

LIFE PLANS AND STAFF ACTION PLANS FOR EMPLOYMENT SERVICES

Innovations in Employment Supports
2019 Employment and Vocational Services
Leadership Conference
September 24, 2019

CHSE
Innovations in
Employment Supports

About today

- Today's schedule
- Sign in and sign out
- Site details
- Engage!



Today we will cover ...

- Employment Services Collaboration with Care Managers
- OPWDD Life Plans for Employment Services
- OPWDD Staff Action Plans for Employment Services
- Questions??????

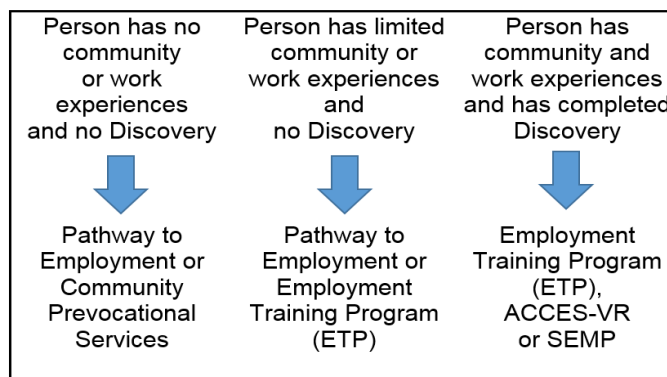
EMPLOYMENT SERVICES COLLABORATION WITH CARE MANAGERS

Employment Services Collaborative Role with Care Managers

1. Participate in person-centered planning with the person, Care Manager, and care planning team.
2. Identify the vocational or employment service(s) that matches the individual's needs related to prior vocational experiences, career exposure, work experiences, interests, and demonstrated skills.
3. Work collaboratively with the Care Manager to facilitate enrollment in the programs, services and resources that best meet the individual's vocational needs. Care Manager will need Central Office approval number for Intensive SEMP and Additional Pathway to Employment service requests.
4. Update and add new services to the Life Plan (Care Manager) and Staff Action Plans (Provider Agency), as required.
5. Ongoing communication regarding progress, challenges and changes in the person's services, status, schedule, etc.

Choosing Services to Fit the Person's Skills, Experience and Support Needs?

OPWDD Career and Employment Services Options



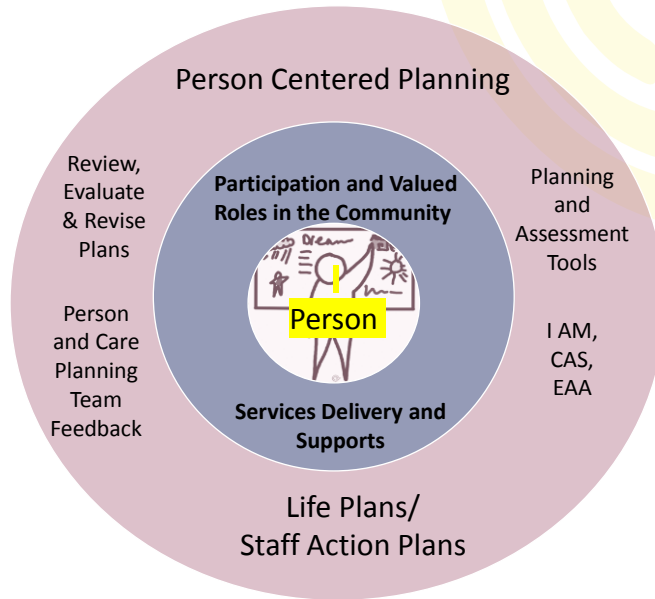
Why Combine Programs for Employment Success?

