

**Preliminary Recommendations
Service Array Workgroup
September 7, 2010**

Introduction

The Service Array Subcommittee was asked to provide recommendations to address gaps in the delivery system for long term services and supports and supplement the services provided by formal and informal caregivers. The role of technology, opportunities for linking housing and services, advancing consumer direction and improving access to transportation were among the areas that were specifically identified for consideration in the charter.

Initially workgroup members were asked to provide a "gap analysis" identifying gaps in the delivery system from their perspective. Those gaps were then linked to previous recommendations from the unified long term care budget process. The documentation created served as the basis for conversation and was used to identify areas for further research, discussion, and ultimately to frame the recommendations that follow.

Populations

The population that accesses long term services and supports is diverse and represents a variety of needs and preferences. Ultimately the service array offered in the long term care delivery system should include the services necessary to provide meaningful choices so that each consumer can choose to receive services he or she needs in the setting he or she prefers. The consumer's ability to access services in a way that provides a meaningful choice of settings should not be limited by the consumer's specific disability or disabilities, but instead should be focused on the consumer's needs.

However, programs are designed, for a variety of reasons, for specific groups of disabled consumers. Examples include, but are not limited to, consumers under 60 with physical disabilities, consumers with developmental disabilities, and consumers over the age of 60. The delivery systems for different consumer populations have developed at different rates over time with a resulting difference in the availability of options for consumers in different populations. As gaps in the current delivery system were identified, population groups that seemed to have a less developed delivery system include, but are not limited to, consumers under 60 with Alzheimers, consumers who have suffered a traumatic brain injury, and consumers with serious mental illness.

The service array group recognized that reducing gaps in the delivery system across populations was key to achieving meaningful choice for all consumers who need long term services and supports. Our initial focus has been on concepts which we believe will benefit consumers across populations, generally in the

short term without significant cost. Today we will provide specific recommendations in the areas of discharge planning, transportation, housing, service coordination, consumer direction and telehealth. However, as we continue our work in the coming months, we anticipate the development of additional recommendations (in new areas and, potentially, in some of the areas we will talk about today).

Discharge Planning

Informed discharge planners in both hospitals and nursing homes are key to a delivery system that supports consumer choice. Often a consumer is asked to make choices about long term services and supports unexpectedly, and those choices are limited by the knowledge of the discharge planner. Effective discharge planning requires a broad knowledge base regarding housing and services available in the community. It is important that the discharge planner working with the consumer understand both the services and supports available in the community and how those services relate to the needs of the consumer. As a result, developing core competencies and education for discharge planners has the potential to significantly improve consumer choice in Ohio simply by making sure consumers know what options are available.

The importance of tools to consistently identify available resources was discussed in the Front Door Work Group in the previous unified long term care budget report. The transition workbook, developed through the Home Choice program and written from the consumer's perspective, is one tool that is already being used successfully to assist consumers transitioning to community settings.

The need for a web based tool that consumers, advocates and discharge planners could use to identify resources was one of the tools essential to successful implementation of the "no wrong door" principles. In Ohio, Connect Me Ohio is currently available as an initial step toward that web-based tool. EMMA is currently leading a group of state agencies in work to significantly enhance the information available through Connect Me Ohio by incorporating data currently maintained by state agencies.

Discharge planners in both nursing homes and hospitals need the knowledge and skills to support consumers as they choose the settings and services that best meet their needs and support their goals.

- ✓ **Develop a tool kit that can be used across settings to identify resources, both for services and information to support the consumer's transition to the settings they choose with services to support the consumers goals.**
- ✓ **Develop a tool to assist in determining the options that best meet each consumer's needs.**

- ✓ **Develop resources accessible to consumers and their families which support their choices, their ability to access services that meet needs that change over time, and the role of informal caregivers in the delivery system for long term services and supports.**
- ✓ **Create care support centers in hospitals where consumers and caregivers can utilize resources in accessible formats, including educational videos, print and online resources, and can connect with services and supports within their communities.**
- ✓ **Explore the need for requirements for qualifications, certification, education and/or continuing education for discharge planners in hospitals and nursing homes.**

Transportation

Transportation has been identified as a significant change in the delivery of long term services and supports as a significant challenge. While communities have established successful programs in some areas of the state and continue to work to expand those opportunities, focused effort at the state level is critical to the development of an effective transportation system for consumers who choose to receive long term services and supports in community settings. The Service Array Sub-Committee supports the recommendations of the 21st Century Transportation Priorities Task Force and the Ohio Anti-Poverty Task Force.

Ensure consumer access to affordable, accessible transportation to support the choice of setting, the consumer's participation in the community and access to health care.

