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Community Integration: A Holistic Approach to the New Core Services for Transition & Diversion

Background on the New Core Services: The Power of CILs

**August 22, 2017
Atlanta, GA**

**Presenter:
Bruce Darling**

Learning Objectives

As a result of this learning and sharing experience, it is hoped that you will be able to:

- Describe the necessary elements of IL services that implement new core service requirements for institutional transition and diversion.
- Describe how the interconnected needs of individuals with significant disabilities guide both transition and diversion from institutions.

Learning Objectives, cont'd.

- Describe approaches for identifying and assisting at-risk individuals to avoid placement in institutions.
- Describe successful implementation strategies for diversion and transition that include funding, relationships, and referrals, and leveraging the other CIL core services.

Overview of Training

Over the next two-and-a-half days, we will:

- Share our experiences.
- Provide information on effectively assisting in institutional transition and diversion.
- Answer questions on the transition and diversion process.
- Facilitate peer sharing of your experiences and ideas.

Overarching Principles

- Assisting someone in reclaiming and maintaining their life, and moving into and staying in the community are fundamental to Independent Living.
- The Independent Living Philosophy answers many of your questions and guides you through the process.

Policy Framework

Institutional transition and diversion work are based on the Americans with Disabilities Act.

- Title II: State and Local Government Programs and Services
- The most integrated setting is defined as “a setting that enables individuals with disabilities to interact with non-disabled persons to the fullest extent possible.”

ADA (28 C.F.R. pt. 35, App. A, p. 450)

Policy Framework, cont'd.

The Supreme Court's Olmstead Decision

- Lois Curtis and Elaine Wilson against the State of Georgia.
- On June 22, 1999, the United States Supreme Court held in *Olmstead vs. L.C.* that “unjustified isolation is properly regarded as discrimination based on disability.”

Policy Framework, cont'd. 2

The Supreme Court's Olmstead Decision

The Court wrote that “institutional placement of persons who can handle and benefit from community settings perpetuates unwarranted assumptions that persons so isolated are incapable or unworthy of participating in community life.”

Policy Framework, cont'd. 3

The Supreme Court's Olmstead Decision

The Court also wrote that "confinement in an institution severely diminishes the everyday life activities of individuals, including family relations, social contacts, work options, economic independence, educational advancement, and cultural enrichment."

Challenges to Transition & Diversion

- Long term services and supports (LTSS) involve numerous funding streams administered by multiple federal, state and, local agencies. This creates a confusing maze of organizations and bureaucratic requirements at a time of vulnerability or crises.
- Coordinated systems through Aging and Disability Resource Centers (ADRCs), Money Follows the Person, Veteran Directed Home and Community-Based Services, etc. are effective in some states and not others.

Challenges to Transition & Diversion, cont'd.



- Federal policy is highly volatile right now. In this rapidly changing environment we must stay nimble.
- States are experiencing budget crises. But that doesn't eliminate the requirement that they comply with Olmstead.
 - Home and community-based services are still generally less expensive than institutional care.
- Managed Care continues to expand. Centers in some states have been successful at securing contracts for transition and diversion services with MCOs. In other states centers have not been able to make those connections.

The Power of CILs and the IL Movement



- CILs are now on record as being the only organizations mandated to provide transition and diversion. Use the IL law as leverage. MCOs may be more interested in HCBS because it's more cost effective.
- The ADA and Olmstead Decision still provide a legal framework. Use them!
- Get at the right tables.
- Make the case for what your CIL can do/is doing.

The Role of CILs

- In the next segment we will explore what “transition” and “diversion” mean for CILs under the independent living law and regulations, and start the exchange of ideas for not only how to do what is required, but how to use the unique value of IL to increase the quality of life within your community.

