

WEBVTT

1 "Wanda Crocker" (1837796352)

00:00:00.000 --> 00:00:10.559

1 to Cracker, I am the director of provider relations and I am 1 of your Co hosts for today. Carrie Williams, the tech lead for the division.

2 "Wanda Crocker" (1837796352)

00:00:10.559 --> 00:00:24.900

Is a CO facilitator, so if something goes wrong with my system, she can pick up and take away as you can see from our agenda today. If I can make it move.

3 "Wanda Crocker" (1837796352)

00:00:24.900 --> 00:00:29.190

We have a packed agenda, lots of awesome information.

4 "Wanda Crocker" (1837796352)

00:00:29.275 --> 00:00:37.915

Lots of updates, so I'm glad everyone is here so we are going to go ahead and get right started right now with Miss Jennifer,

5 "Wanda Crocker" (1837796352)

00:00:38.425 --> 00:00:44.335

the assistant director at the role of sunlight office and she's going to talk to us about reporting events after hours.

6 "Jennifer O'Day" (3242149888)

00:00:47.430 --> 00:00:52.230

Thank you. Can everyone hear me uh, so.

7 "Jennifer O'Day" (3242149888)

00:00:52.795 --> 00:00:59.695

Can you guys hear me? Yes, I hear you, Jennifer. Thank you. Okay.

8 "Jennifer O'Day" (3242149888)

00:00:59.905 --> 00:01:11.035

So, um, there has been a recent change to the TCM agreement and, um, some have chosen to have initial after hours responses, come to the regional office.

9 "Jennifer O'Day" (3242149888)

00:01:11.455 --> 00:01:15.415

And so we wanted to just kind of update what, um, what.

10 "Jennifer O'Day" (3242149888)

00:01:15.775 --> 00:01:29.395

Needs to be reported to the regional office and I will preface this with saying that you should talk with your own entity to see if they have relinquished this, um, duty to the regional office or if they're gonna keep it.

11 "Jennifer O'Day" (3242149888)

00:01:29.395 --> 00:01:35.065

Because some, the majority of the in the raw region are agreeing to keep.

12 "Jennifer O'Day" (3242149888)

00:01:35.340 --> 00:01:41.280

You know, to keep the calls coming to them, so it will vary from county to county.

13 "Jennifer O'Day" (3242149888)

00:01:41.755 --> 00:01:48.985

Um, however, what needs to be reported immediately to our after hours on call.

14 "Jennifer O'Day" (3242149888)

00:01:49.195 --> 00:02:02.215

So every regional office has an after hours on call and there are basically 6, uh, 6 issues that need to be reported immediately to that after hours on call. Um.

15 "Jennifer O'Day" (3242149888)

00:02:02.520 --> 00:02:08.250

The 1st, 1 is any death, um, that is considered a critical event.

16 "Jennifer O'Day" (3242149888)

00:02:08.250 --> 00:02:16.950

And so the dmhc requirements have not changed and those are outlined in the division directive. 4.070.

17 "Jennifer O'Day" (3242149888)

00:02:16.950 --> 00:02:20.340

As well as the door 4.270.

18 "Jennifer O'Day" (3242149888)

00:02:20.340 --> 00:02:25.230

And it's also trained on the reliance, the platform on reportable events.

19 "Jennifer O'Day" (3242149888)

00:02:25.230 --> 00:02:28.890

So, um, any death.

20 "Jennifer O'Day" (3242149888)

00:02:28.890 --> 00:02:34.830

Needs to be reported immediately and so during, um.

21 "Jennifer O'Day" (3242149888)

00:02:34.830 --> 00:02:44.640

Business hours, those need to be reported via event report, but if it's after business hours, then you'll need to contact the after hours on call.

22 "Jennifer O'Day" (3242149888)

00:02:44.640 --> 00:02:48.660

Um, other critical events.

23 "Jennifer O'Day" (3242149888)

00:02:48.660 --> 00:02:52.080
Which critical events are defined as.

24 "Jennifer O'Day" (3242149888)
00:02:52.080 --> 00:03:02.785
An incident involving department services facilities, or consumers that are to be reported to Keith, the department administration locally and incentive and in central office.

25 "Jennifer O'Day" (3242149888)
00:03:03.175 --> 00:03:12.895
So the Elias, the reliance training provides training on incidents that shall be classified as critical events for community based providers.

26 "Jennifer O'Day" (3242149888)
00:03:13.170 --> 00:03:16.980
In addition to him to death.

27 "Jennifer O'Day" (3242149888)
00:03:16.980 --> 00:03:24.930
Any serious injury to a consumer and serious injury is, uh, 1 that involves hospitalization.

28 "Jennifer O'Day" (3242149888)
00:03:24.930 --> 00:03:35.790
So, if the person is not being admitted from a serious injury to the hospital that can be reported on an event report and does not need to be called into the after hours.

29 "Jennifer O'Day" (3242149888)
00:03:35.790 --> 00:03:48.840
Um, all complaints and allegations are suspicions of abuse, neglect, misuse of funds and property are to be reported immediately to the DD after hours.

30 "Jennifer O'Day" (3242149888)
00:03:49.915 --> 00:03:59.485
Any suicide attempt resulting in an injury, and it says in the the, uh, reportable category 6, that, um,

31 "Jennifer O'Day" (3242149888)
00:03:59.575 --> 00:04:12.145
if there's a realistic threat or physical action or serious self harm or assault to others and the injury is above minor 1st aid, it is a critical event. And must immediately be reported to DD.

32 "Jennifer O'Day" (3242149888)
00:04:14.035 --> 00:04:19.345
Met with law enforcement contacted are involved and again, indeed reportable category.

33 "Jennifer O'Day" (3242149888)
00:04:19.345 --> 00:04:31.435

3, it is a critical event when the DV law enforcement is involved, because a consumer leads a support service program, residents, activity, unsupervised,

34 "Jennifer O'Day" (3242149888)
00:04:31.735 --> 00:04:37.735
or unnoticed by staff and staff is unable to maintain the consumer's approved level of supervision.

35 "Jennifer O'Day" (3242149888)
00:04:38.129 --> 00:04:41.579
Or the approved supervision level of the other consumers in.

36 "Jennifer O'Day" (3242149888)
00:04:41.579 --> 00:04:45.629
In service, and that's what defines it as a critical event.

37 "Jennifer O'Day" (3242149888)
00:04:45.629 --> 00:04:59.459
And then last is or not last the 2nd, the last is criminal activity, reported to law enforcement involving a consumer as the perpetrator or victim when the activity occurs at a facility.

38 "Jennifer O'Day" (3242149888)
00:04:59.459 --> 00:05:09.359
And again, that's under category 3, and it lies rises to the level of a felony. Then it is critical. It must be reported immediately to the division.

39 "Jennifer O'Day" (3242149888)
00:05:10.469 --> 00:05:19.019
And then fire theft, or any natural disaster, resulting in extensive property damage, loss, or destruction of service.

40 "Jennifer O'Day" (3242149888)
00:05:19.019 --> 00:05:30.119
And again, under category, 4, it, it rises to the level of extensive property damage. Then it is critical and must be reported immediately to the division of.

41 "Jennifer O'Day" (3242149888)
00:05:31.734 --> 00:05:45.834
So, I would suggest you all work with your local, uh, support coordination entity, uh, find out if they are, um, if they are going to be, uh, using the regional office as their 1st line, uh,

42 "Jennifer O'Day" (3242149888)
00:05:45.894 --> 00:05:49.134
to contact. Um, and then we.

43 "Jennifer O'Day" (3242149888)
00:05:49.649 --> 00:06:02.249

Will then need to have a call on a number that we can contact the, because we need to be able to communicate to you all and and get information from you all. So it's it's kind of a.

44 "Jennifer O'Day" (3242149888)
00:06:02.249 --> 00:06:05.279
A 2 full kind of action.

45 "Jennifer O'Day" (3242149888)
00:06:05.279 --> 00:06:09.869
Is there any questions 1 of the that you can think of? Or have I covered everything?

46 "Wanda Crocker" (1837796352)
00:06:11.184 --> 00:06:25.824
I think you covered everything and we're going to do Q and a, and post those. Jennifer. Okay. Just wanted to highlight what you said. We may have providers who work in multiple counties and 1 county work with.

47 "Wanda Crocker" (1837796352)
00:06:26.244 --> 00:06:39.834
May be utilizing the regional offices, their call and others don't. So it's really a county by county TCM by agency decision. So providers you really need to know what's going on.

48 "Wanda Crocker" (1837796352)
00:06:39.834 --> 00:06:44.934
So you can have your staff at the appropriate locations. Know who to call.

49 "Wanda Crocker" (1837796352)
00:06:45.209 --> 00:06:49.559
When you meet these criteria, so you might have to do a little digging.

50 "Wanda Crocker" (1837796352)
00:06:51.869 --> 00:06:58.259
That's all I have 1 to thank you. Thank you so much, Jennifer. I appreciate you coming on and doing that for us.

51 "Wanda Crocker" (1837796352)
00:07:00.714 --> 00:07:15.714
All right, so next I have a massive list of information to go over for technical for providers and support coordinators alike. So, um, we.

52 "Wanda Crocker" (1837796352)
00:07:16.379 --> 00:07:24.599
I'm sure you might have additional questions from going through these slides. Hopefully I will answer or most of what you have. Um.

53 "Wanda Crocker" (1837796352)
00:07:24.599 --> 00:07:27.719
So, with the.

54 "Wanda Crocker" (1837796352)

00:07:27.719 --> 00:07:41.154

Implementation of the 7122providercontract, we implemented a provider notice portal. So this portal electronic system through which the contractor notifies, the division of decisions to decline or terminate services as outlined in their contract.

55 "Wanda Crocker" (1837796352)

00:07:41.154 --> 00:07:45.024

terminate services as outlined in their contract

56 "Wanda Crocker" (1837796352)

00:07:45.239 --> 00:07:57.479

3.34 and 3.353.34 is speaking to when the provider declines to provide the service within 10 calendar days after the service authorization.

57 "Wanda Crocker" (1837796352)

00:07:57.479 --> 00:08:05.009

3.35 is related to when the provider is giving a 30 days notice.

58 "Wanda Crocker" (1837796352)

00:08:05.009 --> 00:08:15.239

Um, the portal does not substitute for the provider, notifying the individual, their guardian and the service coordinator.

59 "Wanda Crocker" (1837796352)

00:08:15.239 --> 00:08:25.379

This is the method for you to notify the department the provider notice portal is on our division website.

60 "Wanda Crocker" (1837796352)

00:08:25.379 --> 00:08:30.089

Uh, and it's not going to let me click on that. Um.

61 "Wanda Crocker" (1837796352)

00:08:31.319 --> 00:08:39.629

But when you go to our, let's see, I want it to be able to show you where to find it.

62 "Wanda Crocker" (1837796352)

00:08:42.959 --> 00:08:51.329

And I give you an illustration of how it works.

63 "Wanda Crocker" (1837796352)

00:08:54.479 --> 00:09:02.609

And, of course, it's thinking, which might be why the link didn't work. And so service providers you go to information for service providers.

64 "Wanda Crocker" (1837796352)

00:09:02.609 --> 00:09:07.199

And it's right here and orange provider notice portal.

65 "Wanda Crocker" (1837796352)

00:09:07.199 --> 00:09:15.719

It is super user friendly. You do have to enter specific information so we have enough information to know.

66 "Wanda Crocker" (1837796352)

00:09:15.719 --> 00:09:29.429

Where to route the notice, and you just follow the cues, your demographics what kind of services are you providing? There might be more than 1. so we have group home shared living.

67 "Wanda Crocker" (1837796352)

00:09:29.429 --> 00:09:39.749

Non residential, both ASL and non residential, both group, home, non, residential, and both shared living and non residential cause you might be providing services. Um.

68 "Wanda Crocker" (1837796352)

00:09:39.749 --> 00:09:42.809

For multiple services for the same person.

69 "Wanda Crocker" (1837796352)

00:09:42.809 --> 00:09:53.069

Of course, we need to know who you're providing notice on and what region you're serving them in. Um, so that the information can be routed to the right regional office.

70 "Kat Craig" (2236648192)

00:09:53.069 --> 00:10:01.829

Rhonda, yes, your screen is not showing what you're what you're wanting to share. Of course, it isn't.

71 "Wanda Crocker" (1837796352)

00:10:01.829 --> 00:10:09.299

Um, my link didn't go live as I hoped it would so let's do this.

72 "Wanda Crocker" (1837796352)

00:10:11.279 --> 00:10:18.749

It should be sharing.

73 "Wanda Crocker" (1837796352)

00:10:21.569 --> 00:10:25.859

Can you see now the portal information now?

74 "Wanda Crocker" (1837796352)

00:10:25.859 --> 00:10:29.339

Darn it. I don't know why it's not pulling that up. Okay.

75 "Wanda Crocker" (1837796352)

00:10:29.339 --> 00:10:33.509

So, um, but.

76 "Wanda Crocker" (1837796352)

00:10:33.509 --> 00:10:38.219

Anyway, so so that, you know, it is super user friendly.

77 "Wanda Crocker" (1837796352)

00:10:38.219 --> 00:10:47.249

Uh, that link is provided hopefully, if you copy and paste that into the website, it will take you directly to this portal. Um, but there is a series yes.

78 "Kat Craig" (2236648192)

00:10:47.249 --> 00:10:50.639

Um, we're seeing your your, um.

79 "Wanda Crocker" (1837796352)

00:10:50.639 --> 00:10:58.319

Yeah, we're not seeing the PowerPoint, right? Right. I'm going to switch back. Unfortunately it is. I don't know what happened.

80 "Kat Craig" (2236648192)

00:10:59.429 --> 00:11:05.039

Exit out of there you go. There we go.

81 "Wanda Crocker" (1837796352)

00:11:05.039 --> 00:11:14.579

So it is super user friendly dropdown boxes leads you through every single data point that you need to know.

82 "Wanda Crocker" (1837796352)

00:11:14.579 --> 00:11:27.239

Um, it is for all services that are giving notice. So if you are a therapeutic service provider, and you're giving notice that you can no longer serve that person. You would record that here.

83 "Wanda Crocker" (1837796352)

00:11:27.239 --> 00:11:31.739

If you are provider and giving notice, you would record that here.

84 "Wanda Crocker" (1837796352)

00:11:31.739 --> 00:11:39.719

Again, it is not a substitute for notifying the individual, their guardian and the support coordinator.

85 "Wanda Crocker" (1837796352)

00:11:40.254 --> 00:11:52.044

And you'll be prompted in the provider in order notice portal to remind you that it's not a supplement. In fact, it will ask you if you have notified those people.

86 "Wanda Crocker" (1837796352)

00:11:52.914 --> 00:11:59.874

There's also a signature block at the end for whoever is filling out that notice and you can do that electronically with your mouse.

87 "Wanda Crocker" (1837796352)

00:12:00.299 --> 00:12:09.059

Um, and so it's super simple. So my next update is on shared living.

88 "Wanda Crocker" (1837796352)

00:12:09.059 --> 00:12:18.389

You might have heard that we have some pending structure changes to shared living. They're super exciting going to simplify how we do shared living today.

89 "Wanda Crocker" (1837796352)

00:12:18.389 --> 00:12:32.159

Um, we've already had 1 training on shared living with great attendance, lots of shared living providers. Um, and we'll have 2 more coming up that I'll have the dates for here momentarily. Um.

90 "Wanda Crocker" (1837796352)

00:12:32.784 --> 00:12:45.114

But this what I'm going to give you a high overview of what those changes are, you will need to come to the training to get the details in illustration of the form and how it's going to work.

91 "Wanda Crocker" (1837796352)

00:12:45.624 --> 00:12:48.864

We are still pending CMS approval for these changes.

92 "Wanda Crocker" (1837796352)

00:12:49.169 --> 00:13:03.414

But we wanted to increase people's awareness and explain how it's going to work before it goes live. Um, so that people aren't scrambling after it goes, live to figure out how it works. And it's super simple.

93 "Wanda Crocker" (1837796352)

00:13:03.414 --> 00:13:14.304

I think you guys are really going to like it. Right? So, once we have CMS approval, urban versus rural will only apply to room and board. There'll be no differential.

94 "Wanda Crocker" (1837796352)

00:13:14.609 --> 00:13:29.184

And the residential service codes and rates, so, and it will only apply to room on board until we can convene a work group and do a study on what the room and board should look like. And then we hope to make that consistently.

95 "Wanda Crocker" (1837796352)

00:13:29.244 --> 00:13:29.724

Um.

96 "Wanda Crocker" (1837796352)

00:13:30.059 --> 00:13:39.389

1 rate as well, the daily rate is based on 3 tiers that are predicated off of the person's rate allocations score.

97 "Wanda Crocker" (1837796352)

00:13:39.389 --> 00:13:53.669

So, you need 2 pieces of information, you need their rate allocations for and you need to know whether their urban versus rural and the right

determination form we've designed is going to give you the answer as to what to authorize. If you know, those 2 pieces of information.

98 "Wanda Crocker" (1837796352)

00:13:54.084 --> 00:14:09.024

Um, the daily rate is all in capacity. It includes direct support. It includes the host that includes relief includes administrative costs and professional manager. Um, I was asked on a, on the 1st training whether or not.

99 "Wanda Crocker" (1837796352)

00:14:09.389 --> 00:14:21.689

Um, the provider was required to pass all of the daily rate on to the host. And the answer to that is no. Um, because it's all encompassing. They are, um.

100 "Wanda Crocker" (1837796352)

00:14:21.689 --> 00:14:28.439

The provider has to keep some of those funding for administrative costs. They tend to fund the professional manager and the relief.

101 "Wanda Crocker" (1837796352)

00:14:28.439 --> 00:14:35.399

Um, staff that are necessary since it is all encompassing. Um, there is no more.

102 "Wanda Crocker" (1837796352)

00:14:35.399 --> 00:14:49.529

Relief variance reporting the amount of relief provided will be between the host and the administering agency, and the planning team to determine what's really necessary and to make that happen for the person. And for the host.

103 "Wanda Crocker" (1837796352)

00:14:49.529 --> 00:15:01.799

When we get this approved, it will be it will fall the same default process for budget structure as we do for or group home.

104 "Wanda Crocker" (1837796352)

00:15:01.799 --> 00:15:05.159

So that was, um.

105 "Wanda Crocker" (1837796352)

00:15:05.159 --> 00:15:12.449

Really awesome. So we will be able to bring them in as a default tier. 1.

106 "Wanda Crocker" (1837796352)

00:15:12.449 --> 00:15:15.749

Until the is, um, is.

107 "Wanda Crocker" (1837796352)

00:15:15.749 --> 00:15:29.579

Provided through the Moss, and then we will retro implement the correct tier to the start or implementation date. It will also move up and down as it with renewed.

108 "Wanda Crocker" (1837796352)

00:15:29.579 --> 00:15:40.169

And boss just like it does now for and group homes so we'll get a lot more consistency. Right? We'll get we'll be able to have that same process and that's gonna be really nice.

109 "Wanda Crocker" (1837796352)

00:15:41.489 --> 00:15:46.229

Providers will no longer have to submit budgets for shared living.

110 "Wanda Crocker" (1837796352)

00:15:46.434 --> 00:16:00.504

So that's a really key factor. I've mentioned a rate determination form support coordinators are going to use that and it's going to tell them exactly what they need to authorize and the code they need to authorize. So it's going to be super slick again.

111 "Wanda Crocker" (1837796352)

00:16:00.504 --> 00:16:06.024

You do need to know the person's already asked and whether they're herbal versus, um.

112 "Wanda Crocker" (1837796352)

00:16:06.359 --> 00:16:09.599

Versus rule.

113 "Wanda Crocker" (1837796352)

00:16:09.599 --> 00:16:19.289

Um, and so as in all things rate related, there will be no rate reductions. If a person's current budget.

114 "Wanda Crocker" (1837796352)

00:16:19.289 --> 00:16:26.904

Is higher than the new rate structure so they will retain the current or the higher of the 2 until such time.

115 "Wanda Crocker" (1837796352)

00:16:26.934 --> 00:16:41.034

Perhaps a new, um, is completed at which increases the daily rate through the new standard process, or rate structure or until the enhanced f map maintenance of effort ends.

116 "Wanda Crocker" (1837796352)

00:16:41.064 --> 00:16:46.554

So it's consistent with all the other rate changes we've made another. Keynote is.

117 "Wanda Crocker" (1837796352)

00:16:46.829 --> 00:16:50.669

We will no longer be doing individual waiver budget adjustments.

118 "Wanda Crocker" (1837796352)
00:16:50.669 --> 00:16:54.779
The new structure is the consistent.

119 "Wanda Crocker" (1837796352)
00:16:54.779 --> 00:16:57.869
Structure for all providers across the state.