- ✓ **Explore legislative action to limit the liability of volunteer drivers in community transportation programs and develop legislation as determined to be appropriate.**
- ✓ **Develop a health and human service transportation plan that ensures health and human services options are coordinated and addressed.**
- ✓ **Streamline state rules and regulations regarding service delivery and advocate for federal changes where barriers are identified so that funds can flow quickly to providers.**
- ✓ **Create a comprehensive inventory of transportation service providers with an on-line service directory. Build on ongoing efforts at ODOT as appropriate.**
- ✓ **Replicate local and regional models that have proven successful.**
- ✓ **Explore reimbursement models that encourage group trips and ride sharing when appropriate to increase access to limited resources. The role of consumer choice and consumer direction should be considered as reimbursement models are explored.**

- ✓ **Establish an Executive Council for Transportation Coordination (ECTC) reporting to the Governor, with representatives of state agencies, providers, consumers, and the General Assembly, charged with developing a plan to implement these recommendations across systems.**

Housing

In Home Choice and other efforts in Ohio to link consumers with services in community settings, the absence of accessible, affordable housing with supports is a consistent barrier to transition. While innovative approaches have been developed, it is critical for Ohio to continue to focus on developing affordable housing that is accessible to consumers with disabilities and that is linked to appropriate supports if we are to achieve a balanced delivery system that allows consumers to live independently. Additional accessible, affordable housing capacity must be developed - and consumers, discharge planners and stakeholders must have the tools necessary to access that housing.

Any toolkits or resources developed to assist consumers with disabilities in living in community settings should include materials to assist in accessing housing.

The supply of accessible housing could be developed over time by enacting visitability requirements for new construction. Visitability requirements would mean that all new housing had at least one zero-step entrance, doors with a minimum width of 32 inches, an accessible bathroom on the main floor, reinforced wall or backing in the main floor bathroom to facilitate installation of grab bars, and outlet, light switches and thermostat controls in locations reachable by a seated individual. Visitability requirements must continue to be explored as we develop affordable, accessible housing.

Another way to increase the supply of affordable, accessible housing is to find opportunities for inexpensive modifications to the existing housing supply to address accessibility issues. For example, the Home Choice program is currently developing a plan to purchase portable, reusable ramps for program participants. The ramps will be purchased with funds provided jointly by the Home Choice Program and the Ohio Housing Finance Agency through the cooperative on housing that is being developed as part of the Home Choice balancing plan.

Medicaid waiver funds and other public sources (e.g., Ohio Housing Trust Funds and local government funds) provide accessibility modifications for people with disabilities. But many of these programs are limited to owner-occupied housing. Only landlords with federal subsidies (e.g., HUD contracts) must pay for reasonable modifications. In other rental housing landlords must allow - but do not have to pay for - accessibility modifications; funding can be a major issue.

Develop resources to provide accessibility modifications in rental housing.

Consumer choice is supported most effectively when housing is combined with services. When housing is combined with services which are available at the consumer's option, maximum flexibility to meet the needs of individual consumers is achieved. The State of Ohio, via the Interagency Council on Homelessness & Affordable Housing, has developed a policy framework that defines Permanent Supportive Housing as a model that can assist consumers who choose community settings by combining affordable housing with services consumers can choose to access. Permanent supportive housing can improve consumer access to prevent health care, decrease emergency department and outpatient hospital utilization, and assist consumers in living successfully in community settings while accessing long term services and supports. The balancing plan that is part of the Home Choice program includes investment in permanent supportive housing.

Expand Permanent Supportive Housing for individuals with disabilities as outlined in the Interagency Council on Homelessness and Affordable Housing Permanent Supportive Housing Policy Framework.

- ✓ **Increase capital and operating support for accessible housing to meet the needs of consumers accessing long term services and supports.**
- ✓ **Provide priority access for consumers currently institutionalized and ready to transition to a community setting and to those consumers at risk of immediate institutionalization.**

While access to affordable, accessible housing is a primary barrier for consumers who want to transition to community settings, as indicated by the relatively small number of recommendations in this area, the service array group recognized the variety of efforts throughout the state and chose not to devote significant amounts of time to this subject. For a summary of some of those initiatives, refer to Attachment 1.

Service Coordination

Service coordination is a cross-disability model linking housing with supportive services. Service coordinators can assist consumers in accessing community services, public benefits and other resources and can assist consumers in relationships with family members, property management and community service providers. They can assist consumers in understanding the requirements of their leases, in maintaining their apartments and in becoming active members of their communities. The support of a service coordinator is a valuable tool as consumers choose community settings.

Expand the availability of service coordinators in Ohio's affordable housing to better assist consumers in achieving their goals in the setting they choose.

- ✓ **Increase access to sustainable service coordination in affordable housing, including senior housing and permanent supportive housing for chronically homeless individuals and non-elderly people with disabilities.**
- ✓ **Support the Interagency Council on Homelessness & Affordable Housing to leverage federal, state, local and private resources and develop consistent policy for Ohio's housing and social service agencies.**
- ✓ **Investigate options for funding service coordination, including service coordinator grants and Ohio Housing Trust Funds.**
- ✓ **Educate local entities about the ability to access funds for service coordination and the ways in which funds can be accessed.**

Consumer Direction

Consumer direction is a key element to a system that gives consumers choice in where and how their services are provided. The service array sub-committee focused their work on three specific approaches.

