

DIVISION OF DEVELOPMENTAL DISABILITIES

FAMILY SUPPORT ANNUAL REPORT

July 1, 2015 – June 30, 2016

DEPARTMENT OF ECONOMIC SECURITY

Our Mission:

The Arizona Department of Economic Security makes Arizona stronger by helping Arizonans reach their potential through temporary assistance for those in need, and care for the vulnerable.

Our Values:

- Teamwork We collaborate with humility, and partner with kindness.
- Respect We appreciate each other, and value those we serve.
- Integrity We never lie, cheat, steal, bully or harass nor tolerate those who do.
- Accountability We commit to excellence, innovation and transparency.
- Diversity We respect all Arizonans, and honor those in need.

Our Vision:

Opportunity, assistance and care for Arizonans in need.

Our Goals:

- Serve Arizonans with integrity, humility and kindness.
- Support Arizonans to reach their potential through social services that train, rehabilitate, and connect them with job creators.
- Provide temporary assistance to Arizonans in need while they work toward greater selfsufficiency.
- Provide children with food, health care, and parental financial support; provide services
 to individuals with disabilities; and protect the vulnerable by investigating allegations of
 abuse, neglect, and exploitation.

DIVISION OF DEVELOPMENTAL DISABILITIES

Mission:

To provide to individuals with developmental disabilities and their families, the necessary services and supports that are flexible, high quality, and member-driven. To afford individuals the opportunities to exercise their rights and responsibilities of independent decision-making and engagement in the community.

I. Introduction

In 1993, Family Support Legislation was passed that defined a family support program for people with developmental disabilities and their families, subject to funding appropriations. This legislation was a result of collaboration with families, advocacy organizations, providers of services and the Division of Developmental Disabilities (Division or DDD) in recognition of the significance of family support as a national initiative. The Division integrates the philosophy of the legislation into all of its programs and activities. This Annual Report highlights initiatives and systems successfully implemented, and describes the ways in which individuals and families are supported through the Division and its many collaborators.

Family support is defined as services, supports and other assistance provided to families with members who have a developmental disability and are designed to:

- Strengthen the family's role as a primary caregiver;
- Prevent inappropriate out-of-home placement;
- Maintain family unity;
- Reunite families with members who have been placed out of the home; and,
- Include respite care, assistive technology, appropriate personal assistance services, parent training and counseling, home modifications, and assistance with extraordinary expenses associated with the needs of a person with a developmental disability.

II. Overview of the Division of Developmental Disabilities

As of June 30, 2016, The Division of Developmental Disabilities within the Arizona Department of Economic Security provides services and programs to 37,076 people with developmental disabilities. The Division believes that people can best be supported in integrated community settings. The majority of the Division's programs and services are tailored to meet the needs of individuals and their families at home and in community-based settings.

The Division coordinates services and resources through central administrative offices, district offices and local offices located in communities throughout Arizona. There are five (5) district statewide. They include: District Central, District East, District North, District South, and District West. These district and local offices promote the use of existing community resources and program flexibility to meet the needs of individuals with developmental disabilities and their families. While a few services are delivered directly by the state, most services and supports are delivered through a network of individual and agency providers throughout Arizona.

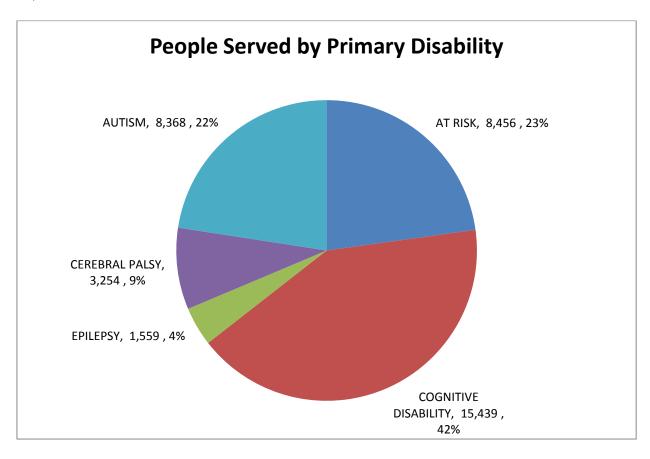
Division Eligibility Criteria: To qualify for supports and services through the Division, an individual must:

- 1. Voluntarily apply;
- 2. Be an Arizona resident and lawfully in the United States;
- 3. Have been diagnosed with autism, cerebral palsy, epilepsy, or an intellectual disability which manifested before the age of eighteen and is likely to continue indefinitely; and,

