, and Successful Use of Project ECHO in Neurodiverse Communities.

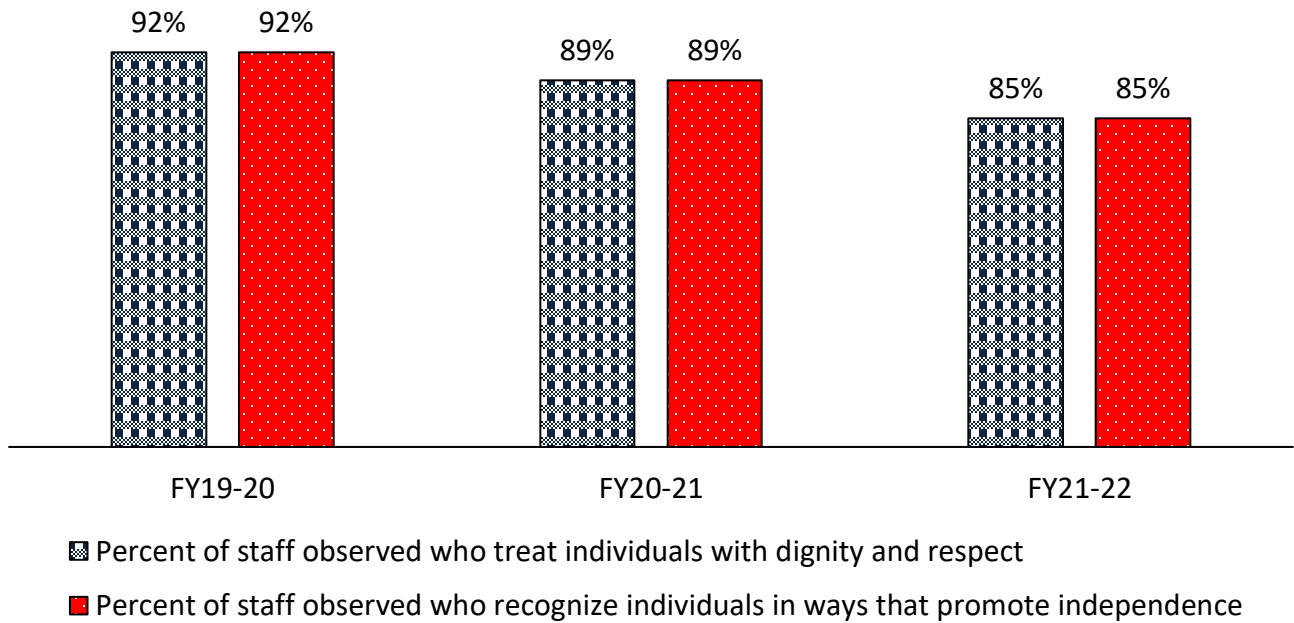
American Rescue Plan Act (ARPA) Initiative –

- ❖ SAU1 has begun recording My Life My Way videos featuring self-advocates active in their communities. In addition, SAU1 has delivered virtual sessions and developed training content in the topical areas that includes service definitions, trauma, Lifesharing, and wellness.

PERFORMANCE MEASURES *for #7*

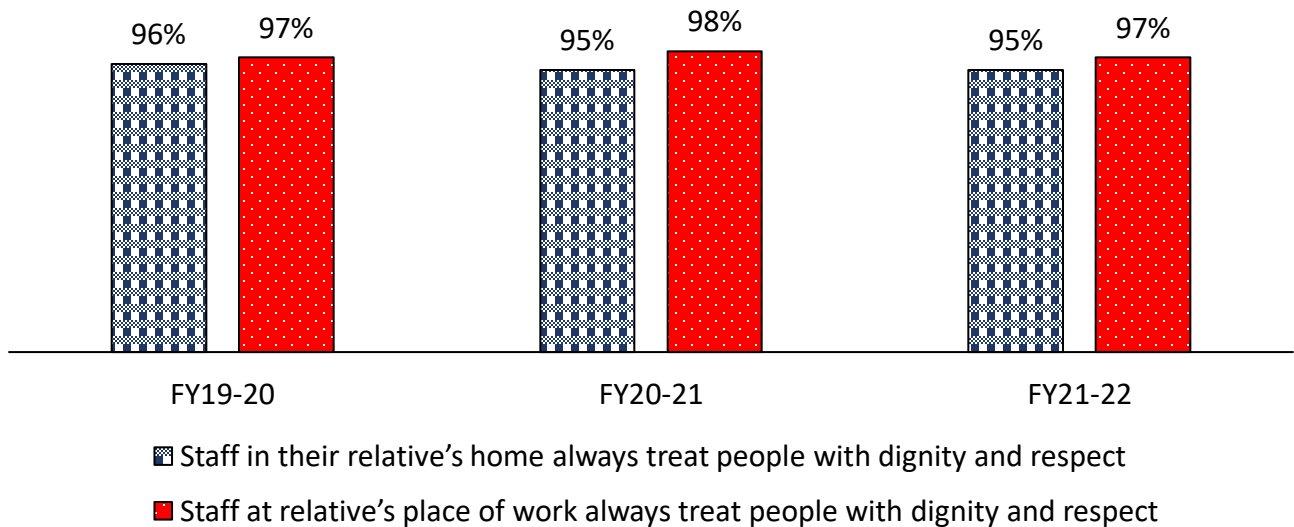
1. Percent of staff observed who treat individuals with dignity and respect. (*IM4Q*)
2. Percent of staff observed who recognize individuals in ways that promote independence. (*IM4Q*)
3. Percent of respondents who said staff in their relative's home and place of work always treat people with dignity and respect. (*IM4Q*)
4. Percent of staff observed supporting individuals at home and/or work who appeared to have the skills they needed to support the person. (*IM4Q*)
5. Percent of respondents who said staff appear to have the skills they need to support their relative at home and at their place of work. (*IM4Q*)
6. Percentage of staff that are trained in the individual's communication profile or formal communication system. (*QA&I*)
7. Percentage of agencies that are using tiered DSP credentialing/training. (*NADSP*) – see *accomplishments above*

Percent of Support Staff Who Treat Individuals with Dignity and Respect and Promote Independence (PMs 1 & 2)



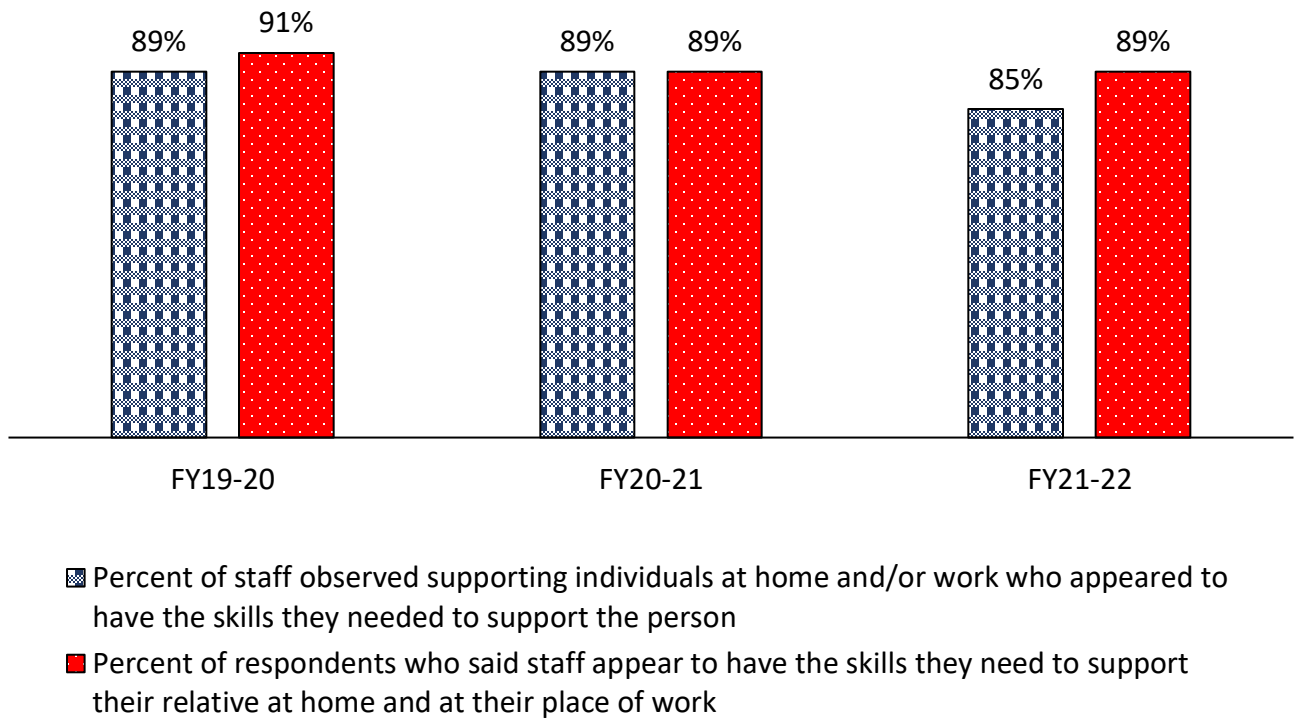
Source: IM4Q

Percent of Respondents Who Said Staff in Their Relative's Home and Place of Work Always Treat People with Dignity and Respect (PM 3)



Source: IM4Q

Percent of Support Staff Who have the Skills They Need to Support the Individual (PMs 4 & 5)



Source: IM4Q

Percentage of Staff Trained in Individual's Communication Profile or Formal Communication System (PM 6 – Baseline)

86%

Source: QA&I FY 22-23



Recommendation 8: Simplify the System

The system of supports and funding of those supports must be as straightforward and uncomplicated as possible. This will allow for greater understanding and use of the system by everyone — most importantly the individual needing and receiving supports.

ACCOMPLISHMENT HIGHLIGHTS *for #8*

- ✓ **Onboarded the Enterprise Case Management (ECM) systems integrator to meet key business goals related to the replacement of the current Home and Community Services Information System (HCSIS)**
- ✓ **Successfully launched the revised Supports Coordination (SC) Orientation Curriculum**

ACCOMPLISHMENTS IN DETAIL *for #8*

HCSIS Replacement Activities –

- ❖ PA’s Department of Human Services (DHS) procured a new ECM system to replace HCSIS, ODP’s secure web-based information system that supports the functions of supports coordination and program oversight.
 - ✓ Completed onboarding of ODP’s ECM system integrator, Accenture, and held the project kick-off in July 2023.
 - ✓ Began business requirement activities in August 2023; these activities are anticipated to continue through July 2024.
 - ✓ Identified and discussed detailed data sharing scenarios with DHS’s legal department.
 - ✓ Began planning for accessibility recommendations in July 2023 and discussions on this topic started in November 2023.
 - ✓ Developed the framework and content for several sections of the new ECM Individual Support Plan (ISP) with discussions continuing to finalize the ISP design.
 - ✓ ODP’s design team was convened to develop the framework and content for several sections of the new Individual Support Plan (ISP) in ECM. Discussions continue to finalize the ISP design. **(PM 1)**

