

DBHDS

Virginia Department of
**Behavioral Health and
Developmental Services**

STRATEGIC PLAN FOR EMPLOYMENT FIRST: EXPANDING EMPLOYMENT OPPORTUNITIES

October 2012

This document outlines the Department of Behavioral Health and Developmental Services' (DBHDS or 'the department') Strategic Plan for Employment First. The strategic plan was formulated in response to efforts in recent years to build and expand integrated employment opportunities for individuals with disabilities in Virginia. DBHDS supports individuals with serious mental illness, substance use disorders, and intellectual and other developmental disabilities. The strategic plan establishes annual goals for DBHDS to collaborate with other state agencies and organizations to expand opportunities for employment for all Virginians with disabilities.

Background

The DBHDS Strategic Plan for Employment First is based on a series of previous studies and collaborations addressing integrated employment in Virginia. For many years DBHDS has recognized the importance of delivering employment services in integrated settings. DBHDS has a long-standing interest in supported employment and is actively developing policies and practices that better promote employment outcomes for a broader range of individuals with disabilities. Over the past few years, the department has undertaken efforts to support individuals with disabilities in having increased access to integrated community-based employment. Definitions of integrated and other employment opportunities are outlined in Appendix A.

- **Joining and maintaining membership in SELN (State Employment Leadership Network):**
In 2008, DBHDS joined the State Employment Leadership Network (SELN) sponsored by the National Association of State Directors of Developmental Disability Services and the University of Massachusetts-Boston Institute for Community Inclusion. DBHDS developed a Virginia-specific SELN Advisory Group made up of over 30 members representing a variety of organizations involved in providing employment services to Virginians. Members include community service boards (CSBs), the Department for Aging and Rehabilitative Services (DARS), the Department of Education (DOE), the Virginia Board for People with Disabilities (VBPD), the Virginia Commonwealth University Rehabilitation Research and Training Center on Workplace Supports and Job Retention (VCU/RRTC), and vendor organizations such as the Virginia Association of Community Rehabilitation Programs (vaACCSES), the Arc of Virginia, and the Virginia Association of Providers of Supported Employment (VaAPSE). DBHDS continues to be an active, contributing participant in the monthly National SELN web-based meetings. Virginia is now one of 30 states in the SELN.
- **SELN State Strategic Plan Assessment:** In 2009, the members of the Virginia SELN Advisory Group completed the *SELN State Strategic Assessment* (Appendix B). The major barriers to employment identified in this assessment were:
 1. Lack of incentives for employment service organizations to provide integrated community-based employment;
 2. Lack of standard policies across agencies regarding employment services and definitions;
 3. Need for review and revision of current regulations impacting the disincentive for people to choose integrated employment (such as the limited flexibility of the current waiver system for people to move from day services to integrated employment);
 4. Lack of funding for long term supports;

5. Need for increased education of service providers and individuals about the opportunity for community-based employment and work incentives to support moving into employment; and
 6. The need for a greater coordination of employment outcome data collection across and within state agencies.
- **Creating Opportunities Plan:** In 2010, the DBHDS strategic plan, *Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia (Creating Opportunities Plan)*, was developed with the help of over 200 individuals, including staff from DBHDS' central office and state hospitals and various state agencies; representatives from community services boards (CSBs) and private providers; and individuals receiving services and other stakeholders (Appendix C). The *Creating Opportunities Plan's* strategic employment priority seeks partnerships among CSBs, the Department for Aging and Rehabilitative Services (DARS), and Employment Services Organizations (ESOs) to "Provide training and consultation to services providers on implementing innovative supportive employment (SE) models and establishing integrated supported employment teams that include CSBs, DARS, and ESOs."
 - **Hiring an Employment Services Coordinator:** In 2011, to help move forward the employment priorities identified in the SELN Assessment and the *Creating Opportunities Plan*, DBHDS created a full-time, dedicated position for expanding and coordinating employment services in both behavioral health and developmental services. A goal for the position of the employment services coordinator, called the Community Resource Manager for Employment Services, is to develop working relationships with key personnel at the state and local agencies and private organizations providing employment services. Another responsibility for this position is to serve as the coordinator of Virginia's SELN Advisory Group. These goals have been accomplished.
 - **Training Regarding Employment First Policies and Strategies:** In October 2011, DBHDS organized an Employment First Summit to begin addressing statewide training and technical assistance needs. As part of this summit, Governor McDonnell issued a Certificate of Recognition to officially promote the Employment First Initiative in Virginia. The department hosted the Second Employment First Summit in October 2012. Additionally, the DBHDS Community Resource Manager for Employment Services position set a goal of conducting Regional Employment First Summits around the state in order to present Employment First concepts and ideas to the broadest geographical audience. Over 40 such regional summits were held in the past year at CSB sites, DBHDS training centers, service provider meetings, and stakeholder meetings such as the Virginia Leadership in Intellectual and Developmental Disabilities (VALIDD) and The Advisory Council on Individuals with Intellectual & Developmental Disabilities (TACIDD).
 - **Settlement Agreement with the US Department of Justice (DOJ):** In January 2012, Virginia reached a Settlement Agreement with the US Department of Justice (DOJ) to further expand and build upon its community-based system of supports and services for individuals with intellectual and other developmental disabilities. The agreement contains a section related to integrated employment opportunities and requires Virginia to establish Employment First policies and practices (Appendix D). The agreement also requires DBHDS to maintain its membership in the

SELN and establish baseline measurements regarding key employment indicators for individuals receiving services through the HCBS waivers and use targets to meaningfully increase the number of individuals who enroll and remain in supported employment.

- Establishing a DBHDS Employment First Policy:** In 2012, at the direction of the State Board of Behavioral Health and Developmental Services ('the Board'), DBHDS developed, with advice and consultation from the SELN Advisory Group, an Employment First policy for the department and CSBs. This policy was in response to the Settlement Agreement, elements of the 2009 SELN *Assessment*, and the goals of the 2010 *Creating Opportunities Plan*. The Board will consider approval of the draft policy in early December 2012. Once the policy is approved by the Board, DBHDS will include a provision in the CSB Performance Contract requiring adherence to it.

DBHDS Strategic Plan for Employment First

These past efforts of identifying barriers to employment, establishing goals to improve employment outcomes, training and technical assistance, and development of an Employment First policy were used to formulate this Strategic Plan for Employment First. The Plan was developed in 2012 for the purposes of advancing the *Creating Opportunities Plan*, the SELN Assessment, and several priorities identified by stakeholders at the 2011 Employment First Summit. It will also serve as the plan to address the expectations related to Employment First outlined in the Settlement Agreement. DBHDS consulted with members of the SELN Advisory Group in development of the Plan and it will be updated annually in collaboration with the SELN.

I. Interagency Collaboration

In order to achieve a state wide Employment First Initiative, it is necessary to align policies and procedures between a number of state agencies which play a part in employment for people with disabilities.

Activity 1	Employment First Leadership Summit (meeting) –Commitment to collaborate on Employment First objectives
Long Range Goal	Conduct a joint leadership meeting of departments to commit to working towards Employment First
Perceived Barriers/Challenges	Identification of key personnel in leadership who need to attend Coordination of meeting schedules
Short-term Objectives	Leadership staff of key state agencies (e.g., DBHDS, Department of Medical Assistance (DMAS), DRS, Department of Education (DOE), etc.) will be invited to participate in an Employment First Leadership Summit to promote Employment First objectives.
Agencies Involved	DBHDS, DARS, DMAS, DOE
Projected Start Date	October 2012
Projected Completion Date	January 2013
Product/Results	Commitment by agencies to support employment first and be available to change policies and regulations.

Activity 2	Convene a high level administration leadership body (DBHDS, DARS, DOE, DMAS, Virginia Employment Commission (VEC), Developmental Disabilities Council (DD Council) Virginia Community College System (VCCS) to come to consensus on the definition of integrated employment (Employment First policy) so they can examine their own employment priorities, practices and policies in each agency; clarify policies and share them with one another; and discuss possible ways to remove barriers so that people with I/DD can achieve successful employment outcomes.
Long Range Goal	Advance the development of a statewide Strategic Plan for Employment First. The strategic plan for Employment First will draw from and support Virginia's commitment to person-centered planning and work to increase available resources from relevant funding sources to support activities vital to creating customized employment opportunities for people with the most significant disabilities
Perceived Barriers/Challenges	Currently no unified policy or standards for employment Lack of coordination between state agencies Lack of established interaction protocols
Short-term Objectives	<ul style="list-style-type: none"> • Review of the findings and recommendations from existing Virginia studies, analyses and other work that can inform decisions about implementing a coordinated Employment First approach in Virginia. • Review the employment-related policies of all relevant agencies to identify areas of congruence and divergence. Each relevant state agency has developed policies and procedures to increase opportunities for people with the most significant disabilities to seek integrated employment. • Develop a consensus policy statement regarding Employment First to be adopted by all relevant agencies and policy bodies that includes a consensus definition of the concept of Employment First and its underlying foundations. This policy will encompass individual agencies' areas of service focus to support integrated community-based employment for people with the most significant disabilities. Draft policies will be vetted through each partner department's stakeholder groups which include self advocates, advocacy entities and provider organizations.
Agencies Involved	DBHDS, DARS, DOE, DMAS, VEC, DD Council, VCCS
Projected Start Date	Fall 2012
Projected Completion Date	September 2013
Product/Results	A statewide strategic plan to emphasize Employment First. The strategic plan

	defines roles and responsibilities of departments and promotes streamlined coordination of resources to support activities vital to creating opportunities for integrated community-based employment opportunities for people with the most significant disabilities.
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Activity 3	Align licensing, certification, accreditation and other standards to facilitate employment outcomes
Long Range Goal	Refine current policies and practices regarding community employment in licensure, certification, and accreditation standards. Align DMAS, DARS, and DBHDS policies and regulations to support community employment.
Perceived Barriers/Challenges	Regulations are inconsistently applied across agencies. Regulations inconsistently written across agencies
Short-term Objectives	Identify specific issues -Individual Supported Employment under Waivers will permit billing for same activities as DARS -Individuals can use Medicaid transportation to and from job sites while on the Waivers -Identify timelines for accomplishing needed changes by agency and regulation -Identify operating policies and procedures that can be changed without regulatory amendment and timelines for these changes.
Agencies Involved	DBHDS, DARS, DMAS
Start Date	2011
Projected Completion Date	June 2014
Product/Results	Standardized requirements for providers and staff

II. Training and Technical Assistance

In order move ahead with the Employment First initiative in Virginia it is first necessary to provide clear information on what the Employment First initiative means. There is a great need to educate stakeholders about current trends and recognized best practices in providing integrated community-based employment to people with disabilities. The department intends to increase the Virginia employment community's awareness of the national movement and federal support of integrated community-based employment. Virginia's once nationally prominent role in integrated employment needs to be redeveloped.