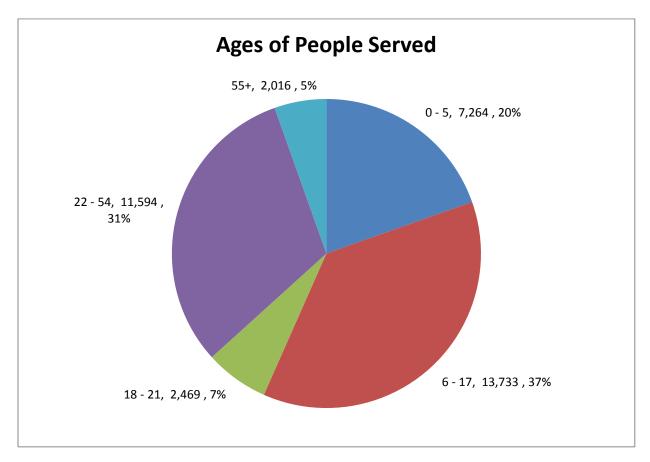
- 4. Have substantial functional limitations in three or more of the following life areas that are directly attributable to the qualifying diagnosis:
 - a. Self-care: Needing help with eating, hygiene, dressing, using the bathroom, etc.
 - b. Receptive and expressive language: Communicating with others.
 - c. Learning: Acquiring and processing new information.
 - d. Mobility: The skill necessary to move safely and efficiently from one location to another within the person's home, neighborhood, and community.
 - e. Self-direction: Managing personal finances, protecting self-interest or making independent decisions which may affect the individual's well-being.
 - f. Capacity for independent living: Needing supervision or assistance on a daily basis.
 - g. Economic self-sufficiency: Being financially independent.

Children under the age of six may be eligible for services when they are determined to be at risk for a developmental disability if services and supports are not provided.

The following chart shows the breakdown of eligible individuals by primary disability as of June 30, 2016:



The Division supports people of all ages. The following chart shows the breakdown of eligible individuals, by age, as of June 30, 2016:



The Division provides services through two primary funding sources: state general fund and Medicaid.

The Division provides services to three eligibility categories or populations: (1) state-only funded members, (2) Arizona Long Term Care System (ALTCS) members, and (3) Targeted Support Coordination (TSC) members.

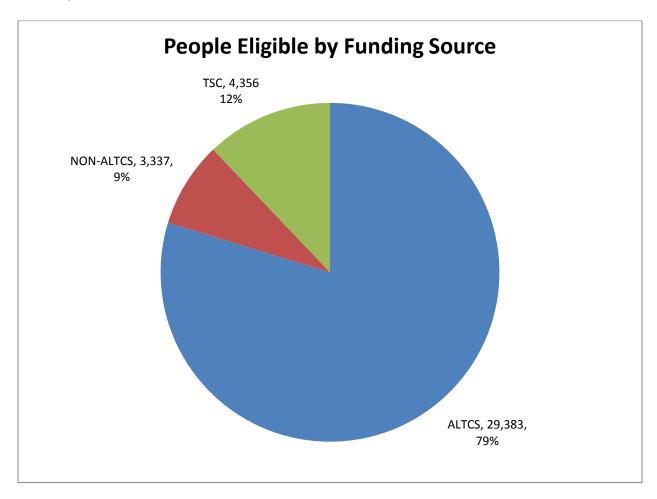
Individuals who meet the Division's eligibility criteria, described above, receive state-funded services not-to-exceed the Division's legislative budget appropriation. Children under the age of three receive state-funded services in accordance with the Individuals with Disabilities Education Act (IDEA) Part C requirements. The types of state-funded services provided are listed in Section III of this report.

Individuals with developmental disabilities who qualify for services through the Division may also be eligible for services through ALTCS. ALTCS provides long term care services, behavioral health services, and acute care services to individuals with developmental disabilities who are at risk of institutionalization. Arizona Health Care Cost Containment System (AHCCCS) staff determines eligibility for ALTCS through a review of the person's functional needs and financial eligibility. AHCCCS is the Arizona Single State Medicaid Agency and

oversees the Medicaid program. In Arizona, the Medicaid program is a research and demonstration waiver approved through the Federal Centers for Medicare and Medicaid Services (CMS), and is intended to demonstrate that home and community-based services and a managed care approach are more cost effective than institutionalization. Long term care, behavioral health, and acute care services are bundled to improve care coordination and enhance service delivery under a single system of support managed by the Division.

Targeted Support Coordination (TSC) is an option for people who qualify for services through the Division and who are also eligible for Medicaid acute care through AHCCCS, but are not eligible for ALTCS. AHCCCS determines if an individual is eligible for the TSC program. This option allows the individual/responsible person to determine the frequency and type of contact he/she wants from the Support Coordinator. TSC provides support to the individual by assisting in identifying community resources and helping to coordinate acute care services provided by Medicaid. These individuals may also receive state-funded services not to exceed the Division's legislative budget appropriation. For persons under age 21, Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services are covered.

The following chart shows the breakdown of eligible individuals by funding source as of June 30, 2016:



The Division provides most of its services through a statewide network of profit and non-profit agencies (Qualified Vendors) and independent providers. Services are provided based on the person's identified needs, state and/or federal guidelines and, when applicable, the availability of funds. See Section VI for the number of providers.

III. Services and Supports

People receive assistance from a Support Coordinator (case manager) in assessing needs and obtaining services and supports. The role of the Support Coordinator may include:

- Facilitator leading the team that develops and implements an Individual Support Plan.
- Advocate advocating for the needs of the person as identified by the person and family.
- Teacher/modeler helping a person gain self-advocacy skills.
- Coordinator coordinating supports and assessing for medically necessary services.
- Mediator assisting with communication between a person, family, and other systems, with a focus on working together.
- Information source knowing about community supports, other systems, and supports from the Division.
- Monitor monitoring the plan to ensure quality of supports and services, as well as progress towards reaching the individual's goal.

