



Division of State Operated Healthcare Facilities

STATE DEVELOPMENTAL CENTERS: STRATEGIC PLAN

January 2023 to June 2025



State Developmental Centers: Strategic Plan

Division of State Operated Healthcare Facilities

Table of Contents

- Overview 2
- Plan Structure 2
- Input and Considerations 3
- Development Process and Timeline 4
 - Strategic Plan Development* 4
 - Implementation Plan Development*..... 5
- Purpose..... 5
- Objectives 5
- Foundational Perspective 6
- Target Areas of Focus 7
 - Downsizing* 7
 - Self-Advocacy* 9
 - Community Collaboration* 10
 - Centers of Excellence* 11
- Evaluation Process 12
- Conclusion 13
- Appendix A: Schedule of Stakeholder Awareness Sessions..... 15
- Appendix B: Stakeholder Feedback for Consideration 16
- Appendix C: Key Terms Defined 17

State Developmental Centers: Strategic Plan

Division of State Operated Healthcare Facilities

Overview

The Division of State Operated Healthcare Facilities (DSOHF) operates three Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs), known as the State Developmental Centers (SDCs). These ICF/IIDs provide comprehensive clinical care for people with Intellectual/Developmental Disabilities (I/DD) in regional centers known as J. Iverson Riddle Developmental Center (JIRDC), Murdoch Developmental Center (MDC), and Caswell Developmental Center (CDC). These centers are located in the western, central, and eastern regions, respectively, of North Carolina.

The State Developmental Centers recognize the need to serve as a safety-net service for people with I/DD. The SDCs also recognize that the I/DD service system is changing. There are unique needs and challenges that developed because of economic, political, and social dynamics during the Covid-19 pandemic. In the last several years, the State Developmental Centers have experienced significant staffing shortages resulting in the pausing of new admissions to programs, consolidating homes on campuses, and continuing to adapt to unprecedented circumstances. The Covid-19 pandemic also revealed areas of greater flexibility for example with the Appendix K expenditures, consideration of new waiver funding streams through 1915i, and the beginnings of Tailored Plan Care Management. The State Developmental Centers are committed to implementing the principles of Olmstead outlined in the NC DHHS Olmstead Plan. As the system continues to change to best meet the needs of people with I/DD, so must the State Developmental Centers. The SDCs seek to do so in a way that capitalizes on the unique resources and expertise available to meet the gaps within the I/DD system of care.

The SDCs will use this strategic plan to define the foundational purpose for future work to occur within the SDCs. The strategic plan aims to capture the intent and spirit of the future planning for the SDCs. The strategic plan outlines four target areas: downsizing, self-advocacy, community collaboration, and centers of excellence. As initiatives are explored, the SDCs will consider how they advance and contribute to each of the target areas, as defined in the strategic plan.

Plan Structure

This plan has a lifecycle of two and a half years to ensure there is sufficient time to implement new initiatives, make adjustments, and so that the impact of the work can be determined. The additional six months added to this lifecycle will align the strategic plan with the state fiscal year. This alignment will ensure ease of tracking for data collection and reporting. Status reports on progress made will be provided on a quarterly basis.

To ensure this work moves forward expeditiously, initiatives related to this iteration of the plan began as the plan was in draft form. This was done intentionally to ensure the strategic plan is both proactive and responsive to needs as they are identified. Prior to finalization of the strategic plan, time was spent connecting with stakeholders and creating opportunities to receive input and feedback. This occurred as the plan was drafted to ensure the feedback was incorporated directly.

The development of future iterations of the strategic plan reflects the SDCs' commitment to lead systemic change to improve the biopsychosocial outcomes for people with I/DD in a way that allows for increased access and integration. We acknowledge that this is important work and requires commitment and intentionality in thought and action.

Input and Considerations

The strategic plan outlines four specific target areas to serve as guideposts as the SDCs consider and implement related initiatives. Corresponding implementation plans outline the initiatives that will occur in relation to each of the target areas. The target areas were developed with careful consideration given to several sources of data and feedback.

Sources of Input:

- **SDC Census Data:** Analyzing number of admissions, discharges, and deaths from FY 2016-2021
- **Community Transition List (CTL) Data:** Analyzing the average length of stay past the initial end of MOA date and variation in length of stay between centers and across Managed Care Organizations (MCOs)
- **SDC Leadership Retreat:** Occurred in the fall of 2021 with the leadership of all three developmental centers to outline the target areas and receive input on future planning for the SDCs
- **I/DD Stakeholder Needs Assessment:** Conducted in fall of 2021 with 199 responses received from community stakeholders on their insight into the gaps in the I/DD system of care
- **Interest Surveys:** The Division of State Operated Healthcare Facilities' State Developmental Center team produced and released several surveys for related work initiatives prior to their inception to gather feedback on a) if the initiative was needed and b) recommendations from stakeholders on implementation
- **Stakeholder Awareness Sessions:** Opportunities from September 2022 through November 2022 to present an overview of the areas of focus and related initiatives to stakeholders to hear their input and feedback.