- To address barriers to employment such as task focus, interpersonal skills, flexibility, etc.
- To build social and community relationships outside of work
- To build stamina and healthy habits
- To develop transportation skills
- To build independence and safety skills
- To gain experience in new career paths

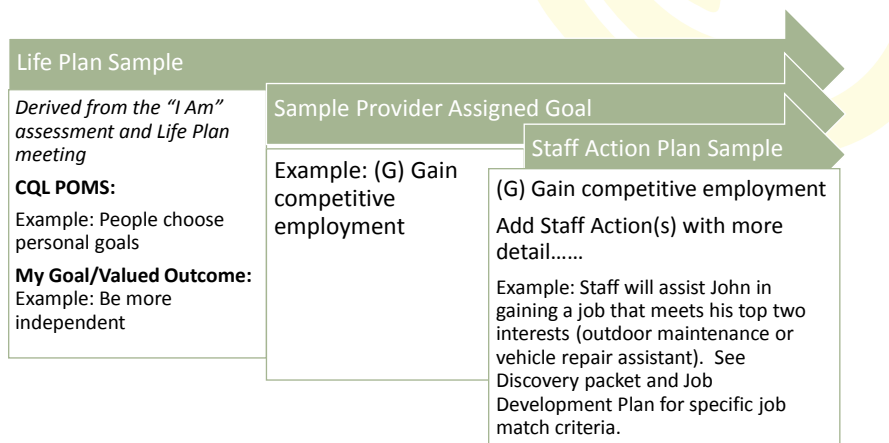


OPWDD LIFE PLAN FOR EMPLOYMENT SERVICES

Life Planning Process



Life Plan Development



Life Plan Format

The person, Care Manager, and care planning team work together to develop the Life Plan using a person-centered planning process.

The Life Plan is comprised of 5 sections.

- I. Assessment Narrative Summary
- II. Outcomes and Support Strategies
- III. Individual Safeguards/Individual Plan of Protective Oversight
- IV. HCBS Waiver Service and Medicaid State Plan Authorized Services
- V. All Supports and Services: Funded and Natural/Community Resources
- VI. IDT Summary, IDT Meetings/Attendance, Member Conditions and Diagnoses



Valued Outcomes in the Life Plan

HCBS Waiver Requirements as Listed in Service ADM's

Valued Outcomes may be listed in either Section(s) I, II and III of the Life Plan.

Service	Valued Outcome/Goals (must closely reference the specific ADM requirements listed below)
Community Based Prevocational	Interest in obtaining pre-employment skills; preparation for employment or job readiness
Site Based Prevocational	Interest in obtaining pre-employment skills; preparation for employment or job readiness
Pathway to Employment	Interest in obtaining pre-employment skills; preparation for employment or job readiness
Supported Employment	Interest in competitive employment or self-employment

Life Plan Section II and III

How are Goals/Valued Outcomes Listed in the Life Plan?

- POM (Personal Outcome Measure) – Only in Section II - must have at least 2 POM in the overall Life Plan
- Goal/Valued Outcome – Overarching goals in the Life Plan
- Provider Assigned Goal – More specific
- Provider/Location
- Service Type
- Frequency (relates to implementing goal **NOT the service**)
- Quantity (relates to implementing goal **NOT the service**)
- Timeframe (relates to implementing goal **NOT the service**)
- Special Considerations (may list additional information as needed)

Sample Life Plan Section II or III

Goal/Valued Outcome	Provider Assigned Goal	Provider/Location	Service Type	Frequency	Quantity	Time Frame	Special Considerations
Instructions: <i>What does the person want out of life? What do they want to achieve? May be generated from I AM or planning meetings.</i>	<i>Specifies what the provider is expected to do as it relates to the person's goal/valued outcome.</i>	<i>List the agency name and location</i>	<i>List the specific service</i>	<i>How often the goal or support will be provided? Estimate</i>	<i>Within the frequency – how often? Estimate</i>	<i>When the goal is expected to be achieved. Estimate</i>	<i>As needed, list info regarding health /safety concerns or other pertinent info.</i>
Sample: I want to improve or maintain my work skills	(G) Teach work skills	ABC Agency	Supported Employment	As needed	Ongoing	Ongoing	None

Life Plan Section IV

HCBS Waiver Services and Medicaid State Plan Authorized Services

How are OPWDD Service Regulations and ADM Requirements Listed in the Life Plan?

Valued Outcomes as required by specific service ADM's may be listed in sections I, II, III. See valued outcomes as listed in service ADM's chart.