120 "Wanda Crocker" (1837796352)
00:16:57.869 --> 00:17:11.339
So there will be no individual budget adjustments providers. We'll need to learn the new system and construct their system, um, and their service in a way that fits within the daily rate established.

121 "Wanda Crocker" (1837796352)
00:17:13.649 --> 00:17:24.899
Um, so process, so you're aware once we have approval, um, we've already pulled a report, we're already working on making sure it's accurate and we're going to.

122 "Wanda Crocker" (1837796352)
00:17:24.899 --> 00:17:28.529
Go back through.

123 "Wanda Crocker" (1837796352)
00:17:28.529 --> 00:17:32.879
And central office will modify the daily rates.

124 "Wanda Crocker" (1837796352)
00:17:32.879 --> 00:17:47.369
Back to 71, and we will PR, will then send a list to the preserved living providers so they can see what was authorized and verify any issues and will correct. Any errors found.

125 "Wanda Crocker" (1837796352)
00:17:47.784 --> 00:17:57.114
So our next date for the shared living training, more in depth, more detailed illustration of the rate determination form is tomorrow at 90 am.

126 "Wanda Crocker" (1837796352)
00:17:57.114 --> 00:18:04.734
And then, August 24th at 20, we did it at 3 different sessions to maximize possible participation to fit within everyone's schedule.

127 "Wanda Crocker" (1837796352)
00:18:04.734 --> 00:18:16.884
So, if you're not already registered for 1, and you support shared living, whether a support coordinator or provider, please make sure you register for 1 of those times. of those times

128 "Wanda Crocker" (1837796352)
00:18:19.254 --> 00:18:32.604

Although, this does not have anything to do with the new rate structure. We do want to remind people because there has been some misunderstanding. That out of home is now a certified service specifically. It will say out of home Russ.

129 "Wanda Crocker" (1837796352)

00:18:32.604 --> 00:18:37.614

But on the provider's certificate from licensing. And certification, so.

130 "Wanda Crocker" (1837796352)

00:18:37.949 --> 00:18:43.499

A provider of shared living services can utilize vacant relief homes.

131 "Wanda Crocker" (1837796352)

00:18:43.499 --> 00:18:51.059

Where no authorizations are present for host home services for out of home respite.

132 "Wanda Crocker" (1837796352)

00:18:51.059 --> 00:19:04.439

But before they can do that, they have to get certified specifically for out of home respite. Their shared living contract does not carry over into the out of home, respite service. Um.

133 "Wanda Crocker" (1837796352)

00:19:04.439 --> 00:19:12.539

So, just so you don't freak out if you're a group home provider, who already does out of home respite you're okay at your next certification.

134 "Wanda Crocker" (1837796352)

00:19:12.539 --> 00:19:25.499

We will amend your certification to add specifically out of home respite, but you were covered until then because you already have that service underneath the old system, but just want to remind people of that.

135 "Wanda Crocker" (1837796352)

00:19:25.499 --> 00:19:28.769

Because there seems to be a little bit of confusion.

136 "Wanda Crocker" (1837796352)

00:19:30.714 --> 00:19:45.444

We added this slide at the last moment, and I'm Super glad that Mark members spoke up and said, hey, we need to talk about this and make sure people understand. So, thank you for bringing those subjects to us that we need to cover. Um.

137 "Wanda Crocker" (1837796352)

00:19:45.779 --> 00:19:50.489

Clarification on staffing ratio and rates.

138 "Wanda Crocker" (1837796352)

00:19:50.489 --> 00:19:57.989

The day habilitation service definition, and our current waiver is 1 to 6. that is.

139 "Wanda Crocker" (1837796352)

00:19:58.374 --> 00:20:12.624

The expectation, that's the maximum expectation. There's some confusion because people are hearing, but that they have 22 rate was built on a 1 to 1 ratio and that's correct. It was, um, but.

140 "Wanda Crocker" (1837796352)

00:20:12.864 --> 00:20:13.764

but

141 "Wanda Crocker" (1837796352)

00:20:14.069 --> 00:20:27.119

There were things that we didn't catch with that and so that is what we've provided. That's what we proposed. That's what was budgeted. So that's what's being implemented but we are staying true to the service definition ratio of 1 to 6.

142 "Wanda Crocker" (1837796352)

00:20:27.119 --> 00:20:37.374

The actual staffing ratio out of date program is driven by the people's needs. So they might have, um, they might have some groups of 1 to 6. they might have some groups of 1 to 2.

143 "Wanda Crocker" (1837796352)

00:20:37.674 --> 00:20:50.784

they might do some 1 to 1, but it is, it is based on that person's need. And what kind of staffing level is is driven and outlined in that ISP. So we just want to provide that clarification. We are not expecting.

144 "Wanda Crocker" (1837796352)

00:20:50.784 --> 00:20:57.024

They have providers to all of a sudden provide 1 on 1, supports to every person at the day program. Okay.

145 "Wanda Crocker" (1837796352)

00:20:57.119 --> 00:20:58.619

Um.

146 "Wanda Crocker" (1837796352)

00:20:58.619 --> 00:21:01.769

So, hopefully that offers some clarification.

147 "Wanda Crocker" (1837796352)

00:21:01.769 --> 00:21:08.579

We do have a Mercer rate refresh underway for fiscal year, 23. um, and we.

148 "Wanda Crocker" (1837796352)

00:21:08.579 --> 00:21:18.774

That rate study will continue to support at least 15 dollars per hour for DSPs. We will continue to work with stakeholders to achieve an accurate.

149 "Wanda Crocker" (1837796352)

00:21:18.774 --> 00:21:27.384

They have service rate 23 and in fact, we have a DV rate study stakeholder meeting tomorrow to present on the preliminary information.

150 "Wanda Crocker" (1837796352)

00:21:27.384 --> 00:21:37.284

We have so we encourage you all to participate and hear about that, but it is an ongoing discovery and we definitely will take all. all

151 "Wanda Crocker" (1837796352)

00:21:37.619 --> 00:21:50.069

All factors into account and work with our stakeholders to make sure we have everything identified. Okay. So, hopefully, that helps some, some stressors for people.

152 "Wanda Crocker" (1837796352)

00:21:50.069 --> 00:22:00.059

Provider waiver assurance on our last couple of statewide provider means we have talked about waiver assurances 1 and we've talked about the.

153 "Wanda Crocker" (1837796352)

00:22:00.059 --> 00:22:07.379

The percentages that we, that we are currently experiencing with provider staff qualifications and training.

154 "Wanda Crocker" (1837796352)

00:22:07.379 --> 00:22:21.809

So, I wanted to share with you a graph of the last, basically, 3, fiscal years worth of data and where we've sat. So, this 1 specifically is related to staff training.

155 "Wanda Crocker" (1837796352)

00:22:22.254 --> 00:22:36.474

For certified and non certified services. So you can see, we've had a lot of a lot of months where we were above 87%. That is our threshold, anything below 87%. We have to do a plan of correction with CMS and explain why.

156 "Wanda Crocker" (1837796352)

00:22:36.474 --> 00:22:43.914

So, in this assurance, you can see that 25% of the time. twenty five percent of the time

157 "Wanda Crocker" (1837796352)

00:22:44.249 --> 00:22:49.919

We were below our 87 consistently below during this fiscal year.

158 "Wanda Crocker" (1837796352)

00:22:49.919 --> 00:22:59.819

So that is very concerning, especially in combination with the other waiver assurances that apply to staff qualifications. So we'll look at.

159 "Wanda Crocker" (1837796352)

00:22:59.819 --> 00:23:04.079

This graph is specific to personal assistants and respite staff.

160 "Wanda Crocker" (1837796352)

00:23:04.079 --> 00:23:08.789

And in this graph, we have a 50 per cent.

161 "Wanda Crocker" (1837796352)

00:23:08.789 --> 00:23:18.959

The last 3 fiscal years that were less than 87%. So we already are on a corrective action plan for this.

162 "Wanda Crocker" (1837796352)

00:23:19.974 --> 00:23:29.334

As you can see the last 2 quarters of this year, we're below the threshold, and we provide this information to CMS on a quarterly basis.

163 "Wanda Crocker" (1837796352)

00:23:29.664 --> 00:23:44.484

So it does not matter whether at the end of the year we're above 87 each quarter counts. Each quarter's results counts. And we have to justify each quarter and CMS starts asking some really difficult questions. questions

164 "Wanda Crocker" (1837796352)

00:23:44.699 --> 00:23:54.119

Um, when you turn this data in, besides our corrective action plan, they expect enhancement and they ask the hard questions.

165 "Wanda Crocker" (1837796352)

00:23:54.119 --> 00:24:06.984

They ask questions, like, did you continue to pay that provider for that staff who wasn't qualified? What did you do about that staff that wasn't qualified to provide that service?

166 "Wanda Crocker" (1837796352)

00:24:07.374 --> 00:24:20.514

So, as our numbers continue to be lower than 87%, we are going to have to increase our efforts to be accurate. Every time a waiver assurance is below threshold. It puts our waiver at risk. at risk

167 "Wanda Crocker" (1837796352)

00:24:20.819 --> 00:24:35.454

It puts the individual's funding for services at risk, because CMS funds, 60. so it's very important that we pay attention to what's going on and what our data is telling us. So, 1 of our new strategies, we're addressing.

168 "Wanda Crocker" (1837796352)

00:24:35.454 --> 00:24:48.714

This is next month. There will be 2 meetings with the focus group of service providers. These providers specifically were were noted in the last 5 quarters. I believe, um, of.

169 "Wanda Crocker" (1837796352)

00:24:49.049 --> 00:24:59.159

Not having 100% of their staff qualifications and training in place. That doesn't mean they were at 60%. They could have been missing 1 staff. Um.

170 "Wanda Crocker" (1837796352)

00:24:59.159 --> 00:25:11.339

So, um, so There'll be meeting and our intent is to talk with them and learn from them. What are the issues preventing success.

171 "Wanda Crocker" (1837796352)

00:25:11.339 --> 00:25:20.789

From staff being trained 1 of the 1 of the training issues that are consistently in the top 3 is staff not being trained on ISPs.

172 "Wanda Crocker" (1837796352)

00:25:20.789 --> 00:25:25.529

It is consistently in the top 3 and that's.

173 "Wanda Crocker" (1837796352)

00:25:25.529 --> 00:25:38.969

Probably 1 of the easiest ones for staff to get, because we're just looking for, um, signatures on the plan that they've been trained, or some sort of system showing that they've been trained. But that is 1 of our top 3.

174 "Wanda Crocker" (1837796352)

00:25:38.969 --> 00:25:47.964

Um, so we'll also be working with those stakeholders to strategize for systemic improvement. How can we help them? What can we change? What can we do?

175 "Wanda Crocker" (1837796352)

00:25:48.354 --> 00:26:03.204

Um, is there anything we can do, and that work group is being led by Amy Rutledge and Don Cochran who are both both, um, vendor service coordinators, um, for the provider relations team so they're really excited about getting to know you all,

176 "Wanda Crocker" (1837796352)

00:26:03.564 --> 00:26:08.904

um, and bringing that group together, and we're hoping that we can use that to problem solve and come up with more strategy.

177 "Wanda Crocker" (1837796352)

00:26:08.969 --> 00:26:23.549

To impact this, and, of course, we're hoping with the new value based payments since there's so many of those are surrounding staff training that with a value based payment system it will better support providers to get staff trained. Um.

178 "Wanda Crocker" (1837796352)

00:26:23.549 --> 00:26:30.329

Adequately and timely, so hopefully that will have an impact on our waiver assurance numbers as well.

179 "Wanda Crocker" (1837796352)
00:26:32.459 --> 00:26:38.219
Right allocation scores you might remember at our very 1st.

180 "Wanda Crocker" (1837796352)
00:26:38.874 --> 00:26:47.304
At our very 1st, statewide provider meeting that we talked about
uploading rate allocation scores to see more.

181 "Wanda Crocker" (1837796352)
00:26:47.574 --> 00:26:55.764
We are finally successful mostly successful because we've identified 477
people whose rate allocation did not transfer to anymore.

182 "Wanda Crocker" (1837796352)
00:26:55.764 --> 00:27:08.214
So, we're currently working on those, we're going to have to manually
look up their rate allocation score if they have 1 and get that
transferred to Seymour, all providers and support coordinators. providers
and support coordinators

183 "Wanda Crocker" (1837796352)
00:27:08.219 --> 00:27:15.054
With access to see more can find the information under the identifiers
page and the individual's record and s'more.

184 "Wanda Crocker" (1837796352)
00:27:15.384 --> 00:27:27.264
So, you look up a person you're supporting and you go to identifiers,
which is where you would find their comprehensive slot number their
Medicaid number their number, and you will find.

185 "Wanda Crocker" (1837796352)
00:27:27.599 --> 00:27:32.099
A mass Ross or Assis, Ross or both. So, for this person.

186 "Wanda Crocker" (1837796352)
00:27:32.099 --> 00:27:40.769
They have both assists and a mosque, so they're both recorded. Our intent
was to only record the last that they have.

187 "Wanda Crocker" (1837796352)
00:27:40.769 --> 00:27:44.759
Um, but some people have the last 2.

188 "Wanda Crocker" (1837796352)
00:27:45.084 --> 00:27:56.424
If you don't see a mosque in Seymour, that means they haven't had 1 yet.
So every master has been conducted since July 1 of last year is recorded
in Seymour.

189 "Wanda Crocker" (1837796352)
00:27:56.424 --> 00:28:02.574

So, what we were working on is getting the historical and see more as well.

190 "Wanda Crocker" (1837796352)

00:28:02.784 --> 00:28:14.664

So, you should be able to see that now, we're working on using this information since now it's consistently in Seymour to pull reports into tableau so that we can pull provider based.

191 "Wanda Crocker" (1837796352)

00:28:14.759 --> 00:28:27.359

Reports for your review, which right now with it being in 2 different systems is very difficult to get consistency. This, this Ross just so you note has been converted to a 5 scale.

192 "Wanda Crocker" (1837796352)

00:28:27.359 --> 00:28:35.519

Okay, so these are both anything you see in there is on the current 5 scale rate allocation score.

193 "Wanda Crocker" (1837796352)

00:28:35.519 --> 00:28:38.849

You shouldn't see any sixes sevens in there.

194 "Wanda Crocker" (1837796352)

00:28:40.589 --> 00:28:44.579

So, disclaimer for these next few slides, I am not.

195 "Wanda Crocker" (1837796352)

00:28:44.579 --> 00:28:53.999

A tax accountant, I am not an advisor, and I don't know a lot about this subject, but I happen to recently be at a meeting.

196 "Wanda Crocker" (1837796352)

00:28:53.999 --> 00:28:57.179

Where their memberships had a great presentation.

197 "Wanda Crocker" (1837796352)

00:28:57.179 --> 00:29:11.724

Um, from a consultant that they use, who talked with them about the cares act, um, employee tax credit, and I'm like, wow, I wonder if the rest of our providers who aren't Mark members understand what is potentially out there that they might be able to access.

198 "Wanda Crocker" (1837796352)

00:29:12.114 --> 00:29:22.494

So, there's just a few slides here. Um, some providers might think that if they haven't already claimed it, they are no longer eligible and that's not true. There's still an open.

199 "Wanda Crocker" (1837796352)

00:29:22.829 --> 00:29:32.429

Window, um, for application, um, for for credits during those, those fiscal years allowed, um.

200 "Wanda Crocker" (1837796352)

00:29:34.049 --> 00:29:41.189

And you can still claim wages paid after June 30th of 2021 through January 1 of 2022.

201 "Wanda Crocker" (1837796352)

00:29:41.189 --> 00:29:51.419

And you might have to do an adjusted employee appointment tax return within the deadlines. The longer you wait the more the quarters drop off.

202 "Wanda Crocker" (1837796352)

00:29:51.419 --> 00:30:02.369

So, that's the best of my understanding, um, just more information. It was really phenomenal. I mean, my ears perked when their consultant said.

203 "Wanda Crocker" (1837796352)

00:30:02.369 --> 00:30:07.319

We have helped providers, get as many as, you know, 6 figure.

204 "Wanda Crocker" (1837796352)

00:30:07.319 --> 00:30:14.394

Uh, brakes on their taxes, so it's phenomenal if you have not looked into it, it's probably well worth your while to do.

205 "Wanda Crocker" (1837796352)

00:30:14.394 --> 00:30:28.284

So, um, and there's also the misconception that providers who received alone through paychecks protection plans wouldn't be eligible for this tax credit. And that's not true. You may still be eligible for this tax credit.

206 "Wanda Crocker" (1837796352)

00:30:28.529 --> 00:30:31.559

Now, what little I know about this is.

207 "Wanda Crocker" (1837796352)

00:30:31.559 --> 00:30:46.164

It's not easy if anybody does their own taxes, you know, it's probably not easy, especially if you have business taxes. Right? So so you definitely want to consult with the tax accountants if you're interested in doing this.

208 "Wanda Crocker" (1837796352)

00:30:46.464 --> 00:30:47.094

Um.

209 "Wanda Crocker" (1837796352)

00:30:47.814 --> 00:30:54.714

Do your research seek consultation? See if it if you qualify I understand.

210 "Wanda Crocker" (1837796352)

00:30:54.714 --> 00:31:04.344

Like I said, the documentation is a little complicated and I thought I would just throw out there because I know we have new providers who may not know what Mark is.

211 "Wanda Crocker" (1837796352)

00:31:04.884 --> 00:31:17.244

So, when I say that it's Missouri association for rehabilitation facilities, which really doesn't describe what Mark is and what they do but it's a consortium basically a membership of service providers.

212 "Wanda Crocker" (1837796352)

00:31:17.399 --> 00:31:26.969

Some targeted case managers who lead advocacy group groups who participate on our work groups who advocate with legislature, and they collaborate together.

213 "Wanda Crocker" (1837796352)

00:31:26.969 --> 00:31:31.109

To share these kinds of resources, um.

214 "Wanda Crocker" (1837796352)

00:31:31.109 --> 00:31:40.949

So, I feel very fortunate that I just happen to be at that meeting to hear about this resource to share with the rest of you. So another resource for you, if you are not a mark member.

215 "Wanda Crocker" (1837796352)

00:31:40.949 --> 00:31:44.009

Could be to reach out to a mark member that, you know.

216 "Wanda Crocker" (1837796352)

00:31:44.009 --> 00:31:54.269

And maybe they could share with you, um, or to reach out to mark for themselves to explore membership options. Um, you know, if that's something you're interested in, there's lots of perks.

217 "Wanda Crocker" (1837796352)

00:31:54.269 --> 00:32:05.364

Including consultations like these from experts that can help providers figure out how to best utilize the resources that are out there that you might not be familiar with.

218 "Wanda Crocker" (1837796352)

00:32:05.394 --> 00:32:13.914

So, so just saying there are resources PR, we'll be sending out some more information to providers. So that you can check out more details.

219 "Wanda Crocker" (1837796352)

00:32:13.914 --> 00:32:24.144

This is just a really light overview of what's available out there what you can find, but we'll send out the resources that we received from the consultant.

220 "Wanda Crocker" (1837796352)

00:32:24.269 --> 00:32:29.099

And then you can review those and seek your own advisor to your own research.

221 "Wanda Crocker" (1837796352)

00:32:29.099 --> 00:32:32.459

Whatever, um, really needs or needs.

222 "Wanda Crocker" (1837796352)

00:32:32.459 --> 00:32:42.929

Okay, I am done with my section, so I am going to turn it over to the universal design and assistive technology team Holly rife and Shelley brown.

223 "Holly Reiff" (3899988992)

00:32:42.929 --> 00:32:56.699

Afternoon everyone, so we're going to provide some UTA updates for you today surrounding the health assessment and coordination services assistive, technology and remote supports and some EA.

224 "Holly Reiff" (3899988992)

00:32:56.699 --> 00:33:01.109

I'm going to start with our health. Oh.

225 "Holly Reiff" (3899988992)

00:33:01.944 --> 00:33:15.834

Wanda are you driving? Oh, I can see I see where I can drive up front. Thanks. Um, I'm going to start with health assessment and coordination. Um, which is ATC currently our only provider of the services station MD.

226 "Holly Reiff" (3899988992)

00:33:15.834 --> 00:33:27.174

So you might have heard of it referred to as station MD services. We have a new guideline that supports the service. Now, it's under guideline number 86 on our website. The guideline. guideline

227 "Holly Reiff" (3899988992)

00:33:27.509 --> 00:33:36.959

Supports part of the uniqueness of the services and outlines the 2 different ways to initiate the service. The 1st, is by adding it to the ISP.

228 "Holly Reiff" (3899988992)

00:33:37.194 --> 00:33:51.084

Through the regular payment planning process, whether that's annually or through an update request, and the 2nd is by the individual support staff or family directly contacting station MD for the services for those who directly call station M. D. A.