The SDCs are committed to making data-informed decisions and seeking ongoing input and feedback from stakeholders. As outlined in the overview, the strategic plan is intended to evolve as additional information, resources, best practices, and feedback are identified. There are upcoming avenues to receive input for consideration into revisions and future iterations of the strategic plan and implementation plans.

Future Sources of Input:

- **Town Halls:** Town Halls will be implemented as a direct result of feedback provided from stakeholders in one of the strategic plan overview informational sessions with Legally Responsible Persons of the State Developmental Centers. This will provide DSOHF and the SDCs an opportunity to ensure ongoing clear communication about the progress and future of the State Developmental Centers.
- **Quarterly Status Reports:** Reports will be produced on a quarterly basis to provide a status update on initiatives in progress. There will be accompanying surveys to submit feedback on progress.
- **Stakeholder Awareness Sessions:** Opportunities will be scheduled prior to finalization of the next iteration of the strategic plan at the end of June 2025 for stakeholders to provide input and feedback on next initiatives to be considered

- **Community Interest Survey:** A survey (scheduled to kick off in early 2023) of individuals living in the State Developmental Centers (SDC) and their Legally Responsible Persons (LRPs) will be completed to determine interest in pursuing services and supports outside of the SDC. The survey, tailored to the needs of people with disabilities, will identify perceptions, hesitations, barriers, etc. of Legally Responsible Persons (LRPs) and people with disabilities' in considering such community-based services and supports. Relevant data and recommendations from this survey will be incorporated into the ongoing iterations of this strategic plan to gain insight into barriers to transitions to the community
- **Direct Communication:** As part of this strategic plan process, the SDCs are working to ensure stakeholders feel comfortable and confident in reaching out directly to provide feedback. This email address was created to ensure we can receive and respond to all feedback received: communitycollab@dhhs.nc.gov

Development Process and Timeline

Strategic Plan Development

The timeline outlined below captures the phased development of this strategic plan. The strategic plan will be in effect from January 2023 through June 2025.

- October 2021: Formal kick off
 - SDC Leadership Retreat
 - I/DD Needs Assessment Survey
- November-December 2021: Prep work and communication
 - Take discussions back to leadership teams in the facility and begin open dialogue on our objectives and planning efforts
 - Begin implementation of several initial projects to lay foundation for future work
- January-March 2022: Develop framework and objectives
 - Identify initiatives within key target areas and in alignment with DHHS Olmstead Plan
 - Set benchmarks and identify objectives that can be implemented as plan develops
- April-August 2022: Complete draft of Strategic Plan
 - Review framework and document progress within strategic plan
 - Ongoing drafting and shaping of the strategic plan
- September-November 2022: Obtain stakeholder feedback
 - Host informational sessions with stakeholders to gather input and feedback
- October-November 2022: Update plan
 - Establish process for ongoing review of milestones
 - Edit the plan based on stakeholder feedback received
- December 2022: Produce final Strategic Plan covering January 2023-June 2025.

Implementation Plan Development

For initiatives occurring throughout the lifecycle of the strategic plan, individual implementation plans are developed to outline the milestones, timelines, and measures. Initiatives outlined in implementation plans are intended to build on each other. As one lifecycle of a plan concludes, the initiatives will continue to be in place if it is determined they are effective in accomplishing the intended purpose. Future implementation plans outline changes, updates, and new initiatives to be undertaken. Prior to the end of this plan's lifecycle, a process will occur to pursue feedback, propose changes, and outline the development of further implementation plans.

The below timeline outlines the phased approach to drafting the active implementation plan:

- October-November 2022: Planning
 - Consideration of initiatives to pursue
 - Begin drafting project plans with milestones and measures
- December 2022: Review and Revise
 - Determination of initiatives to move forward as part of the plan
- January 2023: Implementation
 - Begin implementation of the work!
 - Continue to move initiatives forward that began concurrently to the drafting and development of the strategic plan

Purpose

The State Developmental Centers are undertaking the process of developing a strategic plan for several reasons, as outlined below. The strategic plan will capture the spirit and intent of the work and will be used to guide future planning for the State Developmental Centers as we look for ways to address the needs of the current I/DD system of services.

