


Utilizing Video Care Plans for Times of Transition

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The Eden Alternative



Objectives for Today:



- ▶ Review and discuss a case study in Mississippi, when the Department of Justice required the relocation of numerous individuals living at ICF-IDD campuses to live in group homes/residential care.
- ▶ Review and discuss the creation of Video Care Plans
- ▶ Review and discuss the use of Video Care Plans as a tool to equip team members and elders for a successful transition.



Case Study:

Progress Update on Mississippi's Public Mental Health System

Supporting a Better Tomorrow...Today



Case Study:

Summary

The Mississippi Department of Mental Health (DMH) certifies, provides and/or financially supports a network of services for people with mental illness, intellectual/developmental disabilities, substance use problems, and Alzheimer's disease and/or other dementia. DMH directly operates six behavioral health programs and six IDD programs throughout the State. Mississippi's public mental health system is comprised of three components: 1) state-operated programs, 2) regional community mental health centers, and 3) other nonprofit/profit service agencies/organizations. The 14 Community Mental Health Centers operate under the authority of regional commissions appointed by county boards of supervisors comprising their respective service areas.



Case Study:

Background

The Department of Justice (DOJ) investigated the State of Mississippi's public mental health system, which serves persons with mental illness, intellectual and/or developmental disabilities (IDD), and substance use disorders. DOJ issued a Findings Letter in December 2011 that alleged the State of Mississippi fails to provide services to qualified individuals with disabilities, including mental illness and intellectual and developmental disabilities, in the most integrated settings appropriate to their needs, in violation of the ADA.

Since 1997, the United States Department of Justice has been involved with 23 states with regard to allegations of Olmstead/ADA violations. DOJ's involvement ranges from filing Statements of Interest in cases to formal investigations and the issuing of Findings Letters to States with the hope of states entering into multi-year, multi-million dollar settlement agreements. In 2009, on the tenth anniversary of the Supreme Court's decision in Olmstead v. L.C., 527 U.S. 581 (1999), President Obama launched "The Year of Community Living" and directed federal agencies to vigorously enforce the civil rights of Americans with disabilities. Since then, the Department of Justice has made enforcement of Olmstead a top priority.

In 2013, Attorney General Jim Hood sent a letter to the Department of Justice outlining several tasks that the State would accomplish, which postponed any potential lawsuit at that time. During the 2013 Legislative Session, at the request the Attorney General and DMH, the Mississippi Legislature appropriated an additional \$10 million to DMH for the purpose of increasing and improving community services for the State of Mississippi. This funding was again appropriated during the 2014 Legislative Session.



Case Study:

In August 2014, the Attorney General and Jonathan Smith, Chief of the Special Litigation Section for DOJ, signed a letter outlining the next steps for the State of Mississippi and the Department of Justice in moving forward with settling these alleged Olmstead/ADA violations.

DMH will request additional funds in future fiscal years to continue the efforts to expand the capacity for community-based services. These additional funds will help the State move forward with more community placement of individuals through expanding services provided by community service providers. Additional funding is needed to build community capacity while at the same time ensuring the health and welfare of people currently being served.

DMH's ability to work with DOJ and the progress the State has made since 2011 have, to date, helped Mississippi avoid a lawsuit with DOJ.



Case Study:

Strategic Planning

The expansion of community-based services is driven by DMH's Strategic Plan. Since FY10, DMH has utilized a goal-based strategic plan to transform the public mental health system in Mississippi. The *FY16 - FY18 DMH Strategic Plan* includes three goals: To increase access to community-based care and supports for adults and children with mental illness and/or substance use disorders through a network of service providers that are committed to a person-centered and recovery-oriented system of care; To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care; and To ensure people receive quality services in safe settings and utilize information/data management to enhance decision making and service delivery. For more information, visit <http://www.dmh.ms.gov/what-we-believe/strategic-plan/>.



Case Study:

Person-Centered Planning Discharge Practices: All DMH Behavioral Health Programs have implemented person-centered planning discharge practices which are in-line with the agency's transformation to a person-centered and recovery oriented system of care.



Case Study:

Intellectual and Developmental Disabilities

Transitions to the Community: Since January 2012, a total of 347 people have transitioned from intermediate care facilities (ICF/IID) to the community.

Transition Coordinators: Each DMH Regional Program employs Transition Coordinators to assist with persons transitioning from an ICF/IID bed to the community. DMH Central Office employs four Transition Specialists to provide additional pre-transition and post-transition monitoring.



Case Study:

Home and Community Based Waiver: Since FY12, the ID/DD Waiver has been increased with 844 additional slots, allowing individuals to be served in their homes and in the community. Mississippi's ID/DD Waiver provides individualized supports and services to assist people in living successfully at home and in the community and is an alternative to receiving services in an institutional setting. These Medicaid funded supports and services are available as long as the cost of supporting people in the home and community does not exceed the cost of services in an institutional setting. The ID/DD Waiver includes an array of day, in-home, employment and therapy services aimed at assisting people to live as independently as possible in their homes and communities. For more information, visit <http://www.dmh.ms.gov/service-options/idd-services/>.

➤ Growth of ID/DD Waiver:

- Enrollees: FY 2012 – 96
FY 2013 – 256
FY 2014 – 291
FY2015 - 201
Total – 844
- Of 844 Enrollees – 433 from ICF/IID and 409 from Planning List
- Total ID/DD Waiver enrollment as of June 30, 2015 - 2,296 persons

Case Study:

Person Centered Planning Training: DMH developed a pilot group of ID/DD Waiver Support Coordinators and certified community providers to implement a Plan of Services and Supports (Person Centered Plan) for persons receiving ID/DD Waiver services.

