

The Parking Lot

In an effort to consolidate the priorities of the Olmstead Advisory Committee's Diversion Work Group, the following document attempts to separate out those items that committee members have not placed within the top priorities of the diversion policy matrix.

PLEASE NOTE: These items are suggestions to help focus our efforts, and are open for discussion from committee members. The items outlined in this document still can be pursued at a later date but may not be as critical at this time. The committee may wish to modify this document and re-prioritize items on an ongoing basis.

The items chosen for the parking lot were selected based on the following criteria:

- 1) Recommendation does not create an immediate, significant, or direct impact
- 2) Recommendation may be difficult to implement
- 3) Recommendation may not be directly relevant to diversion issues.

The following subsections correspond with those of the Diversion Policy Matrix

C) Increase the Quantity of Accessible and Affordable Housing

C2): Review programs, services and funds for accessibility and Local Government Housing Elements to insure that they include adequate sites for all housing needs including housing with special needs. (Source: California Olmstead Plan)

HCD reviews housing elements of cities and counties for five-year planning periods. The housing element requires analysis of housing needs of persons with disabilities, and local efforts to remove governmental constraints that hinder the locality from meeting the need for housing for persons with disabilities, or provide reasonable accommodations for housing designed for persons with disabilities.

C3): Increase local capacity for home modification by providing Community Development Block Grant (CDBG) funds. (Source: Olmstead Plan)

HCD administers 30% of CDBG funds allocated to California with local governments administering the balance. HCD has no authority to require local governments to use CDBG funds for any specific activity. The state-administrated portion of CDBG has a high usage for the activity of housing rehabilitation, including home modification.

C5): Give counties planning grants to co-plan housing and transit. (Source: Olmstead Plan)

Planning for housing relative to transportation is promoted in the housing elements of cities and counties, which are reviewed by HCD, as well as in many State and local financial assistance awarded to affordable housing developments. Additionally, the Governor's May Revision proposes an increase of \$5 million to provide grants to metropolitan planning organizations (MPOs) to produce regional "blueprint" planning documents in cooperation with Councils of Government to develop plans that will guide future development and land use decisions, including those related to transportation, economic development and housing. Councils of Governments (COGs) such as SCAG are planning to better coordinate the regional transportation plans and regional housing needs plans they prepare, with participation from HCD

C7): Notify operators of HUD housing regarding access requirements for publicly subsidized housing (Source: *Olmstead Plan*)

HCD's State Housing Law staff responds to requests for assistance from architects and local building officials only. HCD presently is proposing amendments to the California Building Standards Code that reorganize and clarify the exiting covered multi-family dwelling unit accessibility standards. These amendments are intended to foster a better understanding of the requirements among both builders and local officials.

C9) Request that the federal Housing and Urban Development commit to a major expansion of federal rental assistance. (Source: *Olmstead Plan*)

California currently has approximately 295,000 rental assistance vouchers (Section 8) with over \$2.5 billion annually. Pending federal legislation could significantly reduce the availability of Section 8 vouchers and funding over the next five years. There is no foreseeable major expansion to this program.

E) Design and Implement a Comprehensive Service Delivery System that Integrates Funding, Acute and LTC

E1) LTC Council: Prepare a conceptual design for a comprehensive assessment and service coordination system for individuals placed in, or at risk of placement in, publicly funded institutions (Source: *Olmstead Plan*).

E2) Develop recommendations to ensure a comprehensive assessment and service-planning system is in place for individuals placed in, or at risk of placement in, institutions due to mental health conditions. (Source: *California Olmstead Plan*)

E7 ii) LTC Departments: Using existing resources, review all existing assessment procedures used for individuals residing in or at-risk of placement in institutions, for consistency with Olmstead principles. (Source: *California Olmstead Plan*)

The LTC Council departments have not formally reviewed all existing assessment procedures. However, through efforts of the California Pathways/Money Follows the Person (MFTP) grant, a model for uniform assessment and transition and protocol is being developed. Part of this project entails evaluation of existing assessment instruments and recommended changes.

In addition, DSS initiated a development process for a statewide Quality Assurance (QA) Plan for the In-Home Supportive Services Program (IHSS). A major component entails standardizing assessments to ensure recipients' needs are appropriately assessed.

F) IMPROVE ACCESS TO HOME AND COMMUNITY-BASED SERVICES

F1) LTC Council Departments: Review current service planning procedures for effectiveness in diverting persons from placement in institutions
(Source: Olmstead Plan)

F2) LTC Council Departments: Evaluate existing crisis response programs and identify recommended models that could be adopted by counties
(Source Olmstead Plan)

F3) Department of Developmental Services (DDS): Expand use of Regional Resource Development Project to all individuals for whom any type of institutional placement is likely *(Source: Olmstead Plan).*

F7) Department of Social Services (DSS): Explore the need and feasibility of licensing assisted living facilities for younger persons with disabilities
(Source: CA Olmstead Plan)

F8) DSS: Review licensing regulations and statutes to identify any barriers to placement or retention in community care facilities, including looking at social rehabilitation facility models and residential treatment alternatives to acute and long-term institutional care *(Source: California Olmstead Plan)*

Status: DSS identified and addressed the following barriers to placement in community care facilities:

- Residential Care Facilities for the chronically ill can now accept persons other than HIV and AIDS clients who are terminally ill
- Per SB 962, DDS and DSS will administer a pilot project to provide health care and intensive support services to adults with developmental disabilities who currently reside in Agnews Developmental Center.