229 "Holly Reiff" (3899988992)

00:33:51.084 --> 00:33:54.324

listing of those individuals is sent the following month to all.

230 "Holly Reiff" (3899988992)

00:33:55.499 --> 00:34:05.694

And as support coordinators for authorization input, this allows the families and individuals to use the service at the time they need it instead of waiting for the service to begin.

231 "Holly Reiff" (3899988992)

00:34:06.294 --> 00:34:11.724

The authorization starts with the date of the initial call and ends with the individual's current.

232 "Holly Reiff" (3899988992)

00:34:11.999 --> 00:34:17.459

Last year, the addendum in the guideline can be used for the utilization review process.

233 "Holly Reiff" (3899988992)

00:34:17.459 --> 00:34:21.119

Since is a subscription service.

234 "Holly Reiff" (3899988992)

00:34:21.119 --> 00:34:33.779

It needs to be entered as a monthly authorization and should not only be input for the month of each contact. We have seen a growing number of authorizations that start in 1 month and run for 6 to 12 months.

235 "Holly Reiff" (3899988992)

00:34:33.779 --> 00:34:37.619

But only have 1 or 2 months with actual billable authorizations.

236 "Holly Reiff" (3899988992)

00:34:37.619 --> 00:34:41.639

So, for as an example, if an individual.

237 "Holly Reiff" (3899988992)

00:34:41.639 --> 00:34:44.759

Cause.

238 "Holly Reiff" (3899988992)

00:34:49.109 --> 00:34:52.529

The call should, the authorization should start and.

239 "Holly Reiff" (3899988992)

00:34:52.529 --> 00:35:01.734

With the initial call end at the ISP year, so if their ISP last for 6 more months, there should be an authorization for each 1 of those 6 months.

240 "Holly Reiff" (3899988992)

00:35:02.124 --> 00:35:09.654

We also still have a large number of authorizations that were requested in December of 2021 that have not yet been entered. not yet been entered

241 "Holly Reiff" (3899988992)

00:35:09.869 --> 00:35:17.009

And we will be inputting these into a tracking system for follow up and education efforts.

242 "Holly Reiff" (3899988992)

00:35:19.169 --> 00:35:28.224

Assistive technology, um, we have a great update about our education pilot that we have been working with, in conjunction with our technology 1st initiative.

243 "Holly Reiff" (3899988992)

00:35:28.614 --> 00:35:36.594

We had 22 support coordinator self directed specialist, applied to be part of this pilot and have now completed their accreditation. accreditation

244 "Holly Reiff" (3899988992)

00:35:36.924 --> 00:35:51.264

Through shift, which is a national education technology education platform. Yesterday we got to our very 1st technology explorers meeting any lists. Phenomenal. Um, we had 23 participants, submit questions and coaching topics prior to the meeting.

245 "Holly Reiff" (3899988992)

00:35:51.264 --> 00:35:53.994

David Baker was able to join us. us

246 "Holly Reiff" (3899988992)

00:35:54.239 --> 00:36:07.169

Who is part of as our guest technology resource expert, and we had wonderful discussions about technology resources, how to get started with technology supports and how to access funding our acquisition.

247 "Holly Reiff" (3899988992)

00:36:07.169 --> 00:36:18.809

Or technology for needed technology. The next technology explores meeting is September 21st and any support coordinator who would like, coaching around assistive technology.

248 "Holly Reiff" (3899988992)

00:36:18.809 --> 00:36:23.429

They just need to email their coaching question or topic to the team.

249 "Holly Reiff" (3899988992)

00:36:23.429 --> 00:36:30.029

Which is technology 1st and universal design and dot Gov.

250 "Holly Reiff" (3899988992)

00:36:30.029 --> 00:36:42.299

With the subject for exploration by 50 P. M. on Friday September 16th these coaching sessions are only for support corners and VOC rehab counselors.

251 "Holly Reiff" (3899988992)

00:36:45.779 --> 00:36:51.809

We have had lots of frequently asked questions about assistive technology. So I wanted to take some time.

252 "Holly Reiff" (3899988992)
00:36:51.809 --> 00:37:05.489

To go over some of what we've seen assistive technology is a natural concept in our daily lives. Our damaged DD waiver service works. The same individuals and support teams do not have to choose between using an assistive technology.

253 "Holly Reiff" (3899988992)
00:37:05.489 --> 00:37:20.099

Or having their in person support, there's lots of places that could intersect using both supports and those might include employment medication, support applications for daily reminders or tasks support and communication devices and applications.

254 "Holly Reiff" (3899988992)
00:37:20.099 --> 00:37:24.779

Please remember that assistive technology does not require a bid.

255 "Holly Reiff" (3899988992)
00:37:24.779 --> 00:37:28.469

A consultation or an evaluation.

256 "Holly Reiff" (3899988992)
00:37:28.469 --> 00:37:34.409

We have had a lot of requests for equipment that's not part of the services too.

257 "Holly Reiff" (3899988992)
00:37:34.409 --> 00:37:39.689

But some of it is adaptive equipment and is available through our specialist medical equipment.

258 "Holly Reiff" (3899988992)
00:37:39.689 --> 00:37:53.814

This might be bit lifts are low tech support options, like filter flatware or specialized plates or those really fun maps that keeps your plate from moving around on you while you're trying to eat if you have more questions about those please check out our May,

259 "Holly Reiff" (3899988992)
00:37:53.844 --> 00:37:55.104
you got lunch and learn.

260 "Holly Reiff" (3899988992)
00:37:55.914 --> 00:38:10.884

Recording, which was all about the difference between modification EA, specialized medical equipment and assistive technology 18 another great resource for the difference between these 3 is on the damage manual in the support coordination,

261 "Holly Reiff" (3899988992)

00:38:10.884 --> 00:38:12.534
manual under section. Each.

262 "Holly Reiff" (3899988992)
00:38:13.555 --> 00:38:27.175
There are about 6 individuals across the state who are currently qualified to provide an AC consultation. If you team feels like it's needed. Um, so please reach out to us, but there's only 6. so there could be a line.

263 "Holly Reiff" (3899988992)
00:38:27.205 --> 00:38:30.055
But right now we have some space. Um.

264 "Holly Reiff" (3899988992)
00:38:31.410 --> 00:38:42.840
Please consult the 80 consultations are not part of the consultations that are required for projects over 5,000 dollars the EA, consultation.

265 "Holly Reiff" (3899988992)
00:38:42.840 --> 00:38:48.900
Is to ensure project adherence and completion reviewing the information concerning the bell.

266 "Holly Reiff" (3899988992)
00:38:48.900 --> 00:38:53.490
And if you missed the, you'd at lunch and learn on August 9th.

267 "Holly Reiff" (3899988992)
00:38:53.490 --> 00:39:02.580
Go check out the recording because Shelly and Chris do a great job walking through what the EA consultation process is and how it works.

268 "Holly Reiff" (3899988992)
00:39:02.580 --> 00:39:11.010
Just a reminder, each aspect of the, a T service definition code has its own modifier.

269 "Holly Reiff" (3899988992)
00:39:11.010 --> 00:39:15.210
And when I think about these modifiers, I think of them.

270 "Holly Reiff" (3899988992)
00:39:15.210 --> 00:39:25.380
As the aspects favorite little dress or jacket or tasteful pantsuit. So when you're working with the assistive technology Co codes.

271 "Holly Reiff" (3899988992)
00:39:25.380 --> 00:39:35.580
Please make sure that the aspects have on their favorite outfit. And if you have any questions at all, are any concerns about how to work the definitions.

272 "Holly Reiff" (3899988992)

00:39:35.580 --> 00:39:46.020

Please just reach out to you that. So we are seeing some great growth in both assistive technology and remote supports.

273 "Holly Reiff" (3899988992)

00:39:46.020 --> 00:39:55.920

We want to continue and improve that growth so that I've been reaching out trying to come up with 2 different community practices 1 for our community providers.

274 "Holly Reiff" (3899988992)

00:39:55.920 --> 00:40:05.430

Who would like to have some more discussions about implementing technology into their existing programs. So talking about what kind of roadblocks they might be facing.

275 "Holly Reiff" (3899988992)

00:40:05.430 --> 00:40:10.320

Lessons learned that they've tried already ideas for the future.

276 "Holly Reiff" (3899988992)

00:40:10.320 --> 00:40:20.155

Um, and supporting those providers, who are just getting started as well as helping out the division figure out how to support the growth of the 80 services and where we should go in the future with them.

277 "Holly Reiff" (3899988992)

00:40:20.575 --> 00:40:30.475

I'm also working on a similar community of practice for self advocates to get their voices heard on what they would like to see with our system technologies and remote support.

278 "Holly Reiff" (3899988992)

00:40:30.870 --> 00:40:36.630

And our technology 1st initiative going forward for remote support.

279 "Holly Reiff" (3899988992)

00:40:36.630 --> 00:40:41.700

In general cameras are not seen as remote supports that surveillance.

280 "Holly Reiff" (3899988992)

00:40:41.700 --> 00:40:48.180

If an individual or individuals team truly believes that a camera's absolutely required for support.

281 "Holly Reiff" (3899988992)

00:40:48.180 --> 00:40:55.290

There are certain parameters that need to be in place prior to implementation is not reviewing all remote support.

282 "Holly Reiff" (3899988992)

00:40:55.290 --> 00:41:00.475

However, if any computer community provider is wanting to implement remote supports for the 1st time,

283 "Holly Reiff" (3899988992)

00:41:00.865 --> 00:41:13.885

please reach out to you that for assistance with policy procedure and to help with any facilitation for that camera division approval community providers will need division approval for cameras supported technologies.

284 "Holly Reiff" (3899988992)

00:41:14.155 --> 00:41:17.875

And we'll also have a unique data collection requirements.

285 "Holly Reiff" (3899988992)

00:41:18.300 --> 00:41:28.350

Just remember you dad's here for you guys, we were happy to consult on any remote supports that are needed, and I'm going to kick it over to Shelley.

286 "Holly Reiff" (3899988992)

00:41:28.350 --> 00:41:31.380

For our update.

287 "shelly brown" (2610728704)

00:41:33.505 --> 00:41:47.935

Okay, thanks. I have just a few quick things I wanted to review. Um, 1, being that, what Holly touched on just briefly is, we do, have some trainings that are coming up as well as the recent 1 we had in regards to the consultation process.

288 "shelly brown" (2610728704)

00:41:47.935 --> 00:41:51.715

And so that's available on the website. If you want to review that from August.

289 "shelly brown" (2610728704)

00:41:51.715 --> 00:42:03.415

9, and then next week we have another 1 coming up on the evaluations and that's going to be an opportunity for us to learn maybe how to interpret that how to review those and use that in our outcome.

290 "shelly brown" (2610728704)

00:42:04.015 --> 00:42:17.485

As well, as what to expect, and this is also an opportunity for to understand what our system may require a need from them as an evaluation. So be on the lookout for those or here's the information.

291 "shelly brown" (2610728704)

00:42:17.485 --> 00:42:24.715

If you need that to go ahead and register for that webinar I also want to just use this opportunity to say, thank you to everyone.

292 "shelly brown" (2610728704)

00:42:25.015 --> 00:42:33.415

We started this team about a year ago, and it was about December that we started some new processes with the consultation.

293 "shelly brown" (2610728704)

00:42:33.420 --> 00:42:47.425

Process of EA, um, and so with that we had the criteria established that anything over 5,000 that was in an EA, request would be reviewed by our team, and we started to track these numbers and our 1st report.

294 "shelly brown" (2610728704)

00:42:47.455 --> 00:43:01.045

We were at 19 and then the next month. We moved up to 28% and I can tell you now we're sitting anywhere between 90-100% of each month. And so we just really appreciate you guys giving us that information because as a result of those reviews, it really does allow us.

295 "shelly brown" (2610728704)

00:43:01.045 --> 00:43:03.355

of those reviews it really does allow us

296 "shelly brown" (2610728704)

00:43:03.420 --> 00:43:18.415

To provide some more consistent messaging, um, to kind of see areas where we need to provide some more clarification, or maybe where we need to change the system. And we do use that information and we do use that feedback as for our own systems as well.

297 "shelly brown" (2610728704)

00:43:18.715 --> 00:43:33.355

This also allows us the opportunity to work with providers and service coordinators to ensure that the outcome is the best result for the family and a lot of times this will even incorporate we've been able to work with REE and Lucas on some things and really make sure, we have all the team players.

298 "shelly brown" (2610728704)

00:43:33.420 --> 00:43:46.105

That needs to be involved at the table. So that consultation piece is really designed to ensure that we give families the best outcome individuals, the best outcome that they can get. We also use that information.

299 "shelly brown" (2610728704)

00:43:46.105 --> 00:43:59.245

Like, I said to review the structure for IAE and then we also use that to determine where we need to have enhancements. And I think you're gonna see that in the next couple of months. There's gonna be some changes coming to IAE. So stay tuned.

300 "shelly brown" (2610728704)

00:43:59.935 --> 00:44:03.145

I think they're going to be favorable changes and this is something that's a.

301 "shelly brown" (2610728704)

00:44:03.420 --> 00:44:13.135

Of the information we've been able to retrieve as a result of these consultations and working directly with EA, providers also want to give a thank you for the webinars.

302 "shelly brown" (2610728704)

00:44:13.135 --> 00:44:27.505

We've had some great attendance, and we just asked that you continue to give us feedback on information that you would like and this also goes into, you know, we can do 1 on 1 trainings. We can work with. We've worked with service coordinator teams and just come in for their team meetings.

303 "shelly brown" (2610728704)

00:44:27.835 --> 00:44:33.415

Whatever is needed in any areas. We are more than happy to provide that. And then we also have.

304 "shelly brown" (2610728704)

00:44:33.420 --> 00:44:45.505

A lot of referrals for just some 1 on 1, technical assistance. Um, I know last week I worked with a provider who who has an ASL, because it's not provider owned or controlled they're eligible for some home modification.

305 "shelly brown" (2610728704)

00:44:45.505 --> 00:44:56.365

And they were really just wanting to know what the process was and what we need to do. So those are things that you can look to us to. Maybe it's just a quick question. Um, maybe it's a planning question how do we get started?

306 "shelly brown" (2610728704)

00:44:56.635 --> 00:45:03.355

So, definitely don't hesitate to refer folks to us in, in any of those situations. Um, the link below is just what I.

307 "shelly brown" (2610728704)

00:45:03.835 --> 00:45:16.615

Referred to, as kind of our getting started documents. If you have questions over our team, some of the services that we provide in that consultation or what those requirements are feel free to click on that. And that will take you to an overview of our system.

308 "shelly brown" (2610728704)

00:45:16.885 --> 00:45:30.055

And then, of course, anytime you need to get in touch with us, we can be reached the technology person, universal design at dot. Gov. And we will be able to respond to you directly with either your question or your consultation request.

309 "shelly brown" (2610728704)

00:45:30.145 --> 00:45:33.085

Um, so I just wanted to use this opportunity to say, thank you for.

310 "shelly brown" (2610728704)

00:45:34.075 --> 00:45:47.605

The progress and the information that we've received so far, and to let, you know, that we definitely are using that. Um, we're definitely seeing some progress and we just encourage you guys to continue to use our team to make sure we can help you with those outcomes.

311 "shelly brown" (2610728704)

00:45:47.905 --> 00:45:49.345

So, I will turn it over.

312 "shelly brown" (2610728704)

00:45:49.650 --> 00:45:53.400

To the next to Angie, to start with the fiscal updates.

313 "Angie Brenner" (2352166144)

00:45:55.200 --> 00:45:58.590

Everyone, um, so I'm trying to adjust my.

314 "Angie Brenner" (2352166144)

00:45:58.590 --> 00:46:04.560

Screen here, so I'm not all shaded out but anyway, thank you so much. There's a lot of good information today.

315 "Angie Brenner" (2352166144)

00:46:04.560 --> 00:46:08.160

Um, so excited to be a part of this, um.

316 "Angie Brenner" (2352166144)

00:46:08.160 --> 00:46:12.030

Go to the next slide.

317 "Angie Brenner" (2352166144)

00:46:12.030 --> 00:46:24.120

Many of you have seen the new decision items, the budget actions, but there may have been someone out there that hasn't seen this. So we want to make sure to share this with everyone. I will start off by saying that this has been.

318 "Angie Brenner" (2352166144)

00:46:24.120 --> 00:46:29.220

The most funding that I believe our division has received historically, at least to my knowledge.

319 "Angie Brenner" (2352166144)

00:46:29.220 --> 00:46:37.260

This last year with 755Million dollars so that is a lot of money. So we're so extremely thankful for that.

320 "Angie Brenner" (2352166144)

00:46:37.260 --> 00:46:44.700

You all of you that are here today, we're really able to help tell this story of.

321 "Angie Brenner" (2352166144)

00:46:44.700 --> 00:46:59.635

What you face daily, um, with the data that you've provided through staff stability surveys, you turnover rates through stories of of what you're facing um, boots on the grounds working with the people that we serve. Um, and so really what's really important to all of this is that.

322 "Angie Brenner" (2352166144)

00:46:59.910 --> 00:47:04.980

It's gonna help us here in Missouri to provide quality services to those that are accessing.

323 "Angie Brenner" (2352166144)

00:47:04.980 --> 00:47:13.740

Our waiver services, um, our state plan services. So thank you all so much for that. And I would also be remiss if I didn't.

324 "Angie Brenner" (2352166144)

00:47:13.740 --> 00:47:28.200

Say that it is a lot harder to spend money than it is to cut money. So, I also want to thank everyone for just helping us roll out so many initiatives over this next year and even kind of what we've been doing the last couple of years. So.

325 "Angie Brenner" (2352166144)

00:47:28.200 --> 00:47:34.350

We'll roll it through these pretty quick here, but just so everyone knows we have our new decision items.

326 "Angie Brenner" (2352166144)

00:47:34.350 --> 00:47:38.820

So, the utilization that's kind of a standard 1 that we, that we request.

327 "Angie Brenner" (2352166144)

00:47:38.820 --> 00:47:50.275

So, we did receive 127Million dollars and that included 1300 slots for in home services and 402 residential and this was the 1st time that we received funding for cost to continue. And that was an additional 38Million dollars.

328 "Angie Brenner" (2352166144)

00:47:50.275 --> 00:47:53.905

for cost to continue and that was an additional thirty eight million dollars

329 "Angie Brenner" (2352166144)

00:47:54.150 --> 00:48:09.085

For those individuals that we served in fiscal year, 21 to help cover some of the increased cost, you know, people are living longer, we're staying on our homes longer and so so cost to increase as we, we kind of age in place. Um, so again, like I said, that was the 1st time that we're able to get that.

330 "Angie Brenner" (2352166144)

00:48:09.085 --> 00:48:09.355

that

331 "Angie Brenner" (2352166144)

00:48:09.630 --> 00:48:22.680

The duty rate standardization this were these were funds that were approved originally in fiscal year, 22 so it's really just a continuation to keep those those rates. And that was for.

332 "Angie Brenner" (2352166144)

00:48:22.680 --> 00:48:26.490

Um, like our residential rates, um.

333 "Angie Brenner" (2352166144)

00:48:26.490 --> 00:48:40.855

There was our personal assistant, so that's again, just a continuation. The D telehealth, which is what station has provided it is the now in the waiver it is the health assessment and coordination service, this funding of 4.4Million dollars.

334 "Angie Brenner" (2352166144)

00:48:40.855 --> 00:48:41.905

four million dollars

335 "Angie Brenner" (2352166144)

00:48:42.180 --> 00:48:50.610

Was allocated to us appropriated to us to move it from an emergency contract during covid, um, to a waiver service. So.

336 "Angie Brenner" (2352166144)

00:48:50.610 --> 00:49:01.020

Um, so that we are moving along on getting that implemented officially in the 915 C waiver it's approved through appendix K right now. Okay. On the next slide.

337 "Angie Brenner" (2352166144)

00:49:01.020 --> 00:49:08.940

We have our value based payments and so this was 411Million dollars.

338 "Angie Brenner" (2352166144)

00:49:08.940 --> 00:49:14.160

375Million of that is for our rate increases.

339 "Angie Brenner" (2352166144)

00:49:14.160 --> 00:49:17.460

And that is to bring everyone to.

340 "Angie Brenner" (2352166144)

00:49:17.460 --> 00:49:22.980

Um, all the DSPs to, like, that 15 dollars an hour. So that was based off of our Mercer rate studies.

341 "Angie Brenner" (2352166144)

00:49:22.980 --> 00:49:29.220

Um, that we've done over the last couple of years, and we were able to get those finalized and then receive funding for that. So.