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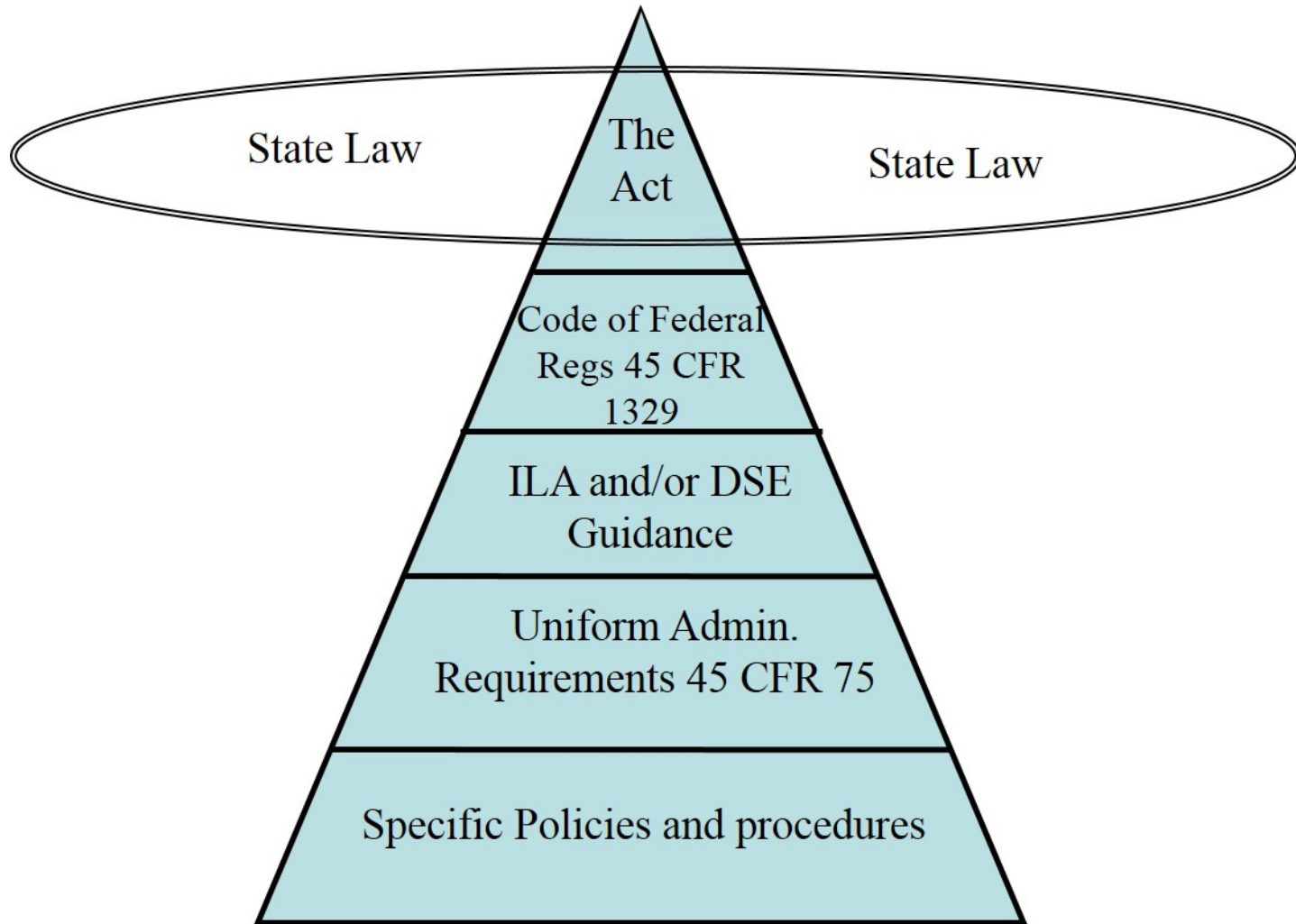
Necessary Elements of Transition and Diversion

Presenters:
Darrel Christenson
Paula McElwee

What the Law and Final Regulations Say

Paula McElwee

What is the order of authority?



What does the Rehabilitation Act say?



- The language in the actual federal statute, as passed by Congress and signed into law in 2014, contains language that the regulations cannot change; only Congress can make those changes.
- Where the regulations speak, typically they clarify the Rehab Act; they can be changed through a process of draft/public comment/finalization as long as the changes are consistent with the Act.
- When neither addresses an area of interest or concern, we can request clarification (FAQ) or guidance from ACL/ILA.