Activity 1	Employment First Statewide Summit (annual)
Long Range Goal	Develop a shared statewide understanding of the goals of the Employment First Initiative and communicate state goals and priorities with stakeholders

Perceived Barriers/Challenges	The annual Employment First Summits can be provider driven and self advocates need to have an equal voice; Employment First expectations are not disseminated by agency leaders to front line workers; Inconsistent buy-in from all stakeholders in the Employment First philosophy
Short-term Objectives	Organization of annual Employment First Summits
Agencies Involved	DBHDS, DARS, provider associations, Virginia Association of Community Service Boards (VACSB), advocacy groups (SELN Advisory Group)
Projected Start Date	May 2011
Projected Completion Date	October 2011 and annually thereafter
Product/Results	An Employment First Summit is held annually to review the activities of the previous year and plan for the upcoming year, as well as provide technical assistance to stakeholders

Activity 2	Employment First Regional Summits
Long Range Goal	Develop a shared statewide understanding of the goals of the Employment First Initiative at the local level, communicate state goals and priorities, and identify local priorities.
Perceived Barriers/Challenges	Each region is unique in its attitudes towards integrated community-based employment due to variations in economic conditions and availability of resources.
Short-term Objectives	Conduct at least 4 regional Employment First Summits across Virginia, ensuring that NOVA, Southwest, Central, and Tidewater areas are covered.
Agencies Involved	DBHDS
Projected Start Date	January 2012
Projected Completion Date	Annually
Product/Results	Information about Employment First Initiatives, including policy, strategies, innovation, education, and training materials, are shared across the state.

Activity 3	Set up dedicated website for Employment First
Long Range Goal	Have a dedicated website for stakeholders to access information about Virginia's Employment First initiative. Stakeholders will be able to readily get information on current policies, resources and training material to start implementing Employment First practices; This is where providers could supply information about their services and locations.
Perceived Barriers/Challenges	Financing separate website Lack of web-design expertise at DBHDS

Short-term Objectives	<p>Research other states' Employment First websites to determine what is necessary and customary on a website.</p> <p>Determine if grant or other resources are available to set up the website</p> <p>Develop content requirements for Virginia website</p> <p>Contact and negotiate with web developers</p> <p>Populate site with appropriate information</p>
Agencies Involved	DBHDS, DARS, Virginia Board for People with Disabilities (VBPD)
Projected Start Date	October 2012
Projected Completion Date	September 2013
Product/Results	Virginia will have a user-friendly and informative central location for information about our Employment First Initiative.

Activity 4	Develop Comprehensive system-wide supported employment practice training plan
Long Range Goal	Employment staff at all Community Service Boards (CSBs) and Employment service organizations trained in best practice techniques of supported employment
Perceived Barriers/Challenges	<p>Staff time to participate in trainings is limited</p> <p>Financial support for training is minimal</p>
Short-term Objectives	<p>Using the recent development of the Case Manager training curriculum, develop minimum qualifications needed for practitioners</p> <p>Research current training programs available</p> <p>Identify which trainings are best for, or most suited to, sub sets of stakeholders</p> <p>Develop or customize web based training</p>
Agencies Involved	DBHDS, DARS, DOE
Projected Start Date	October 2012
Projected Completion Date	October 2013
Product/Results	A menu of trainings offered for free to employment staff and stakeholders on best practice of supported employment programs.

Activity 5	Work Incentives & Benefits Counseling Intensive Training for Case Managers and Service Providers
Long Range Goal	Increased level of knowledge, access to, and use of work incentives
Perceived Barriers/Challenges	<p>Federal funding for the program will end soon</p> <p>Lack of consistent access across the state to information on work incentives</p> <p>Current lack of understanding by most stakeholders with regard to work incentives</p>

Short-term Objectives	Build on the trainings provided through the Medicaid Infrastructure Grant, Financially support the WorkWorld decision making software so it can remain available, free of charge, to Virginians with disabilities seeking employment
Agencies Involved	Social Security Administration(SSA), Virginia Association of Community rehabilitation programs (VA ACCESS), Rehabilitation Research and Training Center at Virginia Commonwealth University (RRTC), DBHDS
Projected Start Date	June 2010
Projected Completion Date	Ongoing
Product/Results	Stakeholders will have a greater understanding of work incentives and therefore, less anxiety about seeking employment

Activity 6	Provide Trainings on Innovative Employment Models to Direct Support Staff
Long Range Goal	To have a broad based group of direct support staff knowledgeable in supported employment techniques and practice
Perceived Barriers/Challenges	Perception that Virginia is somehow unique and Employment First will not fit our system Belief that initiating Employment First practices will be too expensive and too staff intensive
Short-term Objectives	Identify cutting edge employment programs and models that can be replicated Partner with training providers to deliver trainings for behavioral health staff Develop grant proposals for financial assistance to fund trainings for ID/DD population
Agencies Involved	DBHDS, RRTC, Association of People Supporting Employment First (APSE)
Projected Start Date	January 2012
Projected Completion Date	September 2013
Product/Results	Each CSB will have staff with knowledge of best practices for providing integrated community-based employment services

Activity 7	Reach out to families and individuals with disabilities regarding employment first
Long Range Goal	Families and advocates are informed about Employment First and employment resources and options.
Perceived Barriers/Challenges	Accessibility of resources; parents and self-advocates don't know what questions to ask and whom to ask; mistrust of services system at times
Short-term Objectives	Develop packet of information on quality employment services Present at conferences, self-advocacy meetings, provider meetings Make information available to educators and business leaders Work strategically with self-advocates on advocating for integrated employment

	services Conduct focus groups to identify what questions parents and self-advocates have
Agencies Involved	DBHDS, Partnership for People with Disabilities, Arc of Virginia, Virginia Advocates united leading together (VAULT), National Association for the mentally Ill (NAMI), VBPD
Projected Start Date	April 2011
Projected Completion Date	May 2012—packet completed Outreach will be ongoing
Product/Results	Multiple presentations on employment first to advocacy groups Based on feedback from focus group , develop packet of information on quality employment services to be presented at meetings and put on website

Activity 8	Strategize on ways to reach out to business communities to educate and increase awareness of employing persons with disabilities
Long Range Goal	Business leaders are involved as advocates for employment opportunities for people with disabilities
Perceived Barriers/Challenges	Stigma of disability
Short-term Objectives	Collaborate with Secretary of Commerce and Trade Office to develop plan to conduct outreach with business communities Develop membership of different business organizations Increase knowledge and understanding of Employment First in the business community(s). Be active participants in the NGA employment of people with disabilities campaign
Agencies Involved	DBHDS, Virginia Business Leaders Network (VBLN), DARS
Projected Start Date	July 2012
Projected Completion Date	September 2013
Product/Results	Employment community in Virginia will have an understanding of the benefits of employing people with disabilities

III. Services and Service Innovation

Virginia will need to make adjustments in its service delivery system as it continues to transition to a more community-based system. There are currently a number of very good integrated employment programs in Virginia which we need to identify and use as potential models for other areas.

Activity 1	Review and revise Waiver Day Support regulations to increase flexibility and emphasis on employment as the priority focus.
Long Range Goal	Revise Day Support focus and train providers on preparing individuals to work
Perceived Barriers/Challenges	Staffing ratios Reimbursements rates Staff training
Short-term Objectives	As part of Medicaid renewal, implement CMS suggested changes to regulations which increase emphasis of services towards integrated community-based employment Remove/Revise current policies and practices regarding transportation that inhibit or prevent individuals from receiving support with transportation in order to access community employment
Agencies Involved	DBHDS,DMAS
Projected Start Date	2011
Projected Completion Date	Date of DS Waiver/ ID Waiver application renewals (2013/2014)
Product/Results	Waiver regulations will emphasize and support individual placement in integrated employment

Activity 2	Allowable Services standardized to be in line with best practice and DARS employment services
Long Range Goal	All DMAS staff have standardized understanding of allowable services for individual and group supported employment
Perceived Barriers/Challenges	Regulations, individual understanding and application of regulations, varied reimbursement for similar services
Short-term Objectives	Identify similarities and differences in applicable regulations Standardize interpretation of regulations Educate DMAS staff on application of regulations
Agencies Involved	DBHDS, DARS, DMAS
Projected Start Date	September 2012
Projected Completion Date	Waiver renewal date of 2014
Product/Results	Standardized application of regulations for individual and group supported employment which will result in equitable reimbursement for these services

IV. Financing and Contracting Methods

In order to motivate service providers to shift away from congregate employment programs and provide integrated community-based employment as one of their potential service offerings, Virginia needs to remove or minimize barriers in the state's existing rate-setting and/or contracting policies/practices.

Funding and billing practices need to be aimed at creating stronger incentives to provide integrated employment supports.

Activity 1	Develop braided funding procedures
Long Range Goal	Virginia vocational rehabilitation and Medicaid funding will be aligned to support integrated employment by incorporating a first dollar down mechanism of braided funding.
Perceived Barriers/Challenges	The state agencies responsible for rate setting and developing policies and procedures for supporting integrated community-based employment are not in line with federal guidance on supporting integrated employment.
Short-term Objectives	Identify ways to allow for developing multiple funding for services Ensure that “double dipping” is not possible
Agencies Involved	DBHDS, DMAS, DARS
Projected Start Date	October 2012
Projected Completion Date	Waiver renewal date of 2014
Product/Results	Billing structure which allows for different funding streams to be involved simultaneously to provide maximum support for individuals in employment services

Activity 2	Review and modify Waiver Employment rates and non-Waiver employment-related funding
Long Range Goal	Develop funding policies and rates that support employment as the priority outcome.
Perceived Barriers/Challenges	State funding limitations
Short-term Objectives	Conduct a review of, and make changes to, rates and payment approaches across the state Allow Medicaid funding for individuals’ transportation when the job coach is not on site with the individual
Agencies Involved	DBHDS, DMAS
Projected Start Date	2011
Projected Completion Date	Waiver renewal date of 2014
Product/Results	Waiver rate structure in line with CMS guidance which emphasized and incentivized delivery of employment services over other services

Activity 3	Further Develop Medicaid funding streams for individuals with behavioral health diagnoses
Long Range Goal	Virginia will have researched additional ways of funding integrated employment

	for individuals with behavioral health diagnoses through Medicaid
Perceived Barriers/Challenges	State funding limitations
Short-term Objectives	Review policies developed in other states regarding funding of employment services for BH. Review CMS guidance about funding and align DMAS regulations
Agencies Involved	DBHDS, DMAS
Projected Start Date	October 2012
Projected Completion Date	July 2014
Product/Results	Potential options for funding employment programs for individuals with behavioral health diagnoses through Medicaid

Activity 4	Further develop Virginia's Use of Ticket to Work program
Long Range Goal	All individuals who qualify for the SSA Ticket to Work Program have knowledge about the program which will lead to increased use of this program
Perceived Barriers/Challenges	Lack of understanding how the program works. Lack of information for individuals on how to access this program, both under DBHDS and DARS
Short-term Objectives	Identify regulations and procedures for accessing the program Educate providers and individuals on how to use the program Produce instructional material on the program
Agencies Involved	DBHDS, DMAS, and DARS
Projected Start Date	October 2012
Projected Completion Date	September 2013
Product/Results	Increased understanding of the program which will lead to increased utilization.

v. Performance Measurement

In order to accurately determine the effectiveness of any Employment First initiative Virginia needs to be able to measure service outcome data for individuals with disabilities who are working. In establishing accurate ways to measure outcomes, the state will be able to set goals for overall performance and identify individual high performance areas. A discussion of current baseline data is outlined below. This section of the Strategic Plan sets goals to improve baseline data and establish outcomes targets.