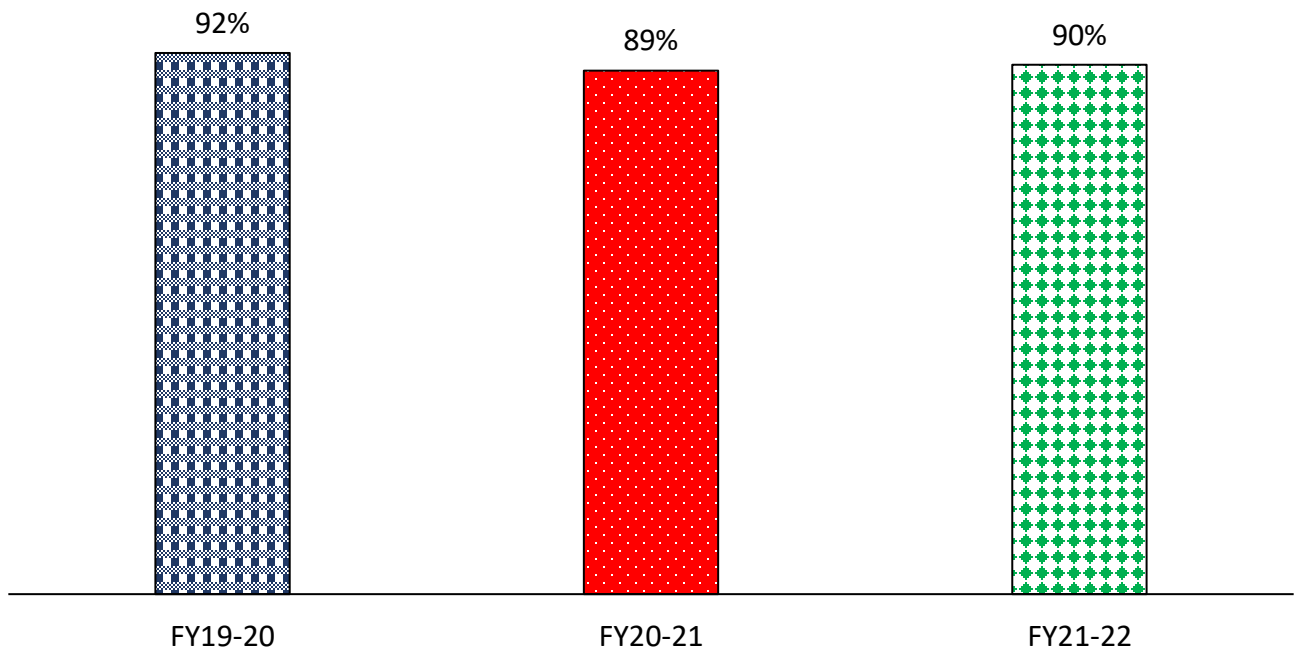
Supports Coordination (SC) Orientation Strategic Thinking Group (STG) –

- ❖ In 2022, ODP began work on revising the SC orientation with the goal of strengthening the purpose of the SC role in helping individuals live an everyday life. The SC Strategic Thinking Group was enlisted to review the existing SC orientation curriculum and provided recommendations for improvement that were incorporated into the updated curriculum. The revised SC Orientation went live July 1, 2023, and focuses on person-centered planning, CtLC and Supporting Families. The first 30 days of training for new SCs was streamlined and meets all regulatory requirements.

PERFORMANCE MEASURES *for* #8

1. Evaluate the redesign of ISP process and format for: reduction in time that SC spends on administrative tasks, reduction in the number of pages in the ISP, and increase time spent with individuals, self-advocates, and families in person-centered planning.
2. Percent of respondents who report their supports coordinator asks them what they want. (*NCI PA In-Person Survey*)

Percent of Respondents Who Report Their Supports Coordinator Asks Them What They Want (PM 2)



Source: NCI PA In-Person Survey



Recommendation 9: Improve Quality

Together we must plan and deliver services and supports that adhere to our values, measure person-centered outcomes, and continuously improve an individual's quality of life. All stakeholders must be engaged in the process of measuring how well services assist people in achieving an everyday life.

ACCOMPLISHMENT HIGHLIGHTS *for #9*

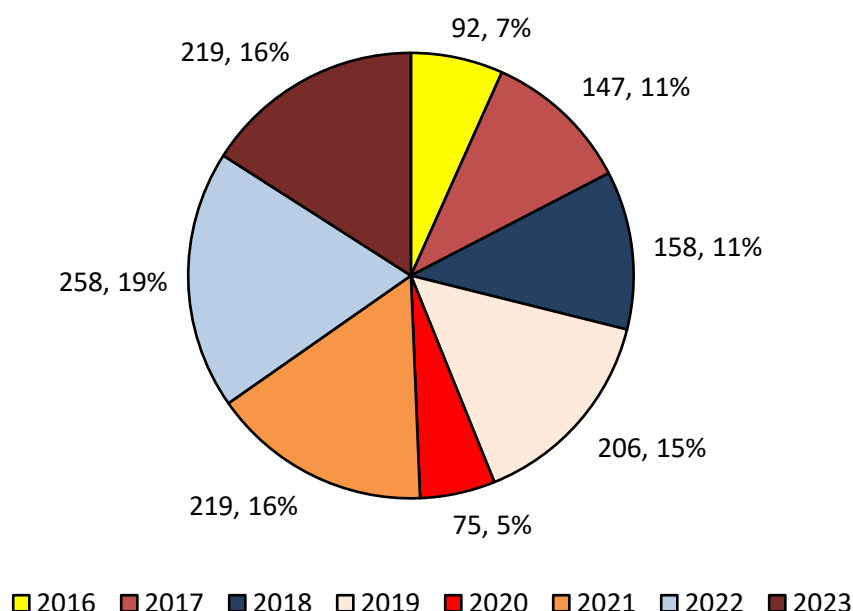
- ✓ ODP Quality Management (QM) Certified Staff increased to 1,374 as of November 2023
- ✓ ISAC Strategies Improvement Project completed
- ✓ QA&I Cycle 2 Year 1 completed, and the Annual Report distributed in November 2023

ACCOMPLISHMENTS IN DETAIL *for #9*

Quality Management (QM) Certification –

- ❖ In 2023, 219 additional ODP staff and stakeholders became ODP QM certified. Since 2016, the total number of people who have become certified is 1,374. The pie chart below displays the total number of people certified since the program began, broken into yearly “slices.” The percentages displayed represent the portion of the total number certified through November 2023. A continuous increase in total numbers each year is notable, except for 2020, when the COVID-19 pandemic impacted the ability to meet in person, and in 2023, when ODP’s QM Division only scheduled 8 virtual classes for the year, down from 12 in 2022. The decision to reduce the number of classes offered throughout the year was made after a review of attendance and no-show data. Even with the reduction in number of classes, ODP was still able to newly certify 219 people in 2023 and has been able to QM certify more people in the last 3 years (696 in 2021-23), than were certified in the first 5 years that QM certification was offered (678 in 2016-20). This has very likely been due to the 2-day classes being held virtually, starting at the end of 2020 (September), which has allowed the classes to be more accessible and less of a hassle or cost for participants to attend (e.g., no travel).

Number and Percent of People ODP QM Certified (PM 1)



Source: ODP QM Certified Tracking Spreadsheet as of 11/30/2023

The breakdown of the total number of people ODP QM Certified, by where the people work(ed) at the time of certification is as follows:

Number of People ODP QM Certified, by Entity Type (PM 1)				
AE	SCO	Provider	ODP/HCQU	Total
189	145	920	120	1,374

Source: ODP QM Certified Tracking Spreadsheet as of 11/30/2023

- ❖ Pre-requisite training modules and a [QM Certification Handbook](#) remain available to everyone in the ODP system on MyODP. This includes those who may not want to formally pursue certification but are just interested in learning about components of QM. During class, participants practice using their QM skills with a quality improvement (QI) team and are encouraged to develop goals and target objectives in QM plans that directly impact individuals' lives (e.g., increase Competitive Integrated Employment (CIE) opportunities, reduce medication errors, etc.). ODP conducted 8, 2-day virtual classes in 2023.

Develop, Implement, and Maintain Quality Assessment and Improvement (QA&I) process –

- ❖ QA&I Cycle 2 Year 1 (C2Y1) began in August 2022 and marked the move away from modified processes for QA&I Interim Years 1 and 2, approved by CMS because of the COVID-19 pandemic, and a return to originally approved, full QA&I processes. Monitoring tools for AEs,

SCOs and providers were enhanced for C2Y1 to move away from evaluation of policy development (e.g., do you have a policy?) towards evaluation of policy implementation (e.g., is there evidence that you are doing what your policy says you do?). Additionally, ODP enhanced the questions about quality management plans, to include variation responses, to be better able to evaluate the quality of the QM plans. Lastly, questions were added to evaluate new ODP policies such as the Incident Management bulletin requirements and CMS Home & Community Based Services (HCBS) settings rule for unlicensed settings.

[QA&I IY1 and IY2 individual interview](#) results were published in a March 2023 report. C2Y1 individual interviews were conducted in-person, by phone or by video, based on individual preference, from August through December, by the Independent Monitoring for Quality (IM4Q) local programs, on behalf of ODP. Of the 436 individuals offered interviews, 338 (78%) chose to participate and 98 declined. C2Y1 was successfully completed in 2023 and the [C2Y1 Annual Statewide Report](#) was published in November 2023 (**PM 2**). The report continues to be organized to call attention to specific areas that AEs, SCOs and providers need to focus quality improvement (QI) activities on. QA&I Cycle 2, Year 2 (C2Y2) began July 1, 2023.

Additional QM Activities in 2023 –

- ❖ ODP continued to convene bimonthly (every other month) virtual ISAC meetings throughout 2023 and also returned to holding some in-person meetings in August and October.
- ❖ ODP distributed the following reports over the last year, for use in quality improvement (QI) activities (**PM 2**):
 - ✓ [ISAC Annual Report](#) (last published in February 2023)
 - ✓ [ODP Annual Data Report](#) (last published in March 2023)
 - ✓ [Annual Waiting List Report](#) (last published in March 2023)
 - ✓ Independent Monitoring for Quality (IM4Q) Annual Reports including:
 - [IM4Q Statewide Report 2021-2022](#)
 - [User-Friendly - Icons](#)
 - [User-Friendly - Charts](#)
- ❖ ISAC Strategies Improvement Project (**PM 3**)- In late summer 2023, ODP embarked on an ISAC Strategies Revision project. In collaboration with statewide ISAC recommendation leads, ODP leadership and ISAC members, ISAC strategies were reviewed, retired, added, or revised in meetings held in August and October 2023. All strategy revisions were recorded on a Record of Change document and shared with all stakeholders.
- ❖ In January 2023, ODP launched the QM Landing page on MyODP, which is a one-stop shop for all QM needs. The page contains the QM Certification Handbook, all QM Spotlights, links to QM cert class information, QA&I reports, Independent Monitoring for Quality (IM4Q) and National Core Indicators (NCI) information and reports, and many other QM resources, all in one place.
- ❖ Since June 2022, ODP's QM Division, in collaboration with ODP's Regional QM Leads and other ODP staff, has been releasing quarterly QM Spotlights, which are 1-page publications intended

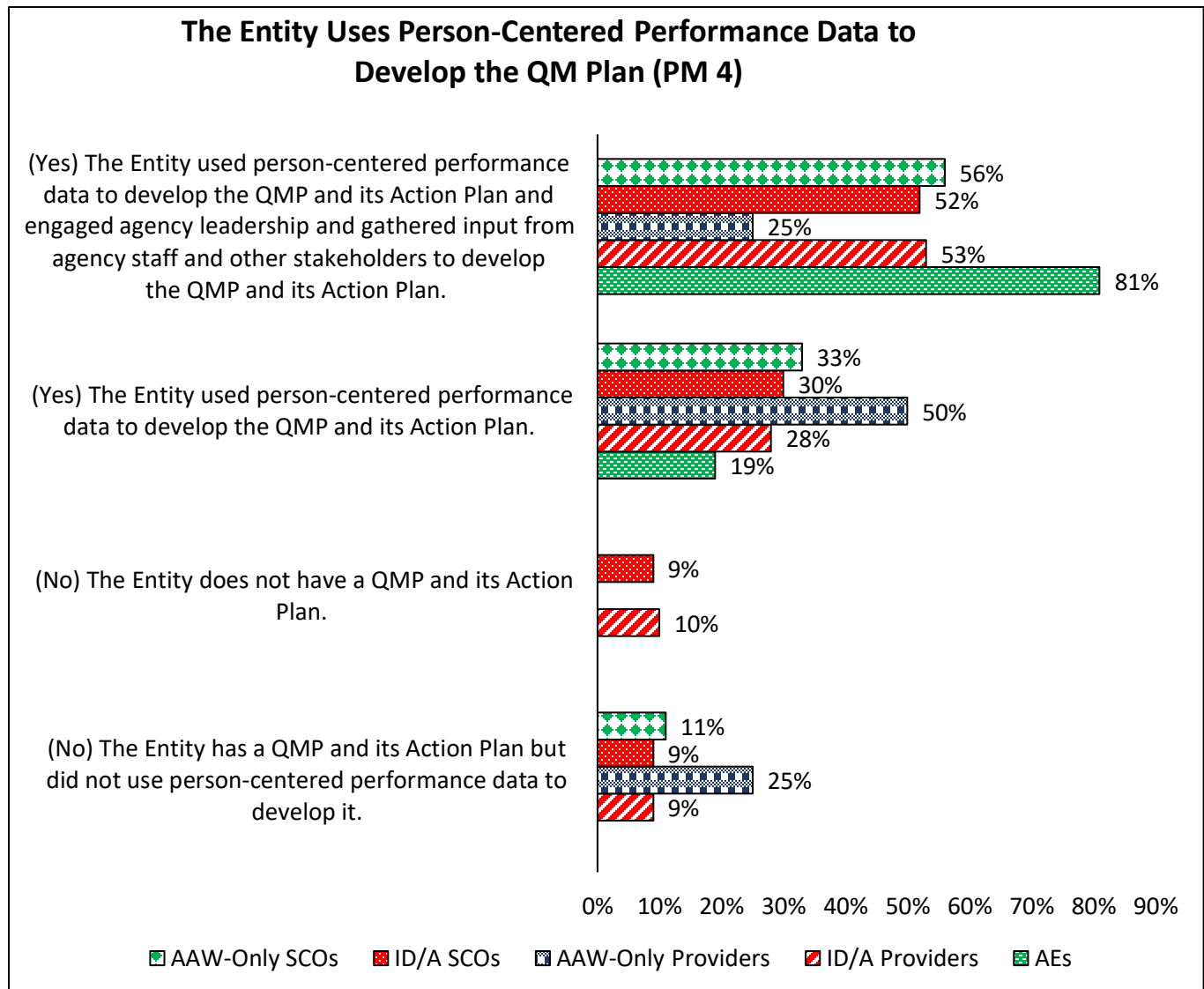
to provide timely guidance and helpful hints for applying QM principles and best practices. All stakeholders can reference this information as they develop and/or evaluate QM plans. This initiative remains part of ODP's continued effort to build system capacity in effective QM. Each QM Spotlight includes a hyperlink that takes the user directly to the ODP QM Certification Handbook. By the end of 2023, 7 QM Spotlights had been published.