Contracted with Support Development Associates for Person Centered Planning Training for Support Coordinators, Transition Coordinators, Transition Specialists, Targeted Case Managers, Community Providers and Pilot Group

- 80 persons from the pilot group received Person Centered Training regarding development of Plan of Services and Supports
- 739 persons trained in Person Centered Thinking in FY14 and FY15
- 190 persons trained in Person Centered Facilitation
- 90 Support Coordinators trained in Outcomes Writing



Case Study:

IDD Rate Study: In 2013 - 2014, DMH worked with Burns and Associates to conduct a study of ID/DD Waiver reimbursement rates to ensure they are adequate to provide needed services in the community. One of the main goals of the rate study was to develop a rate structure that would allow for appropriate supports and services in the community and increase the capacity of community based service providers. DMH is working with the Division of Medicaid to amend the ID/DD Waiver to implement recommended rates July 1, 2016.

Expanding Community Services: CMS approved the 1915(i) State Plan Amendment (IDD Community Support Program) to provide day program services to persons with IDD. The program was implemented in January 2015. DMH anticipates approximately 2,000 persons will receive Day Habilitation, Prevocational Services, and Supported Employment. As a State Plan Amendment, there will be no waiting list for services for persons determined eligible. For more information, visit <http://www.dmh.ms.gov/service-options/idd-services/>.



Case Study:

IDD Service/Program Expansion from January 2011 to June 2015:

- 78 new community living programs – this includes supervised and supported living programs
- 33 new day programs – this includes locations where prevocational services, community respite and day services-adult are provided
- 17 new providers employment related service – this includes job discovery and supported employment services added to certification for service providers – these services are not location-based
- 5 new providers of crisis service – this includes provision of crisis intervention and crisis support services – only one of these services is location-based
- 8 new providers of behavior support/intervention services – these services are not location-based
- 3 new providers of transition assistance services – these services are not location-based
- 8 new providers of in-home services – this includes home and community supports and in-home nursing respite – these services are not location-based services
- 5 new providers of Targeted Case Management Services



Case Study:

Conclusion

While great efforts have been made, DMH still believes the State has far to go to fulfil its vision of a better tomorrow where the lives of Mississippians are enriched through a public mental health system that promotes excellence in the provision of services and supports. *We will continue our efforts and look forward to a better tomorrow when...*

- All Mississippians have equal access to quality mental health care, services and supports in their communities.
- People actively participate in designing services.
- The stigma surrounding mental illness, intellectual/developmental disabilities, substance use disorders and dementia has disappeared.
- Research, outcome measures, and technology are routinely utilized to enhance prevention, care, services and supports.
- Partnerships improve and support holistic service delivery in the community.

September 2015

Case Study:

- ▶ How do I fit in all of this?
 - ▶ NHA/Preceptor contracted to precept two AITs May of 2015- March 2016
 - ▶ Assisted with the transition of persons from ICF-IDD with the use of Video Care Plans
 - ▶ Taught team members about the Eden Alternative → Person Directed Care



Video Care Plans

- ▶ VCPs have been around for about 15 years with the Eden Alternative.
- ▶ A VCP is a two/three-minute video/power point to music which explains a person's unique preferences and needs.
- ▶ A VCP is a tool used to give a voice to a person who may not be able to voice their daily preferences.



Video Care Plans

- ▶ The WHY behind them?
 - ▶ In two minutes, a care partner better understands the whole person - beyond their chart.
 - ▶ The care partner better understands the preferences and nuances of the individual.
 - ▶ Remember the Root Cause Analysis of the "behavior"? If we understand the triggers which cause behaviors, then we can best serve the person who may not be able to voice their concerns.
 - ▶ Well-being is at the forefront!
 - ▶ The music connects the lobes of the care partner's brains, so they remember the details.




VCPs - a tool for transition



- ▶ The VCPs are a tool for transition which help the people who will be care partnering to be able to best support the person in transition.
 - ▶ These are designed by the team who knows the elder best - and the elder, too!
 - ▶ Back to Case Study:
 - ▶ Food
 - ▶ Helmets
 - ▶ Mats
 - ▶ Better success rate!!



Video Care Plan Examples




Video Care Plan Examples



Video Care Plans

- ▶ HOW do we make them?
 - ▶ Technology has certainly been made easier since 2015, when I worked on VCPs for South MS Regional Center.
 - ▶ Interview the individual and those closest to them.
 - ▶ Take pictures of the person, their room, items that provide meaning and assistive devices.
 - ▶ Assemble the pictures to PowerPoint or whatever program is most comfortable, and add words/music
 - ▶ SHARE the content with those who need to know it.




Questions?

- ▶ Michelle Daniel
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Ways to Grow with The Eden Alternative

- ▶ Branding guidelines
- ▶ eVOLVE Online Learning
- ▶ eNGAGE Workshop Learning
- ▶ DIY Education Kits
- ▶ Eden Educator
- ▶ eMPower Consultants
- ▶ Eden Membership (Eden Navigator)



Eden Membership for Individuals - \$29/year

Individual Eden Membership includes:

| | | |
|---|---|--|
|  <p>Individual Member Resources / Eden Tracks & Practices Course</p> |  <p>Eden Community Community</p> |  <p>Membership How to... Course</p> |
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