342 "Angie Brenner" (2352166144)

00:49:29.220 --> 00:49:38.280

We are excited about that 16Million dollars goes for incentive payments and those are the value based payments that we've been working on with stakeholders.

343 "Angie Brenner" (2352166144)

00:49:38.280 --> 00:49:46.740

To implement additional payments outside of just your service payments to kind of stabilize the workforce to have some pay for reporting.

344 "Angie Brenner" (2352166144)

00:49:46.740 --> 00:49:57.840

And then on top of that, we are working on enhancing and well, actually building and then enhancing components of our I. T. infrastructure. So that is another 19Million dollars.

345 "Angie Brenner" (2352166144)

00:49:57.840 --> 00:50:08.070

So, all of that totals up to the 411, and then we have an additional or additional enhancements of 14.7000.

346 "Angie Brenner" (2352166144)

00:50:08.070 --> 00:50:14.850

This is to build a, um, a DD health home module in the, um, with Hearst.

347 "Angie Brenner" (2352166144)

00:50:14.850 --> 00:50:28.225

So, a little bit of funding there, it's also to build more around sorry risk, mitigation, individual rights increase in our home modification limits. You're seeing all of those in, in waiver amendments.

348 "Angie Brenner" (2352166144)

00:50:28.645 --> 00:50:30.235

Um, we're also looking at.

349 "Angie Brenner" (2352166144)

00:50:30.540 --> 00:50:42.570

We've sent out an bid for a bid request for provider review services and then also looking at enhancing our medication administration certification.

350 "Angie Brenner" (2352166144)

00:50:42.570 --> 00:50:45.660

Um, on the next slide.

351 "Angie Brenner" (2352166144)

00:50:45.660 --> 00:51:00.180

We have more it doesn't stop there, um, case management privatization. We did receive 7.6Million dollars to shift 2200 individuals from our

regional office caseload to private providers and that. We kind of that would get us to a.

352 "Angie Brenner" (2352166144)
00:51:00.180 --> 00:51:05.460
proximally a 1 to 3536 ratio. Um, whereas a lot of our.

353 "Angie Brenner" (2352166144)
00:51:05.460 --> 00:51:10.710
Regional offices have anywhere between 1 to 50 up to 1 to 8.

354 "Angie Brenner" (2352166144)
00:51:10.710 --> 00:51:20.490
85, so it's pretty high. Um, we received 5.8Million to double our diagnostic evaluation capacity at the 6th, at the autism.

355 "Angie Brenner" (2352166144)
00:51:20.490 --> 00:51:31.410
Um, at the 6 clinics with autism services, and then there was funding for 2 additional autism centers 5Million dollars. So, Southwest and Joplin.

356 "Angie Brenner" (2352166144)
00:51:31.410 --> 00:51:39.690
And then DD council received or 17.8Million with their vaccination grants. So we had appropriation authority.

357 "Angie Brenner" (2352166144)
00:51:39.690 --> 00:51:51.900
Or that, that was passed through the budget and then our community waiver programs, we applied for provider relief funds just like, many of our providers did and we were awarded, um.

358 "Angie Brenner" (2352166144)
00:51:51.900 --> 00:51:58.440
3.4Million dollars, so, in order for us to be able to spend that we had to ask for.

359 "Angie Brenner" (2352166144)
00:51:58.440 --> 00:52:02.760
Um, appropriation, so we did get that appropriation.

360 "Angie Brenner" (2352166144)
00:52:02.760 --> 00:52:06.150
And then finally, for me.

361 "Angie Brenner" (2352166144)
00:52:06.150 --> 00:52:12.480
The fiscal year, 23 rate implementation just a little bit of an update on that.

362 "Angie Brenner" (2352166144)
00:52:12.480 --> 00:52:16.380
Our rate standardization waiver amendment is under CMS review.

363 "Angie Brenner" (2352166144)
00:52:16.380 --> 00:52:23.220
And they sent us their 1st set of questions this week and our federal programs team is working closely with.

364 "Angie Brenner" (2352166144)
00:52:23.220 --> 00:52:33.300
Fiscal and more health net to answer those questions from CMS we also submitted the rate standardization through an appendix. K. and that was to enable us to.

365 "Angie Brenner" (2352166144)
00:52:33.300 --> 00:52:39.390
Implement the rates July 1st and so we did receive questions from CMS on that.

366 "Angie Brenner" (2352166144)
00:52:39.390 --> 00:52:45.060
I don't know a week or so ago and we turned them around the next day. So we're hoping to hear back soon on that. Appendix. K.

367 "Angie Brenner" (2352166144)
00:52:45.060 --> 00:52:54.930
That will probably happen a little bit quicker than the actual 915 C amendment. None of the questions that we're getting from CMS right now are concerning. That's mostly clarification.

368 "Angie Brenner" (2352166144)
00:52:54.930 --> 00:52:58.080
So, we'll continue to work on those and maybe.

369 "Angie Brenner" (2352166144)
00:52:58.080 --> 00:53:01.110
Update a little bit of the language to make it more clear.

370 "Angie Brenner" (2352166144)
00:53:01.110 --> 00:53:12.480
Um, again, I think we want to talk about this a little bit for those services that did not need approval. They'd been entered and see more. Please can continue to check kind of those budgets to make sure it looks correct with the.

371 "Angie Brenner" (2352166144)
00:53:12.480 --> 00:53:17.790
With the, and we'll continue to work through those with with the, the providers.

372 "Angie Brenner" (2352166144)
00:53:17.790 --> 00:53:28.920
And then tomorrow, um, just kind of a shout out for everyone tomorrow. We'll be our, our webinar for our rate study, refresh and Mercer. Our state's Actuaries will be joining us.

373 "Angie Brenner" (2352166144)

00:53:28.920 --> 00:53:39.180

And with that, our focus is going to be the refreshing of the wage data. So there's a lot of different components with the rate studies that we have to look at.

374 "Angie Brenner" (2352166144)

00:53:39.180 --> 00:53:43.200

Um, so the 1st, and the most significant piece would be the, the wage wage.

375 "Angie Brenner" (2352166144)

00:53:43.200 --> 00:53:50.670

Which components, so, Mercer will be presenting kind of what we've walked through and talked about with the, the wage data and how that refresh looks.

376 "Angie Brenner" (2352166144)

00:53:50.670 --> 00:53:59.370

Um, and then remaining components of the right say refresh will be in future webinars. So we'll, we'll kind of roll those out bit by bit with, with, um.

377 "Angie Brenner" (2352166144)

00:53:59.370 --> 00:54:02.550

With the, with the providers and the stakeholders.

378 "Angie Brenner" (2352166144)

00:54:02.550 --> 00:54:06.480

Let me think with that is what I have for today.

379 "Angie Brenner" (2352166144)

00:54:08.400 --> 00:54:15.420

So, I'm gonna turn it over to Kerry. Thank you. Bye, Angie.

380 "Carrie Williams" (1521861120)

00:54:15.420 --> 00:54:22.290

Good afternoon everyone, um, today I'm going to be covering just a couple of reminders.

381 "Carrie Williams" (1521861120)

00:54:22.290 --> 00:54:28.650

Regarding the verbal signature flexibility and, uh, support monitoring guidance.

382 "Carrie Williams" (1521861120)

00:54:31.890 --> 00:54:46.855

So the division notification was previously sent out regarding the extension of the federal public health emergency, and that renewal was effective for 90 days, um, or it extended until Thursday,

383 "Carrie Williams" (1521861120)

00:54:47.005 --> 00:54:59.605

October the 13rd of 2022, as a result of that extension the 1135. and also the appendix K flexibilities do continue at this time. flexibilities do continue at this time

384 "Carrie Williams" (1521861120)

00:55:03.000 --> 00:55:09.265

I know that we do frequently receive questions regarding the verbal signature flexibility.

385 "Carrie Williams" (1521861120)

00:55:09.295 --> 00:55:09.595

Um,

386 "Carrie Williams" (1521861120)

00:55:09.625 --> 00:55:24.355

so that's really what we're focusing on today and just a reminder that the verbal signature flexibility is at 1135 flexibility only and it will end up on the expiration of the public health

387 "Carrie Williams" (1521861120)

00:55:24.355 --> 00:55:26.005

emergency. health emergency

388 "Carrie Williams" (1521861120)

00:55:26.575 --> 00:55:41.275

So, when that public, the federal public health emergency expires that 1135 flexibility will expire as well and there will be no transition period for the verbal signature flexibility at that time.

389 "Carrie Williams" (1521861120)

00:55:41.275 --> 00:55:42.025

that time

390 "Carrie Williams" (1521861120)

00:55:44.940 --> 00:55:57.685

We have included here in the PowerPoint, a link to that covid, 19 flexibility chart and this chart will include the 135 flexibilities as well as the appendix K flexibilities.

391 "Carrie Williams" (1521861120)

00:55:57.685 --> 00:56:05.935

And if you click on the link and go in and view that chart, you will note that. you will note that

392 "Carrie Williams" (1521861120)

00:56:06.210 --> 00:56:16.110

The appendix K flexibilities in no, later than 6 months after the federal public health emergency ends. Um, and then.

393 "Carrie Williams" (1521861120)

00:56:16.110 --> 00:56:24.865

If a flexibility is both 1135 and appendix K authority, then the flexibility will end at a later date.

394 "Carrie Williams" (1521861120)

00:56:24.865 --> 00:56:39.595

Um, again, with our focus today on the verbal signature flexibility that particular flexibility will end when the federal public health emergency expires since it is and 1135. um, only flexibility.

395 "Carrie Williams" (1521861120)

00:56:39.595 --> 00:56:41.845

five um only flexibility

396 "Carrie Williams" (1521861120)

00:56:43.255 --> 00:56:55.105

So that is our review on verbal signature flexibility and now we're going to move on to some reminders around support, monitoring guidance.

397 "Carrie Williams" (1521861120)

00:56:55.825 --> 00:57:07.675

We have received some questions regarding what to do, you know, currently in cases or situations where an individual or maybe even individuals within a home.

398 "Carrie Williams" (1521861120)

00:57:07.675 --> 00:57:12.205

Maybe have confirmed covid, 19 cases and just.

399 "Carrie Williams" (1521861120)

00:57:12.210 --> 00:57:24.085

Wanted to remind everyone, um, that the, the process is that, as that support coordinator is planning for that visit with that individual the in person visit.

400 "Carrie Williams" (1521861120)

00:57:24.115 --> 00:57:35.545

Um, they're assessing and they're determining, uh, does the individual or individuals within that home have a current confirm Kobe, 19 infection.

401 "Carrie Williams" (1521861120)

00:57:36.385 --> 00:57:42.115

Have they been tested and they are awaiting covid, 19 test results.

402 "Carrie Williams" (1521861120)

00:57:42.510 --> 00:57:46.440

Or they're experiencing carbon 19 symptoms.

403 "Carrie Williams" (1521861120)

00:57:46.440 --> 00:57:55.800

And if any of those things are true, then just a reminder that the support coordinator, then.

404 "Carrie Williams" (1521861120)

00:57:55.800 --> 00:58:04.975

Um, would conduct a remote virtual visit, and they would resume that in person visit um,

405 "Carrie Williams" (1521861120)
00:58:05.275 --> 00:58:18.235
after all positive individuals are 10 days past that date of the positive test and their symptom free for 24 hours. Um, so just wanted to remind everyone of the guidance that is out there.

406 "Carrie Williams" (1521861120)
00:58:18.235 --> 00:58:23.395
Um, also included here is the link. You can go directly to. to

407 "Carrie Williams" (1521861120)
00:58:23.700 --> 00:58:27.120
That guidance, um, for your reference.

408 "Carrie Williams" (1521861120)
00:58:27.120 --> 00:58:35.130
And those are the 2 updates that I had to share for today so I will turn it over to our next presenter.

409 "Carrie Williams" (1521861120)
00:58:35.130 --> 00:58:40.110
Oh, it looks like that is Emily with our federal programs unit.

410 "Emily Luebbering" (1228484096)
00:58:40.110 --> 00:58:44.910
It was carrying Hi, I'm Emily brain director of the federal programs unit.

411 "Emily Luebbering" (1228484096)
00:58:45.385 --> 00:58:58.765
And I'm going to share some updates our review of the proposed items in our upcoming amendments, and our upcoming wave of renewal,

412 "Emily Luebbering" (1228484096)
00:58:59.335 --> 00:59:09.895
just to kind of go over. We have a amendment currently with CMS, and it's amendments for all of our, all 4 waivers. So, we have 4 amendments with CMS.

413 "Emily Luebbering" (1228484096)
00:59:09.990 --> 00:59:15.750
We have another 1 that we're working on the division is working on for our valued based.

414 "Emily Luebbering" (1228484096)
00:59:15.750 --> 00:59:29.610
Payments and then we're also continuing to work on our wave of renewals for more kids and partnership, which will have the additional amendments to go with them. So that all of the items match.

415 "Emily Luebbering" (1228484096)
00:59:29.610 --> 00:59:39.690

Across all of the proposed changes match across our waivers. So we've got a lot going on and you'll see when I start going through each of the amendments.

416 "Emily Luebbering" (1228484096)

00:59:39.690 --> 00:59:47.310

Keeping track of it of what's happening when might be a little difficult for everybody, but There'll be communication of the changes.

417 "Emily Luebbering" (1228484096)

00:59:47.665 --> 01:00:00.595

So, right now we have the hack, which is our health assessment and coordination and great standardization amendment with CMS. This is the 1 that you hear about what we're waiting on for to approve.

418 "Emily Luebbering" (1228484096)

01:00:00.595 --> 01:00:14.185

So we can do those additional rate increases. So, in that amendment, we have proposed adding the health assessment and coordination service, your station and D to all of the waivers.

419 "Emily Luebbering" (1228484096)

01:00:14.280 --> 01:00:25.830

We're proposing changing the EA, which is your adaptive system adaptive equipment and 80 are assistive technology.

420 "Emily Luebbering" (1228484096)

01:00:25.830 --> 01:00:33.775

And our specialized medical equipment and crisis intervention services from a waiver year limit to an ISP here.

421 "Emily Luebbering" (1228484096)

01:00:34.045 --> 01:00:44.275

So, no change in the limits just the change in how they're monitored, how those limits are monitored from the waiver year to an year.

422 "Emily Luebbering" (1228484096)

01:00:44.760 --> 01:00:51.030

We're also updating some of our applied behavioral analysis service titles.

423 "Emily Luebbering" (1228484096)

01:00:51.030 --> 01:01:02.340

And the standardization of rates, and what that means is we're changing some of our methodology for our services to standardize the rate methodology process.

424 "Emily Luebbering" (1228484096)

01:01:02.340 --> 01:01:09.960

And because of that, we're needing that CMS approval so that we can do those rate increases that we're waiting on.

425 "Emily Luebbering" (1228484096)

01:01:09.960 --> 01:01:15.210

A change, we're also 1 of the things that you'll, you'll find.

426 "Emily Luebbering" (1228484096)

01:01:15.210 --> 01:01:24.360

And most of them are just rate increases transportation will be changing from a monthly unit to a trip unit.

427 "Emily Luebbering" (1228484096)

01:01:24.360 --> 01:01:29.490

Because of the maintenance of effort, we will allow both.

428 "Emily Luebbering" (1228484096)

01:01:29.490 --> 01:01:34.980

The both units to be build, according to the provider, their preferences.

429 "Emily Luebbering" (1228484096)

01:01:34.980 --> 01:01:40.890

That is not to decrease or restrict any payments or rates at this point.

430 "Emily Luebbering" (1228484096)

01:01:40.890 --> 01:01:46.500

So, There'll be more discussion, I'm sure with Wanda on those changes for our providers.

431 "Emily Luebbering" (1228484096)

01:01:46.500 --> 01:01:49.830

As that's implemented.

432 "Emily Luebbering" (1228484096)

01:01:49.830 --> 01:01:56.280

We're also updating the horse with your health risk screening tool, implementation dates.

433 "Emily Luebbering" (1228484096)

01:01:56.280 --> 01:02:01.830

To May of 2024, so complete of the implementation of that.

434 "Emily Luebbering" (1228484096)

01:02:01.830 --> 01:02:11.040

The initial screening tools will be may in 2024 to kind of coincide with our when we've had a full year of connection in place.

435 "Emily Luebbering" (1228484096)

01:02:11.040 --> 01:02:21.990

We're increasing the comp, the community support and partnership for hopes lots. So we'll have additional thoughts to serve it more individuals.

436 "Emily Luebbering" (1228484096)

01:02:21.990 --> 01:02:27.930

And then we're also increasing the community support waiver cap to 40,000 dollars.

437 "Emily Luebbering" (1228484096)

01:02:30.660 --> 01:02:38.695

The value based amendment, that's the additional amendment that we're working on. Currently. You probably have heard a lot about value, based payments or value.

438 "Emily Luebbering" (1228484096)

01:02:38.695 --> 01:02:52.195

Based incentives were the plan is to have this turned into CMS as soon as they approve our rate increase amendment with an implementation for the items in this amendment.

439 "Emily Luebbering" (1228484096)

01:02:52.470 --> 01:03:05.280

Starting January, 1st of 2023. of course, this is all dependent on when CMS approves our amendments and this amendment we're adding the value based payments to incentivize a reward for best practices.

440 "Emily Luebbering" (1228484096)

01:03:06.055 --> 01:03:12.595

Requesting and proposing that we update the environmental accessibility adaptation to home and vehicle modification,

441 "Emily Luebbering" (1228484096)

01:03:12.895 --> 01:03:22.165

maximum limit from 10,000 per individual per year to 20,000 dollars per individual every 2 years. two years

442 "Emily Luebbering" (1228484096)

01:03:22.260 --> 01:03:34.620

So, essentially, it kind of comes out of being 10,000 each year, but this gives the flexibility to our individuals to have that 20,000 for a 2 year period.

443 "Emily Luebbering" (1228484096)

01:03:34.620 --> 01:03:39.720

And then our last thing that it's proposing, and is the.

444 "Emily Luebbering" (1228484096)

01:03:39.720 --> 01:03:45.810

We're going to add the level 2, direct support, professional training.

445 "Emily Luebbering" (1228484096)

01:03:46.890 --> 01:03:52.770

Completion of the level 2 direct support professional training within a year of employment exception.

446 "Emily Luebbering" (1228484096)

01:03:52.770 --> 01:04:02.965

So, they may receive our can work towards getting their level 2 training in place of a high school diploma or a, that we currently require now.

447 "Emily Luebbering" (1228484096)

01:04:03.325 --> 01:04:17.695

And this will open up some doors for some of our DSP workers out there who may not be able to finish their for whatever reason. But because they can do this training while they're with their job, they can complete that level to training.

448 "Emily Luebbering" (1228484096)
01:04:17.695 --> 01:04:18.955
That's in reliance.

449 "Emily Luebbering" (1228484096)
01:04:23.425 --> 01:04:38.095
So then the last 1 that I had last thing we have going on with our waivers waiver renewals amendments is the partnership for hope and little kids waiver renewal. And, of course, as I mentioned, we'll also update our competency with these changes as well.

450 "Emily Luebbering" (1228484096)
01:04:38.430 --> 01:04:51.630
These will be the proposal, or the effective date of these would be 71 of 2023 because that's when we would have when we're due for our renewals of the partnership and markets.

451 "Emily Luebbering" (1228484096)
01:04:51.895 --> 01:05:05.095
So, in the waiver renewals, we are proposing to make remote supports we'll move it out of assistive technology and make its own make it its own standalone service.

452 "Emily Luebbering" (1228484096)
01:05:05.665 --> 01:05:07.915
So we'll have its own service definition.

453 "Emily Luebbering" (1228484096)
01:05:08.250 --> 01:05:14.850
It's on all limits, maximum limits, that sort of thing. We'll also add.

454 "Emily Luebbering" (1228484096)
01:05:14.850 --> 01:05:29.130
Specialized medical equipment, maximum limit to the waiver language to match the waiver manual, which is that 10,000 dollars maximum and that's our current practice that's in our manual. That's what we follow. We're just this.

455 "Emily Luebbering" (1228484096)
01:05:29.130 --> 01:05:33.120
This is more of just adding it to the link waiver language.

456 "Emily Luebbering" (1228484096)
01:05:33.120 --> 01:05:37.650
So no change actual change in how we practice.

457 "Emily Luebbering" (1228484096)
01:05:37.650 --> 01:05:43.740
Will be adding virtual delivery for our employment services.

458 "Emily Luebbering" (1228484096)
01:05:43.740 --> 01:05:47.310
So your benefits planning career, planning, supportive employment.

459 "Emily Luebbering" (1228484096)
01:05:47.310 --> 01:05:53.400
I know I'm missing a few. Those will be allowed to be provided virtually.

460 "Emily Luebbering" (1228484096)
01:05:53.400 --> 01:05:56.790
It once approved by, um.