Section IV:

- Effective Dates – Date of the Life Plan or service start date, if in between the Life Plan effective dates
- Unit = **Frequency** (as directed in the service-related ADM)
- Duration (as directed in the service-related ADM)
- Total Units – List the number of units listed in the Service Authorization Letter or 99999 if unknown
- Comments – may list additional information as needed

Supported Employment

Must have at least one goal/valued outcome identified in Sections II or III. If specific language needed to met regulatory requirements is not included, the Care Manager may edit the appropriate section OR list in a comments section.

Section IV HCBS Waiver and Medicaid State Plan Authorized Services							
Authorized Service	Provider/ Facility	Effective Dates	Qty	Unit	Per	Total Units	Comments
SEMP	Name of the agency or Fiscal Intermediary (FI) providing the service	Effective date (i.e. review date) of the Life Plan or new service start date) Duration: Ongoing	This field is to assist in calculating the total units and may or may not be used by the CCO.	"Hour" or "Hourly"	This field is to assist in calculating the total units and may or may not be used by the CCO.	Per service Authorization or 99999 if unknown	Other required or pertinent information.

Prevocational Services

Must have at least one goal/valued outcome identified in Sections II or III. If specific language needed to met regulatory requirements is not included, the Care Manager may edit the appropriate section OR list in a comments section.

Section IV HCBS Waiver and Medicaid State Plan Authorized Services							
Authorized Service	Provider/Facility	Effective Dates	Qty	Unit	Per	Total Units	Comments
Site Based Prevocational Services (SBPV), if site based	Name of the agency providing the service	Effective date (i.e. review date) of the Life Plan or new service start date)	This field is to assist in calculating the total units and may or may not be used by the CCO.	SBPC - "A day"	This field is to assist in calculating the total units and may or may not be used by the CCO.	Per service Authorization Letter 99999 if unknown	Other required or pertinent information.
Community Based Prevocational Services (CBPV), if community based		Duration: Ongoing		CBPV- "Hour" or "hourly"			

Pathway to Employment

Must have at least one goal/valued outcome identified in Sections II or III. If specific language needed to met regulatory requirements is not included, the Care Manager may edit the appropriate section OR list in a comments section.

Section IV HCBS Waiver and Medicaid State Plan Authorized Services							
Authorized Service	Provider/Facility	Effective Dates	Qty	Unit	Per	Total Units	Comments
Pathway to Employment	Name of the agency providing the service	Effective date (i.e. review date) of the Life Plan or new service start date) Duration: Time Limited	This field is to assist in calculating the total units and may or may not be used by the CCO.	Hour or hourly	This field is to assist in calculating the total units and may or may not be used by the CCO.	Per service Authorization Letter 99999 if unknown	Other required or pertinent information.

Life Plan Section V

All Supports and Services; Funded and Natural & Community Resources

Includes OPWDD state-paid services, other Medicaid services not authorized by OPWDD, health care providers, natural supports, and community resources.

Examples related to employment services:

- OPWDD state-funded SEMP (individuals are grandfathered prior to 7/1/15)
- ACCES-VR services (Supported Employment, Assessments, Benefits Advisement, Assistive Technology, Driver Rehabilitation, Post-Secondary Education Coaching, etc.)
- ETP Wages are 100% OPWDD state-funded. (ETP services are funded by HCBS Waiver OPWDD SEMP and must be listed in Life Plan Section IV).
- Community transportation provider or supports (taxi, Uber, coworker, etc.)

Example: How to List the Employment Training Program (ETP) on the Life Plan

ETP/SEMP Services:

SECTION IV							
HCBS WAIVER SERVICES AND MEDICAID STATE PLAN AUTHORIZED SERVICES							
<i>This section of the Life Plan includes a listing of all HCBS Waiver and State Plan services that have been authorized for the individual.</i>							
Service	Provider/Facility	Effective Dates	Qty	Unit	Per	Total Units	Comments
SEMP	Name of the agency FI providing the service	Effective date (i.e. review date) of the Life Plan or new service start date) Duration: Ongoing	This field is to assist in calculating the total units and may or may not be used by the CCO.	"Hour" or "Hourly"	This field is to assist in calculating the total units and may or may not be used by the CCO.	Per service Authorization or 99999 if unknown	Person currently participates in ETP

