

Olmstead Plan Stakeholder Advisory Minutes

August 23, 2021; 1:00 PM – 4:00 PM, Online

1:00 – 1:05 Welcome

Betsy MacMichael, Community Co-Chair

Holly Riddle, Office of the Senior Advisor on the ADA, called the meeting to order, noting that this was the Olmstead Plan Stakeholder Advisory's (OPSA) fifth quarterly meeting. She turned the meeting over to Betsy MacMichael, the OPSA's Community Co-Chair. Ms. MacMichael welcomed new members and thanked the four members of the NC General Assembly who are part of the OPSA. She briefly described the experience of her family on a beach trip where inadequate physical accessibility proved stressful for the family and shared the family's struggles after her daughter's Direct Support Professional (DSP) was laid off. The Olmstead Plan, she said, was "personally meaningful" to her family and to many others.

Ms. MacMichael noted that, during the meeting, participants would review timetables for development of the plan and discuss recommendations for the plan from OPSA's eight committees. She asked that speakers make every effort to be inclusive, making their remarks "listener friendly." She then introduced OPSA's Departmental Chair, Deputy Secretary Dave Richard, thanking him for his leadership in this effort.

1:05 – 1:10 Introduction of Secretary Cohen

Deputy Secretary Dave Richard, NC Medicaid

Deputy Secretary Richard introduced Mandy K. Cohen, MD, Secretary of the NC Department of Health and Human Services (DHHS). Secretary Cohen has led the DHHS since 2017, he said. A physician by training, Secretary Cohen has a strong commitment to social determinants of health; sees the needs of people with disabilities as a priority; and has a vision for the Olmstead Plan as a "living, breathing document" that will be embraced by DHHS.

1:10 – 1:20 NCDHHS Leadership Remarks

Secretary Mandy K. Cohen, NCDHHS

Remarks from Secretary Cohen included the following related to Olmstead Plan development. The Secretary:

- Thanked the "talented team" of DHHS staff, the co-chairs and the committee chairs leading the Olmstead effort.
- Noted the significance of the Governor's Executive Order No. 92 to make North Carolina an Employment First state.
- Acknowledged the "foundational" Olmstead-related work conducted by Transitions to Community Living (TCL) and Money Follows the Person (MFP).
- Emphasized the state's efforts to expand and build its Medicaid Home and Community-Based Services (HCBS) waiver environment to make the benefits of inclusive community available to more people.
- Observed that the state has developed a broad array of community services and supports, honoring choice.
- Affirmed that DHHS will continue its work to build community services and advance Olmstead goals in the newly submitted 1115 waiver.
- Lauded Direct Support Professional (DSPs) wage increases, passed in the House, as key to building a viable frontline workforce, supporting community life.

- Stated that the Olmstead Plan would become “a roadmap” and a “blueprint,” committing North Carolina to a future where people with disabilities can live an “everyday life” with the services and supports necessary to do so.
- Committed to building strong partnerships with all the stakeholders necessary to implement the plan successfully, including legislators and Governor’s office, and to encouraging stakeholders to work collaboratively to make the plan a reality. DHHS, she said, cannot do this alone.
- Reiterated the importance of the Olmstead Plan as a “living, breathing” document for making policy, program and funding decisions in DHHS.
- Expressed the need for widespread, continued education on and information about the Olmstead Plan and its vision.
- Called for making DHHS Olmstead a reality by engaging a diverse cadre of “leadership in action.”
- Advised that DHHS will identify a new group of stakeholders to move the Olmstead Plan forward in 2022-2023 and a team of professionals solely dedicated to overseeing, monitoring and revising the plan.

Ms. Riddle thanked the Secretary and introduced Sherry Lerch, Senior Consultant with the Technical Assistance Collaborative (TAC).

1:20 – 1:50 Update on Olmstead Plan Development

Sherry Lerch, Senior Consultant, TAC

Ms. Lerch noted that the TAC report, *An Assessment of the North Carolina Department of Health and Human Services’ System of Services and Supports for Individuals with Disabilities*, was shared with stakeholders at the end of April 2021. The report is an important input for the Olmstead Plan, helping to inform priorities and goals. The TAC, with support from the DHHS’ Office of the Senior Advisor, has begun the plan development process, relying on feedback from diverse stakeholders, many of whom they and DHHS are interviewing one-on-one.

Olmstead Plan inputs, in addition to the assessment, include:

- Reviewing the work and recommendations of the eight Olmstead Plan Stakeholder Advisory (OPSA) committees.
- Assessing other states’ Olmstead Plan frameworks, including, e.g., the Minnesota Olmstead Plan, a “gold star” plan that is data-driven; explains the rationale for the state’s priorities; and includes targeted measures for the priorities.

NC has decided to write a two-year plan, covering calendar years 2022 - 2023.