- ❖ In Spring 2023, to help support AEs, SCOs, and providers with organizing and analyzing their data for quality improvement purposes, the QM Division developed a [QM Data Monitoring & Analysis Template](#) for anyone to use for tracking, monitoring, and analyzing whatever data they want to. Benefits of this tool include:
 - ✓ Helps with documentation of all activities in one place
 - ✓ Is universal – can be used to monitor/analyze whatever is wanted
 - ✓ Is modifiable – can be used as-is or changed to make it fit what is needed
 - ✓ Includes an analysis tool to help the user consider components for a more complete analysis
 - ✓ Includes hyperlinks to online support for Excel and HCSIS Learning (LMS)
 - ✓ Helps users think through their data monitoring and analysis setup – includes necessary components to be effective – they can use it or build their own, using the template as a reference to ensure that they have all the needed parts for success.

PERFORMANCE MEASURES *for #9*

1. Number of ODP and stakeholder staff who achieve ODP QM Certified status. – *See accomplishments above*
2. ODP develops and distributes annual reports, including the ISAC Annual Report, ODP's Annual Data Report, the Annual QA&I Aggregate Report of Self-Assessment and the Annual QA&I Statewide Report. – *See accomplishments above*
3. ODP, in collaboration with the ISAC, uses all available data and identifies the need for new data collection to measure and improve performance. – *See accomplishments above*
4. Number and percent of AEs, SCOs and Providers that use person-centered performance data in developing the Quality Management Plan (QMP) and its Action Plan. (QA&I)
5. Number and percent of AEs, SCOS, and Providers who use data to assess progress towards achieving identified person-centered Quality Management Plan (QMP) goals and its Action Plan target objectives. (QA&I)

As mentioned above in accomplishments, variation responses were added to QA&I C2Y1 QM plan questions. In 2022, ISAC adopted 2 new performance measures based on these questions. Below are the initial results of those questions.



Source: QA&I FY 22-23

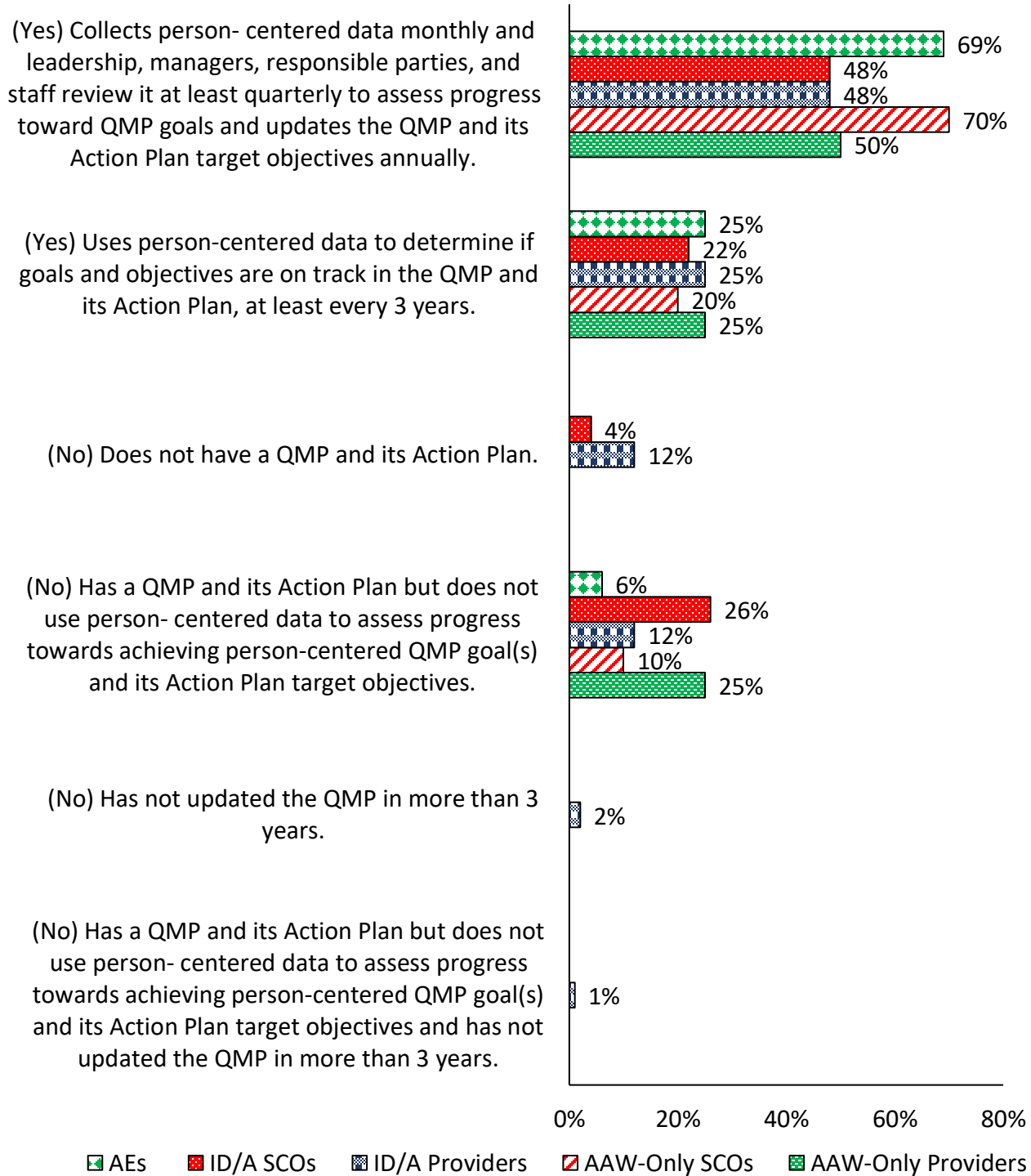
The top (Yes) option on the graph above indicates the best practice standard that we strive to have all AEs, SCOs, and providers meet. The "Yes" option below that shows those who only meet basic requirements and the "No" options display those who did not have a required QM plan with Action Plan, or they had one, but it was not developed using person-centered performance data aimed at improving the everyday lives of people served.

The table below provides the numbers behind the graph of percentage rates above. It shows the number of compliant QM plans over the total number of QM plans reviewed.

Use of Person-Centered Data in QM Plan Development Counts (PM 4)	AEs	ID/A Providers	AAW-Only Providers	ID/A SCOs	AAW-Only SCOs
(Yes) The Entity used person-centered performance data to develop the QMP and its Action Plan and engaged agency leadership and gathered input from agency staff and other stakeholders to develop the QMP and its Action Plan.	13/16	164/309	1/4	12/23	5/9
(Yes) The Entity used person-centered performance data to develop the QMP and its Action Plan.	3/16	86/309	2/4	7/23	3/9
(No) The Entity does not have a QMP and its Action Plan.	0	32/309	0	2/23	0
(No) The Entity has a QMP and its Action Plan but did not use person-centered performance data to develop it.	0	27/309	1/4	2/23	1/9

Source: QA&I FY 22-23

The Entity Uses Data to Assess Progress Towards Achieving Identified Person-Centered QM Plan Goals and its Action Plan Target Objectives (PM 5)



Source: QA&I FY 22-23

Like the previous graph, the top “Yes” option on this graph above indicates the best practice standard that we strive to have all AEs, SCOs, and providers meet. The "Yes" option below that shows those who only meet basic requirements. The "No" options display those who did not have a required QM plan and its Action plan, OR they did but its progress was not assessed using person-centered performance data aimed at improving the everyday lives of people served, AND/OR the plan had not been updated in more than 3 years (per 6100 regulations).

The table below provides the numbers behind the graph of percentage rates above. It shows the number of compliant QM plans over the total number of QM plans reviewed.

Use of Person-Centered Data to Assess QM Plan Progress Counts (PM 5)	AEs	ID/A SCOs	AAW-Only SCOs	ID/A Providers	AAW-Only Providers
(Yes) The Entity collects person-centered data monthly and leadership, managers, responsible parties, and staff review it at least quarterly to assess progress toward QMP goals and updates the QMP and its Action Plan target objectives annually.	11/16	11/23	6/9	146/321	2/5
(Yes) The Entity uses person-centered data to determine if goals and objectives are on track in the QMP and its Action Plan, at least every 3 years.	4/16	5/23	2/9	77/321	1/5
(No) The Entity does not have a QMP and its Action Plan.	0	1/23	0	35/321	0
(No) The Entity has a QMP and its Action Plan but does not use person-centered data to assess progress towards achieving person-centered QMP goal(s) and its Action Plan target objectives.	1/16	6/23	1/9	36/321	1/5
(No) The Entity has not updated the QMP in more than 3 years.	0	0	0	5/321	0
(No) The Entity has a QMP and its Action Plan but does not use person-centered data to assess progress towards achieving person-centered QMP goal(s) and its Action Plan target objectives and has not updated the QMP in more than 3 years.	0	0	0	4/321	0

Source: QA&I FY 22-23



Recommendation 10: Expand Options for Community Living

Expand the range of housing options in the community so all people can live where and with whom they want to live. Listening to people with disabilities and their families, providers, and Support Coordinators will help people locate affordable and accessible housing, find house mates, and identify housing resources/supports and other government benefits that, when blended with natural supports, will promote an everyday life.

ACCOMPLISHMENT HIGHLIGHTS *for #10*

- ✓ **Housing Transition and Tenancy Sustaining Services increased by 14% in FY 22-23, to a total of 243 individuals served**
- ✓ **Lifesharing services by relative increased by 13% in FY 22-23, to a total of 122 individuals served**
- ✓ **Supported Living services increased to 161 individuals**

ACCOMPLISHMENTS IN DETAIL *for #10*

Housing Transition and Tenancy Sustaining Services –

- ❖ The number of individuals receiving Housing Transition and Tenancy Sustaining Services has increased from 162 in FY 20-21, to 213 in FY 21-22, to 243 in FY 22-23.
- ❖ The number of qualified Housing Transition and Tenancy Sustaining Providers (HTTP) increased from 10 in FY 20-21, to 17 in FY 21-22, to 18 in FY 22/23.

Lifesharing Services –

- ❖ The number of individuals receiving Lifesharing supports provided by a relative increased from 76 individuals in FY 20-21, to 108 in FY 21-22, to 122 individuals in FY 22-23.
- ❖ ODP had 6 individuals move into a Lifesharing program from a group home setting through the Transition to Independent Living Initiative. As of November 2023, 4 of these individuals had passed the 6-month milestone with the other 2 anticipated to do so in early in 2024.