- As a safety-net support, we need to evolve to better address gaps in services to best meet the needs of people with I/DD.
- We plan to identify ways in which we can leverage our resources to increase clinical capacity in the community and further reduce reliance on institutional care settings.
- We aim to develop and implement new initiatives to inform systemic changes.
- We seek to increase stakeholder input and involvement as we redefine our role in the system of care.
- By clearly defining our objectives and outlining our benchmarks, we will increase transparency and accountability.

Objectives

There are several objectives we intend to achieve by developing and implementing this strategic plan for the SDCs. These outcomes are related to the overarching vision of the strategic plan. To ensure our strategic plan is effective and meaningful, we will:

- Identify gaps within the I/DD service system and ways in which the SDCs can address these gaps as a time-limited, safety-net service.
- Begin to provide services within community settings to build capacity and expertise within physical, mental, and behavioral health providers.
- Capitalize on the expertise of the clinical professionals within the SDCs to creatively envision the future purpose of the SDCs.
- Decrease a reliance on the SDCs in the I/DD system of care

Foundational Perspective

By continuing to advance initiatives through our implementation plans, we intend to put into action our foundational perspective. Our overarching goal is to engage with stakeholders and build capacity in the system to improve biopsychosocial outcomes for people with I/DD. The strategic plan and the corresponding initiatives intend to:

- Creatively envision the future of the SDCs through partnership and collaboration with community stakeholders and other divisions
- Fill gaps in the I/DD system of care to continue to meet urgent needs and serve as a safety-net resource for those with additional complex vulnerabilities related to their disability
- Lead work that increases the community's capacity to support people with disabilities
- Communicate plans clearly and transparently so there is consistency in our goals, plans, and actions
- Offer intentional spaces for stakeholder feedback, informational sessions, and ongoing input into plan(s)

The following principles will be used to guide and underpin the strategic plan for the State Developmental Centers. Outlining these principles provides a foundation for the work and initiatives in the implementation plan. These principles should be reflected in all aspects of leadership, programming, and operations within the State Developmental Centers.

- ❖ All individuals currently residing in or applying for admission to the SDCs can be served in the community when they are able to access the necessary array of services. The community services may need to be adjusted to better meet the needs of individuals with I/DD to achieve better outcomes and decrease reliance on the State Developmental Centers.
- ❖ All individuals admitted after 2012 have a Memorandum of Agreement (MOA), which is a contractual agreement between the legally responsible person, SDC, and the Managed Care Organization (MCO) that outlines the length of stay and provides a timeframe to plan for a return to a community setting. Targeted efforts for individuals admitted without an MOA prior to 2012 will be implemented to educate and advocate for transition to community settings as part of our Olmstead initiatives.
- ❖ Transition/discharge planning efforts will begin at the time of admission to the SDCs. Admissions to the SDCs offer a unique time for external systems (MCOs, providers, etc.) to begin to formulate action plans and services to better meet the needs of the individual when they return to a community setting. From the time of admission, MCOs should be working to identify the necessary services in their network or to build their network capacity to prepare the community providers to support the individual upon discharge.
- ❖ Individuals admitted to the centers are expected to transition to a community setting at the end of the MOA, even without reduction in challenging behaviors. We will move away from a medical model of treatment/care and acknowledge the unique gifts and strengths each person inherently possesses. We do not view admissions to the State Developmental Centers as a primary means to decrease challenges, but instead view an admission to the centers as a unique opportunity to allow the I/DD system to adapt and build the necessary supports to meet the needs presented by the individual in their current capacity. The State Developmental Centers have a responsibility to work with the I/DD system to provide recommendations, clinical support strategies, and excellent

quality services, and to use what is learned during an admission to facilitate education, training, and capacity building within the system to better support the individual upon their return to a community setting.

- ❖ Our goal for the SDCs is to better inform the system to create capacity to serve individuals with complex medical or behavioral needs within the community. Admissions to SDCs are a time to focus on developing the supports within the community. Though an improvement or reduction of behavioral health needs may occur because of the clinical supports received, the SDCs are committed to sharing the strategies and supports with community providers for them to continue the care provided.

Target Areas of Focus

The State Developmental Centers' strategic plan identifies four target areas that we aim to impact to make meaningful and measurable change. Each target area includes a definition and description of the purpose for its inclusion. Each target area also details the goal and related initiatives, in order to increase transparency to see how the work initiatives relate to the vision.

Additionally, the DHHS Olmstead plan was released in January 2022. The State Developmental Centers are deeply committed to the initiatives related to furthering the implementation of the state's Olmstead Plan. The strategic plan cannot occur in a silo, and therefore we need to ensure that all initiatives advance the objectives of the state of NC and meet the needs of the residents and community members.

