

2016 Annual Plan Summary

Focus Area 1: Promote Integrated Employment Opportunities for people with and without disabilities to work together.

Commitments:

1. Provide each person of working-age receiving services from DDS with an opportunity to engage in a process of identifying strengths, interests, preferences, and desired outcomes for community employment.
2. Collaborate with school districts to support students with disabilities to prepare for community employment.
3. Provide information to people with disabilities, families, schools, employers and providers about resources and opportunities to facilitate community employment.
4. Increase the number of people engaged in community employment.
5. Align DDS structures, processes and resources to support Integrated Employment.

2016 Annual Plan Goals

1. Expand community collaboration model to engage new local businesses so that community employment options expand for people with DD.
2. Increase, from current employment rate of 9%, to 30%, the number of transitioning youth who are employed in the community.
3. Use person centered tools and plans to generate meaningful outcomes for day and home life and to promote self-advocacy.
4. Track and analyze employment successes, job losses, and demographic trends to build strategies for successful employment.
5. Manage and improve on-line employment module to more accurately capture local employment data.
6. Support at least 10% of people currently attending HCDDS adult centers to select a community provider.
7. 90% of adults leaving the HCDDS adult center and who have selected an alternative community provider will indicate satisfaction with their transition to new provider.
8. Identify gaps in community provider capacity to support people with specialized needs and develop supports to address these. Develop creative and effective ways for DD Services to offer consultation and supports (e.g. nursing, behavior support) to ensure services offered by community providers are consistent with those currently provided in HCDDS adult centers.
9. Families and transitioning youth in the local school work/study will indicate what's working/not working in their support for community employment to inform best practices locally.
10. Host forums highlighting peers who have recently left the adult center for community employment so that peers remaining at the centers consider community options.
11. Assist at least 15 agencies, who request support, to offer more integrated, community experiences so that people served are more likely to be connected to work and volunteer opportunities.
12. Strengthen collaboration with Opportunities for Ohioans with Disabilities, Ohio Means Jobs, school district representatives, Regional Autism Council, and other leaders supporting school children so that community based school programs are better equipped to serve students with more complex needs.

Focus Area 2: Work with the Community to Build Capacity for a Growing Number of Aging Caregivers and People with Disabilities

Commitments:

1. Develop new collaborations and new models of housing and supports that are responsive to the needs of aging caregivers and people with disabilities.
2. Collaborate with community to support aging caregivers to plan for the future of their family members with a disability.
3. Build a strong collaboration with the Council on Aging of Southwestern Ohio so that aging caregivers and people with disabilities have access to community resources.
4. Develop data systems that generate good information about aging caregivers and people served by DDS who are aging.
5. Build the capacity of providers of community services to seniors to welcome and include seniors with disabilities.

2016 Annual Plan Goals

1. Use adapted Future is Now curriculum to support families with aging caregivers from adult centers to develop an action plan for the future of their family member.
2. 95% of people interviewed will indicate satisfaction with plans developed from Future is Now series.
3. Develop a collaborative framework to support families over the life course, babies to seniors, so that multiple organizations and family networks contribute to identified needs.
4. Implement routine dementia screening for people who are over age 50 or age 35 for those with Down syndrome.

5. Network with 20 high quality aging services and their point people so that people with DD who are seniors have a wider range of options for quality care.
6. Develop and distribute media kit to explain current availability of affordable, accessible housing across the lifespan.

Focus Area 3: Strengthen Community Collaborations to improve health and behavioral health

Commitments

1. Support DD providers who successfully promote the health and behavioral health of people served by their organization including DD Provider Agencies, OPRA, DODD
2. Investigate health and behavioral health “hot spots” and plan collaborative actions to improve outcomes and reduce costs

2016 Annual Plan Goals

1. Convene a Trauma Informed Care workgroup to review existing practices and make recommendations for enhancing the quality of trauma-informed practices throughout the organization.
2. Use best practice transition principles so that people leaving Developmental Centers and ICFDDs remain in community placement/homes.
3. Use behavior support expertise to safely reduce staffing for people receiving 2:1 support so that people have greater independence.
4. Ensure newly selected independent providers understand role and responsibilities so that they support health and My Plan outcomes of individuals served.
5. Support the development and communication of the provider “Gold Standard” so that individuals and families have informed access to high quality providers.

Focus Area 4: Manage Resources Fairly and Wisely

Commitments

1. Align HCDDS structures, processes, and resources with the Strategic Plan.
2. Invest in technology and analytics to collect, analyze, and use data to promote quality services and wise use of resources.
3. Collaborate with state departments and other entities to promote efficiencies.
4. Develop and communicate procedures for fair distribution of resources.

2016 Annual Plan Goals

1. Update analysis of how we do our work including structure, processes, and human resources.
2. Implement recommendations from agency analysis so that work is streamlined, positions are aligned, and savings are achieved. Complete “what’s working/not working” analysis of restructured areas.
3. Train and support SSAs to facilitate Cost Projection Tool meetings to assure costs are contained and quality assured
4. Complete refinancing of remaining 50% of people receiving locally funded services.
5. Study and use strategies from other counties to successfully reduce the number of people receiving residential services who live alone
6. Analyze housing network and group home vacancies. Implement plan for reducing vacancy rate by 10%.
7. Implement Communication Plan for all stakeholders that explains ongoing changes and HCDDS current and future role in assuring quality supports for people with DD.
8. Share information with families about changes that will be coming to all Medicaid funded day services so that families understand that provider programs may be changing in response to federal and state requirements.
9. Strengthen and communicate the role of the Service and Support Administrator (SSA) as the point person to guide the planning process, particularly during times of transition.
10. Provide community connections to people currently on the waiting list so that families can be linked to alternative supports to meet current needs.
11. Create a Quality Council, inclusive of family members, that focuses on reviewing the results of surveys and provider quality reviews.
12. Create a user-friendly and accurate data base of providers that is searchable by criteria of interest to families and Service and Support Administrators (e.g. behavior support, nursing services, opportunities for community experiences).
13. Assist providers to navigate the services/supports and rate add-ons in the Adult Day Array Funding Redesign to most effectively support people with intense support needs and advocate for any additional changes that may be needed to the funding structure.