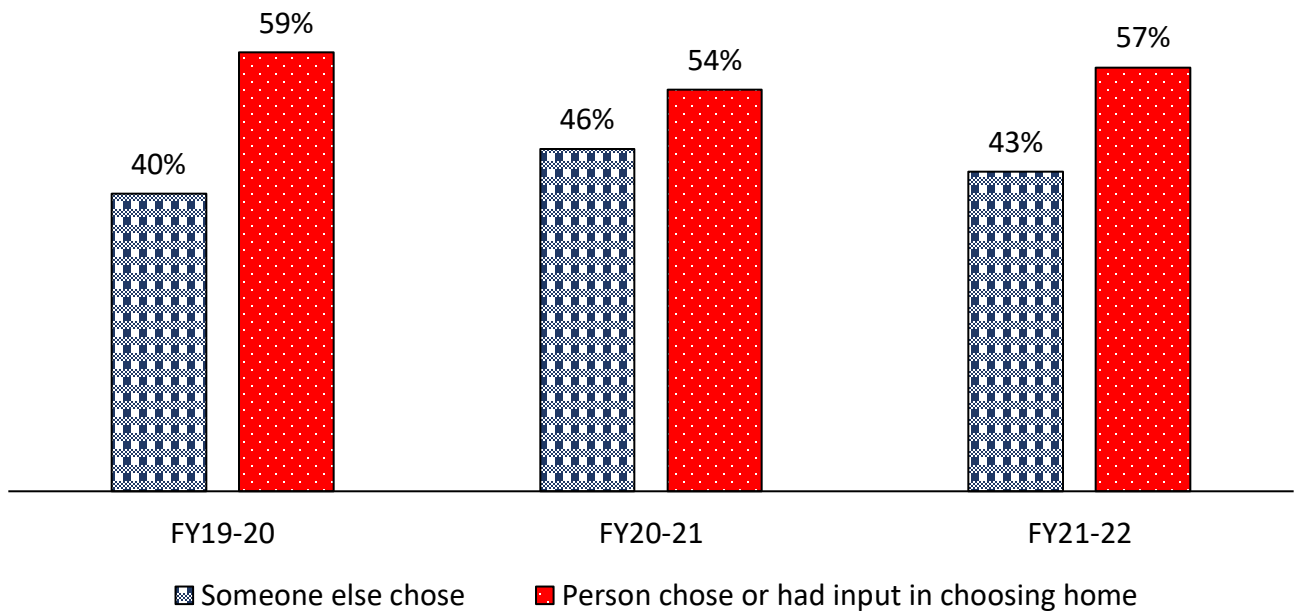
Supported Living Services–

- ❖ The number of individuals receiving Supported Living services increased from 110 in FY 20-21, to 142 in FY 21-22, to 161 in FY 22-23.
- ❖ The number of qualified providers increased from 117 in FY 20-21 to 120 in FY 21-22 but decreased slightly to 115 in FY 22-23.

PERFORMANCE MEASURES *for* #10

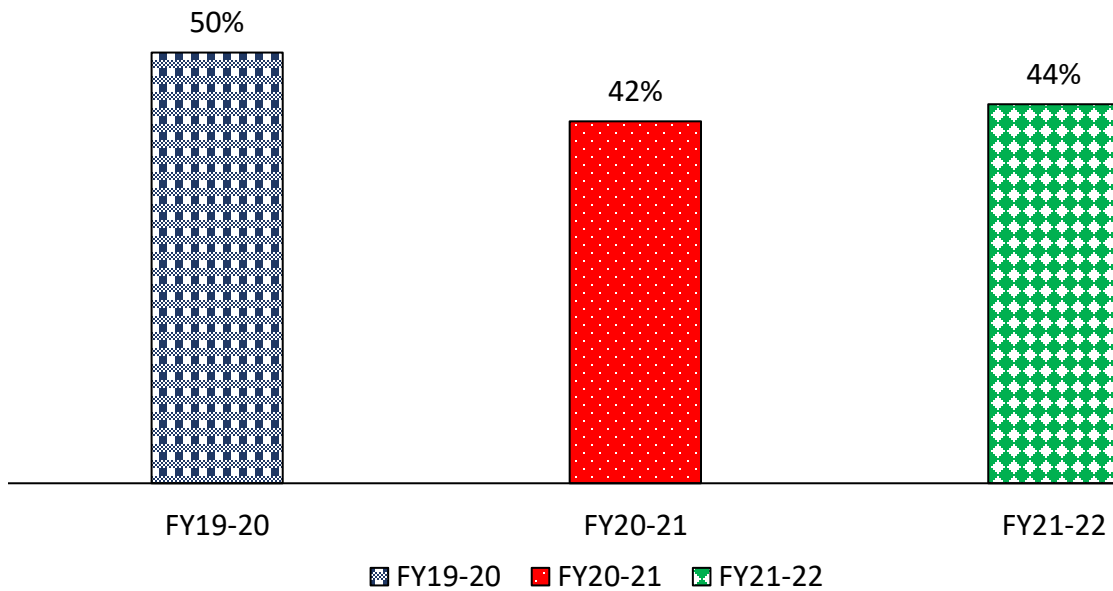
1. Percent of people who choose their home. (*NCI PA In-Person Survey*)
2. Percent of people who choose their roommate. (*NCI PA In-Person Survey*)
3. Percent of people who rent or own their homes. (*NCI PA In-Person Survey*)
4. If people do not get needed services, the percent whose unmet need is in the area of finding/changing housing. (*NCI PA In-Person Survey*)
5. Percent of people who like where they live, overall and by race. (*IM4Q*)
6. Number of people who transition from residential habilitation to life-sharing or supported living. (*PROMISE*)

Percent of People Who Choose Their Home (PM 1)



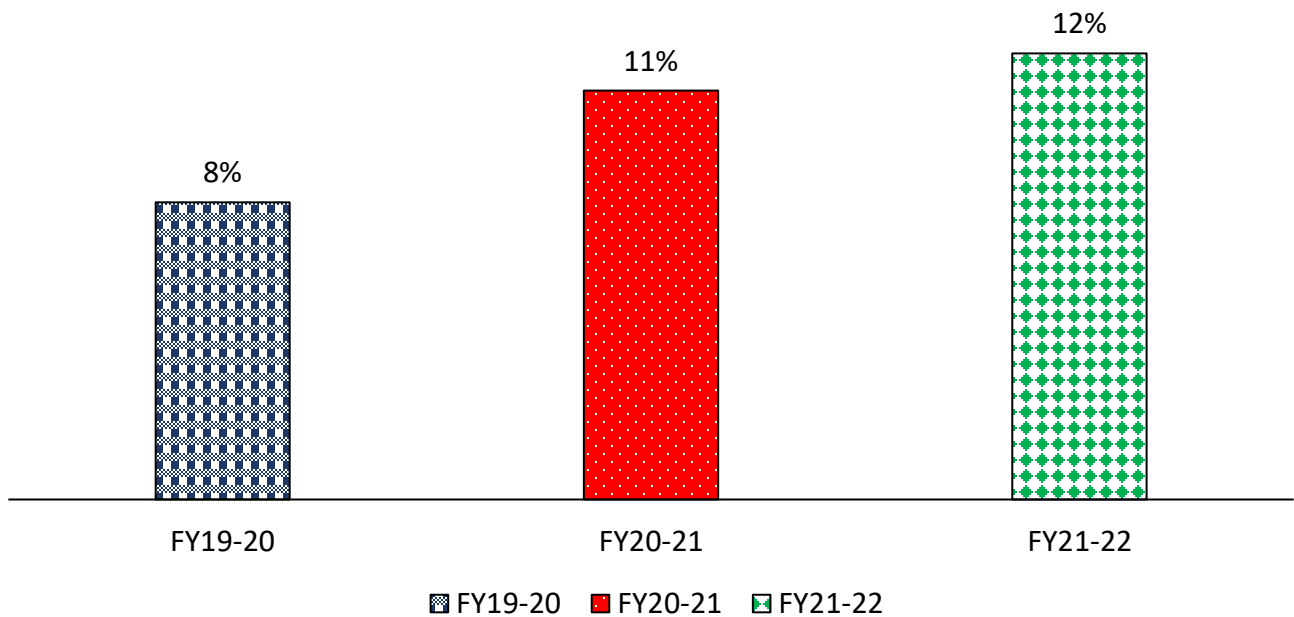
Source: *NCI PA In-Person Survey*

Percent of People Who Choose Their Roommate (PM 2)



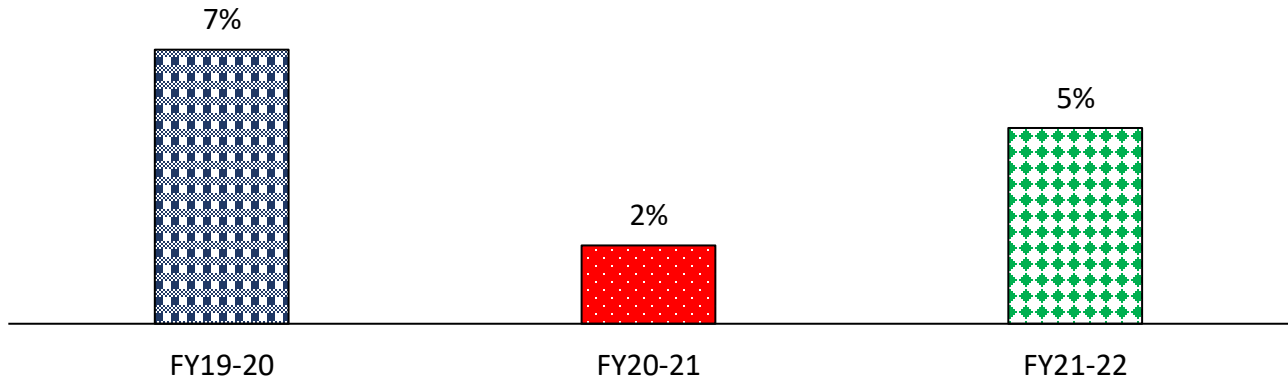
Source: NCI PA In-Person Survey

Percent of People Who Rent or Own Their Home (PM 3)



Source: NCI PA In-Person Survey

**Percent of People Whose Unmet Need is in the
Area of Finding/Changing Housing
(PM 4)**



Source: NCI PA Adult Consumer Survey

**Percent of People Who Like Where they Live,
Overall and by Race (PM 5)**

	FY 20-21	FY 21-22
White	90%	90%
Black or African American	84%	82%
Other	92%	93%
Overall	89%	89%

Source: IM4Q

**Number of People Who Transitioned from Residential Habilitation to
Lifesharing or Supported Living (PM 6)**

	FY 21-22	FY 22-23
Lifesharing	11	19
Supported Living	14	<11

Source: EDW HCSIS Services and Support Fact; Data extraction date: 12/13/2022

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.



Recommendation 11: Increase Community Participation

Being involved in community life creates opportunities for new experiences and interests, the potential to develop friendships, and the ability to make a contribution to the community. An interdependent life, where people with and without disabilities are connected, enriches all of our lives.

ACCOMPLISHMENT HIGHLIGHTS *for #11*

- ✓ Held Community Participation Support (CPS) webinars to provide updated guidance on waiver changes and the end of Appendix K
- ✓ Used ARPA funds to provide opportunities to expand community-based CPS services
- ✓ Under standardized CPS curriculum, 64,402 users have received a certificate for required training

ACCOMPLISHMENTS IN DETAIL *for #11*

CPS Webinars -

- ❖ A webinar was developed for Supports Coordinators to provide additional guidance and training on how to locate, coordinate, and monitor the CPS service. This also served as an update to the previous training content on this service for Supports Coordination Organizations.
- ❖ An additional webinar was held to provide guidance on the flexibilities available to CPS under the approved Appendix K, which ended November 11, 2023. This webinar provided clarification for what to do when the pandemic related flexibilities ended. Additionally, based on questions received during the webinar, ODP gained more insight into future training and guidance needs of stakeholders for increasing community participation.

American Rescue Plan Act (ARPA) Funding Expansion for CPS –

- ❖ ODP proposed to the Centers for Medicare and Medicaid Services (CMS) that certain unused ARPA funding could be expanded to support innovative projects from the Administrative Entities (AEs) to develop alternatives to traditional CPS services for individuals who were waiting to receive services or are unable to find a provider willing to support them. CMS approved this proposal which incorporates brainstorming with stakeholders to understand needs that could be addressed by a proposed project.