461 "Emily Luebbering" (1228484096)
01:05:56.790 --> 01:06:11.100
By the way by, they are currently allowed as well as other services now under appendix K to be provided virtually but this will allow for them to continue to be provided. Virtually after the appendix K expires.

462 "Emily Luebbering" (1228484096)
01:06:11.100 --> 01:06:23.550
We also have some additional updates to our service definition, some odds, and ends about debris removal. Some other things to clarify with the use of art that service.

463 "Emily Luebbering" (1228484096)
01:06:23.550 --> 01:06:30.960
And then we'll update shared living limitation to match the waiver manual language.

464 "Emily Luebbering" (1228484096)
01:06:30.960 --> 01:06:42.840
I think it's actually the share manual, shared, living manual and a shared living staff qualifications. So, currently in the shared living are currently in the, um.

465 "Emily Luebbering" (1228484096)
01:06:42.840 --> 01:06:54.145
Waiver it says parents of minors, we're going to remove the of minors to make it just parents, which this matches what we do in practice as well in shared living manual.

466 "Emily Luebbering" (1228484096)
01:06:54.325 --> 01:06:59.215
So not really a change there, but making things match across the board.

467 "Emily Luebbering" (1228484096)
01:07:03.360 --> 01:07:11.610
And the last thing I wanted to head on, so that was a lot of information about all the changes for post changes that we have coming.

468 "Emily Luebbering" (1228484096)
01:07:11.610 --> 01:07:17.070
The last time I want to mention is regarding and the memo fields.

469 "Emily Luebbering" (1228484096)

01:07:17.070 --> 01:07:31.020

So, if you're not aware of it, or if you haven't heard electronic visit, verification is required for all of our personal assistant visits and agency and.

470 "Emily Luebbering" (1228484096)

01:07:31.020 --> 01:07:36.870

There are requirements for when those those visitors submitted.

471 "Emily Luebbering" (1228484096)

01:07:36.870 --> 01:07:45.360

1 of the requirements that we are seeing that our providers are not complying with is the completion of the.

472 "Emily Luebbering" (1228484096)

01:07:45.360 --> 01:07:52.650

What we're calling the memo field, and that's kind of like an open box where providers are.

473 "Emily Luebbering" (1228484096)

01:07:52.650 --> 01:08:06.570

Or, to add a note, and this should relate to what our provide providers would call the progress note. So, all of our records require is building memo field.

474 "Emily Luebbering" (1228484096)

01:08:06.570 --> 01:08:20.125

There is a maximum limit to the memo field. It was recently increased to a maximum of 1024 characters, including spaces. This is alphanumeric limited characters. Especially some limited characters are are allowed.

475 "Emily Luebbering" (1228484096)

01:08:20.125 --> 01:08:21.895

characters are are allowed

476 "Emily Luebbering" (1228484096)

01:08:23.065 --> 01:08:36.205

So, if a provider goes over the 1024 characters, the vendors should it's called truncate basically determine how much can be sent to the actual aggregator system,

477 "Emily Luebbering" (1228484096)

01:08:36.205 --> 01:08:48.085

which is the ML, health net aggregator gator aggregator. Sorry? Excuse me? Um, system, if they send over the 1024 characters, that record will be rejected. So it's.

478 "Emily Luebbering" (1228484096)

01:08:48.085 --> 01:08:52.495

characters that record will be rejected so it's

479 "Emily Luebbering" (1228484096)

01:08:52.650 --> 01:08:57.660
Important that the system that our providers have can.

480 "Emily Luebbering" (1228484096)
01:08:57.660 --> 01:09:05.340
Can do that function, have that functionality to basically cut off how much they spend. We're not asking providers to.

481 "Emily Luebbering" (1228484096)
01:09:05.340 --> 01:09:15.570
Stop documenting at a 1024 characters they should have a complete progress now, but their system should only send over 1024 characters.

482 "Emily Luebbering" (1228484096)
01:09:19.075 --> 01:09:29.665
And any questions that we do, sometimes get questions about the documentation requirements and direct documentation requirements for the PA service P, visits have not changed.

483 "Emily Luebbering" (1228484096)
01:09:29.905 --> 01:09:36.745
They need to continue to document the services that they've provided. Um, and then.

484 "Emily Luebbering" (1228484096)
01:09:37.225 --> 01:09:45.325
Think that was it we have sent, you will have seen possibly seen some emails out there email blast about this memo field.

485 "Emily Luebbering" (1228484096)
01:09:45.325 --> 01:09:53.575
We're really trying to get providers on board with completing this memo field with meaningful information progress to note information.

486 "Emily Luebbering" (1228484096)
01:09:54.240 --> 01:10:06.690
The Mac, when they do audits will not it's not they do not want to see check it in at this time checked out at this time they want to stay true proper steps.

487 "Emily Luebbering" (1228484096)
01:10:06.690 --> 01:10:15.720
So, and we have been received some questions. So if you have those questions, if you're getting for questions for providers, please send them our way.

488 "Emily Luebbering" (1228484096)
01:10:15.720 --> 01:10:19.950
And I think that's all I have for today. Thank you.

489 "jaclyn colter" (4071887616)
01:10:24.565 --> 01:10:35.755

Hello everyone, um, I just have 2 little agenda items today. Um, and I'm hoping that they are both, um, actually more reminders than brand new information for you.

490 "jaclyn colter" (4071887616)

01:10:36.535 --> 01:10:46.315

Um, the 1st item is, um, as, you know, we are working towards transitioning out of the representative services.

491 "jaclyn colter" (4071887616)

01:10:46.825 --> 01:10:54.445

Um, at this time, we don't have a, um, set date as to when we are hoping to be completely removed from this role. But.

492 "jaclyn colter" (4071887616)

01:10:54.450 --> 01:10:57.180

We are actively working on it. Um.

493 "jaclyn colter" (4071887616)

01:10:57.835 --> 01:11:07.285

I did want to mention I've gotten quite a few questions about how this process works and I did want to mention that the process is primarily being driven by social security.

494 "jaclyn colter" (4071887616)

01:11:08.155 --> 01:11:19.225

Uh, they are the ones that are kind of working on identifying appropriate individuals or agencies that might be able to serve in this capacity and then they're getting the ball rolling to, um.

495 "jaclyn colter" (4071887616)

01:11:19.500 --> 01:11:34.050

Initiate those moves, uh, if you do have any, um, questions about, um, any pay moves that have already happened, that might be in progress or if you are, um.

496 "jaclyn colter" (4071887616)

01:11:34.525 --> 01:11:48.205

Interested in, possibly becoming a pay yourself, um, or your agency uh, I would, um, encourage you to reach out to Social Security and they can answer any questions that you might have about. What all is required.

497 "jaclyn colter" (4071887616)

01:11:48.235 --> 01:11:58.015

Um, and, um, you know, kind of get you started and and let, you know, if you'd be a good fit for, for that individual or individuals that you are working with.

498 "jaclyn colter" (4071887616)

01:11:59.460 --> 01:12:05.640

And then the 2nd item, which is kind of, um, goes hand in hand, uh, with the.

499 "jaclyn colter" (4071887616)

01:12:05.640 --> 01:12:09.180
Uh, representative pay, he moves, so.

500 "jaclyn colter" (4071887616)
01:12:09.180 --> 01:12:17.130
Uh, we will no longer be entering in room and board budgets and to see more if we are not the individual's pay.

501 "jaclyn colter" (4071887616)
01:12:17.130 --> 01:12:29.640
Since we aren't making the monthly payments for the room and board side out of the consumer's benefit the budget's not really driving anything in Seymour.

502 "jaclyn colter" (4071887616)
01:12:30.085 --> 01:12:42.595
I did want to, um, note, though, that this does mean if you are typically used to printing or receiving your scl statement monthly. Um, if we are not entering the budget and this is not going to be populated.

503 "jaclyn colter" (4071887616)
01:12:42.595 --> 01:12:51.655
So, you are going to have to, um, go back to the contracts or another means, uh, to look at what the monthly payment amounts will be on those.

504 "jaclyn colter" (4071887616)
01:12:51.685 --> 01:12:59.635
Um, uh, I've gotten quite a few questions, um, as we talk more and more about this, uh, specifically about how the.

505 "jaclyn colter" (4071887616)
01:12:59.665 --> 01:13:11.455
Group homes would work, or how, you know, how much, um, the rates are for those individuals and, um, I did want to just remind everyone that that information is, um,

506 "jaclyn colter" (4071887616)
01:13:11.455 --> 01:13:26.245
embedded and to see more and you actually can find it by looking, um, under the provider contract section and see more and it lists out, um, each of those different rates for each of the, um, locations of the group homes.

507 "jaclyn colter" (4071887616)
01:13:26.520 --> 01:13:39.390
Um, if you aren't sure where to find this information, you can definitely reach out to me or to your vendor support coordinator, or any of the other, um, regional business office leads.

508 "jaclyn colter" (4071887616)
01:13:39.390 --> 01:13:49.260
And that's really all I had today to very short little items. So please let me know like I said, if you have any questions on how either of those will work.

509 "Duane Shumate" (3819066112)
01:13:52.230 --> 01:14:03.180

Good afternoon everybody this is going to make the state coordinator, employment, community engagement and I'll be talking just a few minutes about our certified direct support professional apprenticeship program.

510 "Duane Shumate" (3819066112)
01:14:03.180 --> 01:14:08.220

And then just also a couple of updates about our employment team, and the support and service.

511 "Duane Shumate" (3819066112)
01:14:08.220 --> 01:14:17.520

That we're able to provide, so, with many of you all have probably heard me talk about Missouri talent pathways, which is the.

512 "Duane Shumate" (3819066112)
01:14:17.520 --> 01:14:20.550

Name of the effort and initiative, um, that.

513 "Duane Shumate" (3819066112)
01:14:20.550 --> 01:14:26.610

Our certified direct support professional registered apprenticeship program is a part of.

514 "Duane Shumate" (3819066112)
01:14:26.610 --> 01:14:31.495

So, we 1st started developing Missouri talent pathways. It was as early as fall of 2018.

515 "Duane Shumate" (3819066112)
01:14:31.495 --> 01:14:43.135

uh, so this preceded the pandemic the understanding of our profiles, or any of the impact that we've seen since the, the public health emergency. public health emergency

516 "Duane Shumate" (3819066112)
01:14:43.650 --> 01:14:47.730

We knew at that time that there was an incredible challenge with.

517 "Duane Shumate" (3819066112)
01:14:47.730 --> 01:14:57.180

Finding appropriate workforce and then retaining that workforce. So, what we began to do was work with a set of stakeholder providers, uh, some family members.

518 "Duane Shumate" (3819066112)
01:14:57.180 --> 01:15:08.605

Some, um, post secondary ad settings and really developed an aim of how we could go about helping solve part of the DSP workforce crisis. And, as you can see on the screen.

519 "Duane Shumate" (3819066112)

01:15:08.635 --> 01:15:14.065

Uh, the key aims that we had at that time, were to stabilize the structure. The workforce.

520 "Duane Shumate" (3819066112)

01:15:14.310 --> 01:15:21.630

Construct career pathways for direct support professionals, kind of, standardize the priorities and the competencies.

521 "Duane Shumate" (3819066112)

01:15:21.630 --> 01:15:31.020

That we would see of the ideal, direct support professional, anytime you could begin to stabilize the workforce that's going to mitigate risk.

522 "Duane Shumate" (3819066112)

01:15:31.020 --> 01:15:37.500

Not just risk financial risk of the provider. Uh, but also it will mitigate the risk.

523 "Duane Shumate" (3819066112)

01:15:37.500 --> 01:15:43.590

Of any health or safety concerns of those who are receiving services when you're working with individuals.

524 "Duane Shumate" (3819066112)

01:15:43.590 --> 01:15:52.830

That you're more accustomed to and there's not the, every evolving door of direct support professionals. And then the last name that we had was by having.

525 "Duane Shumate" (3819066112)

01:15:52.830 --> 01:15:59.490

Greater stability of the workforce with individuals that have possessed national best practice skills.

526 "Duane Shumate" (3819066112)

01:15:59.490 --> 01:16:03.900

And competencies that this would correlate to increased outcomes.

527 "Duane Shumate" (3819066112)

01:16:03.900 --> 01:16:08.190

For the individuals that we all collectively support and serve.

528 "Duane Shumate" (3819066112)

01:16:09.300 --> 01:16:12.720

So, the key elements of Missouri talent pathways.

529 "Duane Shumate" (3819066112)

01:16:12.720 --> 01:16:17.580

And this is following the US Department of labor's office, apprenticeships, guidance.

530 "Duane Shumate" (3819066112)

01:16:17.755 --> 01:16:31.255

On design of a registered apprenticeship so it is critical. Uh, the words registered apprenticeship are critical, because that does mean that it has been formally registered reviewed and approved by the US Department of labor.

531 "Duane Shumate" (3819066112)

01:16:31.825 --> 01:16:36.055

Um, the 5 essential elements that are required in any.

532 "Duane Shumate" (3819066112)

01:16:36.330 --> 01:16:49.260

Registered apprenticeship program is that you have to have an employer partner. Those would be our state agency and our community based organizations there has to be structured on the job training of at least 2000 hours.

533 "Duane Shumate" (3819066112)

01:16:49.260 --> 01:16:59.430

And in our program, it is requiring 2000 hours upon the job training and mentoring for any new employee who registers.

534 "Duane Shumate" (3819066112)

01:16:59.430 --> 01:17:02.490

As an, a premise for a.

535 "Duane Shumate" (3819066112)

01:17:02.490 --> 01:17:12.420

Community based organization that chooses to participate in this initiative through that structure on the job training, uh, direct support professionals will be developing.

536 "Duane Shumate" (3819066112)

01:17:12.420 --> 01:17:21.300

15 competencies, those 15 competencies are the evidence based validated competencies identified by the National Alliance.

537 "Duane Shumate" (3819066112)

01:17:21.300 --> 01:17:27.960

For direct support professionals and demonstrating those 15 competencies. There are 69 skills.

538 "Duane Shumate" (3819066112)

01:17:27.960 --> 01:17:31.260

That have been identified by an.

539 "Duane Shumate" (3819066112)

01:17:31.260 --> 01:17:41.910

That comprise those 15 competencies. So the 2000 hours of on the job training is focused on mentors and tradings at the mentors and traders.

540 "Duane Shumate" (3819066112)

01:17:41.910 --> 01:17:52.200

At those community based organizations working with the apprentice or new employee on developing these 15 competencies and 69 skills.

541 "Duane Shumate" (3819066112)

01:17:52.200 --> 01:18:00.570

The 3rd area that's required in registered apprenticeship program is a minimum of 144 hours of related instruction.

542 "Duane Shumate" (3819066112)

01:18:00.570 --> 01:18:12.570

In our model, the slide says 169 that's actually been updated to 158, uh, contact hours. So those hours would be completed in the reliable portal.

543 "Duane Shumate" (3819066112)

01:18:12.570 --> 01:18:22.560

Uh, whether you're using the DD portal, or if you're worth the provider agency that has your own license with reliance those 158 hours.

544 "Duane Shumate" (3819066112)

01:18:22.560 --> 01:18:27.510

Our courses that, um, parallel with the 15 competencies.

545 "Duane Shumate" (3819066112)

01:18:27.510 --> 01:18:40.410

Identified by those are the exact same courses that an individual would be completing. If you were participating in the evaluate, purchasing a level 1 level 2 level 3 training.

546 "Duane Shumate" (3819066112)

01:18:40.410 --> 01:18:49.920

The 4th part that's required and registered apprenticeship is that the apprentice or employee has an increase in their salary.

547 "Duane Shumate" (3819066112)

01:18:49.920 --> 01:18:54.390

As they develop skills and complete the apprenticeship program.

548 "Duane Shumate" (3819066112)

01:18:54.390 --> 01:19:02.400

Uh, what we have specified in our partnership is that individuals would need to start off at a base wage rate of 15 dollars an hour.

549 "Duane Shumate" (3819066112)

01:19:02.400 --> 01:19:11.850

And upon completion of the full apprenticeship, uh, they would need to be paid at a minimum of 650 an hour, uh, any employer partner who participates.

550 "Duane Shumate" (3819066112)

01:19:11.850 --> 01:19:19.170

Establish their own wage scale we just need to see that. They're reporting to those, um, uh, those.

551 "Duane Shumate" (3819066112)

01:19:19.170 --> 01:19:33.000

Step increases, uh, that I've just covered, and then the 5th piece of a registered apprenticeship, uh, is that a results in a national occupation credential? And so what we have done is registered with the US Department of labor.

552 "Duane Shumate" (3819066112)

01:19:33.000 --> 01:19:36.630

Uh, the credential of certified direct support, professional.

553 "Duane Shumate" (3819066112)

01:19:36.630 --> 01:19:40.410

So, if someone who is working at an employer partner.

554 "Duane Shumate" (3819066112)

01:19:40.410 --> 01:19:45.990

Chooses to participate once they've completed the 2000 hours of on the job training.

555 "Duane Shumate" (3819066112)

01:19:45.990 --> 01:19:50.850

They demonstrated the 15 competencies and the 69 skills that go along with that.

556 "Duane Shumate" (3819066112)

01:19:50.850 --> 01:19:56.880

Completed 158 hours of training not only would they have a salary increase.

557 "Duane Shumate" (3819066112)

01:19:56.880 --> 01:20:03.630

But they would also be getting a credential from the U. S. Department of labor as they certified direct support professional.

558 "Duane Shumate" (3819066112)

01:20:03.630 --> 01:20:07.620

The 15 competencies that, uh, are developed.

559 "Duane Shumate" (3819066112)

01:20:07.620 --> 01:20:11.190

Are on the screen here they fall in 4 broad domains.

560 "Duane Shumate" (3819066112)

01:20:11.190 --> 01:20:17.070

Of care, uh, fostering determination, uh, professional growth and development.

561 "Duane Shumate" (3819066112)

01:20:17.070 --> 01:20:20.190

And then supporting individuals and community integration.

562 "Duane Shumate" (3819066112)

01:20:20.190 --> 01:20:29.730

I understand the slides a little bit small. Uh, but I know folks will be able to access this presentation later. And so you'll be able to identify those.

563 "Duane Shumate" (3819066112)

01:20:29.730 --> 01:20:40.110

15 competencies, if you have questions about Missouri talent pathways, or if you're a provider agency, who would like to have a discussion about it.

564 "Duane Shumate" (3819066112)

01:20:40.110 --> 01:20:48.210

Feel free to give me a call on this slide. My work email address is listed, as is the mo tap address.

565 "Duane Shumate" (3819066112)

01:20:48.210 --> 01:20:59.370

The address is also my email, so, uh, you can email either 1 of those addresses, and I'll receive it and then we do have a webpage that is hyperlink.

566 "Duane Shumate" (3819066112)

01:20:59.370 --> 01:21:05.730

On this slide, uh, to learn more about it currently we, we have 8 approved sites across Missouri.

567 "Duane Shumate" (3819066112)

01:21:05.730 --> 01:21:09.420

Uh, we have about 8 other providers.

568 "Duane Shumate" (3819066112)

01:21:09.420 --> 01:21:13.800

Better in the process of, uh, completing their applications to participate.

569 "Duane Shumate" (3819066112)

01:21:13.800 --> 01:21:18.720

We have about 45 of the providers who have gone through the initial orientation.

570 "Duane Shumate" (3819066112)

01:21:18.720 --> 01:21:23.250

To look at participating in the registered approach.

571 "Duane Shumate" (3819066112)

01:21:23.250 --> 01:21:28.560

Currently, our primary goal is onboarding community based organizations.

572 "Duane Shumate" (3819066112)

01:21:28.560 --> 01:21:33.930

Um, we do have currently about 8 premises that have already started.

573 "Duane Shumate" (3819066112)

01:21:33.930 --> 01:21:39.510

Um, but our aspiration is to, uh, cross 1000, direct support professionals.

574 "Duane Shumate" (3819066112)

01:21:39.510 --> 01:21:49.110

Over the course of the next 2 years. Okay. Leaving the registered apprenticeship program and moving on to, um.

575 "Duane Shumate" (3819066112)

01:21:49.110 --> 01:21:52.530

Our employment 1st team. Uh, so.

576 "Duane Shumate" (3819066112)

01:21:52.645 --> 01:22:01.855

Over the course of the last couple of years, the Department of mental health division at has had a contract with the Institute for community inclusion.

577 "Duane Shumate" (3819066112)

01:22:02.245 --> 01:22:16.255

Uh, those staff individuals were predominantly working with provider agencies, developing training and delivering training and technical assistance. But as our employment team has dwindled over the years with some budget cuts.