Definition: Core Services*

Independent living core services mean, for purposes of services that are supported under the Independent Living Services (ILS) or Center for Independent Living (CIL) programs—

- (A) Information and referral services;
- (B) Independent Living skills training;
- (C) Peer counseling, including cross-disability peer counseling;
- (D) Individual and systems advocacy;

*§1329.4

Definition of Core Services, cont'd.

(E) Services that:

(i) Facilitate the transition of individuals with significant disabilities from nursing homes and other institutions to home and community-based residences, with the requisite supports and services. This process may include providing services and supports that a consumer identifies are needed to move that person from an institutional setting to community based setting, including systems advocacy required for the individual to move to a home of his or her choosing;

Definition of Core Services, cont'd. 2

- (ii) Provide assistance to individuals with significant disabilities who are at risk of entering institutions so that the individuals may remain in the community. A determination of who is at risk of entering an institution should include self-identification by the individual as part of the intake or goal-setting process; and
- (iii) Facilitate the transition of youth who are individuals with significant disabilities, who were eligible for individualized education programs under section 614(d) of the Individuals with Disabilities Education Act (20 U.S.C. 1414(d)), and who have completed their secondary education or otherwise left school ...

1329.5 Indicators of Minimum Compliance

To be eligible to receive funds under this part, a Center must comply with the standards in section 725(b) and assurances in section 725(c) of the Act, with the indicators of minimum compliance, and the requirements contained in the terms and conditions of the grant award.

Your grant(s) and Program Performance Report (formerly 704 Report) address Annual Program and Planning Objectives



- Achievements – goals, objectives and progress
- Challenges – problems and attempted resolutions
- Comparison with Prior Report
- Work plan for the next year
- How the work plan goals, objectives and action plans are consistent with the current SPIL.

**How will the report reflect transition services?
Are you keeping track of the three components of transition – moving from an institution, preventing institutionalization, and youth transition?**

Let's drill down in those regulations...

INSTITUTIONAL TRANSITION

“Facilitate the transition of individuals with significant disabilities from **nursing homes and other institutions to home and community-based residences, with the requisite supports and services.**

“This process may include providing services and supports that a consumer identifies are needed to move from an institutional setting to community based setting, including systems advocacy required for the individual to move to a home of his or her choosing;....”

Let's drill down, cont'd.

INSTITUTIONAL DIVERSION

“Provide assistance to individuals with significant disabilities **who are at risk of entering institutions so that the individuals may remain in the community.**”

“A determination of who is at risk of entering an institution should include **self-identification by the individual** as part of the intake or goal-setting process.”
(**ASK** the individual if they are at risk of institutionalization.)

We have been calling this “diversion” because it simplifies communication and is commonly understood.

Diversion as an Outcome as Opposed to a Service

Darrel Christenson

Diversion – Dictionary Definition

- “Diversion”
 - An instance of turning something aside from its course, rerouting
 - Deflection
 - Deviation
 - Divergence

Services vs. Outcomes

Many of us in IL see institutional transition and youth transition as measurable services. An individual moves from one place/space to another. Some may argue that transition is also an outcome of other actions, e.g. IL skills training, housing location/referral, advocacy, etc., but the more tangible nature of transition makes it easier to measure.

Whereas, diversion is not so tangible. It is more precisely an outcome of other services.

Keeping People in the Community

- Avoiding institutionalization has always been a goal of the IL movement:

The purpose of this chapter is to promote a philosophy of independent living, including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society.... (Title VII, §701)

Keeping People in the Community, cont'd.



- Now that goal is more explicitly stated in law as part of the definition of a CIL.
- Most people with significant disabilities prefer to live in their own home, as part of the community.
- Keeping people home in the community is generally cheaper & certainly easier than going in and out of an institution.

You are already Achieving These Outcomes!



- Many of your consumers are already achieving diversion outcomes by participating in your CIL's I&R, Peer Support, IL Skills training, individual and systems advocacy, etc.

Diversion is the End Result

- Diversion is the outcome of providing a wide range of services to consumers living in the community.

Who is Actually Being Diverted from Institutionalization?

What still needs further definition and clarification is who is actually “at risk” of institutionalization and how might a CIL go about assisting someone to self identify as stated in the regulation:

- “A determination of who is at risk of entering an institution should include self-identification by the individual as part of the intake or goal-setting process.”