F10) DHS: Expand the Medical Case Management Program. *(Source: California Olmstead Plan)*

The Medical Case Management Program is designed to provide integrated care and case management services for complex, chronically ill, full-scope Medi-Cal DHS reports that, to date, the MCM program has case-managed over 37,000 Medi-Cal beneficiaries. Between January 2003 through September of 2004, MCM opened 3,328 cases. The 3,328 cases opened represent an approximate 12 percent increase over the cases opened for Fiscal Year 2003-04, which were 2,928. During the period of October 2004 - March 2005 (6 months), the MCM Program has opened approximately 2,262 additional cases, an average of 377 cases per month

H) DEVELOP, IMPROVE AND MONITOR QUALITY ASSURANCE EFFORTS ACROSS ALL DEPARTMENTS

H1) LTC Council Departments: Review current quality assurance efforts for consistency to promote the use of outcome based models. (Source: California Olmstead Plan)

DHS is developing Quality Assurance standards specifically for seniors and persons with disabilities.

In July of 2004, Department of Social Services initiated development process for a comprehensive statewide Quality Assurance (QA) initiative as part of the Governor's 2004-05 Budget, which includes measures designed to improve the integrity of the assessment process in the IHSS program.

The Department of Developmental Services has designed a conceptual model for a statewide quality management system which is based upon the CMS Quality Framework. At the core of the model are outcomes for consumers and families; all system structures are designed support and produce these outcomes. The model will establish clear expectations for performance, will collect and analyze data to determine if the expectations are met, and will ensure that any deficiencies are corrected.

H2) Department of Mental Health: Work with the Mental Health Planning Council (MHPC) to review state and local mental health quality improvement plans. Source: California Olmstead Plan)

H3) DSS: Develop training, educational materials and other methods of support to (1) aid IHSS consumers to better understand IHSS and to develop skills required to self-direct their care, and (2) aid providers in better meeting the needs of consumers. (Source: California Olmstead Plan)

In September of 2002, DSS received a \$1.385 million Real Choice Systems Change Grant from the federal government to develop training, educational and other materials for IHSS recipients and providers. DSS also developed training for county staff to implement AB 1682.

H4) Department of Aging (CDA): Monitor and improve Area Agency on Aging Information Assistance services to ensure program consistency statewide. (Source: CA Olmstead Plan)

H5) CDA: Encourage general information and referral providers and Area Agency on Aging Information and Assistance workers to become certified I&A/R specialists. (Source: California Olmstead Plan)

This item has not been implemented due to questions regarding the reliability of the certification test.

H6) DSS: Evaluate the IHSS enhancements made pursuant to AB 1682, including a provider registry, provider referral system and qualifications investigations, to determine the impact on service quality. (Source: California Olmstead Plan) A survey on the service quality of Public Authorities is conducted annually and a report of findings is provided to the Legislature.

H7) DMH: Audit statewide the extent to which county Mental Health Plans are providing covered Medi-Cal Specialty Mental Health Services consistent with statewide medical necessity criteria. (Source: California Olmstead Plan)

This is an on-going activity conducted by Medi-Cal Compliance within DMH.

H8) DDS: Revise the current DDS quality assurance systems into a “Quality Management Model” utilizing the Centers for Medicaid and Medicare framework. (Source: California Olmstead Plan)

In 2003, DDS developed a conceptual model for a statewide Quality Management system that is consistent with the CMS Quality Framework. In the Governor’s proposed Fiscal Year 2005-2006 Budget, resources have been proposed to continue planning and implementation of the system.

I) DEVELOP POLICIES AND SYSTEMS TO ENHANCE THE COLLECTION, ANALYSIS AND ACCESSIBILITY TO DATA THAT INFORM DECISIONS ABOUT CONSUMER’S CHOICE OF SERVICES, LIVING ARRANGMENTS, QUALITY, AND POLICY

I 1) LTC Council: Identify data needed for purposes of planning for assessments for persons in and transferring out of institutions, assessments for diversion from institutions, service planning and resource development. (Source: California Olmstead Plan)

The LTC Council has not addressed this item. However, through the Money Follows the Person Grant, the state will be provided with case encounter and cost data that will provide the basis for policy recommendations for Money

Follows the Person initiatives in California. The project team will produce cost and encounter data that form the basis for one or more financing model(s) for money follows the person, as well as cost and other information regarding ongoing or one-time services needed by nursing facility residents in order to transition to community living.