ETP Wages:

SECTION V			
ALL SUPPORTS AND SERVICES; FUNDED AND NATURAL/COMMUNITY RESOURCES			
<i>This section identified the services and support givers in a person's life along with the needed contact information. Additionally, all Natural Supports and Community Resources that help the person be a valued individual of his or her community and live successfully on a day-to-day basis at home, at work, at school, or in other community locations should be listed with contact information as appropriate.</i>			
Name	Role	Address	Phone
NYS OPWDD/Employment Training Program (ETP)	Wages paid for ETP internship	Intern/Trainee is paid wages for internship through NYS OPWDD for a limited <u>period of time</u> .	List ETP Supervisor Name & Number



OPWDD STAFF ACTION PLANS FOR EMPLOYMENT SERVICES



Staff Action Plans

Staff Action Plans detail the following:

- The goal/valued outcomes, goals, and safeguards, as identified in the individual's Life Plan.
- How the habilitation staff will implement the goal/valued outcomes, goals, and safeguards.
- Ensure that the goal/valued outcomes, habilitative goals, and safeguard needs of individuals are met by the planning team and service providers.
- Staff Action Plans are developed and signed by the habilitation staff and forwarded to the Care Manager via the CCO's portal or another agreed upon mechanism for prompt communication. In addition to Care Managers, the Staff Action Plans should also be provided to: the individual and his/her representative and any other parties agreed to by the person and his/her representative. (2018-ADM-06R)
- Staff Action Plans are required for HCBS Waiver services and OPWDD 100% State-Funded SEMP (individuals who are grandfathered prior to 7/1/15).

Staff Action Plan Reviews

There must be evidence that the Staff Action Plan was reviewed at least twice annually.

Evidence of a review may include, but is not limited to a:

- Review sign-in sheet;
- Service note indicating a review took place; and/or
- Revised/updated Staff Action Plan.

Evidence of reviews must include the:

- Individual's name;
- Habilitation service(s) under review;
- Staff signature(s) from the habilitation service(s);
- Date of the staff signature(s); and
- Date of the review.

Staff Action Plan Required Sections



All Goals/Valued Outcomes assigned to the provider must be included in the Staff Action Plan.

Staff Action Plans Must Contain the Following

Additionally, habilitation providers are responsible for the documentation standards outlined in the specific service-related Administrative Memoranda.

- Individual's name;
- Individual's Medicaid Client Identification Number (CIN)
- Habilitation service provider's agency name;
- Name of habilitation service(s) provided (e.g., Community Based Prevocational)
- Date (day, month, and year) the Life Plan meeting, or Staff Action Plan review/developed
- Identification of the Goals/Valued Outcomes (Life Plan Section II);
- Identification of Provider Assigned Habilitative Goals/Safeguards (Life Plan Section III).
- Description of service(s) and support(s) and frequency (as listed in the Life Plan)
- Safeguards listing all supports and services (may also reference guidance documents);
- Printed name(s), signature(s) and title(s) of the staff who wrote the Staff Action Plan;
- Date (day, month, and year) that staff signed the Staff Action Plan; and
- Evidence that Staff Action Plan was distributed no later than 60 days after: start of services; life plan review date; or revised/updated Staff Action Plan, whichever comes first.

Staff Action Plan Template

Optional format available on OPWDD website. Agencies may create their own format with the required elements.

Insert Agency Name: _____
Staff Action Plan

Name of Individual: _____ Medicaid Number (CIN#): _____
 Staff Action Plan Review Date: _____
 Name of Care Coordination Organization: _____

Individual Habilitative Goals/Valued Outcomes (My Goal – Section II of Life Plan)

This section contains the individual's habilitative goals/valued outcomes derived from the individual's Life Plan. The habilitation service must relate to the individual's habilitative goals/valued outcomes. To support person-centered practices, each of the goals/valued outcomes identified must relate to a Council on Quality and Leadership (CQL) Personal Outcome Measure (POM) category.
[Enter content here]

Provider Assigned Habilitative Goals (Section II of Life Plan)