Furthermore, we recognize that this is the first iteration of a centralized strategic plan for the State Developmental Centers in development with the Division of State Operated Healthcare Facilities. Because of this, it is necessary to spend significant time ensuring we are building a shared vision for the future of the SDCs. An initial step is to provide education, information, and awareness. Goals captured in this strategic plan's lifecycle intend to create spaces for intentional dialogue and education.

Downsizing

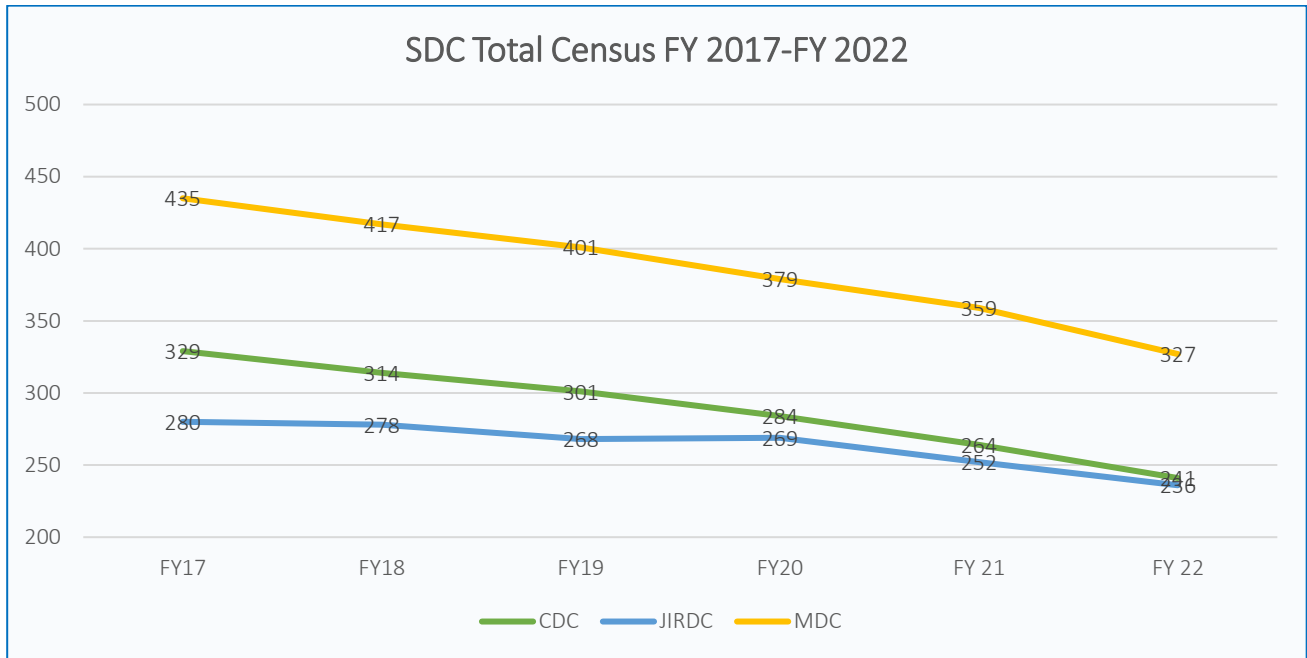
Decrease the total census population of each State Developmental Center.

The strategic planning efforts represent ongoing work that began within the last decade of intentionally decreasing the total census and bed capacity of each of the three centers and increasing transition-to-community planning. As of the end of FY 2022, the total census for all centers equaled 805 people, including respite and TRACK. At the end of FY 2017, the total census equaled 1044 people. Thus, in five years, there was a net decline in census of 239 people.

Operational capacity is defined as the total number of beds available within the State Developmental Center. At the end of FY 2017, the net operational capacity was 1199 beds. By the end of FY 2022, the net operational capacity was reduced to 992 total beds, reflecting our efforts to downsize the operational capacity of the State Developmental Centers and ensure individuals are served primarily in community settings. The State Developmental Centers will continue to prioritize our commitment to people with I/DD living in the most integrated setting.

The State Developmental Centers are committed to downsizing the census of all centers for individuals admitted with a Memorandum of Agreement (MOA) and current residents admitted without an MOA. All admissions since 2012 require an MOA between the Individual or Legally Responsible Person, MCO, and

SDC to ensure active transition planning and timely return to the community. Transition planning begins at the time of referral. The State Developmental Centers aim to ensure that referrals are made once the system demonstrates that the individual meets the ICF/IID criteria and has exhausted community supports and services, necessitating admission. By targeting efforts that narrow the front door (referrals and admissions) as well as encouraging and promoting return to community settings, the SDCs aim to continue to decrease the census throughout the lifespan of this Strategic Plan.