578 "Duane Shumate" (3819066112)

01:22:16.470 --> 01:22:26.970

And reduction in force, we have now expanded the contract with Institute for community inclusion to provide us adequate staffing to meet the same needs.

579 "Duane Shumate" (3819066112)

01:22:26.970 --> 01:22:32.880

That they were reading through the employment 1st, Missouri effort, but also now to also encompass.

580 "Duane Shumate" (3819066112)

01:22:32.880 --> 01:22:37.200

The efforts of all of our employment for a specialist previously had.

581 "Duane Shumate" (3819066112)

01:22:37.200 --> 01:22:41.130

As they serve this state, so this staff, um.

582 "Duane Shumate" (3819066112)

01:22:41.130 --> 01:22:46.320

They're out there to meet with service providers and targeted case managers.

583 "Duane Shumate" (3819066112)

01:22:46.320 --> 01:22:53.820

Uh, we will be sending out in the very near future flyers of the trainings that they have available. The type of technical assistance that they provide.

584 "Duane Shumate" (3819066112)
01:22:53.820 --> 01:22:59.010
As well, as information, um, about the staff and how to access them.

585 "Duane Shumate" (3819066112)
01:23:01.860 --> 01:23:09.090
Um, so the ways that they can assist is they can work with regional offices, service providers and our target case management entities.

586 "Duane Shumate" (3819066112)
01:23:09.090 --> 01:23:17.160
To deliver technical assistance by consulting on ways to improve outcomes ways to better coordinate services.

587 "Duane Shumate" (3819066112)
01:23:17.160 --> 01:23:28.170
Ways to, uh, that may be out there that maybe individuals or families, uh, here to kind of help with improving outcomes around employment coordination.

588 "Duane Shumate" (3819066112)
01:23:28.170 --> 01:23:32.520
That can help in providing technical assistants around best practice.

589 "Duane Shumate" (3819066112)
01:23:32.520 --> 01:23:38.970
In the delivery of services as well as supporting our regional offices in the development of their plans.

590 "Duane Shumate" (3819066112)
01:23:38.970 --> 01:23:42.120
And also a better understanding, um.

591 "Duane Shumate" (3819066112)
01:23:42.120 --> 01:23:49.650
The daily life employment section of some of the monitoring requirements a, they do have a full list of trainings.

592 "Duane Shumate" (3819066112)
01:23:49.650 --> 01:23:56.220
That are available, they're also available to do 1 to 1, mentoring and coaching of staff as needed.

593 "Duane Shumate" (3819066112)
01:23:56.220 --> 01:24:06.480
And they will also be having regional based community of practices. So the types of trainings that are available, I've listed here for support coordination that's for warning pathways.

594 "Duane Shumate" (3819066112)
01:24:06.480 --> 01:24:16.050

Service providers, there's also for learning pathways, but you'll see the topics of training, um, for support coordination is about 11 different topics.

595 "Duane Shumate" (3819066112)

01:24:16.050 --> 01:24:21.060

And there are, uh, 17 different topics of training for our service providers.

596 "Duane Shumate" (3819066112)

01:24:23.250 --> 01:24:27.870

And moving on to the next slide. Oops. Sorry I clicked.

597 "Duane Shumate" (3819066112)

01:24:27.870 --> 01:24:36.420

Uh, if you would like to connect with members of our employment team, uh, Nick Holt is serving all the Joplin.

598 "Duane Shumate" (3819066112)

01:24:36.420 --> 01:24:45.000

Kansas City in Springfield regions. Jessie key noise, serve central Missouri, Hannibal kirkstone Rolla. And then Leslie quarrels who is our newest staff member.

599 "Duane Shumate" (3819066112)

01:24:45.000 --> 01:24:50.610

Um, is serving the popular blog sites in St Louis area um.

600 "Duane Shumate" (3819066112)

01:24:50.610 --> 01:24:58.920

Sandy Kaiser is still with us and what Sandy is doing is kind of working as the lead of this effort and making sure that.

601 "Duane Shumate" (3819066112)

01:24:58.920 --> 01:25:03.330

Uh, data integration is occurring, providing technical assistance.

602 "Duane Shumate" (3819066112)

01:25:03.330 --> 01:25:11.550

Uh, as needed, uh, to Nick, Jessie and Leslie, and then also filling any gaps of support, uh, that may need to occur.

603 "Duane Shumate" (3819066112)

01:25:11.550 --> 01:25:15.840

And with that, I will turn it over to Lucas and.

604 "Lucas Evans" (2092615936)

01:25:19.440 --> 01:25:33.570

Good afternoon everyone, uh, I'm going to get us started and we're gonna talk a little bit about prohibiting practices. So I'm gonna kind of go over thanks for that. So I'm gonna start with hopefully something that's a review. But, if any of these things look strange to you or or a surprise, then.

605 "Lucas Evans" (2092615936)

01:25:33.570 --> 01:25:47.095

This would be a good point to notice and to go back to the CSR that covers prohibiting practices, which is 9 CSR, 45 dash. 3.090 it's the behavior. It's the behavior supports rule.

606 "Lucas Evans" (2092615936)

01:25:47.095 --> 01:25:48.775

it's the behavior supports rule

607 "Lucas Evans" (2092615936)

01:25:49.410 --> 01:25:58.680

So, I'm going to quickly kind of go through what is prohibited, what our prohibitive practices and we're going to talk a little bit about some current trends that we've noticed in some issues.

608 "Lucas Evans" (2092615936)

01:25:58.680 --> 01:26:04.170

So, the 1st, um, uh, page here is is really just about the kinds of, um.

609 "Lucas Evans" (2092615936)

01:26:04.170 --> 01:26:10.140

Manual restraints that you can use, so you can't do things where you put people on the floor or against the wall.

610 "Lucas Evans" (2092615936)

01:26:10.140 --> 01:26:24.925

I can't layer sit on top of people, um, we don't allow pain submission holds or things that, uh, hyper extend people's joints and we don't allow anything that's not, uh, part of a system that's been approved by the division of VD.

611 "Lucas Evans" (2092615936)

01:26:24.925 --> 01:26:26.935

So, currently, that is, um.

612 "Lucas Evans" (2092615936)

01:26:27.300 --> 01:26:34.710

Nationally recognized physical crisis management systems. Some examples of those are mant CPI.

613 "Lucas Evans" (2092615936)

01:26:34.710 --> 01:26:46.620

Safety care, and if you have others, uh, that you would like to use, should let, um, myself or 1 of the area behavior. Analysts. Know and we can look at that and.

614 "Lucas Evans" (2092615936)

01:26:46.620 --> 01:26:58.230

Tell you, whether that is approved or not if you have your own that you want to develop, that is also a possibility. Um, but that has to be reviewed in depth by me and approved. So moving on to the next slide.

615 "Lucas Evans" (2092615936)

01:26:59.245 --> 01:27:12.895

The other thing that we do not allow are mechanical restraints, so I'm going to kind of summarize the definition in the role, because it's very long, but essentially a mechanical trains any device or instrument or physical object that you're using to combine,

616 "Lucas Evans" (2092615936)

01:27:12.955 --> 01:27:18.775

or otherwise limit and individuals freedom of movement that cannot be easily removed by the person.

617 "Lucas Evans" (2092615936)

01:27:19.080 --> 01:27:27.000

So some examples, these are just some examples, they're not exhausted. So, there are things that are within this definition that are not specifically.

618 "Lucas Evans" (2092615936)

01:27:27.000 --> 01:27:36.720

Listed as an example in the definition, but if you lock a person's wheelchair, specifically, if it's a a motorized wheelchair and you disable it. So the person can't re, enable it.

619 "Lucas Evans" (2092615936)

01:27:36.720 --> 01:27:43.770

That would be considered a mechanical restraint taking somebody's crutches away when they need those to get around. Um.

620 "Lucas Evans" (2092615936)

01:27:43.770 --> 01:27:51.295

Special seat belts and a wheelchair, for example, that specifically is to keep the person in the chair when they want to leave,

621 "Lucas Evans" (2092615936)

01:27:51.295 --> 01:27:58.915

not to hold them steady when they're ambulating around or harnesses that you might be using to hold somebody.

622 "Lucas Evans" (2092615936)

01:27:59.160 --> 01:28:08.250

Down in the car, or in a seat in the house or so that they don't run away from you those would be considered mechanical restraints. Um.

623 "Lucas Evans" (2092615936)

01:28:08.250 --> 01:28:18.780

And basically mechanical restraints are just something that have been prohibited and continue to be prohibited in any htbs setting that is funded by Medicaid waiver or, um.

624 "Lucas Evans" (2092615936)

01:28:18.780 --> 01:28:31.200

dmhc general revenue things that are not mechanical restraints so these are exceptions. So, medical protective equipment as part of medical treatment for a medical issue. So these would be things like, casts.

625 "Lucas Evans" (2092615936)
01:28:31.200 --> 01:28:37.710
After a broken bone or a sling that holds a limb and mobile. So it can heal.

626 "Lucas Evans" (2092615936)
01:28:37.710 --> 01:28:41.070
Um, it it wouldn't be.

627 "Lucas Evans" (2092615936)
01:28:41.070 --> 01:28:48.030
A, um, an arm splint that prevents somebody from hitting themselves in the head. That would be considered a mechanical restraint.

628 "Lucas Evans" (2092615936)
01:28:48.030 --> 01:29:01.800
Uh, an arm splint to help, uh, spring limb or a broken bone he'll would be, uh, an exception to this definition and not consider mechanical restraint as are any other orthopedic devices. So.

629 "Lucas Evans" (2092615936)
01:29:01.800 --> 01:29:08.490
Crutches or, uh, braces for, like, knees or wrists.

630 "Lucas Evans" (2092615936)
01:29:08.490 --> 01:29:17.280
Or any of those things that are part of routine medical treatment, medical examination devices aren't considered mechanical constraints.

631 "Lucas Evans" (2092615936)
01:29:17.280 --> 01:29:21.330
And anything that's used to support functional body posture. So if it's.

632 "Lucas Evans" (2092615936)
01:29:21.330 --> 01:29:33.145
If it's purpose is to help somebody sit upright when they can't hold themselves up. Right ambulate correctly without falling down. Those things are are for medical uses and are not considering mechanical restraints.

633 "Lucas Evans" (2092615936)
01:29:33.535 --> 01:29:41.755
Uh, anything that's used a typical device used for transportation, such as a seat belt, or a wheelchair tie down. So, if somebody has a wheelchair.

634 "Lucas Evans" (2092615936)
01:29:42.030 --> 01:29:46.170
It's very typical for any person in the community who has a wheelchair to have.

635 "Lucas Evans" (2092615936)
01:29:46.170 --> 01:29:50.970

A tie down in the vehicle to keep the wheelchair from rolling around unsafely.

636 "Lucas Evans" (2092615936)
01:29:50.970 --> 01:29:56.100

That's what any typical person would experience. That would not be considering mechanical shrink.

637 "Lucas Evans" (2092615936)
01:29:56.100 --> 01:29:59.100

And basically, just things that help people.

638 "Lucas Evans" (2092615936)
01:29:59.100 --> 01:30:02.730
Set up, right. Or, um.

639 "Lucas Evans" (2092615936)
01:30:02.730 --> 01:30:07.410
Maintain normal posture and balance um.

640 "Lucas Evans" (2092615936)
01:30:07.410 --> 01:30:10.500
Really anything that anybody would do.

641 "Lucas Evans" (2092615936)
01:30:10.500 --> 01:30:16.980
That would exacerbate somebody's medical condition or physical condition, or that is medically Contra indicated.

642 "Lucas Evans" (2092615936)
01:30:16.980 --> 01:30:22.530
And would endanger their life is considered prohibited. So this might include actual.

643 "Lucas Evans" (2092615936)
01:30:22.530 --> 01:30:32.670
Uh, what would otherwise be, uh, an approval physical restraint, but somebody who has severely brittle bones and so it's medically contraindicated to use any sort of physical.

644 "Lucas Evans" (2092615936)
01:30:32.670 --> 01:30:40.500
Management technique or a manual hold that would be prohibited because it endangers a person's life. It puts them at risk of the bot.

645 "Lucas Evans" (2092615936)
01:30:40.500 --> 01:30:45.420
Catastrophic bone fractures, uh, anything that interferes with somebody's breathing.

646 "Lucas Evans" (2092615936)
01:30:45.420 --> 01:30:48.660
Or covers a person's face is prohibited.

647 "Lucas Evans" (2092615936)
01:30:48.660 --> 01:30:52.500
And anytime you're using a restrictive reactive strategy, hasn't.

648 "Lucas Evans" (2092615936)
01:30:52.500 --> 01:30:57.060
As needed, or as required basis so really this is, uh.

649 "Lucas Evans" (2092615936)
01:30:57.060 --> 01:31:06.390
What this is saying is, you can't have a standing order for restraint to use it whenever it's necessary. You can't have a safety crisis plan that has a comprehensive set of strategies.

650 "Lucas Evans" (2092615936)
01:31:06.390 --> 01:31:09.570
And the criteria for when you should consider them, but you can't say.

651 "Lucas Evans" (2092615936)
01:31:09.570 --> 01:31:18.120
Whenever Johnny doesn't do what I want him to do, then you're supposed to manually restrain them and make him do the thing that he's not supposed to do. That would be, um.

652 "Lucas Evans" (2092615936)
01:31:18.120 --> 01:31:22.230
Prohibited practice next slide please.

653 "Lucas Evans" (2092615936)
01:31:24.030 --> 01:31:31.920
I just mentioned that 1, uh, you can't use punishment or anything that's for staff convenience or and this 1 is a really key 1.

654 "Lucas Evans" (2092615936)
01:31:31.920 --> 01:31:37.980
As a substitute for an engagement and active treatment or behavior support services. So, what this really says is that, you.

655 "Lucas Evans" (2092615936)
01:31:37.980 --> 01:31:40.980
Um, in settings.

656 "Lucas Evans" (2092615936)
01:31:40.980 --> 01:31:44.250
It's prohibited to use restrictive practices.

657 "Lucas Evans" (2092615936)
01:31:44.250 --> 01:31:50.580
If it's in lieu of active treatment engagement with the community or appropriate behavior, support services.

658 "Lucas Evans" (2092615936)
01:31:50.580 --> 01:31:54.329
So, just because, uh, we would rather.

659 "Lucas Evans" (2092615936)
01:31:54.329 --> 01:32:00.239
User restrictive intervention, lock up the phone, um, limit access to the community.

660 "Lucas Evans" (2092615936)
01:32:00.239 --> 01:32:04.619
Any sort of restrictive practice that we would do. Um, and we're not.

661 "Lucas Evans" (2092615936)
01:32:04.619 --> 01:32:10.109
Doing that as part of a comprehensive set of strategies to increase independence.

662 "Lucas Evans" (2092615936)
01:32:10.109 --> 01:32:19.829
Teach skills and work towards not needing that limitation that that would be in lieu of engagement and treatment and would be considered prohibited as well.

663 "Lucas Evans" (2092615936)
01:32:19.829 --> 01:32:29.699
And then anytime we're using law enforcement or emergency departments as a, as a planned response to a, uh, individual specific.

664 "Lucas Evans" (2092615936)
01:32:29.699 --> 01:32:33.329
Problem behavior as a way to address it.

665 "Lucas Evans" (2092615936)
01:32:33.329 --> 01:32:47.334
So, what this doesn't mean is that you can't have a, it, it doesn't mean that you can't have a provider policy for in an emergency, what you would do, which may be to call law enforcement or utilize the emergency room. But it cannot be part of an individual set of strategies.

666 "Lucas Evans" (2092615936)
01:32:47.664 --> 01:32:56.184
So it can't be the case that anytime Johnny punches somebody in the face that the staff are directed per the plan for the safety crisis plan to call.

667 "Lucas Evans" (2092615936)
01:32:56.489 --> 01:33:00.179
The sheriff's department, or to take them to the emergency room.

668 "Lucas Evans" (2092615936)
01:33:00.179 --> 01:33:09.869
If if if it's a planned thing, then it's not an emergency, and there should be additional strategies that should be, uh, being pursued, including.

669 "Lucas Evans" (2092615936)

01:33:09.869 --> 01:33:16.259

Other identified, or, uh, needed services that would help kind of address the the reason for that.

670 "Lucas Evans" (2092615936)

01:33:16.259 --> 01:33:21.269

Problem behavior from occurring next slide.

671 "Lucas Evans" (2092615936)

01:33:23.159 --> 01:33:35.369

You know, anytime you're having other people at your agency, administer techniques to a person you're supporting, that would be prohibited. If you can't have johnny's housemate, restrain Johnny that would be, uh.

672 "Lucas Evans" (2092615936)

01:33:35.369 --> 01:33:42.869

Prohibited practice you can't use corporal punishment. Can't use a versus conditioning. Can't use. Um.

673 "Lucas Evans" (2092615936)

01:33:45.899 --> 01:33:51.899

You can't use, like, exercise as a punishment technique. You can't use over correction where you make people.

674 "Lucas Evans" (2092615936)

01:33:51.899 --> 01:34:02.369

Do something they messed up over and over and over again you can't put people in totally enclosed Cribs or bars and closures other than Cribs. So this 1 is also really important. And we'll see in a minute.

675 "Lucas Evans" (2092615936)

01:34:02.369 --> 01:34:11.429

Just because it says Cribs doesn't mean that it has to have metal bars on the outside. If it's a totally enclosed.

676 "Lucas Evans" (2092615936)

01:34:11.429 --> 01:34:19.619

Bed that the person can't leave when they want to that would that falls within this definition and it is a prohibited practice.

677 "Lucas Evans" (2092615936)

01:34:19.619 --> 01:34:32.669

Um, and any treatment procedure or process prohibited by federal state law. So if it's illegal to do it in the state of Missouri, or it's illegal in the United States, it's not it's not allowable within the waiver.

678 "Lucas Evans" (2092615936)

01:34:35.634 --> 01:34:47.574

I did this talk probably a year ago, so it's, it's it was it's good to refresh folks on what is prohibited in the state but there's also another reason and 1 of the things that we've noticed over the past.

679 "Lucas Evans" (2092615936)

01:34:47.849 --> 01:34:57.179

Probably 6 months is that we've just had a huge influx in the number of pivoted practices that we've seen in the States. So I'm gonna share some data. Now. The next slide please.

680 "Lucas Evans" (2092615936)

01:34:57.179 --> 01:35:03.719

Actually, I can probably do this open. Now I messed it up. Okay, so Here's some data.

681 "Lucas Evans" (2092615936)

01:35:03.719 --> 01:35:07.319

Um, from the last, uh, 6 years.

682 "Lucas Evans" (2092615936)

01:35:07.319 --> 01:35:21.779

Uh, and what you notice is 2016, how a lot um, and if you can remember all the way back, then that was when directive 4.300, which really was the precursor to the behavioral support CSR that kind of outlined.

683 "Lucas Evans" (2092615936)

01:35:21.779 --> 01:35:29.309

What the preliminary practices were and directed, and also specifically called out, uh, time seclusion, time out as a.

684 "Lucas Evans" (2092615936)

01:35:29.309 --> 01:35:33.809

Revenue practices if it wasn't preapproved and so we had a lot of.

685 "Lucas Evans" (2092615936)

01:35:33.809 --> 01:35:43.379

Exclusion timeout happening in the year, 2016 and the, that's where you see in the 32 and then after that, we didn't really have that many every year. Um.

686 "Lucas Evans" (2092615936)

01:35:43.379 --> 01:35:46.859

Up until 2021, and we've had a ton.

687 "Lucas Evans" (2092615936)

01:35:46.859 --> 01:35:52.829

Um, and there's a couple of reasons why we've had so many in 2021 and why we're on kind of.

688 "Lucas Evans" (2092615936)

01:35:52.829 --> 01:35:56.849

We're on a pace to exceed that in 2022.

689 "Lucas Evans" (2092615936)

01:35:56.849 --> 01:36:03.359

And 1 of those is guideline 85 and guideline 85 just as a, um.

690 "Lucas Evans" (2092615936)

01:36:03.359 --> 01:36:17.579

Refresher for folks, if you don't remember or you haven't heard about it, it really just outlines what the division will do when we find a prohibitive practice. And 1 of those things is that we will be putting it into as a finding that needs to be addressed.

691 "Lucas Evans" (2092615936)

01:36:17.579 --> 01:36:24.989

Um, and so that's 1 reason why we think we saw quite a few, uh, but the other, uh, thing that.

692 "Lucas Evans" (2092615936)

01:36:24.989 --> 01:36:36.419

Happened is, we started to come across a lot of medical beds that were being used for behavioral control and that's where it kind of goes back to that enclosed bed. So there's a lot of devices.

693 "Lucas Evans" (2092615936)

01:36:36.419 --> 01:36:43.379

That have really slick marketing with things like slogans like safety beds or, um.