This section contains the habilitation provider assigned (habilitative) goals derived from the individual's Life Plan which will be assigned as Goals (G), Supports (S), or Tasks (T). Tasks assigned in the Life Plan are not habilitative in nature and therefore do NOT meet the billing requirements to be a habilitation goal. Using the habilitative goals/valued outcomes identified above as the starting point, the details in this section describe the habilitation staff actions that will enable the individual to reach his/her goals/valued outcomes.
[Enter content here]

Individual Safeguards/Individual Plan of Protection (IPOP) (Section III of Life Plan)

This section contains the habilitation provider assigned (safeguard) goals derived from the individual's Life Plan which will be assigned as Goals (G), Supports (S), or Tasks (T). Tasks assigned in the Life Plan are not habilitative in nature and therefore do NOT meet the billing requirements to be a habilitation goal. Using the individual safeguards/IPOP from Section III of the Life Plan as the starting point, this section must include detail and any internal guidance documents that outline the individual-specific protective oversight measures staff need to implement or ensure for the individual. For individuals receiving Individualized Residential Alternative (IRA) Residential Habilitation, the Residential Habilitation Staff Action Plan must meet the requirements of the Plan for Protective Oversight in accordance with 14 NYCRR Section 686.16.
[Enter content here]

Signatures:
 Staff Action Plan Author's Name: _____ Title: _____
 Staff Action Plan Author's Signature: _____ Date: _____
 Individual (optional): _____ Date: _____
 Advocate (optional): _____ Date: _____
 Supervisor/Reviewer (optional): _____ Date: _____

https://opwdd.ny.gov/opwdd_regulations_guidance/staff-action-plan-template

Provider Assigned Goals in the Life Plan Action Step Labels

Goal (G)

- “Teach”
- e.g., “Teach the person to take public transportation”

Support (S)

- “Provide”
- e.g., “Provide diet counseling for healthy food selections”

Task (T)

- A one-time activity (does not meet definition of habilitation and is not billable)
- e.g., “Take the person to view different types of apartments”

(T) Tasks as Listed in the Life Plan

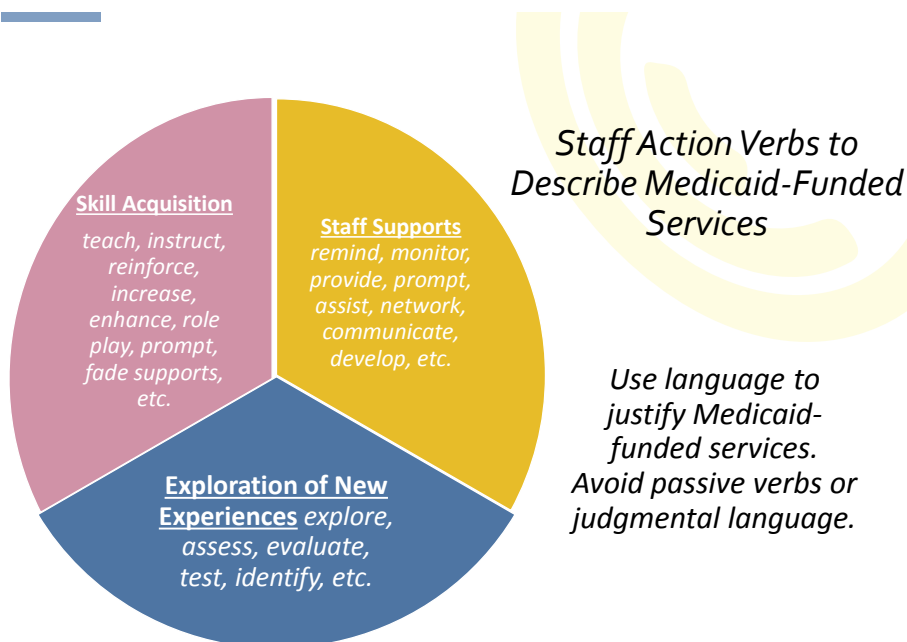
(T) Tasks are one-time activities and are NOT billable.

If a (T) Task is listed in the Life Plan but the provider is working with the individual to achieve this action step as a (G) Goal or (S) Support, then the Life Plan should accurately reflect what the provider is actually doing. An example may be “Assessment of skills and preferences” (T) or (S)?