Group Think

- We will be exploring this question and much more over the next couple of days, beginning with a group discussion now.

We are eager to hear your ideas!

Target Population(s): Who is this intended for, what programs / funding does your CIL, State have?

Darrel Christenson

Target Population(s) for Transition and Diversion

- Transition – Currently residing in a nursing home, assisted living facility, skilled nursing facility, or other type of institution.
- Diversion – Currently residing in the community.

Target Population(s), cont'd.

- Transition – CILs assisting person to less restrictive environment of their choice.
- Diversion – CILs assisting person to stay in the community of their choice.

Target Population(s), cont'd. 2

- Transition – Existing CIL services to enhance skills, resources, knowledge, and confidence to move to a less restrictive environment.
- Diversion – Existing CIL services to enhance skills, resources, knowledge and confidence to enable people to remain at home in a less restrictive environment.

Target Population(s), cont'd. 3

- Transition – Usually (but not always) individuals under 65 years old with a desire to move back to the community.
- Diversion – Up to any age with a desire to remain in their home.

Target Population(s): Transition AND Diversion



- Transition AND Diversion – Anyone with a significant disability who desires to work toward achieving goals with CIL assistance.

Transition Funding

- Some states have Money Follows the Person to help pay for household set-up expenses.

Transition Funding, cont'd.

- Ability360's Board of Directors approved an annual \$20,000 "slush fund" to help 10 consumers transition out of Valley nursing homes.

Transition Funding, cont'd. 2

- Arizona Medicaid monies available for Home Care Services, Personal Assistant Services, and Home Modification services.
- A maximum of \$2,000/ person is available to Ability360 as a contracted transition service (with \$300 to us for Administrative fees).

Diversion Funding

- City Community Development Block Grant (CDBG) monies available to Ability360 for Home Modification services.
- Currently, cities include: Phoenix, Mesa, Peoria, Surprise, and General Funds from Tempe.
- Previously, Ability360 received CDBG funding from Glendale, Scottsdale, Chandler, and the Town of Gilbert.
- CDBG funding comes from HUD and has decreased for years. President's proposed budget eliminates this funding that started with President Nixon.

Diversion Funding, cont'd.

- CIL staff provide key, core services to consumers in the community.
- Little to no new funding for these (existing) positions.

Transition Case Example

- 25 year old male with SCI who has been living in a nursing home for 3 years as a part of “transition from rehabilitation to community.”
- CIL Providing: I&R, IL Skills Training, Peer Support, Socialization Through Recreation and Ability360 Sports Center.
- Biggest Barrier: Locating accessible, affordable housing.
- Greatest Asset: Motivated consumer.
- Results: Found housing, going back to school and living life.

Diversion Case Example

- 58 year old female, stroke survivor, living in a manufactured home alone with no family nearby – feared her only alternative was to move to a nursing home.
- CIL Providing: I&R, IL Skills Training, Peer Support, Advocacy, Home Care Services, Home Modification, Socialization Through Recreation, and Ability360 Sports Center.
- Biggest Barrier: Lonely and has poor cooking skills.
- Greatest Asset: Motivated consumer.
- Results: Peer Mentor and Socialization Through Recreation have helped her gain confidence in public, IL cooking skills training – gain skills, confidence, and greater safety and independence in the kitchen.

Types of Institutions and What it Means to be At-Risk and Avoid Non-Community Living

Michelle Crain

Types of Institutions—Nursing Homes

- “Our Homes, not Nursing Homes” has become the rallying mantra of disability rights advocates throughout the nation.
- It is often in demonstration to the institutional bias that guarantees services for eligible individuals entering nursing homes or other institutions, while requiring waivers for community-based services.

Nursing Homes, cont'd.

- Nursing homes provide 24-hour care to a cross-disability population that includes young and older adults.
- The U.S. Department of Health and Human Services says that 4 out of 10 individuals who reach age 65 will enter a nursing home at some point in their lives, 10 percent of which will reside there for five years or more.
- Statistical trends also indicate an increase of individuals under 65 residing in nursing homes.