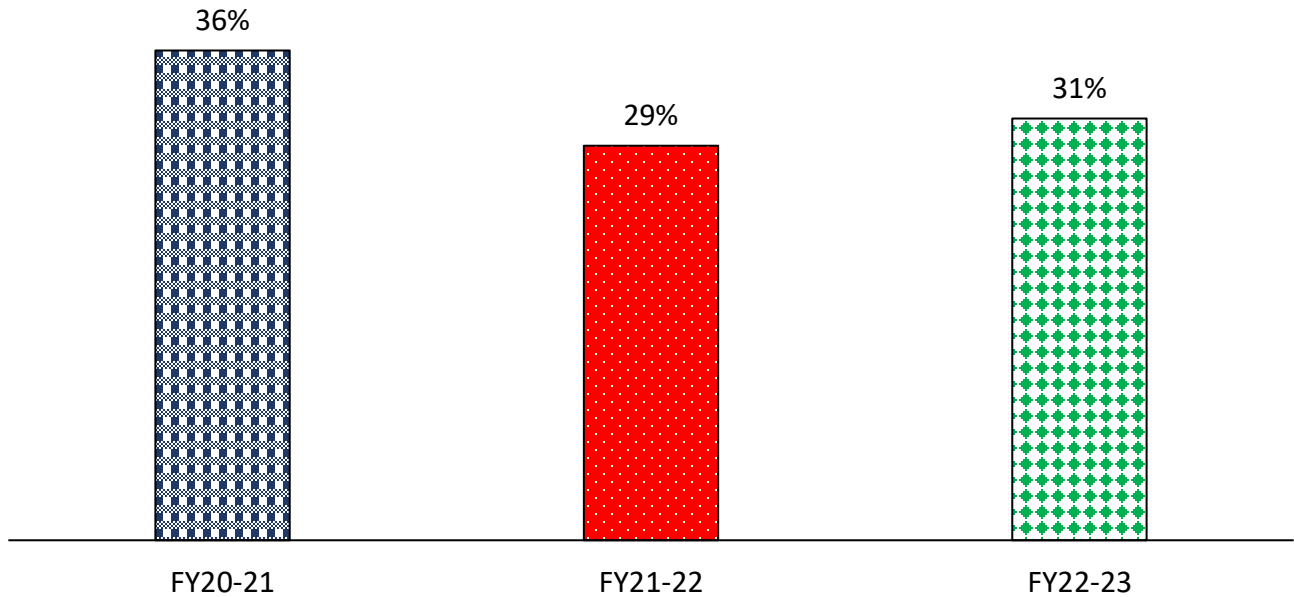
Standardized CPS Curriculum -

- ❖ ODP previously implemented a standardized curriculum for CPS, which includes topics such as community mapping, inclusion/integration, and building relationships in the community. As of November 2023:
 - ✓ 64,402 users have received a certificate for the required training.
 - ✓ 6,530 users have received a certificate for professional development.

PERFORMANCE MEASURES <i>for</i> #11
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1. Percent of Community Participation Support (CPS) service units used by recipients in a community setting, overall and by race. (*PROMISe*)
2. Percent of individuals who received Community Participation Support (CPS) in community settings, overall and by race. (*PROMISe*)
3. Percent of authorized CPS service locations that delivered CPS in community settings. (*PROMISe*)
4. Percent of individuals, overall and by race, who receive at least a quarter of their community participation support service in community settings. (*HCSIS & PROMISe*)
5. Percent of individuals who report that when they choose what they do during the day, they are given a choice to go where people without disabilities go. (*IM4Q*)
6. Percent of people who report that they were given options of where to go during the day. (*IM4Q*)
7. Percent of individuals who report that they visit with friends, relatives, or neighbors at least weekly. (*IM4Q*)
8. Percent of individuals who report that they have friends who are not staff and family. (*IM4Q*)
9. Percent of respondents who say their relative has enough opportunities to participate in activities outside of where they live. (*IM4Q*)
10. Percent of respondents who say their relative has the opportunity to learn new things. (*IM4Q*)

Percent of CPS Service Units Used by Recipients in a Community Setting (PM 1)



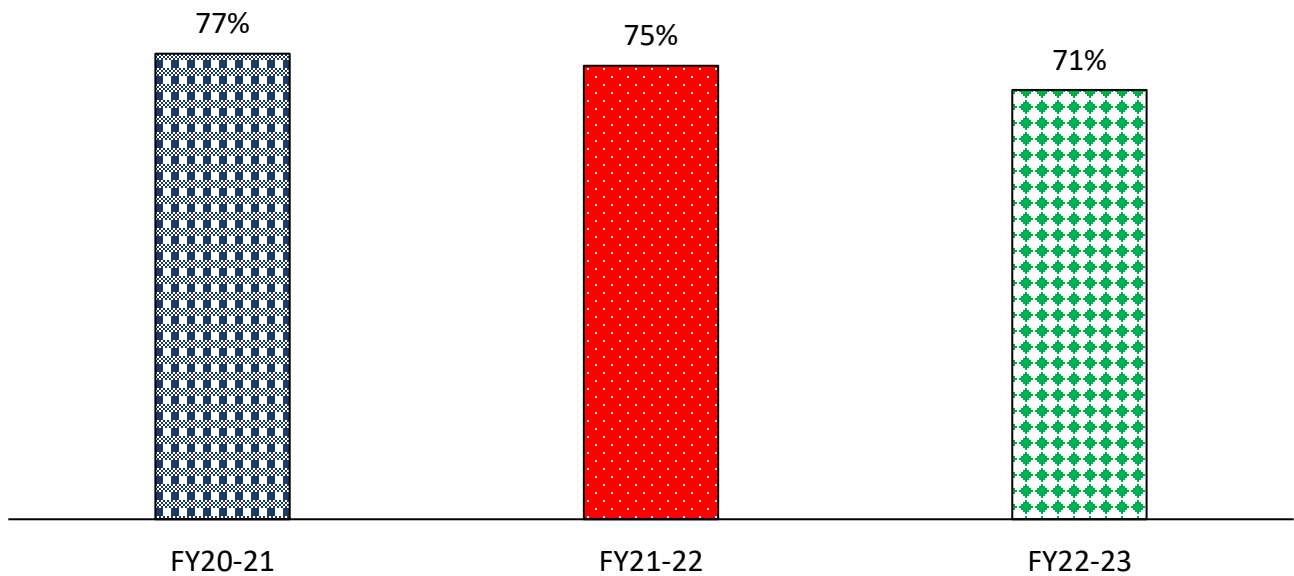
Source: EDW PROMISe Paid Claims Table; Data extraction date: 12/6/2023

Note: "CPS service units used by recipients in a community setting" includes units provided remotely.

Percent of CPS Service Units Used by Recipients (within the Race Category) in a Community Setting, by Race (PM 1)			
RACE	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	21%	20%	28%
Asian	40%	28%	32%
Black or African American	48%	36%	39%
Native Hawaiian or Other Pacific Islander Indicator	4%	4%	17%
White	34%	27%	29%
Other	43%	32%	33%
Unknown	35%	57%	47%
Multi-Race	35%	31%	35%
No to All Options	N/A	N/A	21%
Total	36%	29%	31%

Source: EDW PROMISe Paid Claims Table; Data extraction date: 12/6/2023

Percent of Individuals Who Received CPS in Community Settings (PM 2)



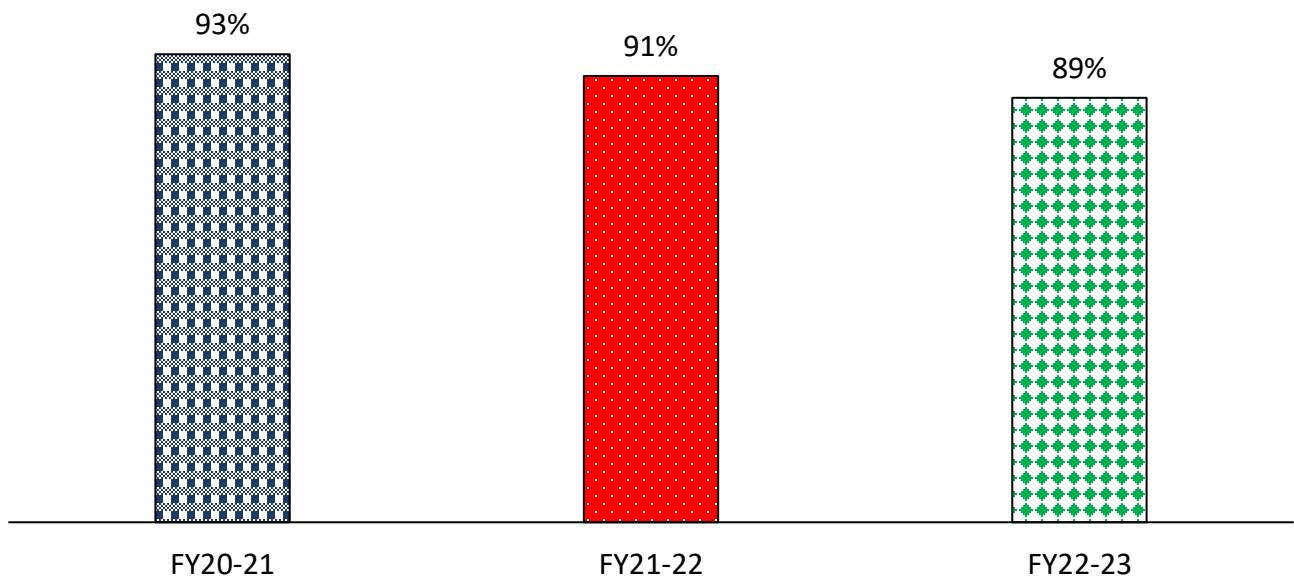
Source: EDW PROMISE Paid Claims Table; Data extraction date: 12/6/2023

Percent of Individuals Who Received CPS in Community Settings, by Race (PM 2)

RACE	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	0.1%	0.1%	0.02%
Asian	1%	1%	1%
Black or African American	13%	13 %	18%
Native Hawaiian or Other Pacific Islander Indicator	0.02%	0.02%	0.05%
White	80%	80%	74%
Other	5%	5%	5%
Unknown	0.1%	0.1%	0.2%
Multi-Race	0.5%	0.5%	0.4%
No to All Options	N/A	N/A	1.31%

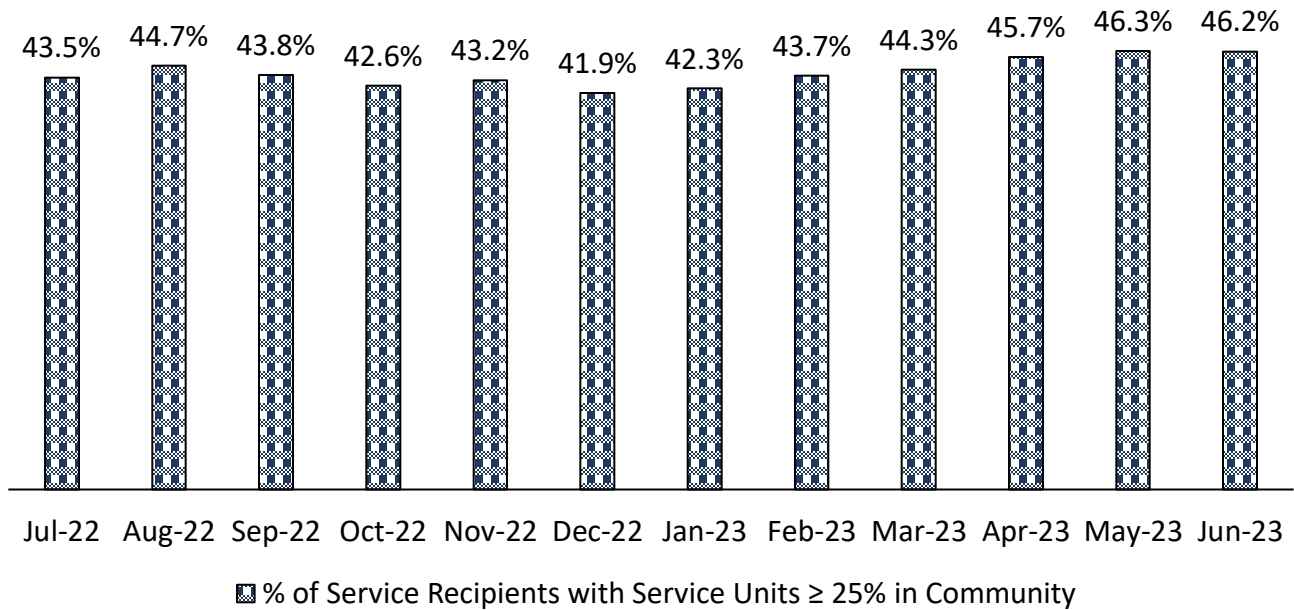
Source: EDW PROMISE Paid Claims Table; Data extraction date: 12/6/2023