Goals:

- The State Developmental Centers will enhance the pre-admission counseling process to divert individuals from admission to the centers and partner with LME/MCOs for implementation.
- The State Developmental Centers will operate a cross-divisional Central Referral Review Committee (CRRC) where all referrals will receive enhanced screening to ensure LME/MCOs have thoroughly considered all alternative options to divert individuals from admission.
- The State Developmental Centers will recruit and hire at minimum one Olmstead Specialist per center to implement enhanced transition planning meetings and ensure individuals with Memorandums of Agreements (MOAs) are preparing, from the time of admission, their return to community plans.
- The State Developmental Centers will reduce the standard MOA length and extension requests for all adult ICF/IID admissions.
- For all residents admitted prior to 2012, who do not have an MOA, the State Developmental Centers will provide education on what Olmstead means and its importance as well as benefits counseling to the residents and family members and/or legally responsible persons about community supports and services available. The SDCs will conduct a survey of all residents, family members, and/or legally responsible persons to learn more about their perceptions and barriers to transitioning to a home or community setting to ensure interventions and supports are tailored to address hesitations or concerns.

Related Status Updates:

- The State Developmental Centers held the first cross-divisional Central Referral Review Committee (CRRC) in June 2022. Currently all adult ICF referrals are reviewed by this committee. Through 12/31/22, we have reviewed 15 referrals, 8 of which met criteria for admission. For the 7 who did not meet criteria, recommendations from the committee on alternative supports were provided to the MCO. Cross-divisional technical assistance is offered to the MCO for all referrals, as appropriate.
- The State Developmental Centers recruited and hired Olmstead Specialist positions within two of the three centers. Ongoing recruitment for two additional positions continues.
- Pre-admission counseling process will be piloted beginning in January 2023.
- The Request for Quote (RFQ) to secure a vendor for the Community Interest Survey project is in the final draft stages and will be posted in early 2023.

Self-Advocacy

Build a system and culture that actively supports the decision-making authority of each individual.

The State Developmental Centers are committed to enhancing the system to support self-advocacy and building a culture that creates intentional space for the voice, choice, and decision-making ability of each individual. The State Developmental Centers seek to partner with agencies and networks already leading this work to capitalize on the resources available. Additionally, the State Developmental Centers strive to serve as a leader in training and enhancing the resources available for advocates who do not communicate with words, relying on our resources and expertise to lift-up the autonomy of all people with I/DD.

Goals:

- The State Developmental Centers will end the use of subminimum wage for any on campus or off campus paid work for residents. As the 14c certificates that enable those programs expire, SDCs will no longer renew.
- All adult residents will have a Career Development Plan documenting their exploratory process to consider paid work opportunities.
- Within one year of ending the use of subminimum wage, DSOHF will complete a survey to evaluate the impact of the changes.
- The State Developmental Centers will partner with agencies to develop and implement peer support networks for individuals with disabilities to connect with peers in community settings about opportunities for inclusion.
- The State Developmental Centers will provide meaningful opportunities to expand advocacy skills that will occur at minimum once per month.
- The State Developmental Centers will partner with agencies to develop and provide educational sessions on guardianship alternatives for individuals with disabilities, families, and legally responsible persons that will be offered at minimum once per quarter.

Related Status Updates:

- The State Developmental Centers no longer operate under 14c Certificates.
- All residents at each of the SDCS engaged in paid work opportunities are paid at least minimum wage as of 1/1/22.

- The SDCs are in communication with Optum to discuss purchasing the peer mentor curriculum to be used to develop cohorts within the SDCs, as paid self-advocacy training opportunities.
- SDCs have increased their efforts to provide self-advocacy opportunities at least monthly. Some events have included a focus on voting rights, choice, and an “advocacy in action” project to recognize people with I/DD and staff for their work.
- The SDCs are partnering with Money Follows the Person (MFP) and UNC CARES to develop a training series for stakeholders and Legally Responsible Persons (LRPs) on guardianship alternatives.

Community Collaboration

Enhance our transparency and relationships with the network of stakeholders and providers to build their capacity to support people with I/DD and complex behavioral, physical, mental health needs.

The State Developmental Centers intend to build partnerships and relationships with the network of I/DD stakeholders to increase transparency, share resources, and build community capacity. We seek to accomplish this work by opening the doors of the State Developmental Centers and beginning initial projects that allow us to offer education and build relationships.

Goals:

- The State Developmental Centers will support people living in the centers by providing informational sessions where they can learn about supported-living residential services to occur at minimum once per quarter.
- The State Developmental Centers will provide opportunities for people living in the centers and their family members or legally responsible persons to learn about community funding streams and service definitions to occur at minimum once per quarter.
- The State Developmental Centers will offer education and training opportunities to community providers with the purpose of building community capacity at minimum once per quarter.
- The State Developmental Centers will pilot a collaborative opportunity with community ICF/IID providers with the purpose of sharing resources, building community capacity, and providing technical assistance and consultation.
- The State Developmental Centers will develop and implement an Olmstead Implementation Institute to provide enhanced training to internal SDC employees on the understanding of the Olmstead Decision as well as how to incorporate Olmstead principles into the transition planning process to better support individuals’ return to a home or community setting.