Ms. Lerch echoed the progress the state has made, outlined in the opening remarks by Secretary Cohen. Ms. Lerch stated that North Carolina would need to choose strategically what the priorities will be in the plan and to consider how best to show measurable progress over time. This, she noted, will take resources. She described the committees’ work as, in many cases, at the level of an “action plan” and more specific, in some cases, than the plan will be. Certain action steps, she said, are likely to be recognized in sequential versions of the plan.

Examples of priorities that the TAC has recommended to DHHS for its consideration are:

- Enhance HCBS for Medicaid beneficiaries:
 - Align the HCBS Final Settings Rule State Transition Plan, to be completed by March 2023, with activities under the Olmstead Plan
 - Continue to develop such additional services as (b)(3) supported employment. The (b)(3) services are like those offered under the Medicaid waiver and can help support people in the community.

- In addition to the Innovations waiver, increase the number of HCBS waiver slots for the Community Alternatives Program for adults with disabilities (CAP-DA); Community Alternatives Program for Children (CAP-C); and Traumatic Brain Injury (TBI) waivers.
 - Continue to develop the Tailored Plan, inclusive of waiver expansion for populations who need more services, such as people with TBI.
 - Implement workforce development strategies for DSPs aimed at recruitment, retention and building career paths to help ensure that additional waiver slots have the intended impacts. Examples: increase wages and provide competency-based training.
 - Expand the use of self-directed services and supports so that people need not rely solely on formal providers.
 - Promote use of assistive technologies and “smart homes”¹ to relieve some of the strain on the community workforce
- Improve collection and use of data/measures:
 - Establish baselines for, e.g., waiver slot availability; DSP workforce wages, retention and turnover; effectiveness of frontline workforce training; numbers utilizing self-directed services; expansion of assistive technology, etc.
- Increase access to safe, decent affordable and accessible housing to improve health outcomes:
 - Enhance Targeted Program Housing vouchers to provide access to affordable housing for people with disabilities.
 - Increase the number of Low-Income Housing Tax Credit (LIHTC) units.
 - Continue to partner with the NC Housing Finance Agency (NCHFA) and others to develop a Strategic Housing Plan.
 - Build on the Transitions to Community Living (TCL) Vouchers to provide rent assistance to those with behavioral health disabilities.
 - Build upon the Key Rental Assistance program to make Targeted apartments affordable to people with disabilities.
 - Consider recommendations that come out of the Strategic Housing Plan to expand access to housing in the community for the Olmstead population.
- Promote Family and Consumer Stakeholder Inclusion
 - Increase efforts to engage families and consumers in policymaking.
 - Use data gathered in the Tailored Plan listening sessions and diverse listening sessions hosted by DHHS on the behavioral health system to inform decision-making
 - Use data from the survey on housing being done by TAC.
 - Find ways to meaningfully engage people in systems design efforts
- Expand Competitive and Integrated Employment.
 - Build on the work being done under NC’s Employment First initiative to advance competitive integrated employment² in community workplaces.
 - Examine and consider expanding DVR’s outcome-based, milestone payment methodology and its use in the NC Collaborative for Ongoing Recover (NC CORE) at Vaya LME/MCO; this collaborative, braided funding approach assists people receiving Individual Placement and Support/Supported Employment (IPS/SE).

¹ Smart home refers to a convenient set up in which a home’s appliances and devices can be controlled remotely with an internet connection. The user can control, for example, temperature, lighting and access to the home from a mobile device or a computer.

² The Workforce Innovation and Opportunity Act (WIOA) defines competitive integrated employment as work that is performed on a full-time or part-time basis for which an individual is: (a) compensated at or above minimum wage and comparable to the customary rate paid by the employer to employees without disabilities performing similar duties and with similar training and experience; (b) receiving the same level of benefits provided to other employees without disabilities in similar positions; (c) at a location where the employee interacts with other individuals without disabilities; and (d) presented opportunities for advancement similar to other employees without disabilities in similar positions.

- Reference the 2015-2017 *Education Opportunities for Students with Disabilities* reports³ to the NC General Assembly as a framework for organizing education and employment data to support the transition to employment for students and youths with disabilities

1:50 – 2:00 Break

2:00 – 2:40 Committee Recommendations

OPSA Members and Staff

Housing Committee (Mike Bridges) – The committee recommends the following to DHHS:

- Continue to use TCL as a framework for housing people in the community.
- Support MFP’s work to rebalance long-term services and supports as the Tailored Plan are built.
- Transition facilities with more than six beds down to no more than three unrelated persons.
- Increase funding for Key Rental Assistance⁴ program.
- Identify and eliminate services barriers to moving people to the community.
- Increase housing options in rural areas.
- Increase home modifications and assistive technology use and train participants/staff to use innovative assistive and smart home technologies.
- Include housing indicators data within the Tailored Plans to measure the number of people housed and housing retention rates.
- Reduce reliance on institutional settings. Develop a plan to close state facilities, inclusive of additional HCBS options; do not, however, promote closures without services/supports in place.
- Explore increasing in Bridge Housing⁵ targeted to persons with disabilities.
- Link the Olmstead Plan to the work that will take place in the DHHS Strategic Housing Plan.