Activity 1	Establish Accurate Baseline of Employment Data
Long Range Goal	Existing data on employment services and outcomes is identified and shared across state department partners to describe employment outcomes.
Perceived	Security issues

Barriers/Challenges	
Short-term Objectives	Institute MOA's with VEC and DRS for data sharing Identify existing data elements in each department's data sets Identify gaps and needs
Agencies Involved	DBHDS, DARS, DOE, VEC
Projected Start Date	April 2012
Projected Completion Date	September 2013
Product /Result	Signed MOA with DRS and VEC to collect and share employment data

Activity 2	Use shared data to determine employment service and outcome information
Long Range Goal	Have accurate data to measure: Annual baseline information regarding: <ul style="list-style-type: none"> • The number of individuals who are receiving supported employment; • The length of time people maintain employment in integrated work settings; • Amount of earnings from supported employment; • The number of individuals in pre-vocational services as defined in 12 VAC 30-120-211 ; and • The length of time individuals remain in pre-vocational services.
Perceived Barriers/Challenges	Cross-matching of data based on differing parameters
Short-term Objectives	Obtain data sets to compare Identify data fields necessary for analysis Run data cross referencing individuals
Agencies Involved	DBHDS, DMAS, VEC, DARS
Projected Start Date	March 2012
Projected Completion Date	September 2013
Product/Results	Accurate indicators of answers to questions listed above.

Activity 3	Development of employment data gathering methodology
Long Range Goal	To have a data collection system necessary to gather employment data on individuals with disabilities
Perceived Barriers/Challenges	No centralized data collection system over agencies and over disability type Coordination of data collection from multiple types of service providers Coordination with CSB Data Management Committee
Short-term	Research data collection systems which can be integrated into overall data

Objectives	collection system Develop employment data collection items into existing data collection tool Implement data collection through identified system
Agencies Involved	DBHDS
Projected Start Date	January 2012
Projected Completion Date	September 2013
Product/Results	Accurate, reliable data collection tool for employment data so annual baseline information can be established

Activity 4	Develop 1-3 year employment outcomes targets
Long Range Goal	Measurable statewide employment outcome goals
Perceived Barriers/Challenges	Data sets across departments do not have matching fields No centralized data collection tool for employment information
Short-term Objectives	Acquire data for analysis Produce data reports with measures identified in Activity 2 above Work with the SELN and SELN Advisory group to evaluate outcomes and establish practical, achievable goals for following year
Agencies Involved	DBHDS
Projected Start Date	October 2012
Projected Completion Date	March 31, 2013 and quarterly thereafter
Product/ Result	Established employment outcome targets that meaningfully increase: <ul style="list-style-type: none"> • The number of individuals who are receiving supported employment; • The length of time people maintain employment in integrated work settings; • Amount of earnings from supported employment; • The number of individuals in pre-vocational services as defined in 12 VAC 30-120-211 ; and • The length of time individuals remain in pre-vocational services.

Establishing a Baseline, Data Collection and Performance Measurement

Virginia recognizes the important first step of evaluating its integrated day opportunities is to establish a baseline of our current services and capacity. The DOJ Settlement Agreement requires the following annual baseline data be established for individuals receiving services through HCBS waivers:

- A. Number of individuals who are receiving supported employment
- B. The length of time people maintain employment in integrated work settings
- C. The amount of earnings from supported employment

- D. The number of individuals in pre-vocational services as defined in 12 VAC 30-120-211
- E. The length of time individuals remain in pre-vocational services.

DBHDS will use this data to begin to measure its progress in meeting the elements of its Strategic Plan for Employment First for individuals with ID or DD receiving HCBS Waiver Services. The Plan outlines goals for the next year to address the limitations in current data with other state agencies and to expand data collection to address other population groups and those being supported through other resources such as DARS' programs.

Methodology: In order to get a baseline of the current services being provided under the HCBS Waiver, DBHDS examined the number of individuals who were receiving individual and group supported employment services under the Medicaid ID, Day Support, and DD waiver programs. DBHDS then tried to determine the number of individuals receiving these services that were currently working. DBHDS cross-checked the individuals who were receiving individual supported employment and group supported employment through the waivers against the Virginia Employment Commission's (Virginia's unemployment insurance agency) employment and wage database to determine the length of time they had worked in integrated settings and the quarterly earnings they had from employment.

To determine the number of individuals receiving pre-vocational services through the Medicaid waivers DBHDS reviewed DMAS data for the number of individuals who were receiving pre-vocational services as defined in 12 VAC 30-120-211. In order to measure the length of time the individuals remained in pre-vocational services the number of months from date they started the service until September 2012 were measured. Please note that data on the number of individuals in supported employment includes people in the target population (ID and DD) where as the data on length of time receiving supported employment services only pertains to people with ID, including those in the Day Support waiver. DBHDS currently only collects this type of data for people with Intellectual Disabilities under the waiver system. As part of the DBHDS Strategic Plan, DBHDS will work with other agencies to develop a standardized data collection system across agencies.

- A. **Number of individuals receiving supported employment through Medicaid ID, Day Support, and DD Waiver:** There are currently 9027 individuals receiving services through the ID waiver, 280 individuals receiving services through the Day Support Waiver, and 581 individuals receiving services through the DD waiver for FY 2011.

Total Individuals Receiving Supported Employment: 852
Individual supported employment -- 194
Group supported employment -- 658

- B. **The length of time people maintain employment in integrated work setting:** The numbers below reflect the number of individuals receiving supported employment services, not necessarily whether they are working. DBHDS does not currently have a means of determining what phase of

the supported employment model individuals are involved in, i.e.: job assessment, job development, placement and training, or follow along support. From the information currently collected it cannot be determined if these individuals are actually working or are in one of these other phases. In addition, as noted previously, there is only data available for the ID and Day Support Waiver. The Strategic Plan has a goal of creating a reliable, accurate data gathering system for employment outcome data across waivers and agencies.

<u>SUMMARY OF SUPPORTED EMPLOYMENT(Individual) REPORT</u>	
# of individuals in Supported employment for <= 12 months	60
# of individuals in Supported employment for 13 to 24 months	16
# of individuals in Supported employment for 25 to 36 months	25
# of individuals in Supported employment for 37 to 48 months	12
# of individuals in Supported employment for > 48 months	11
# of individuals with missing information on length of time	70

<u>SUMMARY OF SUPPORTED EMPLOYMENT(Group - Enclave/Work) REPORT</u>	
# of individuals in Supported employment for <= 12 months	124
# of individuals in Supported employment for 13 to 24 months	31
# of individuals in Supported employment for 25 to 36 months	76
# of individuals in Supported employment for 37 to 48 months	62
# of individuals in Supported employment for > 48 months	213
# of individuals with missing information on length of time	152

C. Amount of earnings from supported employment: Using individual service billing data from the Virginia Department of Medical Assistance Services which was filtered by DBHDS data on individuals with ID receiving supported employment services, and cross-referencing this data with employment and wage information from the Virginia Employment Commission, DBHDS obtained the following baseline information regarding earnings for individuals receiving services on the ID, Day Support, and DD waivers.

The average earnings were \$1,171.08 per quarter based on Virginia Employment Commission information from June '11.

D. The number of individuals in pre-vocational services: The number of individuals in pre-vocational services was 866. Data is available for the ID and Day Support Waivers but not the DD Waiver.

E. The length of time individuals remain in pre-vocational services: Data for the ID and Day Support Waiver show the time individuals remain in pre-vocational services. Data is not available for the DD waiver.

SUMMARY OF Pre-Vocational Services REPORT	
# of individuals in Pre-vocational services for <= 12 months	129
# of individuals in Pre-vocational services for 13 to 24 months	60
# of individuals in Pre-vocational services for 25 to 36 months	110
# of individuals in Pre-vocational services for 37 to 48 months	92
# of individuals in Pre-vocational services for > 48 months	275
# of individuals with missing information on length of time	200

Analysis: There are individuals receiving services through the HCBS waivers who are successful in integrated employment situations but there is a great underutilization of integrated employment by such individuals.

The Department for Aging and Rehabilitative Services, the state’s vocational rehabilitation agency, has a network of over 70 supported employment providers who provide services to individuals who are currently working in integrated community-based employment. DARS reports in their 2010 -2012 LTESS Statistics that currently about 2790 individuals are receiving long term employment support services. Their average hourly wage is \$9.15, and most have maintained their employment for at least 6 months. This capacity is not reflected in the baseline data above. The Strategic Plan developed by DBHDS seeks to build on Virginia’s current employment services system and is focused on increasing the utilization of that system by individuals with disabilities and consequently, more data must be collected across these populations to accurately measure progress.

Building on the DBHDS Strategic Plan for Employment First

The data gathering methodology used in this report will be improved over time as Virginia implements this Plan. Currently, there is not an established system that collects data regarding integrated day activities. The data that DBHDS has been able to compile, which is set forth above, is believed to be incomplete and not fully accurate. DBHDS has defined increasing the collection of accurate, reliable service delivery and outcome data as one of the primary activities that it must accomplish as part of its Strategic Plan.

The data required by the Settlement Agreement will be collected from providers on a quarterly basis and provided to the Regional Quality Councils and the Quality Management system. Each quarter’s data will be compared with the previous quarter’s data to track movement and reviewed by the SELN Advisory Group and the Regional Quality Councils. Regional Quality Councils will review data regarding the extent to which the targets identified through Activity 4 of the Performance Measure section above are met.

Regional Quality Councils will consult with those providers and the SELN Advisory Group regarding the need to take additional measures to further enhance these services. The Regional Quality Councils will annually review the targets and will work with providers and the SELN in determining whether the targets should be adjusted upward.