ALTCS provides funding for many services based on assessed need. Based on the availability of State funding, the Division's state-only funded program offers essentially the same services as does ALTCS except for acute and behavioral health services. An asterisk (*) indicates services that are available for ALTCS members only.

- Augmentative Communication Devices (devices that help a person communicate, such as a tablet, notebook, communication board or computer system. Each device is individualized to a person's specific needs and strengths).*
- Attendant Care (help with personal care and housekeeping).
- Behavioral Health (care and treatment for people with behavioral health needs such as crisis services, evaluation and diagnosis, counseling, behavioral health rehabilitation, transportation, respite, medication, psychiatric medication adjustment and monitoring or in-patient hospital services).*
- Day Treatment and Training (training, supervision, therapeutic activities, and support to promote skill development in independent living, self-care, communication, and social relationships. Services can be provided in both congregate and individual community settings).
- Early Periodic Screening, Diagnosis and Treatment Services (EPSDT).
- Employment Services (transition to employment, center-based employment, groupsupported employment, individual-supported employment and employment-related transportation).
- Environmental modifications (building modifications to allow an individual to function as independently as possible in their own home).*

- Habilitation (interventions such as habilitative therapies, special developmental skills, behavioral intervention and sensory-motor development designed to increase the individual's skills and functioning).
- Health Plan Services (acute care).
- Homemaker (help with housekeeping).
- Home Health Aide (health maintenance, continued treatment or monitoring of a health condition and supportive care with activities of daily living).*
- Home Health Nurse (skilled nursing services).*
- Hospice (care for individuals who are terminally ill).
- Residential Services (see Section IV).
- Therapies (Occupational, Physical and Speech).*
- Transportation (to ALTCS covered services).*
- Respite Care (short-term care and supervision to provide relief to the caregiver).

Information about children's services can be found in Section VII.

IV. Residential Options

The Division provides services in a variety of living environments, the vast majority of which are community based. Most services are provided in the family or person's home. Opportunities are provided for people to choose a place to live, with necessary supports, within their communities, such as receiving supports to live within the family home; living in one's own home or apartment; living in an adult developmental or child developmental home; or residing in a small group home. When residential services are needed, the following options are available:

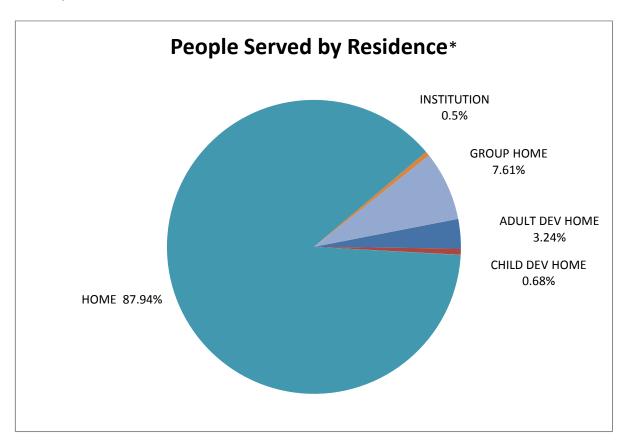
- Individually Designed Living Arrangement This service provides for an alternative, non-licensed living situation for individuals to choose where, and with whom, he/she will live and assume all responsibility for his/her residence. Generally, one or more individuals reside together in a private residence that is leased or owned by the individual(s) and/or the individual(s) representative(s). The focus of this service is to provide teaching supports (habilitation) to individuals based on the collective need for support to eligible individuals who have chosen to reside together and share their resources.
- Adult Developmental Home A licensed, private home contracted to provide room and board, supervision, and teaching (habilitation) for a group of siblings or up to three adults with developmental disabilities.
- Child Developmental Home A licensed, private home contracted to provide supervision, teaching (habilitation) and room and board for a group of siblings or up to three children with developmental disabilities. This includes children who have been determined (adjudicated) dependent by the court as well as children who can benefit from temporarily living away from home.

• Group Home – A residential setting in the community for up to six people with developmental disabilities that provides supervision, habilitation, and room and board. The group home provides a safe and homelike atmosphere, which meets the needs of individuals who cannot physically or functionally live independently in the community.

Rarely does a person need a more intensive residential setting. For those individuals, the following facilities may be accessed

- Assisted Living Centers (ALCs) The facility provides resident rooms or residential units to eleven or more residents. Assisted Living Centers may be licensed to provide one of three levels of care listed below, as defined by the Arizona Department of Health Services:
 - o "Supervisory Care Services" means general supervision, including daily awareness of resident functioning and continuing needs, the ability to intervene in a crisis and assistance in the self-administration of prescribed medications.
 - o "Direct Care Services" means programs and services, including personal care services provided to persons who are incapable of recognizing danger, summoning assistance, expressing need or making basic care decisions.
 - o "Personal Care Services" means assistance with activities of daily living that can be performed by persons without professional skills or professional training and includes the coordination or provision of intermittent nursing services and the administration of medication and treatments by a nurse who is licensed.
- Assisted Living Homes (ALHs) The facility provides resident rooms and services to ten or fewer residents.
- *Nursing Facility* This is a Medicaid-certified facility. This service provides skilled nursing care, residential care, and supervision to persons who need nursing services on a 24-hour basis, but who do not require hospital care under the daily direction of a physician.
- Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) A facility whose primary purpose is to provide health, habilitative and rehabilitative services to people who require them on a continuous basis.