Employment Committee (Bridget Hassan) – The committee recommends:

- Collaborate across areas such as housing and workforce development to make employment successful.
- Promote competitive integrated employment (CIE) as an option for everybody; CIE should be included in all person-centered and transition plans.
- Develop buy in and understanding of employment goals for the person from all people in the system, including providers, frontline staff and LME/MCOs.
- Develop a marketing plan for employers about the state’s Employment First initiative.
- For students transitioning from school to work, increase the focus/services in Local Education Agencies; charter schools and home schools.
- Identify and resolve barriers that result in people not being offered CIE.
- Promote informed choice about integrated employment and post-secondary education options.
- Secure funding for more employment and education supports and services.
- Increase the workforces’ competencies with respect to the delivery of CIE services.

Workforce Development Committee – (Karen McLeod) - Core items and work of this group are:

- Increase wages and create career paths for direct service workers/direct support workers (DSW/DSPs) to reduce turnover.

³ Session Law 2015-241, Section 11.19.(a)

⁴ Key Rental Assistance pays the difference between the tenant rent and the payment standard to make a unit affordable to participants in the Targeting Program, a partnership between the NC Housing Finance Agency and the DHHS to provide access to affordable housing for people with disabilities and/or experiencing homelessness with very low incomes.

⁵ Bridge Housing initiatives provide safe, temporary housing, case management, support and referral services to help people transition to permanent supportive housing.

- Ms. McLeod’s organization, Benchmarks, has helped to form a coalition of 26 provider organizations and LME/MCOs, representing aging, mental health and intellectual and other developmental disabilities (IDD); the group is working with DHHS to get a bill passed to increase DSWs’ wages.
 - The group is also planning with DHHS for use of American Rescue Program Act (ARPA) money for enhanced Federal Medical Assistance Percentage (FMAP) for Medicaid HCBS waiver funding to increase DSW wages; they also seek to sustain the increase after the two years of enhanced FMAP ends.
- Address system wide, institutional bias that has resulted in higher pay for staff in congregate settings.
- Create a career path by using competency-based training and certification.
- Implement a consistent, living wage of \$15/hour to help stabilize the frontline workforce.
 - On this note, Benchmarks continues to monitor HB 914 and a less robust Senate bill.

Transition to the Community Committee (Talley Wells)– Recommendations of this group include:

- Create a five-year, Olmstead plan with specific measures and outcomes and on-going oversight.
- Increase investment in Medicaid HCBS waivers with associated funding targets.
- Increase funding for DSPs/DSWs in the community, not just those frontline staff in institutional settings.
- Implement annual, targeted measures for assessing the state’s success in “rebalancing” its investment in institutions to reflect a preference for HCBS and other community services.
- Appoint a director-level position and identified staff for administration of the Olmstead Plan.
- Support champions in advancing the plan.
- Address all people with an institutional level of need, including those with co-occurring disorders.
- Encourage non-DHHS entities to be vested in the plan development and implementation process (e.g., school systems, housing agencies and local partners).
- Make peer support an integral part of the plan.
- Be sure money really “follows the person” when people transition out of institutional settings.
- Include funding needs for justice-involved people with disabilities and those with disabilities who are aging.
- Consider diversion from congregate settings with entities such as the Department of Public Instruction (DPI), Emergency Departments (EDs) and hospitals.
- Extend the Olmstead Plan from DHHS to apply to the whole state.

Children Youth and Families Committee (Jenny Hobbs)

- The membership and staff of this committee is new and has had limited meetings together as a team.
- Ms. Hobbs expressed concern that the inputs, to date, seemed adult- IDD-oriented; more focus on children is needed.
- The committee invited the TAC to meet with them so they can identify additional inputs into the plan.
- So far, the committee has discussed the need to promote inclusion of the needs of children who are medically fragile. They are at high risk for institutionalization because of nursing shortages among community providers.
- The committee encourages the addition of a goals/strategies addressing home health nurses’ and private duty nurses’ pay and concomitant, nursing workforce shortages.

Quality Assurance and Quality of Life Committee – (Karen Feasel) This committee has six key recommendations:

- Expand on the TCL QAPI⁶ system structure and performance and outcome measures.
- Integrate Olmstead QA into larger departmental framework.
- Infuse QA/PI and continuous quality improvement (CQI) throughout the Plan, with built-in QA mechanisms for all policy components of the plan.
- Utilize existing data points and standardized, national measures and benchmarks.
- Tailor measurement to both unique populations and universal needs.
- Evaluate and update quality activities and measures on an ongoing basis.