DBHDS will be working with the SELN Advisory Group and the Regional Quality Councils to improve data collection methodology in accordance with this plan in order to achieve more accurate and complete data. Since the signing of the settlement agreement, DBHDS has worked to compile basic information regarding integrated day activities in the Commonwealth. Baseline information must first be established before targets to increase supported employment can be set. Now that basic information has been compiled, DBHDS will work with the SELN Advisory Group and the Regional Quality Councils to establish targets as required in the Settlement Agreement, based on the basic data above and updated data obtained in accordance with this plan, to meaningfully increase integrated day opportunities. DBHDS anticipates completing this work in partnership with these stakeholders by March 31, 2013 and the employment outcome targets will then be used to measure progress during the quarterly updates and annual Strategic Plan development. As improved data collection is implemented, the employment outcome targets will be updated in accordance with the settlement agreement. The Strategic Plan for Employment First will be updated in September of each year.

The DBHDS Strategic Plan for Employment First will be the basis for a Virginia Strategic Plan for Employment First. As the activities identified in the attached Strategic Plan are successfully accomplished it will necessarily follow that the strategic goals will be achieved, including incorporation of the work of other state agencies supporting individuals with disabilities and a common understanding across these agencies of Employment First concepts and practices.

Appendix A Definitions

- **Supported Employment:** Supported employment means work in settings in which persons without disabilities are typically employed. It includes training in specific skills related to paid employment and the provision of ongoing or intermittent assistance and specialized supervision to enable individuals with disabilities to maintain paid employment. This service is for individuals with developmental disabilities for whom competitive employment at or above the minimum wage is unlikely without ongoing supports and who because of their disability need ongoing post-employment support to perform in a work setting. Supported employment can be provided in one of two models:

Individual supported employment is defined as intermittent support, usually provided one-on-one by a job coach to an individual in a supported employment position who, during most of the time on the job site, performs independently.

Group supported employment is defined as continuous support provided by staff to eight or fewer individuals with disabilities in an enclave, work crew, entrepreneurial model, or bench work model. An entrepreneurial model of supported employment is a small business employing fewer than eight individuals with disabilities and usually involves interactions with the public and with coworkers without disabilities. An example of the bench work model is a small, nonprofit electronics assembly business that employs individuals without disabilities to work alongside eight or fewer individuals with significantly complex needs and provides daily opportunities for community integration. The individual's assessment and Individual Support Plan must clearly reflect the individual's need for skill-building and supports to acquire or maintain paid employment. [Source: Virginia Medicaid Manual]

- **Integrated employment**
DBHDS, in developing its Employment First Policy, defines Integrated Employment as work providing a minimum or commensurate wage and related benefits in a typical work setting where the employee with a disability has opportunity to interact with non-disabled co-workers, has an opportunity for career advancement, and is preferably engaged full time.
- **Prevocational Services**
Prevocational services are defined as services aimed at preparing an individual for paid or unpaid employment. The services do not include activities that are specifically job-task oriented but focus on concepts such as accepting supervision, attendance, task completion, problem-solving, and safety. Compensation, if provided, is less than 50% of minimum wage. Prevocational services are provided to individuals who are not expected to join the regular work force without supports or participate in a transitional sheltered workshop program within one year of beginning waiver services (excluding supported employment programs). [Source: Virginia Medicaid Manual]
- **Non- Work Community-based Services**

These services include all services that are located in the community rather than a facility and do not involve paid employment. These activities focus on supporting people with disabilities to access community activities where most people involved do not have disabilities. These activities include general community integration activities such as recreation and leisure, improving psychosocial skills, activities of daily living practiced in the community and volunteer experience. This service category is also referred to as Community Integration or Community Participation Services and includes community volunteer activities and recreational opportunities. [Source: SELN State Strategic Employment Assessment]

Appendix B:
SELN AG STRATEGIC ASSESSMENT



State Strategic Employment Assessment
August 2008

Virginia
December 18, 2009

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Introduction

This assessment was developed to assist state intellectual and developmental disabilities (ID/DD) agencies in reviewing state policy, practice and strategy that impact on opportunities for integrated employment. It incorporates elements that research suggests support high rates of participation in integrated employment. For the purposes of this document integrated employment is defined as working for pay in a community-based job where most people do not have disabilities. This may include competitive employment, individual supported employment, self-employment, or group supported employment including enclaves and mobile work crews that meet the definition of competitive employment used in the Rehabilitation Act.

Wherever possible states are encouraged to distinguish between specific employment outcomes in responding to this assessment; please see the Glossary for definitions of different employment and day service outcomes. After the assessment is completed, SELN staff will develop a summary containing recommendations for each state's work plan. States that renew their SELN membership may be asked to update their initial assessment so that recent activity towards improving integrated employment outcomes are reflected and additional objectives or action steps may be added to their work plan.

Assessment Process

The assessment incorporates four major elements:

1. Documentation of the state agency's anticipated **goals and outcomes** related to participation in the State Employment Leadership Network (to be completed by state ID/DD agency).
2. Collection of **documents and other resources** that describe the state's system, mission and strategies for providing employment and day supports (to be completed by state ID/DD agency).
3. Completion of a **qualitative review** of state integrated employment practice and strategy (SELN Project staff).
4. Development of a **longitudinal summary** of state employment participation and funding using data from the Institute for Community Inclusion's (ICI) National Survey of Day and Employment Programs and data from other secondary sources including the Rehabilitation Services Administration, U.S. Census and Social Security Administration (SELN Project staff).

The assessment process consists of: (a) an initial discussion between the member agency and SELN staff, (b) a description of goals and existing state strategy and practice, and (c) a review of documents that describe employment policy and strategy. SELN staff will conduct a site visit to each state to discuss and complete a qualitative summary of state policy and practices using the assessment framework as a guide. A Supplement to the Assessment is also available to gather input from providers and other stakeholders. The Supplement is available in electronic document form, and also as an online survey. The online survey results can be easily collected and shared with the state agency contacts in a report format.

Participating state agency officials are asked to assist SELN staff by defining the goals and outcomes the state intends to achieve through project participation; gathering and reporting information on the state's current statutes, policies and rules regarding the provision of integrated employment services;

and providing a short summary of the current approaches the state used to achieve integrated employment outcomes.

Assessment Framework

The assessment will address the following key elements and questions within ICI's Framework for Employment:

- I. Strategic goals and operating policies
- II. Leadership
- III. Financing and contracting methods
- IV. Training and technical assistance
- V. Interagency collaboration
- VI. Services and service innovations
- VII. Employment performance measurement, quality assurance, and program oversight

A Framework for Employment

This table includes a detailed summary of each element, including descriptors and examples of state strategies. The elements come from ICI's Framework for Employment, collected through extensive experience and research conducted within states. The next few pages include each of the seven key elements along with descriptors and examples. This information represents a series of practices demonstrated to be effective at enabling states to develop and sustain high-performing integrated employment systems. Please read through pages 5-12 before completing the actual Assessment. The questions in the Assessment sections (A-C) are designed to capture a snapshot of your state. Rate your level of agreement with each statement, jot notes and gather input from others. You are encouraged to refer to attachments or resource materials whenever possible and applicable.

Strategic Goals and Operating Policies		
Element	Descriptors	Examples of the Strategy
<p>State mission, goals and operating policies emphasize employment as a preferred outcome.</p>	<p>There is a clear understanding across stakeholders of the philosophical beliefs that support the state's service delivery model.</p> <p>Short and long term policy goals establish clear benchmarks for expanding integrated employment.</p> <p>The state's commitment to furnishing services that enable individuals to obtain employment is emphasized by state policy and regulation.</p> <p>State practices clearly support employment and allow and encourage stakeholders to use innovative methods to meet policy expectations.</p> <p>The state agency allocates resources including staff dedicated to employment and clear accountability at all levels (state, county, regional, area).</p> <p>Local service management units (e.g. county or area boards/agencies) have flexibility to initiate pilot activity or direct</p>	<p>Concrete annual goals address increasing employment outcomes. (FL, CO)</p> <p>State case managers identify employment as the priority outcome/service for all individuals receiving services or entering the system.</p> <p>Employment outcomes have been clearly defined at the state level.</p> <p>Stakeholders have a common understanding and definition of a successful outcome. (OK)</p> <p>A policy that clearly states employment as the preferred outcome for day supports. (WA, OK)</p> <p>ISP process requires the inclusion of employment goals. (CO)</p> <p>Requirement that each individual who is not working complete a situational assessment in a community job site every three years. (TN)</p> <p>Individuals are supported in jobs outside of the hours of 9 to 5.</p>

Strategic Goals and Operating Policies

Element	Descriptors	Examples of the Strategy
	<p>resources toward employment innovation and development.</p>	<p>The state does not require a minimum number of hours of support.</p> <p>State level program manager(s) focus on policy, outcomes management and contracting. (OK, WA, CO)</p> <p>Regional/local program staff work with providers and stakeholders around employment. (WA, NH, FL)</p> <p>Family or other community members can provide employment supports.</p> <p>Expansion of self determination and individual budgets with a focus on the achievement of employment in integrated settings.</p>

Leadership

Element	Descriptors	Examples of the Strategy
<p>Local and state level administrators are clearly identifiable as “champions” for employment.</p>	<p>Central office has a full or part-time position dedicated to employment.</p> <p>Local regions have dedicated staff persons that focus wholly or in part on employment.</p> <p>A network of dedicated and longstanding stakeholders (within the state system and beyond) continually work towards furthering employment in the state.</p> <p>High-level staff communicate a continuous and consistent employment message on a regular basis across a variety of audiences and formats.</p>	<p>County coordinators that are specifically focused on day/employment supports have enabled targeted success in furthering employment. (WA)</p> <p>Florida has an individual in each regional office to spearhead the employment initiative.</p> <p>Several states have established working groups focused specifically on employment strategy and policy.</p> <p>PA has point individuals identified in each county and region that connect regularly. MA has developed cross stakeholder Employment Solutions Teams at both the regional and state levels include state agency staff, providers, self advocates and family advocates.</p>

Financing and contract methods

Element	Descriptors	Examples of the Strategy
<p>Funding mechanisms and contracts with providers emphasize employment as the preferred outcome.</p>	<p>Providers receive greater financial compensation for community employment compared to other outcomes.</p> <p>Contracts and funding levels provide incentives for integrated employment.</p> <p>Goals and/or benchmarks for achieving integrated employment outcomes are included in provider contracts and operating agreements.</p>	<p>Funding allocations and reimbursement rates emphasize employment as a preferred outcome. (TN, CT, OK, FL)</p> <p>Funding is portable between non-work services and employment.</p> <p>Providers have consequences for not meeting goals to increase employment and are rewarded if they do.</p> <p>The state institutes a moratorium for new funding for sheltered employment. (VT)</p> <p>Financial incentives to increase employment; use of multiple or pooled funding sources; flexible use of Medicaid waiver funding.</p> <p>Alternate models, particularly community based non-work, are not better funded than integrated community employment.</p> <p>Pilot programs for funding are encouraged at the local level, such as outcome-based funding for follow along support in Mecklenberg County, NC.</p>