694 "Lucas Evans" (2092615936)

01:36:43.379 --> 01:36:55.529

You know, care beds, uh, and really, when you get down to what their purpose is, it's to keep people from crawling out when you don't want them to, uh, it's to, uh, fully enclose them.

695 "Lucas Evans" (2092615936)

01:36:55.529 --> 01:37:10.379

Um, and while some doctors will recommend those things and prescribe them, and they're very popular in some communities. They're still prohibited in our setting. And, um, as we locate those, we work with teams to identify.

696 "Lucas Evans" (2092615936)

01:37:10.379 --> 01:37:14.219

Why it's prohibited and then to fade them out.

697 "Lucas Evans" (2092615936)

01:37:14.219 --> 01:37:18.299

The other thing that we've noticed is that.

698 "Lucas Evans" (2092615936)

01:37:18.299 --> 01:37:22.049

A lot of use of hospital beds and bed rails as.

699 "Lucas Evans" (2092615936)

01:37:22.049 --> 01:37:33.329

Mechanical restraints as well so, you know, bed rails are supposed to be a support to help somebody not fall out of bed if they move around, but it's not meant to keep somebody in bed when they don't want to be there.

700 "Lucas Evans" (2092615936)

01:37:33.744 --> 01:37:44.274

So, that also can be considered a prohibitive practice, depending on how it's used. And then the other thing, which is why, uh, Kim, and I are kind of CO presenting and she's will probably talk a little bit more about this in the next section.

701 "Lucas Evans" (2092615936)
01:37:44.274 --> 01:37:48.894
Is that, um, even even when the, the hospital beds.

702 "Lucas Evans" (2092615936)
01:37:49.314 --> 01:38:00.354
Are there for a medical reason 1 of the things we're kind of learning as we look at what the current best practices are for beds is that hospital beds really aren't that safe. Um, and they don't make a lot of sense in a lot of cases.

703 "Lucas Evans" (2092615936)
01:38:00.834 --> 01:38:10.884
Um, and there's things like entrapment that is a big deal. Um, which is, um, some of the reasons why people end up moving towards these beds that look like big boxes with lids on them.

704 "Lucas Evans" (2092615936)
01:38:11.219 --> 01:38:17.304
Um, so we, we have to address those things as we find, and to find an alternative strategy that helps the person stay safe.

705 "Lucas Evans" (2092615936)
01:38:17.304 --> 01:38:26.874
But also to recognize that, uh, this is a person who is, is an adult that that should have the same rights that everybody else has, which includes.

706 "Lucas Evans" (2092615936)
01:38:27.149 --> 01:38:37.019
The opportunity to be afforded due process, if pricing to be limited in that they're extended the same safeguards than anybody else's, including being free of mechanical restraints.

707 "Lucas Evans" (2092615936)
01:38:37.019 --> 01:38:41.789
Um, um, so go to the next slide, please.

708 "Lucas Evans" (2092615936)
01:38:41.789 --> 01:38:48.749
So, you'll see, most of them are enclosed beds or inappropriate use of hospital beds.

709 "Lucas Evans" (2092615936)
01:38:48.749 --> 01:38:54.659
We've had some, um, quite a few door locks. That's another 1 that I didn't mention.

710 "Lucas Evans" (2092615936)
01:38:54.659 --> 01:39:02.069

That, um, has been considered and will continue to be considered a mechanical restraints. So, if you're using a lock on a door.

711 "Lucas Evans" (2092615936)

01:39:02.069 --> 01:39:05.369

For the express purpose of keeping somebody in their home.

712 "Lucas Evans" (2092615936)

01:39:05.369 --> 01:39:11.459

So that they can't leave when they want to, that would be considered a mechanical restraint because that is a mechanical device.

713 "Lucas Evans" (2092615936)

01:39:11.459 --> 01:39:24.359

That's not easy to remove that impede. Somebody's ability to move freely around their house and their community. Um, a typical use of a door lock for a house is to keep people out of your home. It's not to keep you in your home.

714 "Lucas Evans" (2092615936)

01:39:24.359 --> 01:39:30.539

So, those things are considered to be prohibited and when we identify those who work with teams to identify.

715 "Lucas Evans" (2092615936)

01:39:30.539 --> 01:39:35.459

Uh, other options, um, including appropriate behavioral supports to address.

716 "Lucas Evans" (2092615936)

01:39:35.459 --> 01:39:41.249

The reason for them, um, we've had a few seclusion time out.

717 "Lucas Evans" (2092615936)

01:39:41.249 --> 01:39:47.729

Just as a quick reminder for those solution, timeout used to be an approval strategy. If you had.

718 "Lucas Evans" (2092615936)

01:39:47.729 --> 01:39:52.169

Pre approval from me and you had active ongoing.

719 "Lucas Evans" (2092615936)

01:39:52.169 --> 01:39:57.749

Behavior services that indicate that it was a need and there was, uh, some pretty.

720 "Lucas Evans" (2092615936)

01:39:57.749 --> 01:40:01.379

Sophisticated safety parameters around the use of it, but as of.

721 "Lucas Evans" (2092615936)

01:40:01.379 --> 01:40:06.689

Uh, 71 last year 721 it was, it's fully prohibited.

722 "Lucas Evans" (2092615936)

01:40:06.689 --> 01:40:12.149

So, it cannot be used in any shape form, um, whatsoever. It cannot cannot be approved at all.

723 "Lucas Evans" (2092615936)

01:40:12.149 --> 01:40:20.099

So, we're, we're glad to not see many of them, but we are concerned. Anytime we see those. And then the last thing I want to mention about prohibited practices.

724 "Lucas Evans" (2092615936)

01:40:20.099 --> 01:40:32.009

Is, uh, specifically with, um, uh, people kids that have child specific contracts, uh, and reside with 1 of our providers. So, the so, another area that we've noticed is, uh.

725 "Lucas Evans" (2092615936)

01:40:32.009 --> 01:40:36.899

There's been, uh, several situations recently where were kids who have.

726 "Lucas Evans" (2092615936)

01:40:36.899 --> 01:40:43.499

Funding, um, children's division through a child specific contract, have these devices as part of.

727 "Lucas Evans" (2092615936)

01:40:43.499 --> 01:40:48.689

Some supports that maybe have were used by natural family, or by schools.

728 "Lucas Evans" (2092615936)

01:40:48.689 --> 01:41:02.249

And there are providers that are providing services to the jobs to the contract that have these things. And, um, we are extremely concerned when we find those. And so, even though technically.

729 "Lucas Evans" (2092615936)

01:41:02.249 --> 01:41:16.014

We don't have authority over a child specific contract, because we don't do the funding and we don't have a formal agreement with CD on what to do in those circumstances. Uh, we do communicate our extreme concern to children's divisions specifically.

730 "Lucas Evans" (2092615936)

01:41:16.014 --> 01:41:22.704

The about, uh, the dangerousness of such a practice, the use of, say like a harness.

731 "Lucas Evans" (2092615936)

01:41:22.889 --> 01:41:28.259

Or an enclosed bed, and we also communicate that at the moment of.

732 "Lucas Evans" (2092615936)

01:41:28.259 --> 01:41:32.789
This child transitioning over to the waiver, which is.

733 "Lucas Evans" (2092615936)
01:41:32.789 --> 01:41:40.019
Almost always the kind of a path for this person that would be considered prohibited and so there needs to be some effort.

734 "Lucas Evans" (2092615936)
01:41:40.019 --> 01:41:53.279
The behavior team is is willing to help out to figure out what that effort should be, but there needs to be some effort to get to a point where you don't need that prohibited practice. Because at the, at the end of the day, it's going to end up being prohibited.

735 "Lucas Evans" (2092615936)
01:41:53.279 --> 01:42:03.959
And so typically, what happens is, you know, once we have communication with the and CD, uh, they tend to agree with our, uh, perspective on.

736 "Lucas Evans" (2092615936)
01:42:03.959 --> 01:42:12.569
On the fact that it should, it shouldn't happen and that it will be prohibited soon. And so they're asking teams to start feeding those out as well. So, um.

737 "Lucas Evans" (2092615936)
01:42:12.569 --> 01:42:22.259
We, we are just wanting to make sure that people are supported effectively. We don't want people to be in danger when we do find a prohibitive practice. If it's the case that the person can't.

738 "Lucas Evans" (2092615936)
01:42:22.259 --> 01:42:28.559
Have the primitive practice immediately removed, because they would be at risk of, uh, um.

739 "Lucas Evans" (2092615936)
01:42:28.559 --> 01:42:35.429
Hurting themselves severely or somebody else. Uh, then we will work with the team to fade it out as fast as appropriate.

740 "Lucas Evans" (2092615936)
01:42:35.964 --> 01:42:46.014
However, even in those circumstances, it's not approved, it cannot be approved. There's nobody that can approve it. Uh, it doesn't matter if you have a doctor's order. It doesn't matter if you call the governor's office.

741 "Lucas Evans" (2092615936)
01:42:46.014 --> 01:42:51.744
There's nobody that can approve it because we specifically say in the waiver in our that we can't do it. There's no.

742 "Lucas Evans" (2092615936)

01:42:52.049 --> 01:43:01.259

Clause in the waiver, there's no clause in the CSR that allows us to make approvals on a case by case basis for things that are specifically said to be prohibited.

743 "Lucas Evans" (2092615936)

01:43:01.259 --> 01:43:04.619

Doing so it would jeopardize our federal funding.

744 "Lucas Evans" (2092615936)

01:43:04.619 --> 01:43:13.109

And we all just heard Andy talk about how much money we were able to get. And so we definitely would not want to jeopardize the ability to continue to get.

745 "Lucas Evans" (2092615936)

01:43:13.109 --> 01:43:17.549

The funding, it's allowing us to really up our game as far as.

746 "Lucas Evans" (2092615936)

01:43:17.549 --> 01:43:24.389

Um, provider rates and, um, some supporting agencies to be able to deliver best practice care.

747 "Lucas Evans" (2092615936)

01:43:24.389 --> 01:43:27.749

And I think that's all that I have. So, appreciate you all listening to me.

748 "Kimberly Stock" (1225176064)

01:43:29.879 --> 01:43:40.289

Good afternoon everyone I'm going to touch just real briefly on a reminder that we have some resources available to everyone in relation to ensuring that individual.

749 "Kimberly Stock" (1225176064)

01:43:40.289 --> 01:43:46.979

Those are afforded due process whenever there's an identified limitation of an individual's rights.

750 "Kimberly Stock" (1225176064)

01:43:47.004 --> 01:43:58.854

Next slide please division director 4.200 appendix C is actually a due process guide. This is a great resource, and provided the direct link here.

751 "Kimberly Stock" (1225176064)

01:43:58.854 --> 01:44:13.284

It clearly outlines all of the components of due process that need to be walked through when there is an identified limitation of an individual's rights. And it just really serves a great tool for the individual. And for the planning team.

752 "Kimberly Stock" (1225176064)
01:44:13.284 --> 01:44:14.424
for the planning team

753 "Kimberly Stock" (1225176064)
01:44:15.089 --> 01:44:29.009
This will help you to be able to make sure that all the necessary information is in place to ensure that the individual has been afforded due process. And also to be forwarded to the due process review committee for that assurance as well.

754 "Kimberly Stock" (1225176064)
01:44:29.009 --> 01:44:35.159
So, I just wanted to take a few minutes to remind everyone that that is available and is an excellent resource.

755 "Kimberly Stock" (1225176064)
01:44:35.159 --> 01:44:40.469
Next slide please also as a quick reminder, um, in just a quick.

756 "Kimberly Stock" (1225176064)
01:44:40.554 --> 01:44:54.774
Global reminder if you are not signed up for the division email blast, please take the time to do. So, that's the main primary method of communication that the division has when we want to get information out statewide. This is a good example of that effort.

757 "Kimberly Stock" (1225176064)
01:44:54.804 --> 01:45:08.874
Um, back in February of 2022, we actually provided some information on some updated trainings through the content, self registration portal, and they are specific to due process training. We currently have 5 modules.

758 "Kimberly Stock" (1225176064)
01:45:08.874 --> 01:45:10.404
currently have five modules

759 "Kimberly Stock" (1225176064)
01:45:10.469 --> 01:45:15.239
Available to everyone that cover rights committee members roles.

760 "Kimberly Stock" (1225176064)
01:45:15.239 --> 01:45:21.389
Um, chairman, facilitator roles, referrals, and an overview for families and individuals. So, again, another great resource.

761 "Kimberly Stock" (1225176064)
01:45:21.389 --> 01:45:36.324
For individuals, and everyone who is part of their interdisciplinary support teams and also stay tuned, we're continuing to look at ways to enhance and provide technical assistance, coaching and support to individuals and their teams on this important subject.

762 "Kimberly Stock" (1225176064)

01:45:37.494 --> 01:45:46.374

Next slide please now, I'm going to segue into a real quick update, tied to health risk screening tool, or Hearst, the Missouri process when a,

763 "Kimberly Stock" (1225176064)

01:45:46.374 --> 01:45:54.084

thank everyone who has reached out to the division and is currently in the process of onboarding during what we're referring to as phase 1.

764 "Kimberly Stock" (1225176064)

01:45:54.389 --> 01:45:58.739

Phase 1 is a reminder binder is the information.

765 "Kimberly Stock" (1225176064)

01:45:59.514 --> 01:46:14.064

And ability to start to implement the process before we go full statewide implementation, which is currently targeted as Emily mentioned earlier, we are looking at initiating and onboarding. Close to the connection system. Go live.

766 "Kimberly Stock" (1225176064)

01:46:14.549 --> 01:46:26.309

So, that will be next summer of 2023 with the intent for everyone to be fully screened, or have at least 1, um, initial screen through the system. If you're a waiver participant.

767 "Kimberly Stock" (1225176064)

01:46:26.309 --> 01:46:33.654

By the summer of 2024, so looking forward to going into that phase 2, but currently we are in phase 1 greatly appreciate everyone.

768 "Kimberly Stock" (1225176064)

01:46:33.654 --> 01:46:46.884

That's reached out what you're seeing on the screen right now is the divisions current webpage for the Missouri process. We do have as noted a direct email. noted a direct email

769 "Kimberly Stock" (1225176064)

01:46:47.184 --> 01:46:57.294

Address if you're interested currently currently in your residential service provider, or your a agency who serves individuals receiving non residential services,

770 "Kimberly Stock" (1225176064)

01:46:57.624 --> 01:47:07.074

please reach out to us through that mailbox and we'll be contacting you to get your onboarding process started and also stay tuned for some email blast.

771 "Kimberly Stock" (1225176064)

01:47:07.314 --> 01:47:13.074

Pertaining to some current updates that we're going to be providing for our process page.

772 "Kimberly Stock" (1225176064)

01:47:13.379 --> 01:47:18.179

So, thank you again for everyone's interest and participation in the Hearst process.

773 "Kimberly Stock" (1225176064)

01:47:18.179 --> 01:47:25.919

You know, with that, I'm gonna turn it over to Leslie to grow. Who's going to share some information regarding our observed decide act documents.

774 "Leslie DeGroat" (160875008)

01:47:25.919 --> 01:47:33.479

All right, thank you, Kim and good afternoon. Everyone I'm glad to be here and thank you. Wind up for having me speak today.

775 "Leslie DeGroat" (160875008)

01:47:33.479 --> 01:47:45.114

About these, um, informational documents titled observed, decide act I'm gonna specifically point out med errors, but you can utilize any of these documents for any kind of educational purposes or training.

776 "Leslie DeGroat" (160875008)

01:47:45.504 --> 01:47:55.914

I'm going to follow that up, um, by also talking about, um, a pilot project related to mobile dental, um, health unit called enable dental.

777 "Leslie DeGroat" (160875008)

01:47:56.549 --> 01:48:00.569

Um, so let's see, I want to scroll down here on my.

778 "Leslie DeGroat" (160875008)

01:48:01.854 --> 01:48:13.284

Okay, so, um, so, yes, I will, uh, 1st, talk about some informational documents, the division created. And, as I said, they are observed decide act. And, as I said, they cover a different topic.

779 "Leslie DeGroat" (160875008)

01:48:13.554 --> 01:48:18.864

Um, these documents can be used for not only staff to learn from individuals.

780 "Leslie DeGroat" (160875008)

01:48:18.864 --> 01:48:31.734

Can benefit from them, families, caregivers and really the whole purpose of them are to identify early onset of any health issues, um, any risk factors and also kind of learn how to.

781 "Leslie DeGroat" (160875008)

01:48:31.739 --> 01:48:39.714

Prepare and put in some prevention measures and and and some actions that can help people to stay as healthy as possible.

782 "Leslie DeGroat" (160875008)

01:48:40.134 --> 01:48:50.574

So that is what it looks like on our webpage, and I will drop that web link in chat so that you guys can get to it. Really? You just go under that? Um.

783 "Leslie DeGroat" (160875008)

01:48:50.909 --> 01:48:58.589

Where it says alerts and updates, there is a whole list, and I can advance the slide. Actually. There we go. Um.

784 "Leslie DeGroat" (160875008)

01:48:58.589 --> 01:49:07.074

So, see, you have this, uh, list under here healthy, living, observe, decide act. So, we have, we decided to go ahead and do the fatal 5+which.

785 "Leslie DeGroat" (160875008)

01:49:07.074 --> 01:49:20.364

You may have heard of which those are really common, um, uh, illnesses and health conditions that people with intellectual developmental disabilities often have, um, they often they can be very fatal. So, early identification.

786 "Leslie DeGroat" (160875008)

01:49:20.394 --> 01:49:28.344

And then putting those supports in place is so important to help people stay as healthy and happy. and happy

787 "Leslie DeGroat" (160875008)

01:49:28.614 --> 01:49:29.634

Long as possible.

788 "Leslie DeGroat" (160875008)

01:49:29.904 --> 01:49:44.754

So the fatal 5, I'll just say, just tell you what those are, um, aspiration, aspiration, pneumonia choking that covers 1 constipation and bowel obstruction is another 1 dehydration another seizures.

789 "Leslie DeGroat" (160875008)

01:49:45.029 --> 01:49:57.174

Sepsis, and then the +1 is a gastro esophageal reflux disease or gird. So many people have gird and it's really it really bothers them and it has that poses risk factors in and of itself.

790 "Leslie DeGroat" (160875008)

01:49:57.174 --> 01:50:02.004

So that is another 1 that was covered and added as the +1. plus one

791 "Leslie DeGroat" (160875008)

01:50:02.754 --> 01:50:14.904

Others that you can see on the list, um, cover burn prevention and safety flu, prevention, incidents and prevention of falls poly pharmacy.

792 "Leslie DeGroat" (160875008)

01:50:15.354 --> 01:50:29.064

We do have different items surrounding covid as well as just brand new. We have some, these aren't called observed aside acts, but they are related to, uh, Cobra. You might have heard of a long haul where you may have residual effects from covid.

793 "Leslie DeGroat" (160875008)

01:50:29.334 --> 01:50:32.094

And these are just some things that we have seen and.

794 "Leslie DeGroat" (160875008)

01:50:32.309 --> 01:50:45.294

And we work with our, our electability, our company that did create the health risk screening tool, and they created the documents. There's 1 for common clinicians 1 for families and, and individuals.

795 "Leslie DeGroat" (160875008)

01:50:45.294 --> 01:50:59.334

And 1, you can share with staff, just kind of a variety and different links on each of those. So whichever 1 would suit your needs best feel free to use any of these documents for education? Um, it's, it's out there on the website.

796 "Leslie DeGroat" (160875008)

01:50:59.544 --> 01:51:02.154

And, like I said, I'll put that link in there here.

797 "Leslie DeGroat" (160875008)

01:51:02.309 --> 01:51:06.029

Just a minute I'm going to. Whoops.

798 "Leslie DeGroat" (160875008)

01:51:06.029 --> 01:51:17.819

Went too far, so this is what they currently look like we're looking to change the appearance of maybe make them a little, a little more stylish or eye catching but this is what we have so far right now.

799 "Leslie DeGroat" (160875008)

01:51:18.234 --> 01:51:25.854

And medication errors that is something that if you could solve the issue of med errors, you will be awarded a 1Million bucks.

800 "Leslie DeGroat" (160875008)

01:51:25.854 --> 01:51:37.794

I tell you what, that's the age old question, especially we'll, we'll talk about the most common here in just a minute, but, um, this deserve, uh, decide accurate. It defines.

801 "Leslie DeGroat" (160875008)

01:51:38.099 --> 01:51:52.614

Uh, from the National coordinating Council for medication, air reporting and prevention basically simply put Ahmed error is when a medication is not given to the person whom it was intended, but how it was, or how it was intended.

802 "Leslie DeGroat" (160875008)

01:51:52.944 --> 01:52:02.574

So, in our, it's if the medication error reaches the individual, then that's that's reportable as you as, you know. So, um.