Older Adults Committee (Steve Strom) - Recommendations from this committee include:

- Increase the workforce qualified to work with the aging IDD aging population.
- Increase awareness of falls prevention.
- Increase slots in the TBI waiver and reducing the waitlists for the remaining waivers.
- Work on strategies to reduce social isolation in elders.
- Promote healthy aging for those with disabilities.
- Increase access to HCBS supports.
- Reform guardianship laws by increasing alternatives to guardianship.
- Work with adult protective services to reduce exploitation of adults with disabilities.
- Apply “lessons learned” from COVID for elder care to the system beyond the pandemic.
- Cross-walk goals from the states’ 2019-2023 Aging Service Plan that complement the Olmstead Plan and include them in the plan.
- Expand HCBS in the following ways:
 - Invest in cost-effective services, such as those from MFP.
 - Connect people to services that are rooted in the social determinants of health.
 - Expand the provider network to have more Medicaid certified entities.
 - Increase use of evidenced-based services.
 - Promote approaches to community capacity building and services that are dementia-friendly.
 - Create career paths for DSWs.
 - Invest in programs that help older adults with disabilities who want to re-enter the workforce.
 - Use some of the ARPA funds to expand services at the Area Authorities on Aging (AAAs).

Community Capacity Building Committee

- Representatives from this committee were not able to attend the meeting and will provide an update via email.

2:40 – 3:15 Discussion of Committee Recommendations

OPSA Committee Chairs, Staff and TAC

Questions and Answers

⁶According to CMS, QAPI is the coordinated application of two mutually-reinforcing aspects of a quality management system: Quality Assurance (QA) and Performance Improvement (PI). QAPI takes a systematic, comprehensive, and data-driven approach to maintaining and improving safety and quality while involving all staff in practical and creative problem solving. QA is the specification of standards for quality of service and outcomes, and a process throughout the organization for assuring that services are maintained at acceptable levels in relation to those standards. PI (also called Quality Improvement - QI) is the continuous study and improvement of processes with the intent to better services or outcomes, and prevent or decrease the likelihood of problems, by identifying areas of opportunity and testing new approaches to fix underlying causes of persistent/systemic problems or barriers to improvement. PI aims to improve processes involved in health care delivery and quality of life.

- Arc of NC's John Nash and others asked how HUD vouchers could be preserved in the system if people were moved from six-person congregate settings to three-person settings. He expressed concern that vouchers could be taken back if they are not used.
- Congressman David Price, Chair of Congress' Housing and Urban Development (HUD) Sub-Committee, is interested in changing the HUD rules so that vouchers are not taken back in this case that Mr. Nash described. In addition, Secretary Marcia Fudge is also interested in working with the Arc of Nebraska and others on issues relating to housing vouchers.
- Anna Cunningham asked whether LME/MCOs' responsibilities could be clarified so that people understand their responsibilities.
- Steve Strom noted that there are five million dollars over the next five years in CARES Act funding in four areas. These include housing, community-based services development, DSP workforce enhancement and increasing access to natural supports. More information on these areas of funding will be available in the fall.

3:15 – 3:30 Public Comment

Guests/Members of the Public

Anna Cunningham welcomed people to join the DSW workgroup which meets on Thursdays at noon. The group discusses a variety of issues related to DSWs. She wants to also leverage lessons learned from COVID.

Charene Caraco with the Promise Resource Network noted the knowledge gap between advocates and providers. The systems are different, which makes it hard to have a common language. She recommended mentoring people so that all share the same approach. She also suggested that DSPs for those with IDD often get the focus when it comes to provider needs. She recommended examining needs across the systems, such as for those working with persons with psychiatric disabilities and persons with TBI so that their needs are considered as equally.

3:30 – 3:45 Next Steps and Questions

Holly Riddle, Office of the Sr. Advisor on the ADA

Ms. Riddle noted that an early draft of the Olmstead Plan is being reviewed internally by leadership in the Office of the Secretary, DHHS. The next iteration of the plan will be issued in mid-September for review by senior DHHS staff. In the meantime, the committees will continue to meet. DHHS encourages continued, active stakeholder engagement.

Another iteration of the Olmstead Plan will come out in the middle of October for review and comment by the OPSA membership; it will also be released for public review. The next OPSA meeting will be scheduled for November, before the Plan is finalized in December of this year. Ms. Riddle reiterated the importance of having diverse stakeholders actively engaged in plan development throughout the process.

3:45 – 3:55 Closing Remarks

Sam Hedrick, Director, Office of the Sr. on the ADA Advisor

Sam Hedrick closed the meeting by echoing the call for continued participation. She reminded people that the plan is an evolving document. She too welcomed all stakeholders' voices in the process, moving forward to December and to the plan's implementation.