Training and technical assistance

Element	Descriptors	Examples of the Strategy
<p>There is a sustained and significant investment in employment-related training and technical assistance.</p>	<p>Training and technical assistance is available to providers to support organizational change and development.</p> <p>Competency-based training is expected or required for direct support professionals working in employment supports</p>	<p>Employment staff that provide direct supports are required to complete a basic training course in employment support. (ME, TN)</p> <p>Provider level technical assistance is available to support organizational development. (CT, TN, CO)</p> <p>Statewide conferences such as Washington’s Ellensburg Conference and other forums showcase innovation and emphasize employment.</p> <p>Training for direct support staff is available at low or no cost. (CT, CO)</p> <p>Support for conversion of sheltered workshops into individualized supported employment opportunities. (VT)</p>

Interagency collaboration

Element	Descriptors	Examples of the Strategy
<p>Through interagency agreements and relationships, provider collaboration, and outreach to stakeholders, employment is shared as a common goal.</p>	<p>Cooperative networks exist within the provider community and across state agencies to support employment goals.</p> <p>Specific marketing and outreach efforts are geared at all levels of stakeholders including policymakers, families, providers, state agencies, individuals, and the business community to ensure that there is a unified outreach effort promoting community employment.</p>	<p>Local training councils direct resources for employment TA and training. (NH)</p> <p>ID/DD coordinates funding with VR for job placement.</p> <p>State working groups exist for employment development. (CO, IN, MN)</p> <p>Newsletters, brochures and other agency communication highlight employment.</p> <p>Partnership with agencies including DOL, VR, DOE, and provider associations in providing employment-related training and technical assistance. (PA)</p> <p>Pilot project involving VR counselors co-locating with Community Centered Board staff. (CO)</p>

Services and service innovation

Element	Descriptors	Examples of the Strategy
<p>The state ID/DD agency works to create opportunities for providers, individuals, and families to make optimum use of the resources available for employment. This includes the dissemination of information related to creative strategies to support individuals in employment.</p>	<p>The state targets transition-age individuals to move directly into employment opportunities.</p> <p>Comprehensive benefits-planning is available to individuals and their families when choosing employment options.</p>	<p>Targeted funding for employment services for youth and young adults between the ages of 16 and 26 in transition to adult life. (PA)</p> <p>Outreach projects target transition age students and families prior to graduation. (King County Parent Training Initiative)</p> <p>Local innovation drives strategy: King County in Washington developed an innovative government employment initiative that spread to state government and other counties.</p>

Employment performance measurement, quality assurance, and program oversight

Element	Descriptors	Examples of the Strategy
<p>Comprehensive data systems that are used as a strategic planning tool to further the state's goals of increasing employment.</p>	<p>The state collects and publishes data on employment outcomes.</p> <p>Information on employment outcomes is collected on a regular basis and shared in summary form with stakeholders.</p> <p>Data are used to inform strategy and contracting.</p>	<p>Core outcome variables including individual earnings, hours of employment, benefits, level of workplace integration, and job satisfaction are assessed on a regular basis. (FL, NH, WA, MA)</p> <p>Provider level employment data are made available to consumers and families.</p> <p>The provision of data to the state is a requirement in provider contracts.</p>

Strategic Assessment

Section A: Anticipated Goals or Outcomes Related to Participation in the State Employment Leadership Network

<p>Please describe the specific outcomes you plan to achieve by participating in the Network.</p>	<ul style="list-style-type: none"> ✚ To move VA forward by increasing the numbers of individuals with DD in Supported Employment under Waiver Services and non Waiver services by a percentage to be determined by advisory board. ✚ To reestablish DBHDS' investment in integrated employment ✚ To collaborate with key state agencies (DRS, DOE, etc) to combine resources and initiatives to improve opportunities for people with DD. ✚ To educate and raise awareness to employment service organizations, providers, individuals and families about the positive outcomes and financial benefits of integrated employment. ✚ To increase training opportunities at low/no cost regarding job coaching, building business relationships, etc.
<p>Identify and describe the strengths of your state's current employment services or network. Include exemplary programs and services, operational practices, funding policies, etc.</p>	<ul style="list-style-type: none"> ✚ Our Waiver funding rates were increased to match DRS's rates in 2008 ✚ There are pockets of excellence throughout the state agencies, private providers, and university affiliated centers that can serve as role models. ✚ Va has an active MIG (FY 2009 \$750,000) ✚ Strong lobby groups (VaAccses, Virginia Network of Private Providers, etc) ✚ Some large lucrative Employment Service Organizations ✚ MIG support of WIPA's, Medicaid Works, Medicaid Buy In ✚ Strong commitment by the state DD agency to increase competitive employment opportunities for persons with DD ✚ Recent study by the Va. Joint Legislative Audit and Review Commission on ASD services in Virginia cited the lack of employment opportunities for persons with ASD as a major area of concern
<p>Identify and describe needed improvements in employment services, programs that do not achieve identified goals or outcomes, areas of consumer, provider or staff complaint, vulnerabilities, etc.</p>	<ul style="list-style-type: none"> ✚ Too many people in day habilitation centers (day support) ✚ Need to increase/install incentives for community employment ✚ Need to decrease incentives for day habilitation services (example: DRS granted ARRA monies to 2 large workshops in VA FY 2010) ✚ Despite funding changing for SE through Waiver, the service definitions don't match with DRS and some services billable under DRS are not billable under Waiver (i.e. phone calls, travel time for coaches) ✚ Lack of awareness of expanded SE Waiver ✚ Individuals/families mistaken about losing benefits or SSI if they work.
<p>List and briefly describe the primary barriers to improving identified employment outcomes. Please be as specific as possible.</p>	<ul style="list-style-type: none"> ✚ Day habilitation units end up paying more than SE rates (day hab rates are units of 1 to 2.99 hours) where as SE rates are 1 hour ✚ Not all day hab. Providers are trained in employment or even prevocation. ✚ "Order of Selection" through DRS hindered individuals from getting services and forced providers to lay off staff (then categories opened up in November 09, so providers are not sure whether to rehire) ✚ DBHDS/ODS absence in involvement in integrated employment for years, Having to re-establish position and reputation.

Identify existing opportunities or resources that can be tapped to facilitate the efforts to improve employment outcomes.

- ✚ Medicaid Infrastructure Grant
- ✚ VCU Research Rehab and Training Center staff support (small or large scale)
- ✚ VCU/Partnership for People with Disabilities collaboration
- ✚ Virginia Board for People with Disabilities (VBPD) may have grants and/ or initiatives to partner with
- ✚ CMS's increase in person centered language and values
- ✚ VA's individual service plans under Waivers are "person-centered" plans based on Person Centered Thinking
- ✚ Highlight exemplary programs across state and use as role models (Project SEARCH, others)

Section B: Documents or Other Resources

Please forward copies of all statutes, policies, regulations, procedures and other documents related to the employment of individuals with developmental disabilities, including:

[√- Provided, NA- Not Applicable or Not Available]

I. Strategic goals and operating policies	
✓	1. State ID/DD agency mission and goal statement(s)
N/A	2. Statements of broad policy directions or commitments to achieving identified employment outcomes
✓	3. Specific state policy goals related to the achievement of employment outcomes for individuals with developmental disabilities
✓	4. Operating policies related to the achievement of employment outcomes for individuals with developmental disabilities
✓	5. Regulations pertaining to the provision of employment and other day services
N/A	6. State agency organizational structure with respect to the provision of employment and day supports

II. Leadership	
✓	1. Organizational chart with areas of responsibility or focus
✓ partial	2. Recent releases regarding the agency's support of employment activity (newsletters, Annual reports, etc.)
✓	3. Examples of how administrators have communicated the employment message both internally and externally (Bulletins, Proclamations, etc.)

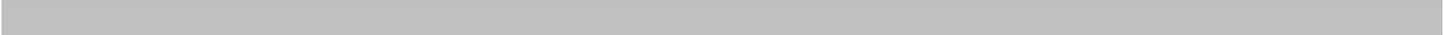
III. Financing and contracting methods	
✓	1. Service definitions of supported employment included in the state's 1915(C) Medicaid waiver programs.
✓	2. Service definitions for day habilitation and other supports furnished under the state's 1915(C) Medicaid waiver programs.
✓	3. Sample provider agency contracts for the provision of employment supports
✓ partial	4. Funding and rate structures for employment and other day service supports

IV. Training and technical assistance	
✓	1. Training requirements and/or curricula for state agency personnel involved in employment, including case managers or service coordinators
✓	2. Training requirements and/or curricula for direct support professionals

V. Interagency collaboration	
✓	1. Agreements or Memoranda of Understanding with other state agencies regarding employment services (including vocational rehabilitation, department of education, and workforce development)
✓	2. Other documents which illustrate current working relationships with other entities around areas such as transition planning

VI. Services and service innovation	
✓	1. Benefits planning resources provided to individuals and families
N/A	2. Resources available to transition age students and their families to encourage them to choose employment over other services options
N/A	3. Information disseminated about creative strategies to support individuals in employment

VII. Employment performance measurement, quality assurance, and program oversight	
	1. Quality standards for employment and other day service supports
✓ see service definitions	2. Description of quality assessment and monitoring procedures for employment services
✓	3. Data summaries or outcome reports related to employment and other day supports



NOTES:

Section C: Summary of State Practice and Strategy

Please respond to the following questions in preparation for the visit and to make our use of time with you as efficient and productive as possible. The qualitative summary of state strategy and practice will be completed by Network staff through the interviews, meetings and discussions at the on-site visit.

The survey questions are based on elements from ICI's Framework for Employment collected through extensive experience and research conducted within states. The questions represent a series of practices demonstrated to be effective at enabling states to develop and sustain high-performing integrated employment systems. The questions are designed to get a snapshot of your state in each area. Please rate your level of agreement with each statement. You are encouraged to refer to attachments or resource materials whenever possible and applicable.

Please note that for the purposes of this self-assessment the term, "employment" refers to integrated employment for persons with developmental disabilities. See the Glossary for definitions of different types of employment and day services.