The following chart shows the breakdown of eligible individuals by residence as of June 30, 2016:



^{*}Behavioral Health Residential Facility, .02% and Assisted Living Center, .01% are not included in the graph above.

V. Employment Options

The Division offers a variety of employment services. As needed, the Division also coordinates services with the Department of Economic Security, Division of Employment and Rehabilitative Services, Vocational Rehabilitation (VR) to ensure the Division member is receiving every opportunity available to assist in their successful employment. Based on a person's needs and interests, the following options are available:

• Individual Supported Employment – This service provides Job Coaching and/or Job Search for eligible Division members. Job Coaching is a time-limited service that provides regular contacts with the employed person and/or with their employer. This service is intended to help the person develop the specific on-the-job skills necessary for successful employment. Job Search may be provided when it is not available through VR. Job Search includes job development and assistance in matching the individual with a community-integrated competitive job.

- Employment Support Aide This service provides people with the one-to-one supports needed for the person to remain in his/her employment. These supports could include one or more of the following three options: limited personal-care services, behavioral supports and/or follow-along supports needed to maintain stable employment. The actual supports provided will depend upon the person's need; however, it is the Division's expectation that this service will primarily be used to provide on-the-job follow-along supports for people in competitive employment.
- Group-Supported Employment This group service provides people with an on-site supervised work environment in a community integrated employment setting. Members are provided the opportunity to work in an environment that allows for maximum interaction with other co-workers or the community at large. People are paid by a Qualified Vendor for work performed in accordance with state and federal laws.
- Center-Based Employment This service is provided in a Qualified Vendor owned or operated setting where participants are engaged in paid work and work-related activities with little or no interaction with the general community. People are supported in developing the skills, abilities and behaviors that will enable them to realize their vocational goals, including transition to a more integrated setting. The Qualified Vendor pays people in accordance with state and federal laws for the work the person performs.
- *Transition to Employment* This service is a curriculum-based service that provides a Division member with individualized instruction, training and supports to promote skill development for integrated and competitive employment. In addition to employment-related skill development, the service may also assist a member in obtaining unpaid work exploration such as a volunteer job and job shadowing experiences.

VI. Provider Network

The Division provides most of its services through a statewide network of for-profit and non-profit agencies (Qualified Vendors) and independent providers.

The Division contracts with agencies and professional providers through the Qualified Vendor Application process. This is an electronic process that is open and continuous. This means the Division accepts applications at any time.

In order to support choice, individuals/families have a variety of providers from which to choose. Providers either work for an agency or are listed as an independent provider based on the need in a specific geographic area.

Independent providers receive training and must be certified prior to service provision. These independent providers are employees of the person or family and are paid through a fiscal intermediary. The fiscal intermediary for the Division is Public Partnership Limited (PPL).

Home and Community-Based Providers	# of Contracts
Agencies (Qualified Vendors)	598
Independent Providers	1,544

VII. Services for Children

Children from birth to three years of age who have a developmental delay and who are eligible for services though Arizona Early Intervention Program (AzEIP) may also be eligible for services through the Division and/or the Arizona Schools for the Deaf and the Blind (ASDB), and ALTCS. The Division works with AzEIP, which is the lead agency for IDEA Part C, to provide services designed to support parents and other caregivers to increase their child's engagement and participation in everyday routines and activities. An Individualized Family Service Plan (IFSP) is developed to enhance the child's development and the capacity of the family. AzEIP providers utilize teaming, coaching and natural learning opportunities to support families. Division funded services may include special instruction, therapies, service coordination, health services, or assistive technology devices. As of June 30, 2016, 3,039 DDD children are currently eligible for services through AzEIP.

VIII. Acute Care Health Plan Services

Arizona Long Term Care System (ALTCS) is unique in the nation in that it has always followed a managed-care model. A managed-care approach has proved cost effective over many years in Arizona. It is also the first program of its kind to bundle acute and long term care services under a single program contractor. The ALTCS guiding principles include a member-centered approach. The member, and family/significant others as appropriate, are the active participants in the planning for and the evaluation of services provided to them.

The Division currently holds contracts with three health plans to provide acute medical care services to ALTCS members served by the Division residing across every Arizona county. The health plans allow each person who is enrolled a choice of a primary care provider. The Division's contracted health plans are:

- United Health Care Community Plan
- Care 1st Health Plan
- Mercy Care Plan

The Division also collaborates with the American Indian Health Program (AIHP) for children and adults who are tribal members.

IX. Behavioral Health Services

The Division delegates the scope of responsibility for the provision and oversight of behavioral health services to ALTCS-eligible members through its Interagency Service Agreement (ISA) with the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS). ADHS/DBHS, either directly or through subcontractors, is responsible for the provision of all medically necessary covered behavioral health services.