Nursing Homes, cont'd. 2

- Diversion and Transition programs may thwart these trends, enabling more individuals to live in their own homes and community “safely, independently, and comfortably, regardless of age, income, or ability level”—essentially, **to age in place**.

Intermediate Care Facilities (ICF/IIDs)



State Supported Living Centers (SSLCs)

- Despite the national trend of deinstitutionalization over 40 years ago, Texas continues to operate SSLCs formally known as State Schools.
- These intermediate care facilities for individuals with intellectual disabilities (ICF/IID) are Medicaid funded, with operating costs exceeding their admission rates.

ICFs—State Supported Living Centers, cont'd.



- SSLCs have been plagued with egregious acts of neglect and abuse, resulting in a \$112 million settlement by the State of Texas with the U.S. Department of Justice.
- Texas legislators have moved to restructure the SSLCs, going so far as to consider closing up to 5 of the 13 facilities.
- A strong parent lobby and the impact of lost jobs on the local economies present a challenge to closing SSLCs and transitioning residents into more integrated, community-based settings.

Hospitals and Rehabilitation Centers



Hospitals

- Acute care physicians often discharge individuals from hospitals to nursing homes due to the need for ongoing nursing care, longer recovery times, rehabilitation, or because of multiple re-admissions for chronic medical conditions, such as heart disease, diabetes, stroke, and mental illness.

Rehabilitation Centers

- Individuals with newly acquired disabilities may be discharged to a nursing facility because of the individuals' inability to perform activities of daily living, having an inaccessible home and lack of family support.
- Developing partnerships with these institutions to implement diversion from the outset can positively impact the course of a person's life forever.

Correctional Institutions— Jails and Prisons

- The National Alliance on Mental Illness (NAMI) estimates that 25 to 40 percent of individuals with mental illness will be incarcerated at some point during their lives.
- Much like the costs of nursing homes, the incarceration of individuals with mental illness costs more than twice the amount it takes to serve them in a community-based setting.
- Diversion projects implemented by court-ordered outpatient treatment programs are proving to be effective, but controversial.

Correctional Institutions— Jails and Prisons, cont'd.



- Working with probation officers, the local mental health authority, the Social Security Administration, and other community-based organizations, CILs can play an effective role in diverting individuals with mental and emotional disabilities from correctional facilities.

Types of Institutions Questions & Answers

What It Means to be At-Risk

What does it mean for a person to be at risk of entering an institution and how can it be avoided?

- Some believe that having a significant disability alone makes a person at risk of institutional placement.
- Some believe that consumer self-identification alone may be enough to consider a person at risk.
- Others believe that self-identification and having a significant disability are key components, but other factors, or a combination thereof, may present a more comprehensive picture of at-risk.

What It Means to be At-Risk, cont'd.

Common At-Risk Factors:

- Homelessness
- Chronic Medical Conditions
- Substance Abuse
- Issues with Taking Medications
- Living Alone
- Age
- Lack of Assistance with Activities of Daily Living
- No/Minimal Income
- No Family Support

Avoiding Non-Community Living

No matter the approach CILs may take in assessing risk, the ultimate goal is to divert consumers from institutional settings by utilizing the core and auxiliary services that CILs already provide:

- Core Services:
 - Information and Referral
 - Individual and Systems Advocacy
 - Independent Living Skills Training
 - Peer Support/Counseling
 - Youth and Nursing Home & Other Institutional Transition

Avoiding Non-Community Living, cont'd.



- Auxiliary Services:
 - Personal Attendant Services
 - Tenant Based Rental Assistance
 - Utility Assistance
 - Social Security Representative Payee Services
 - Assistive Technology
 - Home Modifications
 - Purchasing of Durable Medical Equipment
 - Vehicle Modifications

Avoiding Non-Community Living, cont'd. 2

- The CIL does not have to directly provide the service in order to assist a consumer in addressing his/her needs.
- A well-developed Independent Living Plan will help to establish the role the CIL will play in identifying, referring and/or arranging services to meet the needs of the consumer.
- The key to assisting individuals in avoiding non-community living is knowing the when, what, where and how to accessing resources.

We're already doing that!

More Group Discussion

Now it's your turn again.

What kinds of practices at CILS determine who is at-risk?

Day 1 Wrap Up

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