1. Strategic goals and operating policies:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. There is a clear understanding across stakeholders of the philosophical beliefs that support the state's service delivery model.					✓	
b. The state agency has measurable goals with clear benchmarks with respect to achieving integrated employment outcomes.				✓		
c. The state agency has an initiative around expanding employment.		✓				
d. Requirements are placed on service providers for achieving employment outcomes for individuals with disabilities.			✓			
e. Employment is addressed within the individual service planning process.		✓				
f. Employment related staffing patterns at the state, local or regional levels including program development and quality assurance resources are sufficient.					✓	

Question or Element	Response
What are the measurable goals of your system with respect to the achievement of integrated employment outcomes?	<ul style="list-style-type: none"> ✚ The formal AFP goal ✚ This can be developed through advisory group, esp. once we get accurate employment data
How are system level goals communicated to stakeholders?	<ul style="list-style-type: none"> ✚ Currently, rather informally. Through various groups like: TACIDD, VaLID, informal meetings via different stakeholder groups (i.e. ASA groups, The Arc, ESO Advisory committees, Parent to Parent groups, conference presentations, etc)
How is integrated employment defined in your state's developmental disabilities system? Include all specific employment models.	<ul style="list-style-type: none"> ✚ Area to be developed, Employment first policy plus integrated emp definition
How are other service options including sheltered employment and non-work services defined?	
Briefly describe state ID/DD agency initiatives aimed at improving integrated employment outcomes over the past five years.	<ul style="list-style-type: none"> ✚ Implementation of SIS (indirect impact) ✚ Person Centered Plan (ISP) which is meant to be an "employment first" document/process ✚ Participation in SELN ✚ Becoming an inclusive DD agency rather than ID
What requirements are placed on service providers for achieving employment outcomes for individuals with disabilities?	<ul style="list-style-type: none"> ✚ See Waiver regs & DRS SE documentation
How is employment addressed for persons receiving support by the state's individual service planning process?	
Outline employment related staffing patterns at the state and local or regional levels including program development and quality assurance resources.	

2. Leadership:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. Leadership within the state ID/DD agency clearly supports employment as a top priority.		✓				
b. There is a specific staff person identified within the ID/DD state agency who is responsible for the development of employment policy, strategy and training.	✓					
c. There is a core network of stakeholders within the state who are committed to and advocate for employment.		✓				
d. There are specific staff people at the local or regional level who are responsible for managing the development of employment services and supports.			✓			

Question or Element	Response
Who are the champions for employment as a primary goal within the state ID/DD agency? What factors have made them successful or unsuccessful?	<ul style="list-style-type: none"> ✚ Most of the office of DS staff, my office. In process of revitalizing this thinking. Cheri Stierer and Lee Price are key players in pushing the department towards policy and disseminating the word at a systems level. ✚ The ODS had lost employment staff 2 years ago when that staff left for another position. Has been 10 years or so since Employment was an active goal in ODS.
How successful have leaders been in rallying widespread support for employment as a priority? What strategies have been put into place to make this happen?	✚ Stakeholder and advocate climate is improving with availability of Community Resource manager, (i.e. Emily H) and co-worker, Cindy Gwinn' to visit various state groups, develop repore and educate on SELN /employment role.
What communication and outreach strategies are used?	
Who participates regularly in working groups to discuss employment issues?	

3. Financing and contracting methods:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. The rate(s) and rate structures in place for individual supported or competitive employment encourage employment over other day service options.			✓			
b. Financial incentives are offered to providers to increase integrated employment outcomes.				✓		
c. Other resources outside of the state ID/DD agency are used to support integrated employment for individuals with developmental disabilities.	✓					

Question or Element	Response
What are the rate(s) and rate structures in place for <i>individual supported or competitive employment</i> ? Provide more than one if necessary.	Rate: <i>see Waiver Rates document (based on ESO rates)</i> Billing unit or structure: <i>Hour</i> Source(s) of funds: <i>HCBS 1915(b) or DRS (VR)</i> <i>See fee schedule</i>
What are the rate(s) and rate structures in place for <i>group supported employment</i> including enclaves or mobile work crews?	Rate: <i>same as above</i> Billing unit or structure: Source(s) of funds:
What are the rate(s) and rate structures in place for <i>sheltered employment</i> ?	Rate: Billing unit or structure: Source(s) of funds: Sheltered employment can only be billed as Prevocation under waiver, otherwise LTESS might pick up IF available.
What are the rate(s) and rate structures in place for <i>facility-based non-work services</i> (day habilitation or day activity services)?	Rate: Billing unit or structure: Source(s) of funds: N/A
What are the rate(s) and rate structures in place for <i>community-based non-work services</i> (e.g. community integration services)?	Rate: Billing unit or structure: Source(s) of funds: N/A
What financial incentives are offered to providers to increase integrated employment outcomes	<i>Ticket to Work..... otherwise nothing</i>
What resources outside of the state ID/DD agency	 Refer to attached documents from DRS, MIG, WIPA, VBPD, VEC, etc.

Question or Element	Response
are used to support integrated employment for individuals with developmental disabilities?	

4. Training and technical assistance:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. The state ID/DD agency provides or funds sufficient training opportunities for direct support professionals working in employment.					✓	
b. The state ID/DD agency offers technical assistance or consultation resources to provider organizations to assist them in expanding or improving employment outcomes.			✓			
c. State ID/DD agency personnel including case managers receive training on employment supports and outcomes.				✓		

Question or Element	Response
What training does the state ID/DD agency provide or fund for direct support professionals working in employment?	✚ None known
What technical assistance or consultation resources does the state ID/DD agency offer to provider organizations to assist them in expanding or improving employment outcomes?	
What technical assistance or other resources are offered to provider organizations to help them deal with the challenges associated with organizational change?	
What training do state ID/DD agency personnel receive on employment supports and outcomes?	

5. Interagency collaboration:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. Informal relationships or collaborations exist among state, regional and provider agencies, and employers to support integrated employment.			✓			
b. Formal interagency agreements or collaborations exist to support integrated employment.			✓			
c. Resources are provided to schools to assist in the development of transition plans from school to work.						✓

Question or Element	Response
Who are the key integrated employment stakeholders in your state?	✚ DRS, DOE (transition), RRTC, VBPD, VaAccses, Office of Comm Integration, etc.
What informal relationships or collaborations exist among state, regional and provider agencies, and employers to support integrated employment?	
What formal interagency agreements or collaborations exist to support integrated employment?	
What resources are provided to schools to assist in the development of transition plans from school to work?	✚ Unknown to this writer. However, DOE is in discussion and partnership with DBHDS to develop such via JLARC>

6. Services and service innovation:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. The state ID/DD agency supports and encourages innovation in employment services.				✓		
b. The state ID/DD agency disseminates information about creative strategies to support individuals in employment.				✓		

c. Transition-age students and their families are encouraged to choose employment over other services options.					✓	
d. Resources are available to individuals waiting for services and their families to encourage them to choose employment over other service options.					✓	
e. The case management/service coordination process supports employment as a primary goal.					✓	

Question or Element	Response
How does the state ID/DD agency support and encourage innovation in employment services?	
What are some examples of actions the agency took to facilitate innovations?	
How are benefits planning resources provided to individuals and families?	🚦 WIPA services, Va One Stop, DRS counselor
What resources are available to transition age students and their families to encourage them to choose employment over other services options?	
What resources are available to individuals waiting for services and their families to encourage them to choose employment over other services options?	



7. Employment performance measurement, quality assurance, and program oversight:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Sure
	1	2	3	4	5	6
a. The state collects and publishes data on employment outcomes.			✓			
b. Information on employment outcomes is collected on a regular basis and shared in summary form with stakeholders.				✓		
c. Data are used to inform employment strategy and contracting.				✓		

d. Core outcome variables including individual earnings, hours of employment, benefits, level of workplace integration, and job satisfaction are assessed on a regular basis.				✓		
e. Provider level employment data are made available to consumers and families.				✓		
f. Accountability for achieving employment outcomes is managed at multiple levels (state, county/region, or local level).				✓		

Question or Element	Response
What type of employment data are collected on individuals, providers, and services?	✚ This entire section is very much lacking. ODS is developing new data systems to more accurately track Waiver service numbers (i.e. employment and day hap). Also, collaborating with DRS and DOE to integrate data systems and share info.
What key employment-related variables are collected, how are they collected and how often?	
How is employment data used by the state ID/DD agency, county/regional ID/DD agencies and provider agencies? Is it shared with stakeholders?	
How is employment addressed in state quality assurance systems or processes?	
How is accountability for achieving employment outcomes managed at a state, county/region, or local level?	

Employment Services and Programs

Integrated Employment includes all *competitive employment, individual supported employment, group supported employment, and self-employment related supports*. Services are provided in a community setting (rather than facility-based) and involve paid employment of the participant.

- A. **Individual Employment** includes *individual supported employment services and competitive employment services*.
- B. **Individual Supported Employment** services are:
 - Ongoing job-related supports are provided to the worker with a disability in order to maintain employment at an integrated job site, and
 - Individuals earn at least minimum wage and are an employee of the community business.
- C. **Competitive Employment** services are:
 - Time-limited job-related supports or job placement services provided to the worker with a disability in order to obtain employment.
 - Individuals earn at least minimum wage and is an employee of the community business. This includes transitional employment.
- D. **Group Supported Employment** services are groups of employees who have disabilities who work together on a job site or employees who typically move to multiple work sites receiving continual support. This service includes *enclaves* and *mobile work crews*.
 - **Enclaves** are:
 - Groups of up to 8 employees who have disabilities working together in a site where most people do not have disabilities.
 - **Mobile Work Crews** are:
 - Groups of employees with disabilities who typically move to different work sites where most people do not have disabilities.
- **Self-Employment Services** include self-employment, home-based employment, and small business ownership that is controlled/owned by the individual. This category does not include a business that is owned by an organization or provider.

Facility-Based Work includes all employment services which occur in a segregated setting (rather than community-based) and where the majority employees have disability.

- These activities occur in settings where continuous job-related supports and supervision are provided to all workers with disabilities.
- This service category is also referred to as Sheltered Workshops, Work Activity, or Extended Employment programs.
- This category also includes Work Center Based Employment such as affirmative industries, NISH, NIB, and other federal and state set-asides that do not meet the definition of group supported employment.

Non-Work Services and Programs

- A. **Individual Community-Based Non-Work** includes all services that are located in the community (rather than facility-based) and do not involve paid employment of the participant.
- These activities focus on supporting people with disabilities to access community activities where most people do not have disabilities.
 - Includes general community activities, volunteer experiences, recreation and leisure, improving psychosocial skills, or activities of daily living.
 - This service category is also referred to as Community Integration or Community Participation Services.
- B. **Facility-Based Non-Work** includes all services that are located in a segregated setting (rather than community-based) and do not involve paid employment of the participant.
- These activities include but are not limited to: psycho/social skills, activities of daily living, recreation, and/or professional therapies (e.g., O.T., P.T., S.T.).
 - Continuous supports and supervision are provided to all participants with disabilities.
 - Includes Day Activity, Day Habilitation, and Medical Day Care programs.