As of October 1, 2015 ADHS/DBHS subcontracts for the delivery of behavioral health services through three Regional Behavioral Health Authorities (RBHAs): Cenpatico Integrated Care, Health Choice Integrated Care, and Mercy Maricopa Integrated Care and five Tribal RBHAs: Colorado River, Gila River, Navajo Nation, Pascua Yaqui, and the White Mountain Apache Tribe.

The Division coordinates resolution of member specific quality of care concerns, identifies systemic issues with behavioral health service coordination, participates in system improvement efforts, and provides training and technical assistance to the Division's district personnel in addressing the complex needs of its dually diagnosed members. As of June 30, 2016, the ISA between the Division and ADHS/DBHS expired due to the integration of behavioral health services under the oversight and monitoring of AHCCCS.

X. Other Division Activities that Support Arizona's Families

Providing timely, current supports and services to individuals and families is very important to the Division. In addition to the supports and services listed above, the following are some examples of how the Division serves as a leader for individuals and families:

- The Division's *This Is MY Life* contracts with ABILITY360 and DIRECT to provide curriculum development and training to assist individuals in learning self-determination and self-advocacy principles. Self-determination promotes learning all types of decision-making skills to apply in everyday life. Project objectives included focusing on abilities, developing a self-determination community, member-controlled provider contracts, member budget control, promoting programs that support inclusion, and improving operating efficiencies within DDD.
- The DES website, including the Division's web pages, provides a significant resource for the community. This past year, the DES website was redesigned to be more user-friendly. As a result, the Division's resources for individuals and families as well as providers are easier to access and locate. Included on the website are links to important publications such as *Navigating the System* (a handbook for individuals and families), the *DDD Member Update Newsletter*, and the *ALTCS Member Handbook*. Other examples include frequently asked questions, eligibility referral and a provider search. On the "Help for Providers" page, the most current Rate Book is available, the Provider Manual, billing information, Qualified Vendor announcements, and many other resources to support providers.
- Recognizing the challenges members have when navigating between multiple health care services, the Division began the process of addressing the integration of physical and behavioral health services for its ALTCS-eligible members through a single entity: the member's health plan. The Division held more than 14 stakeholder and colleague meetings that gathered comments from Division personnel along with community input to support a transparent and thoughtful process in the development of contractor requirements. Over 971 comments were received during these "listening sessions" and

provided opportunities to hear firsthand what concerns Division colleagues and community members had regarding services. The Division solicited input on topics that included the benefits of combining behavioral health and physical health care services under one contractor, determining what behavioral health services are most important, how the system can be improved to receive those services, and how to improve transition from child to adult services.

- The Division's Behavioral Health Administration partnered with the Arizona Department of Health Services on a grant funded through the Substance Abuse and Mental Health Services Administration (SAMHSA) and the University of Arizona Campus Health Services to identify skills-based and culturally competent workshop and training opportunities focused on adolescents and transition-aged youth. Other areas that were identified for improvement and intervention included adolescent development, brain development and treatment implications; cultural competency and the engagement and retention of youth and families from diverse cultures; intermediate-level trauma-informed care, including historical and intergenerational trauma. The feedback provided by the Division's Behavioral Health Administration was added to other responses received from a large population of statewide stakeholders and families. This information was then utilized to provide free trainings on the above identified subject areas. Two main training sessions were conducted in April 2016, with a follow-up session held in May 2016.
- The Division implemented the AHCCCS High Need/High Cost (HNHC) Program specific to ALTCS-eligible members who met criteria for high utilization of medical and behavioral health emergency department visits; inpatient admissions; inpatient readmissions within 30 days, or a total cost of \$50,000 or more, inclusive of medical, behavioral health, and long term care costs. As part of this program, implementation of the Division's Behavioral Health Administration facilitates monthly multi-disciplinary staffings for program members with each of the RBHAs, Children's Rehabilitative Services (CRS), the Division's subcontracted health plans and Division nursing staff where individualized medical, behavioral health, and long term care needs, treatment interventions, and service delivery are discussed and documented. These multidisciplinary staffings also include the Division's District Behavioral Health Specialists who involve the members' Support Coordination planning team in the provision of information including treatment interventions to address medical, behavioral health, environmental, and psychosocial needs, identification of barriers to improvement and additional resources needed, as well as changes to any treatment goals. As part of these multi-disciplinary staffings intervention action steps are identified, the appropriate providers under medical, behavioral health and long term care services are involved in addressing the members' needs based on the relevant service delivery system.
- The Division supports councils and family groups. Some of these include the Developmental Disabilities Advisory Council or DDAC (a Governor-appointed council that is advisory to the Assistant Director); FACT groups (Families Actively Communicating Together a parent-driven group that provides support and learning opportunities); and specialized groups for Autism, Down Syndrome and groups for families who speak Spanish. These groups are located throughout the state.