Contact the Care Manager in a timely manner if you need amendments to the Life Plan.

Staff Action Plan Strategies for Service Delivery

- **Skill Acquisition/Retention** - Staff assess skill levels, identify methods to teach skills, and identify how to measure progress. In some instances, retention of skills may be the goal.
- **Staff Supports** – Staff provide supervision, on-going support, or oversight when a person is not expected to perform independently due to disability or health/safety factors.
- **Exploration of New Experiences** – The person learns about community and forming relationships often by trying new experiences to determine life directions and to support greater independence.



Staff Action Plans

How are Allowable Services Listed in the Staff Action Plan?

In order to bill for the range of services related to specific goals/valued outcomes, the Staff Action Plan should list all the allowable services as stated in the regulations or a general statement such as, "Staff may provide any of the allowable services to support this goal."

Sample SEMP Staff Action Plan

Outcomes and Support Strategies (Section II)

SEMP Sample 1:

Copied from Life Plan:

My Goal/Valued Outcome: Be more independent

Provider Assigned Goal: Teach work skills (G-Goal)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Staff will teach the person to learn new tasks, as assigned by work supervisors. Staff will provide instructional supports, communicate regularly with supervisor, and gradually fade supports, as John meets the business' standards. To assist John in remembering his tasks, staff will laminate tasks lists with pictures/symbols, as new tasks are added. Staff may provide any of the allowable SEMP services to support this goal.

Sample SEMP Staff Action Plan

Outcomes and Support Strategies (Section II)

SEMP Sample 2:

Copied from Life Plan:

My Goal/Valued Outcome: Be more independent

Provider Assigned Goal: Gain competitive employment (G-Goal)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Staff will assist Francie in finding a job that meets her keyboarding, filing, and other clerical skill levels within the public transportation range. Francie recently completed Discovery which recommended clerical work as her preferred career choice. Francie is currently employed as a cleaner and would like to eventually move into her preferred career. Staff may provide any of the allowable SEMP services to support this goal.

Sample SEMP Staff Action Plan

Individual Safeguards/Individual Plan of Protection (Section III)

SEMP Sample 3:

Copied from Life Plan:

My Goal/Valued Outcome: I want to improve or maintain my work skills

Provider Assigned Goal: Teach work skills (G-Goal)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation: Staff will teach John to respond to customer requests by looking customers in the eye, listening fully to requests, and responding appropriately. If John does not know the answer, he will escort the customer to another customer service associate for assistance. Staff will provide instructional supports, gradually fading supports, as John competently responds to customer requests. Staff may provide any of the allowable SEMP services to support this goal. John will learn to respond to customer requests appropriately 95% of the time observed and reported within 1 year.

Sample SEMP Staff Action Plan

Individual Safeguards/Individual Plan of Protection (Section III)

SEMP Sample 4:

Copied from Life Plan:

My Goal/Valued Outcome: I want to be healthy

Provider Assigned Goal: Teach diabetes self-management training (S-Support)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Staff will teach Francie which foods are safe to purchase at the company cafeteria and special events according to her diabetic diet. Staff will contact the residential nurse monthly for diabetic instructions and updates. As Francie makes healthy food choices at work, staff will gradually fade supports but monitor regularly. Staff may provide any of the allowable SEMP services to support this goal.

Sample CBPV Staff Action Plan

Outcomes and Support Strategies (Section II)

CBPV Sample 1:

Copied from Life Plan:

My Goal/Valued Outcome: I want to improve or maintain my work skills

Provider Assigned Goal: Teach work habits (G-Goal)

Frequency: Weekly

Add description(s) of staff actions for goal/support implementation:

Staff will teach Francie to stay focused and limit conversation when engaged in work-related activities. Staff will teach Francie to use self-management tools to track her progress. As Francie learns to sustain focus, staff will gradually fade supports. Staff may provide any of the allowable CBPV services to support this goal. Francie will stay focused when engaging in activities until completion (or break time) 80% of the time observed within 1 year.