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For More Information:

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**Appendix C:
DBHDS Creating Opportunities Plan**

CREATING OPPORTUNITIES

*a plan for advancing
community-focused services
in Virginia*



Creating Opportunities

*A Plan for Advancing Community-
Focused Services in Virginia*

IMPLEMENTATION PLAN

Identifying the priorities and actions needed

July 25, 2011

DBHDS

Virginia Department of
**Behavioral Health and
Developmental Services**



COMMONWEALTH of VIRGINIA

JAMES W. STEWART, III
COMMISSIONER

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TO: Interested Parties
FROM: James W. Stewart, III, Commissioner
DATE: July 25, 2011
RE: *Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia*
Implementation Plan

I am pleased to share with you the attached Implementation Plan for strategic initiatives included in the Department of Behavioral Health and Developmental Services' (DBHDS) *Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia*. This report identifies the priorities and actions needed to successfully advance initiatives that will enable DBHDS to 1) build on and continue progress in advancing the DBHDS vision, 2) support the Governor's expressed intentions to achieve a Commonwealth of Opportunity for all Virginians, and 3) promote services system efficiencies in a manner that is effective and responsive to the needs of individuals receiving services and their families.

In spring 2010, planning teams were appointed to assist DBHDS in identifying strategic initiatives for the Commonwealth's behavioral health and developmental services system. Twelve initiatives were selected that focus on the following areas:

- Behavioral Health Emergency Response Services
- Peer Services and Supports
- Substance Abuse Treatment Services
- Effectiveness/Efficiency of State Hospital Services
- Child and Adolescent Mental Health Services
- Developmental Services and Supports Community Capacity
- Autism Spectrum Disorders/ Developmental Disabilities
- Housing
- Employment
- Case Management
- DBHDS Electronic Health Record (EHR) and Health Information Exchange (HIE)
- Sexually Violent Predator (SVP) Service Capacity

Implementation teams were formed to help develop achievable and impactful objectives and priority actions needed to accomplish the initiatives. Over 200 individuals have been involved in this effort including representatives from DBHDS central office, state hospitals and training centers, community services boards, private providers, consumers, various departments of state government and other stakeholders. Reports with background and recommendations are being completed for several of the strategic initiatives. If not already online, reports will soon be available at www.dbhds.virginia.gov/CreatingOpportunities.htm. DBHDS will use existing resources for many of the needed actions, while recommendations that call for expansion of targeted services will require additional resources.

I am grateful to the many individuals who lent their time and talents to this important work. Thanks to their efforts, the outcomes achieved by implementation of *Creating Opportunities* will lead to a more effective and efficient system of services and supports that provides the greatest opportunity for those with mental illness, substance-use disorders, or developmental disabilities and their families across the Commonwealth.

Creating Opportunities: A Plan for Advancing Community-Focused Services in Virginia

Creating Opportunities Implementation Plan

Identifying the priorities and actions needed

In early 2010, DBHDS began work on “**CREATING OPPORTUNITIES**,” a strategic plan with the goal of improving services and supports for Virginians with mental illness, substance-use disorders and developmental disabilities. Work groups, including representatives from the DBHDS central office, state hospitals and training centers, community services boards, private providers, consumers and other stakeholders, identified achievable and objectives, along with priorities and resources needed to accomplish those objectives in the following areas:

- Behavioral Health Emergency Response Services
- Peer Services and Supports
- Substance Abuse Treatment Services
- Effectiveness and Efficiency of State Hospital Services
- Child and Adolescent Mental Health Services Plan
- Developmental Services and Supports Community Capacity
- Autism Spectrum Disorders/ Developmental Disabilities
- Housing
- Employment
- Case Management
- DBHDS Electronic Health Record (EHR) and Health Information Exchange (HIE)
- Sexually Violent Predator (SVP) Service Capacity

Strengthen the responsiveness of **BEHAVIORAL HEALTH EMERGENCY RESPONSE SERVICES** and maximize the consistency, availability, and accessibility of services for individuals in crisis

The Need

Even with recent initiatives to establish crisis stabilization services, many Virginians do not have access to a basic array of emergency and crisis response services. As a result, high numbers of individuals with behavioral health disorders continue to be involuntarily hospitalized and incarcerated, the most restrictive and costly options available. This could be reduced by increasing access to emergency and crisis response and diversion services, implementing recovery-oriented crisis response practices, and managing intensive services more consistently.

Objectives

- Enhance statewide emergency response and crisis prevention and diversion services capacity.
- Increase the quantity and quality of peer support in the crisis continuum.
- Enhance the Commonwealth’s capacity to safely and effectively intervene to prevent or reduce the involvement of individuals with mental health and substance use disorders in the criminal justice system.

Priorities

1. Expand statewide capacity and fill identified gaps in emergency and crisis response services and expand services that prevent or reduce the need for crisis response services. Based on a statewide assessment, additional resources are needed to expand Crisis Intervention Teams (CIT) and PACT programs, establish police reception and drop off centers and emergency critical time intervention services, and increase purchase of local inpatient psychiatric services.
2. Train services providers on recovery-based emergency and crisis response best practices to increase peer support workers employed in emergency response services and use of psychiatric advance directives and wellness recovery plans.
3. Expand the Cross-System Mapping process to more communities to enable community behavioral health and public safety systems to better understand the consumer’s experience, identify service gaps, explore opportunities for diversion or system improvement, and develop local action plans.

4. Participate as an active partner in interagency suicide prevention initiatives.
5. Participate in a Joint NAMI-Virginia CIT Coalition conference to be held in September 2011.

Report

A report detailing the work of the emergency response services implementation team will be found on the DBHDS website in the near future at www.dbhds.virginia.gov/CreatingOpportunities.htm.

Increase **PEER SERVICES AND SUPPORTS** by expanding peer support specialists in direct service roles and recovery support services

The Need

Peer support and recovery support are enormously helpful for many individuals with mental health, substance use, or co-occurring disorders. However, only 32% of CSBs reported access to peers for persons in crisis. Also, Virginia's DBHDS does not have an office, section, or division for "consumer affairs" that can provide leadership for peer and recovery services as is available in many other states.

Objectives

- Establish an Office of Peer Services and Recovery Supports in the Department's central office.
- Increase the quantity and quality of peer support providers.

Priorities

1. Establish a DBHDS Office of Peer Services and Recovery Supports to promote collaboration and information exchange with the peer community, CSBs, and state facilities and support peer services and recovery supports development across Virginia.
2. Work with DMAS to expand peer support services by changing the state Medicaid plan to add peer support as a distinct service. Providers of this new peer support service would need to demonstrate that they meet competency requirements through a state certification program for peer support specialists.

Increase the statewide availability of **SUBSTANCE ABUSE TREATMENT SERVICES**

The Need

Untreated substance-use disorders cost the Commonwealth millions of dollars in cost-shifting to the criminal justice system, the health care system, and lost productivity, not to mention the human suffering and effects on family and friends.

Objective

- Enhance access to a consistent array of substance abuse services across Virginia.

Priorities

1. Expand statewide capacity and fill identified gaps in the substance abuse services. Based on a statewide assessment, additional investment of resources is needed in medication assisted treatment, detoxification services, uniform screening and assessment for substance abuse, intensive outpatient services, substance abuse case management, community diversion services for young non-violent offenders, peer support services, DRS employment counselors, intensive coordinated care for pregnant and post-partum women who are using drugs, supportive living capability, and residential services for pregnant women and women with children in Southwest Virginia.
2. Implement a substance abuse services workforce development initiative. Additional resources are needed for this initiative.

Enhance the **EFFECTIVENESS AND EFFICIENCY OF STATE HOSPITAL SERVICES**

The Need

There are considerable differences in hospital staffing patterns, facility organizational structures, staff allocations, services, populations, policies, procedures, and practices that may limit state hospitals from operating as efficiently and effectively as possible. In addition, there is significant pressure on hospital civil beds for services that can be provided safely and effectively in the community. For example, over 38% of state hospital beds are currently devoted to treating forensic patients and Virginia has more state psychiatric beds (representing 30% of total bed capacity) for elderly persons than all but four other states.

Objectives

- Improve state hospital service delivery and standardize hospital procedures, as appropriate.
- Safely reduce or divert forensic admissions from state hospitals and increase conditional releases and discharges to the community.
- Define the future roles, core functions, and future demand for services provided by state hospitals.

Priorities

1. Implement a new state facility quality review process with annual consultative audits by peer facilities and central office staff.
2. Expand outpatient restoration services and enhance outpatient forensic evaluations to decrease forensic pressures on state hospital admissions and return individuals to the community safely and quickly. An additional investment of resources is needed to accomplish this expansion.
3. Expand Discharge Assistance Project (DAP) resources to facilitate discharge of additional long-stay state hospital patients.
4. Improve hospital forensic procedures and management of forensic patients.
5. Continue to develop community-based forensic capability through community forensic training and recommended forensic evaluation oversight statutory changes.
6. Study the future roles of state facilities as services system transformation further increases community capacity, particularly services alternative for forensic and older adult populations.

Develop a **CHILD AND ADOLESCENT MENTAL HEALTH SERVICES PLAN** to enhance access to the full comprehensive array of child and adolescent behavioral health services as the goal and standard in every community

The Need

Virginia's behavioral health services for children faces multiple challenges including an incomplete, inconsistent array of services, inadequate early intervention services, a need for workforce development and inadequate oversight and quality assurance. As a first step, the General Assembly directed DBHDS to develop and submit a plan to "identify concrete steps to provide children's mental health services, both inpatient and community-based, as close to children's homes as possible" for consideration during its 2012 session.

Objective

- Increase the statewide availability of a consistent basic array of child and adolescent mental health services.

Priorities

1. Establish a Comprehensive Service Array as a guide for children's behavioral health service development.

2. Expand the following child and adolescent behavioral health services statewide to fill identified gaps in base services. Based on a statewide assessment, this would include regional crisis stabilization units for children and mobile child crisis response units, psychiatric services and case management. Additional resources are needed for this initiative.
3. Continue the current role of the Commonwealth Center for Children and Adolescents for the foreseeable future.
4. Implement a children's behavioral health workforce initiative. Additional resources are needed for this initiative.
5. Improve DBHDS quality management and quality assurance and oversight capacity for child and adolescent behavioral health services. Additional resources are needed for this initiative.

Report

The interim DBHDS plan for children and adolescent mental health services was submitted to the General Assembly on October 1, 2010 and the final plan is due November 1, 2011. The interim report can be found at www.dbhds.virginia.gov/documents/CFS/cfs-Community-Based-BH-Plan.pdf.