Related Status Updates:

- The SDCs partnered with Money Follows the Person (MFP) to create an Olmstead Implementation Institute, which is a training series for the social workers in all centers, to learn practices to support transitions to the community.
- The SDCs are partnering with MFP and UNC CARES to host a training series on Supported Living to increase awareness and understanding of this community option.
- The SDCs will host their sixth workgroup for the ICF Provider Collaborative. The SDCs hosted two “office hours” events to provide on-the-spot technical assistance to providers to increase capacity utilizing the expertise and resources of the SDCs.

Centers of Excellence

Utilize and develop best practice, evidence-based interventions to support people with I/DD and improve biopsychosocial outcomes

The State Developmental Centers seek to capitalize on the expertise and resources available to become leaders within the I/DD system of care. We acknowledge that this cannot be done while providing residential services, and therefore the projects below outline initial work to move the State Developmental Centers in the direction of transitioning to Centers of Excellence. The vision for the Centers of Excellence is to partner with leading research programs and state partners to lead evidence-based initiatives that result in high-impact systemic change. Throughout the life cycle of this plan, the State Developmental Centers will begin exploring individual center specialties, with the intent of piloting these specialty, non-residential programs and to consider offering these programs to people with I/DD in community settings.

Goals:

- The State Developmental Centers will work to explore and consider pilots to be used in discerning what specialty programs could be developed.
- The State Developmental Centers will update their website to ensure clear and current information and quarterly strategic plan status updates.
- The State Developmental Centers will form a workgroup for psychologists at the centers to review evidence based best-practices and look to make recommendations for identified areas of improvement.
- The State Developmental Centers will identify programmatic areas currently offered on campus and determine which can be made available to residents with I/DD in nearby communities.
- The State Developmental Centers will develop the plan to implement a diversion program for people with I/DD.
- The State Developmental Centers will explore partnerships with community provider agencies to enhance wrap around services for transitions of people with I/DD from the centers to community-based services.

Related Status Update:

- The State Developmental Centers began a collaborative with community ICF/IID providers and will begin piloting Consultative Office Hours to those providers engaged in the partnership.
 - We have hosted two events so far—one in partnership with the Division of Health Benefits (DHB) on Tailored Plans and one led by the psychologists at the SDCs on complex case formulation.
- The State Developmental Centers hosted a training on Bioethics through Caswell Developmental Center as the first of more trainings to be offered to the community.
- The SDCs are partnering with the MCOs to host a training series on I/DD services per catchment area. These are slated to begin in March 2023.