Sample CBPV Staff Action Plan

Individual Safeguards/Individual Plan of Protection (Section III)

CBPV Sample 2:

Copied from Life Plan:

My Goal/Valued Outcome: I would like to communicate better

Provider Assigned Goal: Teach communication skills (G-Goal)

Frequency: Weekly

Add description(s) of staff actions for goal/support implementation:

Staff will teach Mike to communicate when he needs assistance, instead of waiting inactively for someone to help him. Staff will role-play with Mike various scenarios where he needs help and provide sample statements to ask for help. Staff will provide instruction and gradually fade supports as he becomes independent. Staff may provide any of the allowable CBPV services to support this goal. Mike will ask for assistance 90% of the time without staff assistance, as observed over 6 months.

Sample CBPV Staff Action Plan

Individual Safeguards/Individual Plan of Protection (Section III)

CBPV Sample 3:

Copied from Life Plan:

My Goal/Valued Outcome: I need supervision in the community

Provider Assigned Goal: Provide supervision in unfamiliar places (S-Support)

Frequency: Ongoing

Add description(s) of staff actions for goal/support implementation:

Staff will teach Brian safety skills; specifically contacting emergency contacts and limiting contacts with strangers. When Brian has demonstrated these safety skills at a specific community location for over 6 months consistently, staff may fade assistance while still remaining on the premises. Staff will provide closer supervision in all less familiar community activities. Staff may provide any of the allowable SEMP services to support this goal.

Sample Pathway to Employment Staff Action Plan

Outcomes and Support Strategies (Section II)

Pathway to Employment Sample 1:

Copied from Life Plan

My Goal/Valued Outcome: I want a real job

Provider Assigned Goal: Provide assessment of skills and interests (S-Support)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Miranda has limited work experience in the community. Staff will implement Discovery activities and develop community work experiences that meet Miranda's expressed interests in clerical, child care and stocking. Staff will evaluate her skill levels and preferences in each community work experience. Staff may provide any of the allowable Pathway to Employment services to support this goal.

Sample Pathway to Employment Staff Action Plan

Outcomes and Support Strategies (Section II)

Pathway to Employment Sample 2:

Copied from Life Plan

My Goal/Valued Outcome: I want to earn more money

Provider Assigned Goal: Teach to use public transportation (G-Goal)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Mike has safety skills and time alone in the community but has not utilized the public bus system which will be needed for employment. Staff will assess Mike's skills and teach him to take the bus to the downtown area. Staff will provide assistance and supports until Mike has demonstrated independence and safe travel on the bus, consistently for 6 weeks. Staff may provide any of the allowable Pathway to Employment services to support this goal.

Sample Pathway to Employment Staff Action Plan

Individual Safeguards/Individual Plan of Protection (Section III)

Pathway to Employment Sample 3:

Copied from Life Plan

Individual Safeguards (Life Plan Section III): I want to improve or maintain my work skills

Provider Assigned Goal: Teach safety skills (G-Goal)

Frequency: As needed

Add description(s) of staff actions for goal/support implementation:

Staff will teach Miranda how to call specific emergency contacts. Staff will role play, gradually fading as Miranda demonstrates the ability to call emergency contacts independently. Staff may provide any of the allowable Pathway to Employment services to support this goal. Miranda will respond to various practice scenarios, calling emergency contacts accurately, 100% for 3 months.

Life Plan and Staff Action Plan Training Resources

Life Plan and Staff Action Plan Administrative Memoranda

https://opwdd.ny.gov/opwdd_regulations_guidance/adm_memoranda

Life Plan and Staff Action Plan Resources -

https://opwdd.ny.gov/providers_staff/care_coordination_organizations/msc_webinars

Staff Action Plan Questions and Answers -

https://opwdd.ny.gov/providers_staff/care_coordination_organizations/providers_staff_action_plan_info

Email questions to Care.coordination@opwdd.ny.gov



Presenters:

Laura McCaffrey
Regional Care Manager Director
Care Design NY
LMcCaffrey@caredesignny.org
518-573-9972

Julia Kelly, MS. Ed.
DD Policy Development Specialist
OPWDD
Julia.A.Kelly@opwdd.ny.gov
518-473-7030