803 "Leslie DeGroat" (160875008)

01:52:04.289 --> 01:52:07.409

About said next slide and I'm I guess I'm telling myself that okay.

804 "Leslie DeGroat" (160875008)

01:52:07.764 --> 01:52:21.684

We can observe the following related to medication errors. We do study the data closely and this data we're going to be updating this right here. But according to fiscal year, 2019, the most common med error type was administration at 97%.

805 "Leslie DeGroat" (160875008)

01:52:21.684 --> 01:52:33.444

The most common Eric category was failure to administer at 73% and the most common error reason was forgot to give at 52%. reason was forgot to give at fifty two percent

806 "Leslie DeGroat" (160875008)

01:52:34.169 --> 01:52:45.054

So, this has been the trend for quite some time that those types of errors we're currently looking at processes within quality, quality enhancement for the division to more closely,

807 "Leslie DeGroat" (160875008)

01:52:45.054 --> 01:52:54.834

monitor these minimal medication errors and reach out when we see patterns and trends. That's something that's in development. And I'm just throwing that out there Y, you know, why minimal?

808 "Leslie DeGroat" (160875008)

01:52:55.284 --> 01:53:04.164

Well, as a reminder, any med error has the potential to cause negative outcomes and we're, we're about prevention and being proactive. We don't want to have to be reactive.

809 "Leslie DeGroat" (160875008)

01:53:04.169 --> 01:53:07.169

We don't want someone to get hurt before, you know.

810 "Leslie DeGroat" (160875008)

01:53:07.169 --> 01:53:19.644

We we make a move, you know, we want we want to keep them from getting hurt. So, as you can see minimal medication errors, make up about 98% of medication errors. So, what about those? 2%? Okay, the moderate and serious medication errors.

811 "Leslie DeGroat" (160875008)

01:53:19.644 --> 01:53:33.354

Moderate is defined as treatment. And or intervention, other than monitoring, or observation has occurred due to the error, like, just an example, like, actions were taken to change the outcome.

812 "Leslie DeGroat" (160875008)

01:53:33.354 --> 01:53:37.104

So, like, if someone gets the wrong medication or too much. or too much

813 "Leslie DeGroat" (160875008)

01:53:37.169 --> 01:53:50.069

Of a medication, and they go to the emergency department and receive IV fluids. They get those IV fluids to help. Maybe counteract the potential adverse outcome of the meds. So that would that's considered moderate.

814 "Leslie DeGroat" (160875008)

01:53:50.069 --> 01:53:58.259

You've all had your EMT training, or if not, we actually have that on our, our, our reliance platform. So, um, take advantage of that. Definitely.

815 "Leslie DeGroat" (160875008)

01:53:58.259 --> 01:54:07.739

Um, anyway, serious med errors are defined as life threatening and or permanent adverse consequences consequences, which I'm not gonna. Would that just.

816 "Leslie DeGroat" (160875008)

01:54:07.739 --> 01:54:13.679

It's scary to think about these are very rare, but they do. I mean, they do happen um.

817 "Leslie DeGroat" (160875008)

01:54:13.679 --> 01:54:21.089

The more and this is just something that's you just got to know the more that minimal med errors occur.

818 "Leslie DeGroat" (160875008)

01:54:22.319 --> 01:54:35.454

The more of a chance that a serious mid error could occur. So I'll give you a little more current data so this past quarter fiscal year, 22 quarter 4 um, there were 2320 medication errors reported across the state, these errors affected 1393 individuals.

819 "Leslie DeGroat" (160875008)

01:54:35.454 --> 01:54:45.924

So, just by, you know, those numbers, you can see that many people were the victim of a med air more than once. And so also in fiscal year, 22 quarter, 4, minimal medication.

820 "Leslie DeGroat" (160875008)

01:54:45.924 --> 01:54:52.194

once and so also in fiscal year twenty two quarter four minimal medication

821 "Leslie DeGroat" (160875008)

01:54:52.319 --> 01:55:06.684

Still make up around 98% of all med errors this most current quarter administration errors were at 95% of the error types and forgot to give was a little bit up a little bit at 58%. Whereas it had been 52%.

822 "Leslie DeGroat" (160875008)

01:55:06.684 --> 01:55:15.504

So, they're really not getting they're not going away so, but we are monitoring it and trying to put some. are monitoring it and trying to put some

823 "Leslie DeGroat" (160875008)

01:55:15.924 --> 01:55:27.564

Items in place, and we do have this document here if you would need if you want to share it or review it a little bit more closely to kind of help educate, you know, educate your staff or or people you work with,

824 "Leslie DeGroat" (160875008)

01:55:27.564 --> 01:55:34.884

or who whomever it could help just so they know how important it is to follow their, their training and and the processes outline.

825 "Leslie DeGroat" (160875008)

01:55:35.694 --> 01:55:43.584

So this page, right here, this is the decide aspect of this document, and it tries to get the reader to think about what is causing the error.

826 "Leslie DeGroat" (160875008)

01:55:43.794 --> 01:55:55.554

So it starts off with what was the error, you know, why did it happen, uh, what can be done to decrease the likelihood of reoccurrence the examples of errors could be due to unclear or incorrect physician orders.

827 "Leslie DeGroat" (160875008)

01:55:55.794 --> 01:56:05.184

So, maybe the person giving them medications may not be able to understand what the order is supposed to be telling them. Um, I've encountered that before where the doctor just wasn't clear.

828 "Leslie DeGroat" (160875008)

01:56:05.514 --> 01:56:19.914

When the order was written, if there was maybe needing to be more planning around medication time, and any needed safeguards safeguards, like, making sure that medications, the times were more streamlined,

829 "Leslie DeGroat" (160875008)

01:56:20.154 --> 01:56:34.194

like not giving it several different times during the day. Because if that's the case, people are going to forget if their medication regiment can be simplified. But, you know, that's that's always a bonus. Um.

830 "Leslie DeGroat" (160875008)

01:56:34.854 --> 01:56:47.634

I also want to highlight there are, maybe this is surrounding planning, but maybe if they do forget to take their medications providing timers to alert,

831 "Leslie DeGroat" (160875008)

01:56:47.634 --> 01:56:56.454

when medications are due to be given or any more, we have so much assistive technology that's available to make medication administration.

832 "Leslie DeGroat" (160875008)

01:56:56.634 --> 01:57:04.494

A task that the individual, uh, supported can be used in order to be more independent with their own medication administration and be able to have.

833 "Leslie DeGroat" (160875008)

01:57:04.499 --> 01:57:16.554

Have ownership of that task as Holly right? You know, we spoke earlier, uh, from the universal, uh, designed to assistive technology team. She was talking about that earlier and it's on our website.

834 "Leslie DeGroat" (160875008)

01:57:16.554 --> 01:57:23.034

You can look at all kinds of different things that are available out there that could help a person with their medication.

835 "Leslie DeGroat" (160875008)

01:57:24.774 --> 01:57:34.074

Let's see, you can see on here. Many many times. Other reasons for errors is the person who's giving the medications. They just don't follow. The procedure is trained.

836 "Leslie DeGroat" (160875008)

01:57:34.074 --> 01:57:47.004

Maybe they have, they're thinking about, oh, we got to go to the grocery store later this, this, and that and the other, and they may feel rushed. They, they skip a step and they, they just don't follow their training and oh. They made an error.

837 "Leslie DeGroat" (160875008)

01:57:47.334 --> 01:57:53.094

So, anyway, this page doesn't have an all inclusive list of, like, examples, but it was just kind of.

838 "Leslie DeGroat" (160875008)

01:57:53.369 --> 01:58:04.949

They get people's minds, you know, flowing and trying to kind of think about when an error occurs, why, you know, what is that reason? And what can we do to help make that better.

839 "Leslie DeGroat" (160875008)

01:58:04.949 --> 01:58:09.659

You know, easier for the, the person being supported and the person supporting that person.

840 "Leslie DeGroat" (160875008)

01:58:13.074 --> 01:58:26.424

Okay, the final aspect of or observed a side acts is act, and that's like, the action piece. Uh, this is the action piece of medication errors, and this is working to figure out a person centered way to prevent them.

841 "Leslie DeGroat" (160875008)

01:58:26.724 --> 01:58:39.804

So, individual life strategies that increase a person's involvement in independence is key um, this slide shows links to self administration of medication assessments and those can be used. They're online.

842 "Leslie DeGroat" (160875008)

01:58:39.804 --> 01:58:42.894

They're available to whomever and they can be used to determine.

843 "Leslie DeGroat" (160875008)

01:58:42.989 --> 01:58:50.999

Person's skillset related to, you know, trying to work towards being more independent and more involved with Matt administration. Um.

844 "Leslie DeGroat" (160875008)

01:58:50.999 --> 01:59:03.869

This skill set can be built upon as time goes on and then there's also that assistive technology piece to medication administration. This kind of is a long page. So, this is the 2nd half of the page.

845 "Leslie DeGroat" (160875008)

01:59:05.699 --> 01:59:19.704

And, as I said, I'm going to update it, because we have just become a long ways with we're the assistive technology 1st state and, and just more assistive technology that can totally help people with their medication administration. I just can't accentuate that enough.

846 "Leslie DeGroat" (160875008)

01:59:20.274 --> 01:59:25.764

So, we have just a wealth of technology approved by waiver funding. Um.

847 "Leslie DeGroat" (160875008)

01:59:26.634 --> 01:59:38.334

Let's see other methods that I want to point out besides on here, you can see medication home delivery. Now. That's that's a very that's something that people can take advantage of so that they can make sure.

848 "Leslie DeGroat" (160875008)

01:59:38.334 --> 01:59:48.534

And have their medications delivered on time and maybe at a certain rotation. Um, so people are able to get text messaging or other messaging, whenever prescriptions coming due.

849 "Leslie DeGroat" (160875008)

01:59:48.534 --> 01:59:55.854

So, that, that alerts them that, so that that way, they don't run out because we do see that we're a person they may run out of medications.

850 "Leslie DeGroat" (160875008)

01:59:56.069 --> 02:00:00.269

And then replaced on time, so there, you know, there's a better, um.

851 "Leslie DeGroat" (160875008)

02:00:00.594 --> 02:00:13.464

So oh, another thing that I really want to highlight, which medication review so, the physician or primary care provider could review the person's medications.

852 "Leslie DeGroat" (160875008)

02:00:13.734 --> 02:00:23.304

And they can determine if all the medications are doing what they're supposed to making sure that the person has optimum optimum dosage levels.

853 "Leslie DeGroat" (160875008)

02:00:23.694 --> 02:00:30.024

And not duplicated medication type sometimes a person will be given a medication and it will cause the side effects.

854 "Leslie DeGroat" (160875008)

02:00:30.269 --> 02:00:41.004

We haven't met for that side effect and, you know, they're just after all these meds are stacked up on this person. They're having to take them all and and then so having a physician or even a pharmacist.

855 "Leslie DeGroat" (160875008)

02:00:41.274 --> 02:00:55.014

Uh, look, their pharmacist look over the medications and just make recommendations. I mean, the physician ultimately makes the changes, but just just making sure that that that meddles makes sense for that person and really individualizing it.

856 "Leslie DeGroat" (160875008)

02:00:55.044 --> 02:01:00.204

Let's say the person, uh, the best times for them to take their pills is 800 am before they leave. leave

857 "Leslie DeGroat" (160875008)

02:01:00.269 --> 02:01:12.089

The house and maybe 80 P. M. before bed. Well, why not why can't the, the physician make sure that the orders coincide with that? Cause that's what the person that will work best for that person. So, um.

858 "Leslie DeGroat" (160875008)

02:01:12.324 --> 02:01:21.894

Let me see all the analytics anyway, so please check out this document and others. I, if you guys ever have any suggestions, we do have a DD mailbox.

859 "Leslie DeGroat" (160875008)

02:01:22.284 --> 02:01:36.684

Um, please reach out if there's anything that you'd like, educational documents on and my team, and myself will be glad to research it and and and give you give you some tools for training or or what have you. So, um, please, please consider that.

860 "Leslie DeGroat" (160875008)

02:01:37.014 --> 02:01:40.344

We wanna we wanna help help you all out there do the best you can.

861 "Leslie DeGroat" (160875008)

02:01:40.919 --> 02:01:47.579

And now I'll finish up by talking about enabled dental. Um, this is a.

862 "Leslie DeGroat" (160875008)

02:01:47.579 --> 02:02:00.509

Um, as you all know access to dental care is very difficult for the individuals and we serve, um, there's currently a program occurring to help decrease this barrier, which I believe can pave the way.

863 "Leslie DeGroat" (160875008)

02:02:00.509 --> 02:02:09.359

Uh, for the future of people who we serve and access the accessing dental care, and, uh, there was an email blast that went out about it.

864 "Leslie DeGroat" (160875008)

02:02:09.384 --> 02:02:23.304

And, um, I would like to put that link in the chat to the email blast and it also has a link for the program flyer and in the consent form. And it's just as easy as filling out that consent form and sending it in to.

865 "Leslie DeGroat" (160875008)

02:02:23.454 --> 02:02:38.124

They have an email provided on the flyer, and even if you're not in the counties, where they have listed on the flyer, that they're providing services, they will take that into consideration and try to serve that person. And now I want to tell you this is time sensitive.

866 "Leslie DeGroat" (160875008)

02:02:38.484 --> 02:02:39.054

Um.

867 "Leslie DeGroat" (160875008)

02:02:39.359 --> 02:02:49.074

It runs through October this is the 2nd phase of it and so they're going to review the data and see how that goes and and continue on from there.

868 "Leslie DeGroat" (160875008)

02:02:49.074 --> 02:03:03.324

Hopefully, um, last month, last time I heard they had 77 people signed up for it and your criteria. Um, a person with intellectual and developmental disabilities, it'll be paid for, by Medicaid up to 125 people can be served.

869 "Leslie DeGroat" (160875008)
02:03:03.324 --> 02:03:05.604
twenty five people can be served

870 "Leslie DeGroat" (160875008)
02:03:05.969 --> 02:03:11.729
Okay, so that that sounds pretty cool. Right? So what, uh, what else about it? Right? Okay. Well.

871 "Leslie DeGroat" (160875008)
02:03:12.564 --> 02:03:26.454
This, uh, the dental team, uh, dental hygienist will, they will go to the home, or perhaps, even a day habilitation center, or wherever it just depends on where the person feels comfortable with. They'll go to their home.

872 "Leslie DeGroat" (160875008)
02:03:26.844 --> 02:03:41.244
And they will, uh, they have a mobile X Ray unit that dental hygiene is, they are especially trained to be able to examine they utilize Tele, Dentistry. So they can really get in there with cameras and look around. There is a dentist that will.

873 "Leslie DeGroat" (160875008)
02:03:41.729 --> 02:03:56.454
With the different imaging and different things that the dental hygiene, especially trained dental will see the dental hygiene is able to do cleanings in the home. They're able to do fillings and even extractions. Now, the fillings and extractions they'll bring in a dentist for that.

874 "Leslie DeGroat" (160875008)
02:03:56.634 --> 02:04:11.634
But they're, they're on the flyer, it has a step by step process. It lines it out. So that man, all you gotta do is, uh, the the individual or whomever on their behalf sends in that consent form. And then the enable dental representatives.

875 "Leslie DeGroat" (160875008)
02:04:11.729 --> 02:04:24.264
Contact them and start doing the planning, and then they figure out what works best for the individual, and and they come and see that person and go from there. And you're thinking what this sounds too good to be. True. Well, I mean, it's it's awesome.

876 "Leslie DeGroat" (160875008)
02:04:24.264 --> 02:04:35.184
I I see no flaws to it other than just getting signed up and I'm just I'm Super tickled about it cause it's hard to get out and want to go to the dentist. And so if they're willing to come to your home.

877 "Leslie DeGroat" (160875008)
02:04:35.489 --> 02:04:40.499
And provide services, I just think it's fabulous. So, um.

878 "Leslie DeGroat" (160875008)

02:04:40.499 --> 02:04:51.749

If you have any questions or anything don't hesitate to reach out to our division. Um, I'm going to drop in chat, as I had said.

879 "Leslie DeGroat" (160875008)

02:04:51.749 --> 02:05:05.454

The, um, you're having on a separate document, but I'm gonna drop in chat these links so that you can look at it. You can look at the flyer and kind of decide if that that works. And, um, and and preventions the key may be a person.

880 "Leslie DeGroat" (160875008)

02:05:05.694 --> 02:05:19.614

Um, that you're supporting doesn't necessarily have any dental issues, you know, what, though, uh, those preventative, uh, the, the hygiene is going in there and looking and cleaning, you know, before it actually gets to a problem that is so important for people.

881 "Leslie DeGroat" (160875008)

02:05:19.944 --> 02:05:21.684

Um, you know, we don't want them to have to.

882 "Leslie DeGroat" (160875008)

02:05:21.774 --> 02:05:30.504

Get to an emergency level of need, because then it just becomes so complicated then you run into things like sedation, Dentistry, which is so complicated to try to get for people.

883 "Leslie DeGroat" (160875008)

02:05:30.834 --> 02:05:42.354

So, I, I hope you, you know, if you're interested, take advantage of this and reach out to our division, if you have questions, I'd be glad to help answer anything. What have you.

884 "Leslie DeGroat" (160875008)

02:05:42.689 --> 02:05:52.829

And so I'm going to show this is my contact information. So if you can holler at me, um, just Leslie dot at dot dot. Gov.

885 "Leslie DeGroat" (160875008)

02:05:52.829 --> 02:06:01.409

Any ideas for other observed decide X any questions about this enable dental, health related items what have you just, um, just just reach out.

886 "Leslie DeGroat" (160875008)

02:06:01.409 --> 02:06:07.919

And I appreciate your time today and I'm going to turn it over to my colleague Tricia.

887 "Lucas Evans" (2092615936)

02:06:23.604 --> 02:06:25.374

Hey, Theresa, I think you're on mute.

888 "Tricia Parker" (2214604032)
02:06:25.649 --> 02:06:31.409
Hey, you.

889 "Tricia Parker" (2214604032)
02:06:31.409 --> 02:06:45.299
And mine's gonna be short and sweet. Um, as we wrap up the afternoon, um, we have an upcoming, um, the 2022 residential RnD oversight, annual webinar.

890 "Tricia Parker" (2214604032)
02:06:45.299 --> 02:06:54.774
So, we're, we're excited that we're going to be holding that. This is kind of the 2nd of its kind this was previously done at the regional offices.

891 "Tricia Parker" (2214604032)
02:06:54.774 --> 02:07:01.254
However, when the pandemic hit this meeting this annual meeting for the residential, um.

892 "Tricia Parker" (2214604032)
02:07:02.784 --> 02:07:15.924
Our ends was put on hold, um, in 2020, we decided, to hold this meeting this annual meeting. Virtually we had a great turnout and success with that format.

893 "Tricia Parker" (2214604032)
02:07:15.924 --> 02:07:28.644
So we'll be using that format going forward, um, the purpose of the meeting. Oh, thank you for advancing the slide. The purpose of the meeting is to connect the agency with the quality program teams regionally.

894 "Tricia Parker" (2214604032)
02:07:28.884 --> 02:07:31.674
program teams regionally

895 "Tricia Parker" (2214604032)
02:07:31.679 --> 02:07:34.229
And at the state level.

896 "Tricia Parker" (2214604032)
02:07:34.229 --> 02:07:40.649
Um, it's also to provide division updates and information sharing again. It's virtual.

897 "Tricia Parker" (2214604032)
02:07:40.649 --> 02:07:50.664
Um, it will be recorded, so we realize that, um, a lot of residential aren't residential are ends there only part time.

898 "Tricia Parker" (2214604032)

02:07:50.694 --> 02:08:02.904

So, um, attendance is voluntary, but they can go back and review the recorded video that will be posted on the dmhc website. We did that last year for the meeting as well.

899 "Tricia Parker" (2214604032)

02:08:03.954 --> 02:08:17.694

Our target month is September, we do not have a date set yet. However, there will be an email blast that will come out, um, announcing that date and it will have instructions for registration.

900 "Tricia Parker" (2214604032)

02:08:18.504 --> 02:08:21.054

And that's all I have. Thank you.

901 "Carrie Williams" (1521861120)

02:08:27.654 --> 02:08:41.244

That wraps up our meeting for today so thank you everyone for attending and thanks to each of our presenters who presented today as well as cap mentioned at the beginning of the webinar,

902 "Carrie Williams" (1521861120)

02:08:41.244 --> 02:08:51.354

the recorded webinar and the PowerPoint presentation as well as Q and a document will be available on the website.

903 "Carrie Williams" (1521861120)

02:08:51.389 --> 02:08:57.659

So have a great afternoon. Everyone we will talk with you later goodbye.