Percent of Authorized CPS Service Locations that Delivered CPS in Community Settings (PM 3)



Source: EDW PROMISE Paid Claims Table; Data extraction date: 12/6/2023

Percent of Individuals who Receive at Least a Quarter (>25%) of Their CPS Service in Community Settings (PM 4) - FY 22-23



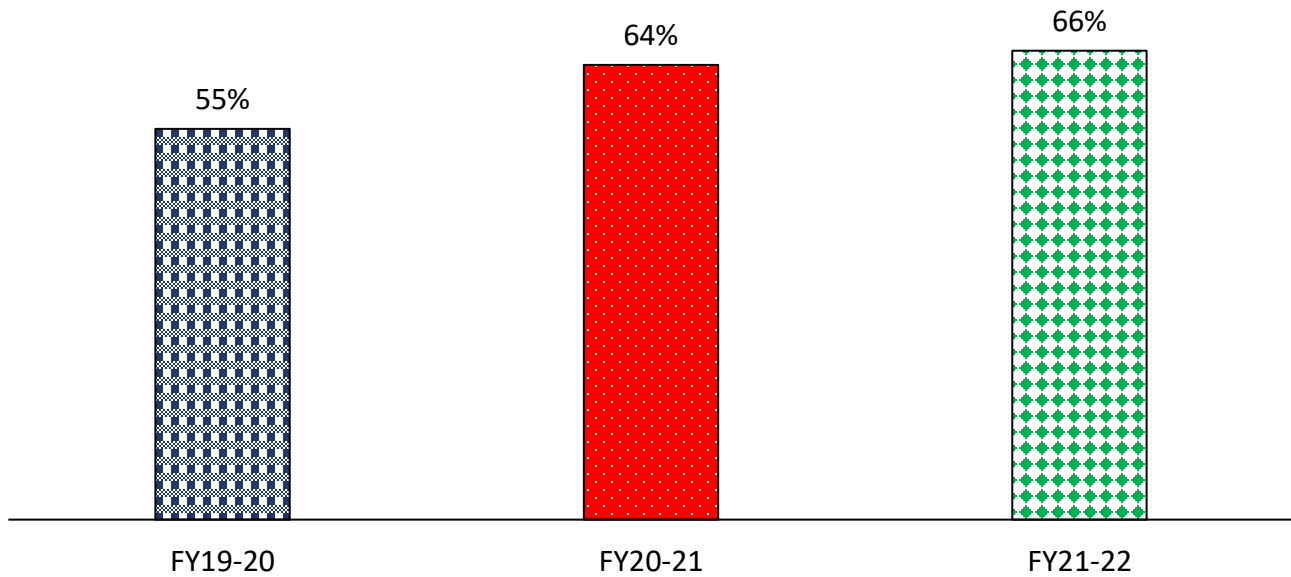
Source: EDW PROMISE Paid Claims Table; Data extraction date: 10/31/2023 with remittance advice dates through 10/23/2023

Percent of Individuals Who Receive at Least a Quarter (>25%) of Their CPS Service in Community Settings, by Race (PM 4) – FY 22-23

Month-Year	American Indian or Alaskan Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander Indicator	White	Other	Multi-Race
Jul-22	0.1%	1%	14%	0%	79%	5%	1%
Aug-22	0.1%	1%	15%	0%	79%	5%	1%
Sep-22	0.1%	1%	14%	0%	79%	5%	1%
Oct-22	0.1%	1%	14%	0%	79%	5%	1%
Nov-22	0.1%	1%	15%	0%	79%	5%	0%
Dec-22	0.1%	1%	15%	0%	78%	5%	1%
Jan-23	0.1%	1%	15%	0%	79%	5%	1%
Feb-23	0.1%	1%	15%	0%	78%	5%	1%
Mar-23	0.1%	1%	15%	0.02%	78%	5%	1%
Apr-23	0.1%	1%	15%	0.02%	78%	5%	1%
May-23	0.1%	1%	15%	0.02%	78%	5%	1%
Jun-23	0.1%	1%	15%	0.02%	78%	5%	1%

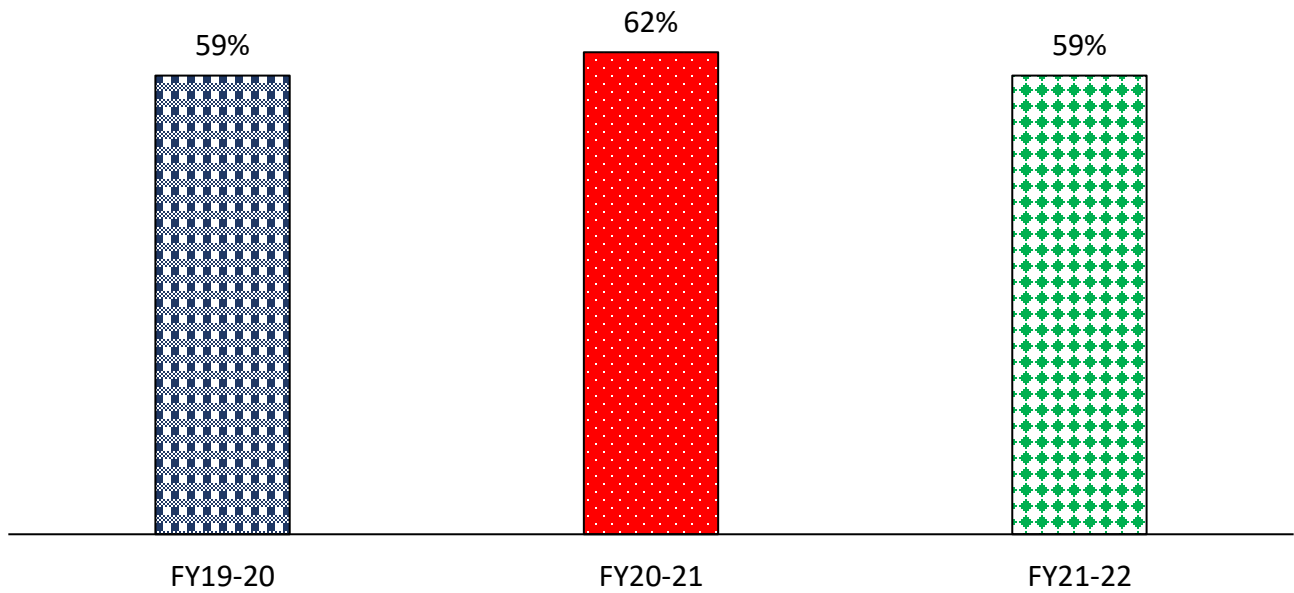
Source: EDW PROMISE Paid Claims Table; Data extraction date: 10/31/2023 with remittance advice dates through 10/23/2023

Percent of Individuals Who Reported that When They Chose Their Work or Day Activity, They Had an Option to Go Where People without Disabilities Go (PM 5)



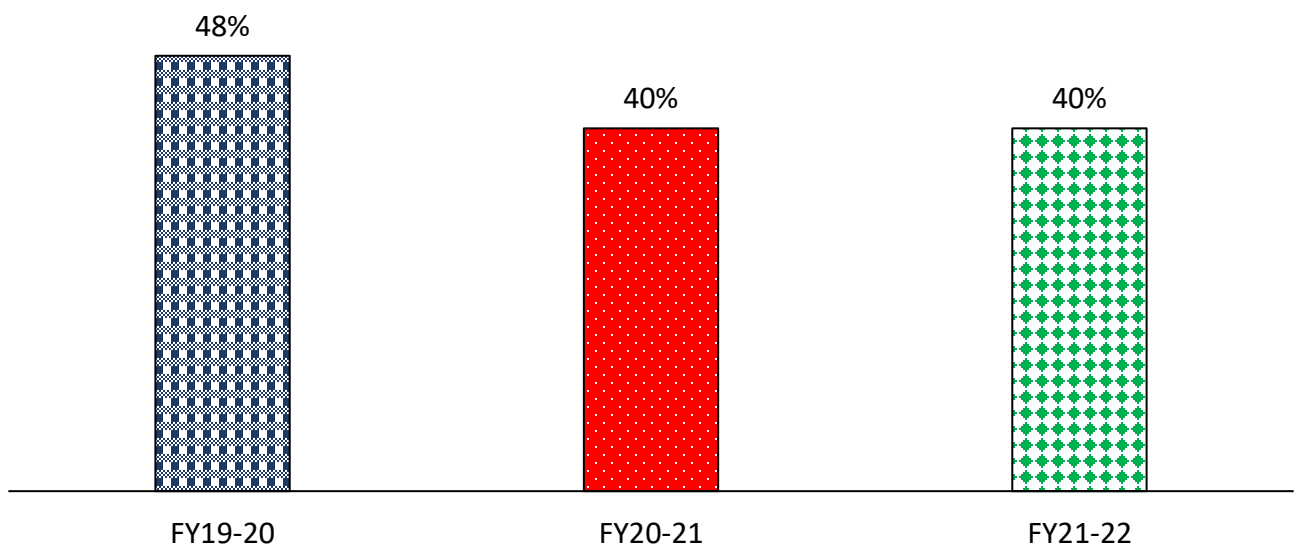
Source: IM4Q

**Percent of Individuals Who Report that They Were Given Options
of Where to Go During the Day (PM 6)**



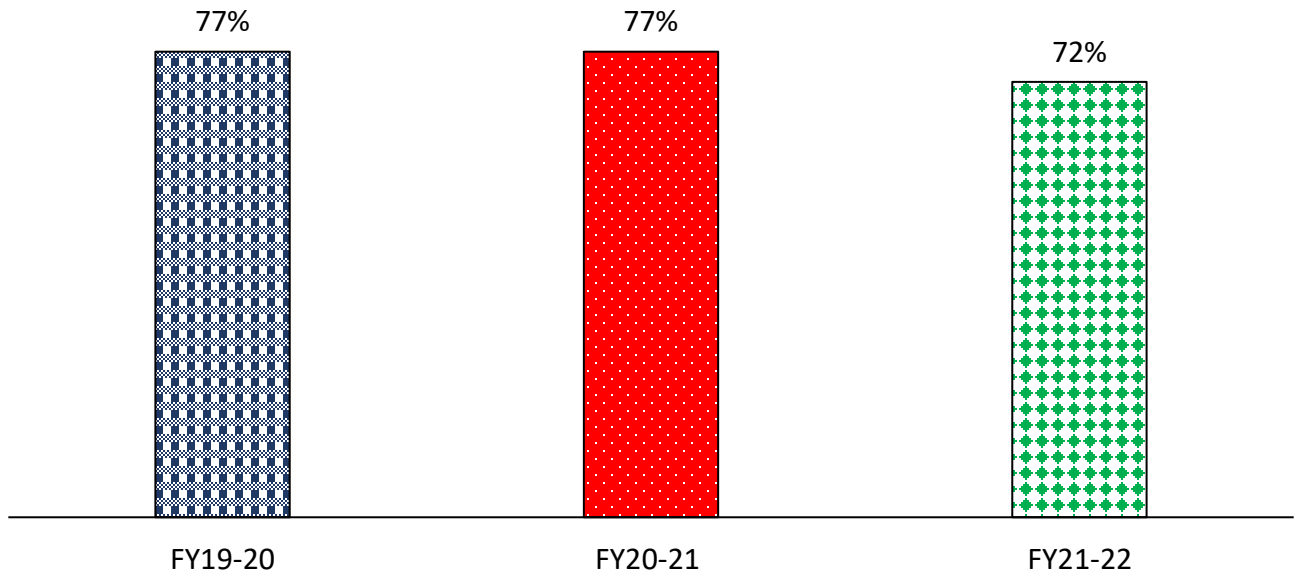
Source: IM4Q

**Percent of Individuals Who Report that They Visit with Friends,
Relatives, or Neighbors at Least Weekly (PM 7)**



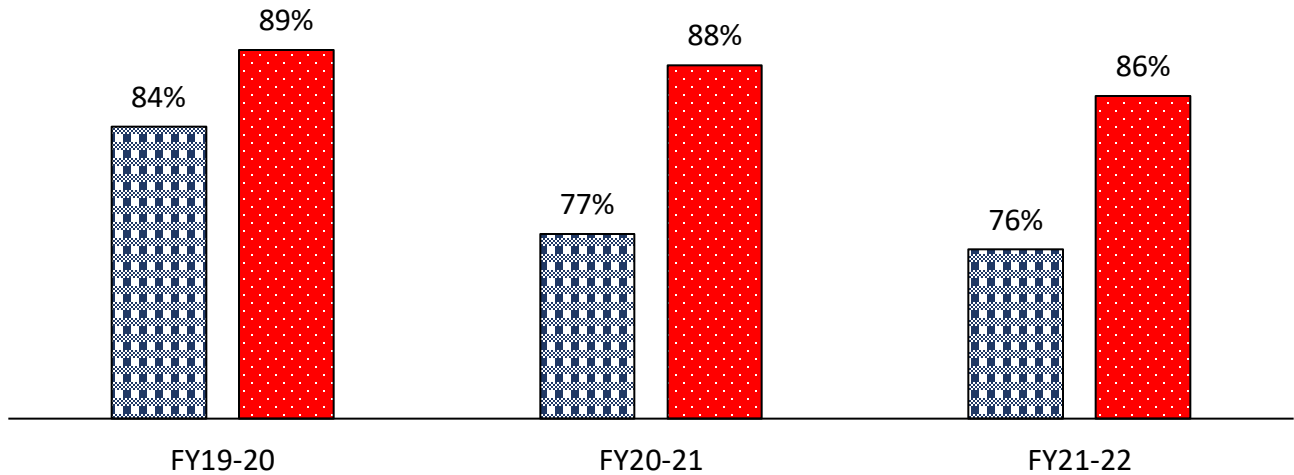
Source: IM4Q

Percent of Individuals Who Have Friends Other Than Staff and Family (PM 8)



Source: IM4Q

Percent of Relatives' Satisfaction with Opportunities for Individuals (PM 9 & 10)



- Percent of respondents who say their relative has enough opportunities to participate in activities outside of where they live.
- Percent of respondents who say their relative has the opportunity to learn new things.