- The Division has a Policy Review Team (PRT) that meets monthly. The PRT is responsible for the annual policy review, policy approvals and policy clarifications. New policies or major policy revisions are shared with the DDAC.
- The Division provides updates to policy via an *Opt In* list. Families, members and community stakeholders submit their contact information to the DDD Policy Unit so that they can receive email updates when there are changes to policy. There are currently over 240 individuals on the *Opt In* list.
- The Division's policy manual was divided into five different manuals. The five manuals include the Operations, Medical, Eligibility, Behavior Supports, and Provider Policy Manuals.
- All new support coordinators complete over 100 hours of initial training upon hire that teaches them the philosophy of the Division and provides the foundation for further onthe-job training.
- The Division's Office of Family and Community Resources provides support to Human Rights Committees (HRCs) organized within each District across the state. These committees are comprised of local volunteers who provide independent oversight in matters related to the rights of people with developmental disabilities such as incidents of abuse, neglect, or exploitation. Committees usually meet once a month to:
 - Review any incidents that may have involved neglect, abuse or denial of rights to members receiving services.
 - o Review behavior programs which involve the use of behavior modifying medications or aversive techniques.
 - o Review any proposed research involving members receiving services.
 - Make recommendations to DDD about changes needed to protect the rights of members receiving services.
- The Division provides support to Program Review Committees (PRCs) across the state. These volunteer committees review every proposed behavior plan to make sure the plan is properly written, includes positive strategies and does not violate people's rights.
- The Division's Quality Management System includes the Incident Management System (IMS) which is the automated system for incident reporting. The purpose of incident management is to assist in promoting the health, safety and welfare of people with developmental disabilities through active reporting, investigating, tracking and trending of incidents and the implementation of both individual-specific and systemic-corrective actions and prevention strategies.
- The Division's Quality Management Staff also conducts residential monitoring of approximately 900 group homes each year for compliance with programmatic standards.

- The Division's Resolution System is an automated system used to track member, provider, and community concerns and complaints, and to describe the resolution of the issue. This allows for the ability to identify patterns of concern to ensure systemic identification and resolution. During this time period, the Division responded to 1292 complaints.
- Activities of the Office of Compliance and Review, which include Notice of Action appeals and hearings, are also reviewed for trends and areas for improvement.
- Quality Management staff gathers information to support the Division's credentialing process of Qualified Vendors. Staff also coordinates the gathering of data, analysis and responses to Quality of Care concerns. The Division holds monthly meetings to analyze a variety of data to use in its performance improvement plan. This plan includes a description of all planned activities/tasks for both clinical care and other covered services; targeted implementation and completion dates for measurable objectives and activities; methodologies to accomplish goals and objectives; and identifies staff responsible and accountable for meeting established goals and objectives.
- The statewide Quality Management Committee prioritizes, monitors and coordinates all organization-wide quality/performance improvement activities in accordance with the quality management plan. Its monitoring activities include utilization review data analysis, member and provider satisfaction survey data review, quality of care concerns, performance improvement plans, corrective action plans, etc.
- The Division, in partnership with AzEIP, uses a Team-Based approach to support families receiving Early Intervention services for their children. In Team-Based Early Intervention, every family has a team that works together to enhance a child's learning and development within everyday activities. Early Intervention teams were selected to attend a two-day Master Teams Institute in October and December 2015. This institute provided teams the opportunity to build relationships and focus on evidence-based practices. Teams also gained a deeper understanding of natural learning environments, coaching and teaming practices. In addition to the two-day Master Teams Institute, the Master Coach Institute was held in December 2015. For individuals that completed the Master Teams Institute, this one-day Master Coach Institute provided them the opportunity to shine as leaders and further infuse the Team-Based Early Intervention Services approach into every aspect of the program.
- The Division has established measured Performance Measures for care and service and must show demonstrable and sustained improvement toward meeting Performance Standards. Statistically significant improvement in measured rates is expected and decreases may result in corrective action plans, service caps, up to sanctions. These Performance Standards established by the Centers for Medicare and Medicaid Services (CMS) Core Sets and utilizing the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS) technical specifications are national measured medical outcomes that support state and national quality comparisons. The Division is committed to ensure coordination of member needs across an ever

expanding continuum of medical identified health risk factors to meet special health care needs.

XI. A Snapshot of 2016 Accomplishments

In an effort to support members and their families, the Division engages in continuous improvement opportunities and actively collaborates with its community partners and stakeholders. Some examples include:

- The Division's Office of Licensing, Certification, and Regulation streamlined it processes for issuing developmental home licenses to providers of residential services to children and adults with disabilities. The office has reduced the time to issue initial licenses from approximately six months to approximately 20 days.
- The Division is actively moving forward with implementation of affordable housing for members of the Division. Last year, the Arizona Department of Housing (ADOH) announced that their joint competitive application for the Section 811 Project Rental Assistance program (PRA) was approved and will be operated by the Division. The Section 811 PRA program enables persons with disabilities who are income-eligible to live in integrated, affordable housing. Arizona received \$2,950,000 for the Section 811 PRA program.

Additionally, in a joint project with the Housing Authority of Maricopa County, the Division was allotted 27 apartments that are currently in the process of being renovated. Once completed, the Division will begin a phased move-in process to allow for the most integration possible in the apartment complex. This process is slated to begin in early 2017. To ensure success, the Division has begun to work with Support Coordinators to identify potential residents.