Build **DEVELOPMENTAL SERVICES AND SUPPORTS COMMUNITY CAPACITY** that will enable individuals who need such services and supports, including those with multiple disabilities, to live a life fully integrated in the community

The Need

Virginia has a waiting list of over 5,000-persons for the ID and the Families with Developmental Disabilities Supports (IFDDS) waivers. The Department of Justice's (DOJ) report on the Central Virginia Training Center says that Virginia needs to ensure that community services are available as alternatives to institutional placements and that greater service capacity is available for those living in the community.

Objective

- Transform to a community-based system of developmental services and supports.

Priorities

1. Participate under the direction of HHR in negotiations of the settlement agreement with the DOJ. Additional resources are needed for this initiative.
2. Implement the initial DD crisis response programs for which \$5 million has been appropriated.
3. Collaborate with DMAS in expanding waiver capacity, modifying existing or creating new waivers, and addressing waiver rate structures. Additional resources are needed for this initiative.
4. Develop implementation strategies for the \$30 million appropriated to the DBHDS Trust Fund to address DOJ findings based on agreed upon plans.
5. Improve DBHDS quality assurance and oversight capacity to identify deficiencies, allow electronic client-level tracking of incidents and systemic analyses of trends and patterns, and follow-up to assure corrective action plans are implemented. Additional resources are needed for this initiative.

Incorporate services and supports for individuals with **AUTISM SPECTRUM DISORDERS (ASD) OR DEVELOPMENTAL DISABILITIES (DD)** in Virginia's developmental services delivery system

The Need

There is currently little to no coordination and funding of ASD and DD services in Virginia. As a first step, the recently completed "Assessment of Services for Virginians with Autism Spectrum Disorders" provides a detailed action plan to provide improved ASD and DD services.

Objectives

- Define and coordinate developmental services system responsibilities for ASD and DD supports and services.
- Enhance statewide ASD and DD services and supports capacity.

Priorities

1. Collaborate with DMAS to expand waiver capacity, modify existing or create new waivers, and address waiver rate structures. Additional resources are needed for this initiative.
2. Develop memoranda of agreement for DD/ASD service coordination with DBHDS and the Departments of Education, Rehabilitative Services, Health, Social Services, and Criminal Justice Services.

Address the **HOUSING** needs for individuals with mental health and substance use disorders and those with developmental disabilities

The Need

Safe, decent, and affordable housing is essential to recovery, and housing stability is correlated to lower rates of incarceration and costly hospital utilization. Generally, individuals should not spend more than 30% of their income on housing. Monthly Supplemental Security Income (SSI) payments are \$674 in Virginia while the average fair market rent for a one-bedroom unit is \$887. Auxiliary grants subsidize housing for individuals receiving SSI, but are limited to assisted living facilities and adult foster care homes and cannot be used for other housing arrangements. Medicaid does not pay for housing, only services.

Objective

- Expand housing and supports options for individuals with mental health or substance use disorders or developmental disabilities.

Priorities

1. Continue to participate in cross-secretarial and interagency activities to leverage housing resources and create affordable housing options for individuals receiving behavioral health and developmental services, including:
 - a) Governor's Housing Initiative recommendations to create a range of housing opportunities.
 - b) Governor's Homeless Outcomes Workgroup activities to increase access to substance abuse and mental health treatment, peer recovery programs, and Housing First Projects.
 - c) Housing Study (2009) recommendations to establish interagency "person-centered" community-based housing options for individuals with developmental disabilities.
2. Provide training and consultation to services providers to increase affordable housing and appropriate supports by leveraging housing resources and implementing supportive housing models.
3. Explore options to "decouple" developmental services and supports provision and housing.
4. Work with DMAS to assess the potential benefits of expanding Virginia's CMS Money Follows the Person (MFP) program to individuals transitioning from state hospitals.
5. Include housing stability of individuals receiving CSB behavioral health or developmental services as a Performance Contract goal and responsibility and track outcomes on a regular basis.

Create **EMPLOYMENT** opportunities for individuals with mental health or substance use disorders and those with developmental disabilities

The Need

People who are employed contribute to the economy and improve their sense of self worth. Certain interventions are proven to help adults with serious mental illness (SMI) transition from income subsidies to successful competitive employment. Today, CSBs report full or part-time employment rates for service recipients of only 14% among adults with SMI, 32% among adults with substance use disorder, and 16% among adult developmental disabilities.

Objectives

- Establish and implement "Employment First" as the policy of the Commonwealth.
- Expand employment opportunities for individuals with mental health or substance use disorders or developmental disabilities.

Priorities

1. Work with public and private services providers and employers to implement an "Employment First" policy that emphasizes integrated and supported employment. Implementation will include an "Employment First" leadership summit, a statewide awareness and education campaign, and regional trainings.
2. Provide training and consultation to services providers on implementing innovative supportive employment models and establishing integrated supported employment teams that include CSBs, DRS, and ESOs.
3. Work with DMAS to identify ways to incentivize integrated employment in the ID and IFDDS waivers.
4. Work with DMAS to incorporate supported employment evidence-based practice models in Medicaid Day Support, Mental Health Support Services and Psychosocial Rehabilitation regulations.
5. Include employment of individuals receiving CSB behavioral health or developmental services as a performance contract goal and responsibility and track employment status on a regular basis.

Strengthen the capability of the **CASE MANAGEMENT** system to support individuals receiving behavioral health or developmental services

The Need

Case management (service coordination and intensive case management) aids with the navigation and best usage of the publicly-funded system of services by helping individuals connect with appropriate services and receive day-to-day support to ensure stable community living. In Virginia, there is no standard training and no system for assuring that case managers have the knowledge and skills needed to be effective. As a result, the level and quality of such services varies widely from community to community.

Objectives

- Enhance the core competencies of individuals who provide case management services.
- Promote consistency in the practice of case management across the Commonwealth.

Priorities

1. Adopt basic and disability-specific case management curricula based on case management core competencies and develop new case management training modules.
2. Establish a state certification program for case managers to demonstrate that they meet competency and training requirements. Additional resources are needed for this initiative.

Report

A report detailing the work of the case management implementation team can be found on the DBHDS website at www.dbhds.virginia.gov/CreatingOpportunities/CMReport.pdf.

Complete the phased implementation of a **DBHDS ELECTRONIC HEALTH RECORD (EHR) AND HEALTH INFORMATION EXCHANGE (HIE)** across the state facility system

The Need

The 2009 *American Recovery and Reinvestment Act* requires health providers to implement an EHR system of the clinical treatment/medical records module, including ancillary services, by 2014 to continue to bill Medicaid and Medicare. In the implementation of an EHR, health information exchange considerations must be addressed to enable the exchange of information and data among facilities, and eventually with CSBs through Commonwealth Gateway.

Objective

- Successfully implement an EHR clinical treatment/medical records module in each state facility.

Priorities

1. Complete a state facility clinical workflow analysis to determine EHR requirements.
2. Prepare and issue a Request for Proposal, select a vendor, and negotiate and award contract for a clinical treatment/medical records EHR. Additional resources are needed for this initiative.
3. Work with the selected vendor to implement the clinical treatment/medical records EHR across the state facilities.

Address **SEXUALLY VIOLENT PREDATOR (SVP) SERVICE CAPACITY** in order to appropriately access and safely operate the Virginia Center for Behavioral Rehabilitation (VCBR) and provide SVP rehabilitation and treatment services

The Need

Because Virginia Code changes in 2006 increased the number of predicate crimes from 4 to 28 and changed the screening tool, the VCBR census is projected to grow from 356 in FY 2012 to 738 in FY 2017. VCBR will exceed its 300-bed capacity in late summer of 2011. The General Assembly directed DBHDS to double-bunk up to 150 residents and directed JLARC to study and report on the full SVP process by November 30, 2011. Changes are needed to solve the overcrowding problem, including reducing the number and types of admissions and safely placing eligible individuals on conditional release.

Objectives

- Meet the needs for additional bed and treatment space at VCBR.
- Increase use of conditional release for eligible individuals.

Priorities

1. Reconfigure treatment, medical, education, food services, and security to serve up to 150 additional residents.
2. Support VCBR in facilitating safe and appropriate conditional release of eligible residents.
3. Establish an internal screening process for double bunking residents to ensure program and clinical integrity and maximize facility safety.

Appendix D:
Employment First Elements
Settlement Agreement between Virginia and the US Department of Justice

The *Integrated Day Activities and Supported Employment* section of the settlement agreement states:

7. Integrated Day Activities and Supported Employment

a. To the greatest extent practicable, the Commonwealth shall provide individuals in the target population receiving services under this Agreement with integrated day opportunities, including supported employment.

b. The Commonwealth shall maintain its membership in the State Employment Leadership Network (“SELN”) established by the National Association of State Developmental Disability Directors. The Commonwealth shall establish a state policy on Employment First for the target population and include a term in the CSB Performance Contract requiring application of this policy.

The Employment First policy shall, at a minimum, be based on the following principles: (1) individual supported employment in integrated work settings is the first and priority service option for individuals with intellectual or developmental disabilities receiving day program or employment services from or funded by the Commonwealth; (2) the goal of employment services is to support individuals in integrated work settings where they are paid minimum or competitive wages; and (3) employment services and goals must be developed and discussed at least annually through a person-centered planning process and included in ISPs. The Commonwealth shall have at least one employment service coordinator to monitor implementation of Employment First practices for individuals in the target population.

i. Within 180 days of this Agreement, the Commonwealth shall develop, as part of its Employment First policy, an implementation plan to increase integrated day opportunities for individuals in the target population, including supported employment, community volunteer activities, community recreational opportunities, and other integrated day activities. The plan will be under the direct supervision of a dedicated employment service coordinator for the Commonwealth and shall:

A. Provide regional training on the Employment First policy and strategies throughout the Commonwealth; and

B. Establish, for individuals receiving services through the HCBS waivers:

1. Annual baseline information regarding:

a. The number of individuals who are receiving supported employment;

b. The length of time people maintain employment in integrated work settings;

c. Amount of earnings from supported employment;

d. The number of individuals in pre-vocational services as defined in 12 VAC 30-120-211 in effect on the effective date of this Agreement; and

e. The length of time individuals remain in pre-vocational services.

2. Targets to meaningfully increase:

a. The number of individuals who enroll in supported employment each year; and

b. The number of individuals who remain employed in integrated work settings at least 12 months after the start of supported employment.

c. Regional Quality Councils, described in Section V.D.5 below, shall review data regarding the extent to which the targets identified in Section III.C.7.b.i.B.2 above are being met. These data shall be provided quarterly to the Regional Quality Councils and the Quality Management system by the providers. Regional Quality Councils shall consult with those providers and the SELN regarding the need to take additional measures to further enhance these services.

d. The Regional Quality Councils shall annually review the targets set pursuant to Section III.C.7.b.i.B.2 above and shall work with providers and the SELN in determining whether the targets should be adjusted upward.