Source: IM4Q



Recommendation 12: Provide Community Services to Everyone

People with disabilities — whether living on their own, with families, or in institutions — are waiting for community services. The goal is to build a system having the capacity to provide services in a timely fashion for all people who need supports.

ACCOMPLISHMENT HIGHLIGHTS *for* #12

- ✓ Continued to provide training to the field on supporting individuals with medically complex conditions
- ✓ Continued expansion of waiver opportunities for individuals with Autism Spectrum Disorder (ASD)
- ✓ Developed and delivered training to help systems partners better navigate the criminal justice system
- ✓ Provided training and resources to court systems and legal professionals to enhance understanding of how Autism and Intellectual Disability may impact how a person interfaces with the justice system

ACCOMPLISHMENTS IN DETAIL *for* #12

Expanded Eligibility in Waiver Programs for Individuals with Medically Complex Conditions —

- ❖ Developed and produced training targeted to Supports Coordinators on supporting Children with Medically Complex Conditions. The training series covered various systems of the body.
- ❖ Presented at professional conferences on the successes of moving Children with Medically Complex conditions from facility level care to their family homes.
- ❖ Published guidance for providers to better understand qualifications and requirements for providing care to medically complex individuals. Added flexibility to qualification requirements for families providing care to a child with a medically complex condition.

Expanded Waiver Opportunities for Individuals with ASD —

- ❖ In January 2020, ODP began transitioning 2,228 individuals on the Adult Autism Waiver (AAW) interest list to ODP's waiting list, so that eligible individuals could be assessed for their urgency of need and prioritized accordingly for waiver enrollment. As of November 2023:

- ✓ 602 of the 2,228 individuals are no longer on the AAW interest list due to their enrollment in a waiver, no longer being interested, or no longer meeting the eligibility requirements.
- ✓ 449 of the 1,626 remaining individuals from the AAW interest list have completed their eligibility determination and are currently on the ODP waiting list.
- ✓ 1,177 of the 1,626 remaining individuals from the AAW interest list are pending transition to the ODP waiting list, upon completion of the process for determining eligibility.

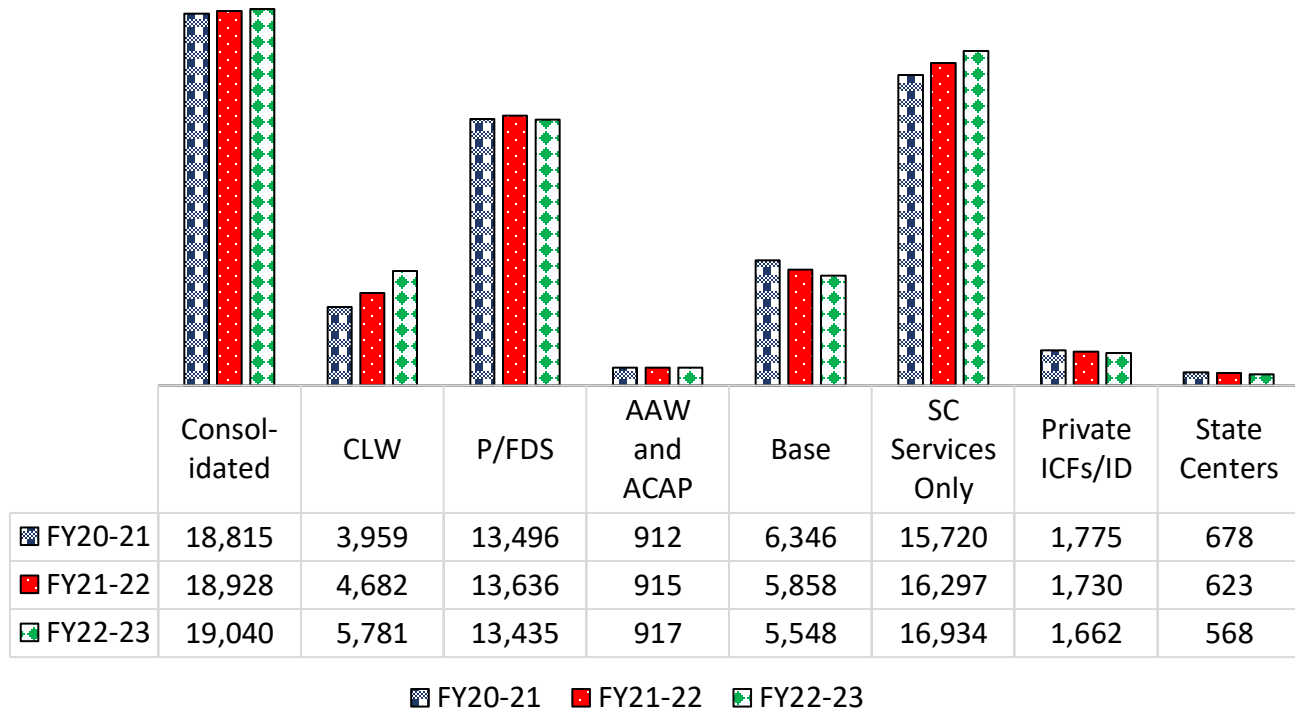
Intellectual Disabilities/Autism (ID/A) & Criminal Justice Systems —

- ❖ Developed and delivered training for professionals in the disability, justice, law enforcement, and advocacy fields, on the criminal justice process, with a focus on individuals with autism and intellectual disability.
 - ✓ Partnered with the PA Supreme Court and the PA Bar Institute in the development of a Continuing Legal Education course (ASD 101) for PA attorneys. 560 attorneys attended the session. Additionally, ASERT is participating in training Magisterial District Judges in the ASD 101 course. Lastly, these sessions are part of an ongoing collaboration with the PA Supreme Court and Administrative Office of PA Courts. Several sessions are being offered and to date, over 260 Magisterial District Judges have participated.
- ❖ Maintained the collaboration with PA's Department of Corrections (DOC) regarding their process for screening all inmates for ASD, including their pilot unit at the State Correctional Institution (SCI) Albion, for neurodiverse inmates, which is grounded in the Positive Behavior Support (PBS) model. In 2023, ODP provided additional training to SCI staff and SCI Albion leadership presented at the 2023 PATC conference.

PERFORMANCE MEASURES *for* #12

1. Number of unduplicated people served, by program, by fiscal year (FY), during the year, overall and by race. (*HCSIS & PROMISE*)
2. Number of people newly enrolled in a HCBS waiver, overall and by race, from:
 - a. ID waiting list, by category, (Emergency, Critical, Planning), by age,
 - b. Interest list, by category, by age,
 - c. Institutional settings (ICF, RTF, and congregate settings for children with complex needs),
 - d. ID waiting list, by program enrolled (*HCSIS & PROMISE*)

Number of Unduplicated People Served By Program (PM 1)



Sources: HCSIS as of 09/30/2023 and PROMISE cycles through 10/23/2023.

Number of Unduplicated People Served by Program, by Race (PM 1)

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes and in some cases, a category of race is not included due to number of people being "0" for all years.

Base Services	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Asian	63	55	52
Black or African American	648	595	586
Hawaiian or Other Pacific Islander Indicator	<11	<11	<11
White	5,229	4,820	4,535
Other	335	319	301
Unknown	24	27	29
Multi-Race	37	34	37
Total	6,346	5,858	5,548

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Number of Unduplicated People Served by Program, by Race (PM 1) -- Continued			
Community Living Waiver	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Asian	55	75	101
Black or African American	636	734	910
White	2,974	3,516	4,311
Other	262	317	412
Unknown	<11	12	13
Multi-Race	17	23	27
No to all Options	<11	<11	<11
Total	3,959	4,682	5,781
Consolidated Waiver	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	15	16	15
Asian	159	167	177
Black or African American	3,049	3,107	3,187
Hawaiian or Other Pacific Islander Indicator	<11	<11	<11
White	14,708	14,727	14,707
Other	809	828	859
Unknown	11	14	17
Multi-Race	61	65	73
No to all Options	<11	<11	<11
Total	18,815	18,928	19,040
P/FDS Waiver	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	19	22	26
Asian	202	227	231
Black or African American	2,152	2,134	2,062
Hawaiian or Other Pacific Islander Indicator	<11	<11	<11
White	10,143	10,232	10,088
Other	911	939	936
Unknown	20	28	34
Multi-Race	44	49	53
No to all Options	<11	<11	<11
Total	13,496	13,636	13,435
SC Services Only	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	32	37	37
Asian	397	446	478
Black or African American	2,990	3,055	3,236
Hawaiian or Other Pacific Islander Indicator	<11	11	<11
White	10,737	11,168	11,478
Other	1,359	1,368	1,426
Unknown	114	126	164
Continued on next page...			

Number of Unduplicated People Served by Program, by Race (PM 1) -- Continued			
Multi-Race	79	85	105
No to all Options	<11	<11	<11
Total	15,720	--	16,934
ACAP	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Asian	<11	<11	<11
Black or African American	16	16	17
White	157	155	157
Other	<11	<11	<11
Unknown	<11	<11	<11
Multi-Race	<11	<11	<11
Total	189	186	189
Adult Autism Waiver	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Asian	<11	<11	<11
Black or African American	60	63	67
White	611	615	611
Other	35	35	35
Unknown	<11	<11	<11
Multi-Race	<11	<11	<11
Total	723	729	728
Private ICF/ID	FY 20-21	FY 21-22	FY 22-23
American Indian or Alaskan Native	<11	<11	<11
Asian	19	19	21
Black or African American	284	282	273
Hawaiian or Other Pacific Islander Indicator	<11	<11	<11
White	1,372	1,332	1,267
Other	94	91	95
Unknown	<11	<11	<11
Total	1,775	1,730	1,662
State Centers	FY 20-21	FY 21-22	FY 22-23
Asian	<11	<11	<11
Black or African American	57	56	55
White	609	555	502
Other	<11	<11	<11
Total	678	623	568

Sources: HCSIS as of 09/30/2023 and PROMISe cycles through 10/23/2023.

Note: Due to privacy reasons some totals may not have been included in these tables.

**Number of People Newly Enrolled in a HCBS Waiver, from ID Waiting List,
by Urgency of Need Category and Age Group (PM 2a)**

E = Emergency; C = Critical; P = Planning

Age Group	FY 20-21			FY 21-22			FY 22-23		
	E	C	P	E	C	P	E	C	P
50 and up	250	<11	<11	226	19	<11	280	14	<11
21-49	1,101	62	<11	1,457	84	16	1,581	124	23
18-20	418	25	<11	452	30	<11	485	33	<11
Birth to 17	65	<11	<11	56	<11	<11	88	<11	<11

Sources: EDW HCSIS Consumer Demographics Fact and PUNS as of 9/30/2023.

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.