- Arizona has participated for over a decade in the Residential Information Systems Project (RISP) and the Supporting Individuals and Families Information Systems Project (FISP). This is done in collaboration with the University of Minnesota's Institute on Community Integration and the National Association of State Directors of Developmental Disabilities Services (NASDDDS). Arizona has 86 percent of persons with intellectual/developmental disabilities living in their family home. The next closest state was South Carolina which has 71 percent living in their family home. The national aim is 90 percent and the Division is committed to assisting our members in exceeding this goal.
- Creating a "Picture of Life", a key collaboration with the Division, the University of Arizona Sonoran Center for Excellence in Developmental Disabilities (UCEDD), and the Arizona Developmental Disabilities Planning Council, was launched in 2012 as a statewide project to improve outcomes for foster youth with developmental disabilities. The goal of the project is to prepare those youth who are about to exit foster care to exercise choice, promote the use of informal and community supports and to make knowledgeable decisions on community living and work. In doing so, the project intends to improve transition outcomes for these youth, which include the following desired outcomes: a safe and stable home, self-

determination and self-advocacy, framing a vision for their future, a support system to help with decision making, an ongoing circle of natural/informal support, and employment exploration and opportunities. Ultimately, this model project will help to improve services for individuals with developmental disabilities exiting foster care in Arizona by offering a mechanism for youth to exercise meaningful choice about their living arrangements, work life, social networks and services.

- The Division continues to participate in the National Core Indicators Project, a project that has outlined approximately 100 individual, family, systemic, cost, and health and safety outcomes. Surveys measure areas such as the satisfaction with supports and services provided to people with developmental disabilities and their families. The Division continues to show areas of strength and areas where improvement is needed. Following each survey completion, the Division identifies strategies to improve priority areas.
- The Division offered 861 in-person training class sessions to its employees. An additional 20 computer-based courses were offered. There were over 12,723 combined attendees who successfully completed these trainings.
- The Division offers free statewide Article 9: "Managing Inappropriate Behaviors" Instructor Clinics throughout the year. 153 instructors from the provider community completed the Instructor Certification process for Article 9.
- The Division offers free statewide Prevention and Support Instructor Clinic throughout the year. Five (5) New Instructor Clinics had 36 participants. Ten re-certification clinics were held for existing Prevention and Support instructors, with 50 participants.
- Over the past year, the Division has continued its efforts to prioritize integrated employment as the primary consideration for adults of working age.
 - The Division continues to hold a leadership role as Co-Chairperson of the broadly-based statewide Arizona Employment First. The Planning Committee has met monthly since January 2014 and published its statewide Strategic Plan in August 2015. A formal Memorandum of Understanding (MOU) has been written and is being finalized. The Division is a signatory on the MOU. Standing committees are being created to implement the Key Directions and Strategies identified in the Strategic Plan. The Division is amending relevant policy to reflect its commitment to the concept of Employment First.
 - The Division has continued its membership in the national State Employment Leadership Network (SELN). The SELN is a network of State Developmental Disability Agencies committed to improving integrated employment outcomes for their program members. The Division participates in monthly webinars held with all state members on a variety of issues that impact the ongoing work of state agencies on behalf of their membership. Just a few of the issues addressed include national Employment First initiatives; recent Department of Justice enforcement and related settlement actions related to integration of services; CMS rules affecting waiver

services for eligible Medicaid service recipients; the new Workforce Innovation and Opportunity Act (WIOA) requirements impacting state DDD agencies and other stakeholders with reciprocal responsibilities and services; and family involvement that is so critical in supporting their family members' successful employment outcomes. The Division is a standing member of the SELN Data Committee benefitting from best and promising practice of other states as it considers enhancements to its own processes.

- The Division continues to prioritize efforts directed toward enhancing the successful transition of young adults with intellectual disabilities from school to work. There is an active state level Community of Practice on Transition (CoPT) that meets monthly and supports local CoPTs with training and technical assistance. The Division cosponsored the 15th Arizona Transition Conference, drawing over 880 participants. The Division regularly presents at the Conference and has been consistently asked to present a session that features Division members telling their own stories of successful employment.
- o The Division's nine District Employment Specialists regularly participate in local high school transition fairs, job fairs, and other events highlighting employment. Division leadership likewise collaborated with the Arizona Department of Education/Exceptional Student Services (ADE/ESS) program in the development of key goals and actions for their annual state plan. This collaboration is intended to likewise enhance students' successful transition from school to employment. The Division is a member of the ADE/ESS Core Team advising them on the implementation of their newly awarded Intensive Technical Assistance Grant (ITA) from the National Technical Assistance Center on Transition (NTACT). Among the goals of the ITA Grant is the development of evidence-based and promising practices to improve employment outcomes for students with intellectual/developmental disabilities.
- Related to successful transition to adult life, the Division has continued its joint project with the VR program. Through a Memorandum of Understanding, the Division provides matching funds to allow the VR program to obtain additional federal monies and hire dedicated staff to work with Division-eligible youth in the foster care system. The project established a system of coordinated planning and service provision for youth beginning at age 14 to better ensure their successful transition to meaningful and sustained employment, education and community living.
- Additionally, the Division is broadening internal awareness of the value of employment for individuals with intellectual disabilities. The Division requires intensive Support Coordination training on the full array of employment services and supports available to members through the Division. The day long training also outlines the Division's relationship with VR in the provision of employment services. In addition to this day long training, a computer-based training curriculum is being finalized. It will be available for Support Coordination staff, including supervisors, to take soon after hire and provide a short overview of the Division's employment

services as a precursor to the day-long training. It will also be required as one of DDD's staff annual training requirements. The Division is conducting a series of "listening sessions" with DDD Support Coordination staff and with members' families and caregivers to assess the need and preferred format for the development of transition related resource materials.