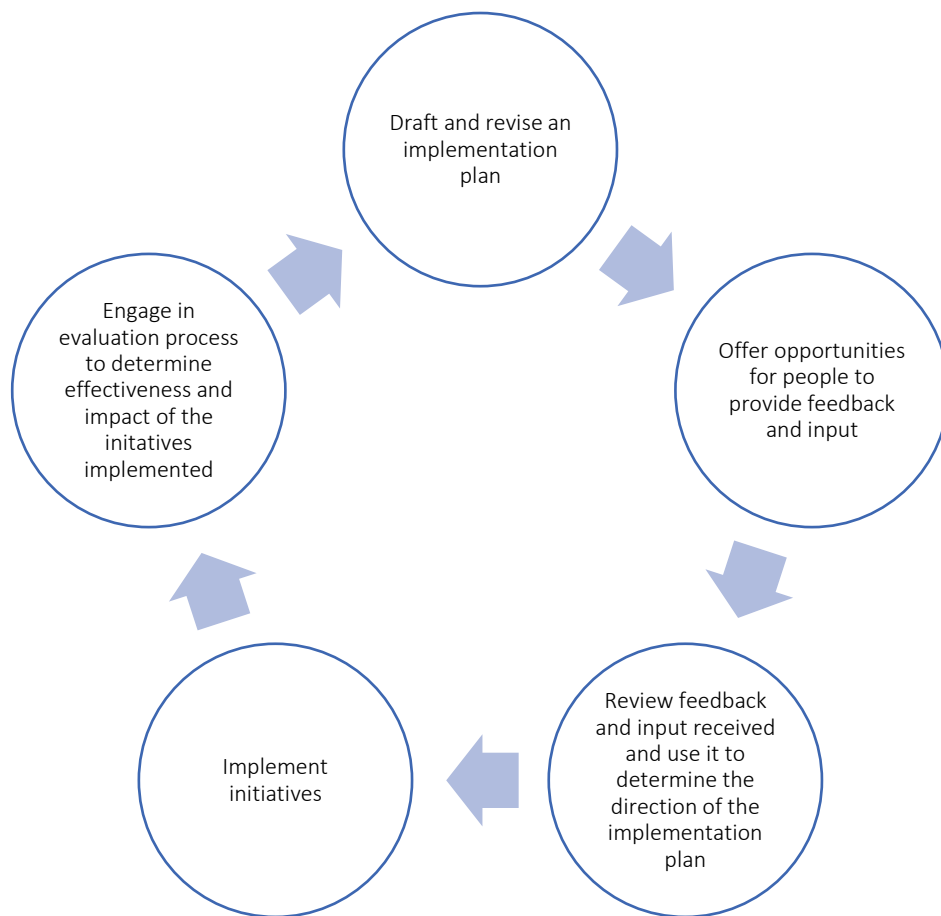
Evaluation Process

To determine the extent to which we have accomplished our goals, each area of focus has corresponding measures. The measures are captured in a dashboard and will be reported on a quarterly basis with the status updates.

Some sources of data captured in the strategic plan dashboard to be used in evaluation are:

- Census Reports
- Community Transition List (CTL)
- Referral Database
- Attendance reports from events
- Evaluation surveys

Additionally, the State Developmental Centers seek to define a process for obtaining feedback from stakeholders on their perceptions and experiences as it relates to our work. The survey link will remain active and serve as a central location for stakeholders to provide feedback on the areas of focus and/or propose related initiatives. Over time, the goal is to continue to follow this format for receiving feedback, revising the strategic plan, developing implementation plans, and beginning the work outlined in the plan for the next timeframe.



At the conclusion of the strategic plan in June 2025, we will follow the below timeline to revise the strategic plan and develop a corresponding implementation plan to be in effect from July 2025 to June 2028. We will begin this process prior to the conclusion of the strategic plan in effect to ensure timely revisions and ongoing work occurs.

- January-March 2025: Stakeholder Input
 - Host community information sessions
 - Survey stakeholders for their feedback on the impact of the initiatives
 - Conduct an updated needs assessment survey to continue to hear from community members on most pressing gaps and needs within the I/DD system
- April-June 2025: Edit and Update
 - Use the input gathered to inform any updates to the strategic plan
 - Identify the next phase of work initiatives to be outlined in a specific implementation plan
 - Revise the strategic plan to capture changes in purpose and vision and to reflect the work that occurred in the prior plan's lifecycle
- July 2025: Final Plan Release
 - Finalize the plan and kick-off outlined initiatives in the implementation plan

Conclusion

The State Developmental Centers are committed to engaging in the work needed to identify areas of improvement, address areas of inequity, and develop programs that utilize the resources available to address gaps in the current I/DD system of care. The strategic plan aims to carve out the unique role of the SDCs in the I/DD system of care in a way that supports the wellbeing of people with significant needs related to their disability, increase access and integration to community-based services, decrease reliance on the ICF/IID services provided at the centers, and creatively envision a future where the SDCs continue to serve as a safety-net service.

To accomplish this work, this first iteration of the strategic plan in effect from January 2023 through June 2025 intends to focus on educational and awareness efforts. This work cannot be accomplished without a strong foundation for communication, information, and ensuring people have the tools they need to make informed decisions. As the related initiatives progress, it is our intent to continue to add initiatives that build on the foundation established. To shift the I/DD system of care requires significant planning, time, and resources. We desire to ensure our work leads to sustainable, long-lasting, meaningful change. All initiatives taken on as part of the strategic plan will work to further the purpose and objectives outlined in this plan.

Quarterly status reports will be produced and shared with stakeholders so that there is transparency in the progress. Quarterly reports will include a brief narrative of progress made within the quarter and any related data. As part of an ongoing route to receive feedback, the survey link will remain active and allow stakeholders to provide feedback and/or propose initiatives related to the areas of focus.

This strategic plan includes the timeline and process for developing the next iteration. This was intentionally included to ensure that stakeholders are aware of our commitment to the ongoing nature of this work. Our intent is that the strategic plans serve as building blocks, making significant progress each lifecycle in moving towards the vision outlined in our foundational principles.

Prior to finalizing this strategic plan, several informational and awareness sessions were offered for stakeholders to learn more about the purpose, foundational perspectives, areas of focus, and related initiatives to be captured within this lifecycle. The time stakeholders spent with us during the sessions and the feedback offered was incredibly important. While not all the work will be able to occur within this plan, Appendix B captures the feedback provided to serve as a transparent record of input to be considered as we draft future iterations.