**Number of People Newly Enrolled in a HCBS Waiver from ID Waiting List, by Race -
Emergency Category Only (PM 2a)**

Race	Emergency
American Indian or Alaskan Native	<11
Asian	69
Black or African American	442
Native Hawaiian or Other Pacific Islander Indicator	<11
White	1,986
Other	268
Unknown	<11
Multi-Race	14

Sources: EDW HCSIS Consumer Demographics Fact and PUNS as of 12/12/2023.

Note: Data for Critical and Planning categories was not included due to numbers generally being too small to publicly report counts due to privacy.

**Number of People Newly Enrolled in a HCBS Waiver from AAW Interest List,
by Age (PM 2b)**

Age Group	FY 20-21	FY 21-22	FY 22-23
50 and up	<11	<11	<11
21-49	17	19	14

Source: HCSIS as of 10/23/2023

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes. Data for Urgency of Need categories was not included due to numbers generally being too small to publicly report counts due to privacy.

Number of People Newly Enrolled in a HCBS Waiver from Institutional Settings (PM 2c)	
Nursing Homes	23
State Hospitals	<11
State Centers	20
Private ICF-IDs	21
Private ICF-ORCs	0
Residential Treatment Facility (RTF)	13
53: RTF (Mental Health) BH Medically Necessary <i>Placement into a mental health residential treatment facility. It provides 24-hour supervision to persons 18 years or older or persons under 21 who qualify for EPSDT extended services.</i>	<11
56: CSC-BH Medically Necessary RTF (other) <i>Placement of a Child in Substitute Care (CSC) into a Mental Health residential treatment facility. This code is to be used for a child from a HealthChoices zone, a voluntary plan, or fee-for-service being placed in substitute care that does not meet the 55 criteria described above (includes zone to zone transfers).</i>	<11

Source: HCSIS, PROMISe and Facility Fact; Data extraction date: 10/23/2023

Note: Data greater than zero and less than 11 is not shown in the table for privacy purposes.

Number of People Newly Enrolled in a HCBS Waiver, from ID Waiting List, by Program Enrolled (PM 2d)			
Waiver Program	FY 20-21	FY 21-22	FY 22-23
Community Living	339	699	922
Consolidated	667	655	681
P/FDS	975	1,028	1,093

Data Sources: EDW HCSIS Consumer Demographics Fact and PUNS as of 12/12/2023.

Number of People Newly Enrolled in a HCBS Waiver, from ID Waiting List, by Program Enrolled, by Race—Emergency Only (PM 2d)	
	Emergency Only
Community Living Waiver	
American Indian or Alaskan Native	<11
Asian	22
Black or African American	121
White	598
Other	68
Unknown	<11
Multi-Race	<11
Total	815
Consolidated Waiver	
Asian	<11
Black or African American	123
White	463
Other	49
Unknown	<11
Multi-Race	<11
No To All Options	<11
Total	651
P/FDS Waiver	
American Indian or Alaskan Native	<11
Asian	26
Black or African American	120
Native Hawaiian or Other Pacific Islander Indicator	<11
White	765
Other	74
Unknown	<11
Multi-Race	11
Total	1,009

Data Sources: EDW HCSIS Consumer Demographics Fact and PUNS as of 12/12/2023.



Recommendation 13: Evaluate Future Innovations Based on Everyday Lives Principles

Future consideration of service models and reimbursement strategies must be based on the principles of person-centered planning, individual choice, control over who provides services and where, and access to/full engagement in community life. Innovative approaches should be evaluated based on the recommendations of *Everyday Lives*, including employment, recognizing and supporting the role of families, and meeting the diverse needs of all individuals. Stakeholders should be fully engaged in designing, implementing, and monitoring the outcomes and effectiveness of innovative service models and service delivery systems.

- ❖ Adherence to the values and principles of *Everyday Lives*.
- ❖ Engagement of stakeholders, including individuals and self-advocates with disabilities, family members, county governments, providers, and advocates in designing, implementing, and monitoring the outcomes.
- ❖ Recognition that payment models assume that individuals and self-advocates with intellectual disability and autism require supports across the lifespan, that their needs are not episodic or time-limited but are on-going and ever changing throughout life. Investment in skill development and job placement and training may not realize savings for a number of years into the future.
- ❖ Recognition that while individuals and self-advocates with intellectual disability or autism have medical, mental health, and dental needs that require medical services, the goal of home and community-based services is to enable people to live and engage in community life.
- ❖ Incorporation of the Federal Home and Community-Based Services rule, which requires person-centered planning, individual choice, and control over who provides services and where and supports access to the greater community and full engagement in community life.
- ❖ Adoption of a performance evaluation system founded in the principles of *Everyday Lives* and the Home and Community-Based Services Rule.
- ❖ Recognition that most individuals and self-advocates with intellectual disability or autism are supported by their families throughout life. An effective service system respects the valued role of families and understands that supporting families is critical to achieving good outcomes for individuals and self-advocates with disabilities.

** A typical description of a medical home is a model or philosophy of primary care that is patient-centered, comprehensive, team-based, coordinated, accessible, and focused on quality and safety.*

ACCOMPLISHMENT HIGHLIGHTS *for #13*

- ✓ ODP published a concept paper outlining a transition to selective contracting, referred to as “performance-based contracting,” for residential and supports coordination services for stakeholder input

ACCOMPLISHMENTS IN DETAIL *for #13*

- ❖ In 2022, using ARPA funding, ODP contracted with Mercer to conduct an environmental scan of other states and to explore selective contracting and alternative payment methods for specific ODP HCBS services. ODP subsequently published a concept paper in 2023 to gather stakeholder input on systems improvements. The goal of this is to improve the quality of services by aligning payment for services with satisfying identified performance targets and outcomes.



Recommendation 14: Promote Racial Equity

Communities are richer, more just, and stronger when we honor and respect the whole of racial diversity. Access to a quality, person-centered, culturally competent system of supports and funding must be equally available regardless of race. Services must include planning over a life span and address racial disparities, including disparate outcomes. The duty to ensure that racial diversity is promoted and supported, at all levels within the services system, must be embraced.

ACCOMPLISHMENT HIGHLIGHTS for #14

- ✓ **Racial Equity performance measures published in 2022 ISAC Annual Report**
- ✓ **Racial Equity Landing page on MyODP developed and released**

ACCOMPLISHMENTS IN DETAIL for #14

- ❖ In January 2023, the new ISAC racial equity performance measure data was published in the 2022 ISAC Annual Report. Included in the report were 20 performance measures across the following 9 recommendations:
 - ✓ #1 - Assure Effective Communication,
 - ✓ #2 - Promote Self-Direction, Choice and Control,
 - ✓ #3 - Increase Employment,
 - ✓ #4 - Support Families Throughout the Lifespan,
 - ✓ #5 - Promote Health, Wellness and Safety,
 - ✓ #6 - Support People with Complex Needs,
 - ✓ #10 - Expand Options for Community Living,
 - ✓ #11 - Increase Community Participation,
 - ✓ #12 - Provide Community Services to Everyone.
- ❖ [Racial Equity Landing Page](#) was developed and released on MyODP.org and includes:
 - ✓ ISAC recommendation #14 strategies,
 - ✓ QA&I C2Y1 data results regarding AE, SCO, and provider engagement in activities to improve racial equity performance and whether or not they have a written policy addressing the subject,
 - ✓ Links to ODP published reports that include racial data, and
 - ✓ Racial equity self-evaluation tools for organizations.
- ❖ During 2023, the ISAC Racial Equity Subcommittee continued to convene virtually to discuss racial equity strategy development and applications.
- ❖ An IM4Q Racial Equity report is under development with a focus on choice and control data.

Acronyms

AAW	Adult Autism Waiver
ACAP	Adult Community Autism Program
AE	Administrative Entity
ARPA	American Rescue Plan Act
ASD	Autism Spectrum Disorder
ASERT	Autism Services, Education, Resources & Training
AWC	Agency with Choice
BH	Behavioral Health
CBI	Capacity Building Institute
CDC	Centers for Disease Control & Prevention
CDS	College of Direct Support
CIE	Competitive Integrated Employment
CMS	Centers for Medicare & Medicaid Services
CoP	Community of Practice
COVID-19	Coronavirus Disease 2019
CPS	Community Participation Support
CSC	Child in Substitute Care
CtLC	Charting the LifeCourse
DHS	PA Department of Human Services
DOC	PA Department of Corrections
DOH	PA Department of Health
ECHO	Expanding Community Health Options
ECM	Enterprise Case Management
EDL	Everyday Lives
EDW	Enterprise Data Warehouse
EPSDT	Early & Periodic Screening, Diagnosis & Treatment
FY	Fiscal Year
HCBS	Home & Community Based Services
HCQU	Health Care Quality Unit
HCSIS	Home & Community Services Information System
HHS	US Department of Health & Human Services
HRST	Health Risk Screening Tool
HTTP	Housing Transition & Tenancy Providers
ICF	Intermediate Care Facility
ICF/ORC	Intermediate Care Facility for Other Related Conditions
ID/A	Intellectual Disability/Autism
IM4Q	Independent Monitoring for Quality
IU	Intermediate Unit
InVEST	Integrated Vocational Engagement & Supports Team
ISAC	Information Sharing & Advisory Committee
ISP	Individual Support Plan
MMIS	Medicaid Management Information System
NADSP	National Alliance for Direct Support Professionals

NASDDDS	National Association of State Directors of Developmental Disabilities Services
NCI	National Core Indicators
NCSS	National Center for START Services
ODP	Office of Developmental Programs
OMHSAS	Office of Mental Health & Substance Abuse Services
OVR	Office of Vocational Rehabilitation
PAFN	Pennsylvania Family Network
PATC	Pennsylvania Autism Training Conference
PaTTAN	PA Training & Technical Assistance Network
PBS	Positive Behavior Support
PCCRC	Pediatric Complex Care Resource Center
PDE	PA Department of Education
PDS	Participant Directed Services
PECS	Picture Exchange Communication System
P/FDS	Person/Family Directed Supports
PM	Performance Measure
PROMIS	Provider Reimbursement & Operations Management Information System
QA&I	Quality Assessment and Improvement
QI	Quality Improvement
QM	Quality Management
QMP	Quality Management Plan
RFA	Request for Application
RTF	Residential Treatment Facility
SAPNA	Self-Advocacy Power Network for All
SC	Supports Coordinator
SCI	State Correctional Institution
SCO	Supports Coordination Organization
START	Systemic, Therapeutic, Assessment, Resources & Treatment Model
STG	Strategic Thinking Group
SWtCIE	Subminimum Wage to Competitive Integrated Employment
TechOWL	Technology for Our Whole Lives
TRAIN	Trauma Recovery for Autistic, Intellectually Disabled & Neurodiverse Individuals
UPMC	University of Pittsburgh Medical Center
VF/EA	Vendor Fiscal/Employer Agent

Data Sources

College of Direct Support (CDS) – A national, web-based learning system that the Commonwealth has used since 2003, that's designed for people who support individuals with intellectual/developmental disabilities.

Enterprise Data Warehouse (EDW) – A repository that stores and manages historical business data for ODP.

Home and Community Services Information System (HCSIS) – A web-based application that supports the Department of Human Services, including ODP, AEs, SCs, and providers, in the administration of federal and state-funded home and community-based programs.

Health Risk Screening Tool (HRST) – A web-based, HIPAA compliant rating instrument developed to detect health destabilization in at-risk populations.

Independent Monitoring for Quality (IM4Q) – People with disabilities, family members, and support professionals in PA are interviewed by the IM4Q project to learn about the overall quality of life for people who receive support through ODP.

MyODP.org – ODP's online Training and Resource Center.

National Core Indicators (NCI) – Supports member agencies to gather a standard set of performance and outcome measures used to track their own performance over time, to compare results across states, and to establish national benchmarks. NCI includes an Adult In-Person Survey and Adult Family Survey.

Provider Reimbursement and Operations Management Information System (PROMISE™) – PA's CMS-certified Medicaid Management Information System (MMIS) and HIPAA-compliant claims processing and financial management information system.

Prioritization of Urgency of Need for Services (PUNS) – This tool is used by ODP to assist in evaluating the waiting list to better target policies to address the needs of individuals with ID/A and their families.

Quality Assessment and Improvement (QA&I) – A statewide assessment with 100% participation from AEs, SCOs and providers (entities) over a three-year cycle. During a full QA&I review, in addition to completing an annual self-assessment, an entity undergoes desk and onsite reviews, receives a comprehensive report, may be required to complete corrective action and quality improvement activities, and receives technical assistance upon request.