- The Division is a member of the Arizona Leadership Team implementing the federal PROMISE (Promoting Readiness of Minors in Supplemental Security Income) grant. Arizona, as part of a six state consortium that includes Colorado, Montana, North Dakota, South Dakota and Utah, received one of the five-year federal study grants designed to fill gaps in services, remove barriers to successful transition from high school to adult life for young adults on SSI, and increase the self-sufficiency of these young adults. Youth 14-16 years of age who are receiving SSI benefits, and their families, will be eligible to participate in this study. The project Arizona is part of has been titled ASPIRE (Achieving Success by Promoting Readiness for Education and Employment) and has engaged over 1,000 teenagers and their families as of June 2016.
- The Division partners with Pilot Parents of Southern Arizona to provide Partners in Leadership. Partners in Leadership is an innovative leadership training program that teaches people to be community leaders, and to affect systems and policy change at the local, state and national levels. The program is designed for individuals who have a disability and for parents raising children with a disability. Partners provides the most current information and education about disability policy, the legislative process, and local, state and national issues that affect individuals with disabilities. Partners' participants are people who are ready to work for long term systems change and for change in public policy. The overall goal of the program is to foster a partnership between people who need and use services for disabilities, and those who determine public policy. Partners' graduates gain the abilities to teach policymakers a new way of thinking about people with disabilities.
- The Division contracts with Raising Special Kids and Pilot Parents of Southern Arizona to
 provide peer counseling which provides self-help opportunities through education, training,
 information, encouragement and support to individuals, families and other caregivers. This
 service also communicates with professionals in fields such as education, healthcare, child
 protection and law enforcement to increase awareness and understanding of developmental
 disabilities.
- The Division's Office of Family and Community Resources delivered 41 presentations during this fiscal year providing outreach to 3,334 people. Attendees included stakeholders, community partners, emergency-management teams, school districts, family groups, Division staff, various community fair attendees, and health and wellness event attendees.
- The Division, along with its community partners, sponsored the Twelfth Annual Direct Support Professionals Recognition event on Thursday, September 24, 2015 at the Disability Empowerment Center. These outstanding individuals were honored for their superior service in working with individuals with developmental disabilities. There were 12 awardees which included ten Direct Support Professionals and two Direct Care Supervisors.

- The Division piloted a New Parent Orientation, with over 30 family members participating in the three sessions. The goal of the orientation is to give families an overview of the Division, including increasing confidence when advocating for an eligible family member. Communication strategies are discussed, potential resources are reviewed, and families have the opportunity to have questions answered.
- The Division engaged in a strategic planning process. The Division held more than 40 inperson, statewide *Listening Sessions* for members, families, providers, Division staff and other stakeholders. In addition, the Division conducted a web-based Strategic Plan Survey, in which more than 600 respondents (members, parents/guardians, Division staff, providers and others) participated.

Subject Matter Expert (SME) Teams met from September through December 2015 to further consider the steering team's recommended goals and objectives. When stakeholder comments became available, comments provided by stakeholders were categorized and provided to SME teams for their consideration and incorporation into their action plans. The SME Teams determined the targeted outcomes that would be used to measure progress on each of the objectives.

The four goals that serve as a frame work for the Strategic Plan are included below:

- ➤ Goal 1: Opportunities. Support opportunities for member's choices and quality of life.
- ➤ Goal 2: Value. Ensure that members get the best possible support for the money spent.
- ➤ Goal 3: Communication. Achieve open, ongoing, clear communications among members, families, providers, stakeholders and DDD staff.
- ➤ Goal 4: Environment. Make DDD a place where people love to work and grow professionally.

Each of the goals listed above have one or more sub teams. The sub teams have been meeting to begin work on the action plan. The Division will periodically provide updates as to progress in meeting these goals.

XII. Conclusion

Under the leadership of the New DES, the Division has continued to grow and prosper. During this past year, the Division has been reinvigorated with excitement and passion. The Division is working diligently on the Strategic Plan goals and objectives, viewing it as the guide for the next five years. This excitement has permeated the Division and it is recognized in the work the Division is doing. The Division's member, family, stakeholder and provider communities feel this excitement and are joining DDD on this empowering journey.

The Division is committed in continuing to lead the nation in including individuals with disabilities in the community. With the affordable housing efforts, the options for inclusion continue to increase and expand.

The Division looks forward to continuous input, transparency and change as DDD embarks on fulfilling the goals and objective outlined in the Strategic Plan.