Above all, we are deeply committed to shifting the I/DD system of care away from a reliance on institutional care settings. To do this, we firmly believe the State Developmental Centers have an important role to serve as a safety-net service to meet the needs of people with I/DD and utilize our resources and expertise in a way that addresses gaps within the system.

Appendix A: Schedule of Stakeholder Awareness Sessions

Specific opportunities were made available to provide opportunities for stakeholders to learn more about the SDC strategic plan and to have questions answered. The following list includes the dates and intended audience for the sessions held.

- September 8, 2022: presentation for the North Carolina Council on Developmental Disability Public Policy Committee meeting
- September 29, 2022: presentation for leadership at the State Developmental Centers
- October 4, 2022: presentation for leadership at the State Developmental Centers
- October 6, 2022: presented a session for Legally Responsible Persons and employees of the State Developmental Centers
- October 10, 2022: Led the MFP Lunch and Learn and presented the strategic plan overview
- October 18, 2022: presentation for Legally Responsible Persons and employees of the State Developmental Centers
- October 28, 2022: presented to the ICF/IID Provider Collaborative on the area of focus, downsizing.
- November 7, 2022: presented a session for Legally Responsible Persons and employees of the State Developmental Centers
- November 9, 2022: presentation for leadership at the State Developmental Centers
- November 17, 2022: presented to the I/DD Stakeholder Workgroup on the strategic plan overview
- November 29, 2022: presented to the ICF/IID Provider Collaborative on the area of focus, self-advocacy

Appendix B: Stakeholder Feedback for Consideration

This feedback was gathered in the stakeholder awareness session and the survey link provided. This feedback is under consideration and will be incorporated into future iterations of strategic plans as they fit with the areas of focus or as appropriate.

The link to the survey will remain active. Feedback can be offered at any time on the areas of focus and/or to propose related initiatives for consideration in future iterations of the strategic plan.

<https://forms.office.com/g/pqNpqu6BMf>

Ideas suggested by Legally Responsible Persons (LRPs) during strategic plan informational sessions:

- Transitional housing model on campus to prepare people with I/DD for transition to community
- Educational/residential model
- Quarterly town halls (to be implemented)
 - This was added to this lifecycle of the strategic plan based on the positive feedback received when the stakeholder shared this idea. They will occur on a quarterly basis in conjunction with the release of quarterly status reports and data.
- Parent support group for transition planning

Feedback received through the survey link from September-November 2022:

The following feedback is taken directly from the responses received through the survey link. Each bullet point indicates one person's response per area of focus. In total, there were seven respondents who provided input specific to our areas of focus.

- **Downsizing:**
 - Expressed concern over downsizing feeling it indicates "closure." Expressed concerns with the availability and level of care able to be provided in community.
 - Concern with downsizing as they feel it means "closure" and "discharging residents." More support for providers needed for crisis situations.
 - Suggestion that when a person leaves a State Developmental Center, the money per diem follows them to the community and goes to the provider. Providers are not able to make enough money to support someone with 100+ behaviors per month.
 - A question of if downsizing is necessary and why
- **Self-Advocacy:**
 - Very important and should always be encouraged
 - Increased focus on people who do not communicate with words
 - More training to community for education on self-advocacy
- **Community Collaboration:**
 - Not enough community support or available providers
 - Need to learn more about community providers available
 - Great idea for the State Developmental Centers to partners with community providers for education and training. Request for State Developmental Center employees to provide training in the home and community setting
 - Needed infrastructure like Care360 for I/DD resources
- **Centers of Excellence:**
 - No responses received

Appendix C: Key Terms Defined

Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID): An optional Medicaid benefit that enables states to provide comprehensive and individualized health care and rehabilitation services to individuals to promote their functional status and independence.

Memorandum of Agreement (MOA): The contractual agreement between the MCO, individual or legally responsible person, and the State Developmental Center (SDC) that determines length of stay at the SDC and ensures that all parties are working toward a transition back to the community from the time of admission. For adults admitted to the ICF/IID programs in the SDCs prior to 2012, the MOA process was not in place. For anyone admitted to the SDCs after 2012, there is an MOA in place.

Community Transition List (CTL): A list of all individuals admitted under an MOA and those not on a MOA who have expressed interest and/or intent to transition to a community setting.

Legally Responsible Person (LRP): In the event the individual needs support with making decisions, this is a court appointed representative. This individual is an active part of the decision-making process.

Local Management Entities/Managed Care Organizations (LME/MCOs): public managed care organizations that provide a comprehensive behavioral health services plan for people in need of mental health, developmental disability or substance use services. LME/MCOs are regionally based.