Cash and counseling programs are focused on personal assistance services and allow consumers to choose their caregivers, identify spending priorities and to establish what they will pay for services within a budget linked to their needs. A counselor assists the consumer in establishing the budget, managing the payment of services and in completing any necessary documents. Studies have shown that cash and counseling programs can be implemented without increasing Medicaid costs.

Support coaching and independent living skills training are key elements of consumer direction. By giving consumers the tools to manage their own care, the transition from an institutional setting to a community setting can be more achievable and successful. The HOME Choice program has recognized the importance of support coaching and independent living skills training in the transition from an institutional setting and incorporates those services.

A significant challenge for consumers using self-direction options is arranging for back-up care when the caregiver they chose cannot provide the services they need. To fully implement self-direction and provide the opportunity to manage care independently, consumers need the tools to ensure their needs are met when caregivers are unavailable. One Center for Independent Living in Ohio (LEAP) has developed community based consumer-directed cooperatives that allow consumers to coordinate their care even when scheduling difficulties occur.

Because the consumers are responsible for establishing and managing the cooperative, they maintain the ability to manage their own care, even when a provider is unavailable. The Home Choice program is further exploring the use of cooperatives through a project using balancing funds.

Continue to develop opportunities for self-direction in Ohio's delivery system for long term services and supports.

- ✓ **As a long term objective, cash and counseling programs should be explored as components of the delivery system for long term services and supports.**
- ✓ **Build on the experience developed in Centers for Independent Living and through Home Choice by offering support coaching and independent living skills training to consumers who are not participants in that program. (Support coaching and independent living skills training are core services mandated in federal law to be provided by every CIL in the country.)**
- ✓ **Build on efforts to develop local cooperatives that have taken place in some communities and that are being developed as a tool to achieve balance in the delivery system through the Home Choice project by developing tools to facilitate the development and operation of personal assistance cooperatives in communities throughout Ohio.**

Telehealth

Telehealth can be defined as the integration of social and healthcare services that are supported by innovative technologies to sustain and promote consumer independence and quality of life. Telehealth has the potential to address gaps related to transportation, informal caregiver support, and workforce shortages. It may improve care management for chronic conditions and better utilize limited health care resources. As the role of telehealth in the delivery system for long term services and supports is explored, new opportunities for consumer independence and transitions to community settings may be identified.

Create a telehealth task force comprised of public and private entities to eliminate regulatory barriers impeding the use of telehealth and to coordinate telehealth initiatives across systems and payers.

Conduct pilot programs for the rendition of medical services using telemedicine that evaluate the management of, and treatment of patients with congestive heart failure, diabetes or diabetes related conditions;

Establish reimbursement policies that require medical and other health care services rendered via telehealth to be reimbursable to the same extent such services would be reimbursed if rendered in person.

Conclusion

The initial recommendations included in this document will assist in the development of a balanced delivery system for long term services and supports. However, it is important to remember that the array of services offered across the delivery system should be reviewed on an ongoing basis to identify opportunities for change and to think innovatively about ways to meet the needs of consumers in community settings so that, ultimately, consumers, regardless of disability, have access to the services they need in a way that provides meaningful choice.

Attachment 1

Efforts to Develop Affordable Accessible Housing in Ohio

The **State of Ohio** supports the creation of a range of permanent, supportive housing approaches and models to meet the needs and housing preference of tenants.

The **Ohio Housing Trust Fund** is a flexible state funding source that provides affordable housing, expands housing services, and improves housing conditions for low-income Ohioans. The Fund supports a wide range of housing activities including housing development, emergency home repair, handicapped accessibility modifications, and services related to housing and homelessness. The Fund is targeted to low income Ohioans. A broad range of organizations are eligible to apply for money from the Ohio Housing Trust Fund including local governments, housing authorities, nonprofit organizations, private developers and private lenders.

The **Ohio Housing Finance Agency (OHFA)** www.ohiohome.org helps Ohio's renters, senior citizens, and others find quality, **affordable** housing that meets their needs. OHFA's financing requires every unit of affordable housing developed to be **visitable** (zero-step entrance, accessible toilet) and to incorporate other **universal design features**.

The OHFA **Annual Housing Plan** is a strategic guide that addresses the state's affordable housing needs and highlights current issues. Planning included stakeholder consensus on 70 recommendations to prioritize and address housing needs.

OHFA's new **Office of Affordable Housing Research** is dedicated to using research-based data to support OHFA's mission. Staffed by OHFA, the office works in partnership with The John Glenn School of Public Affairs at The Ohio State University and collaborates with other colleges, universities and partners to engage research to guide affordable housing policies.

Interagency Council on Homelessness & Affordable Housing (ICHAH)

<http://www.interagencycouncil.ohio.gov/>

In 2007, Ohio Governor Ted Strickland signed an Executive Order establishing the Interagency Council on Homelessness and Affordable Housing, whose mission is *"to unite key state agencies to formulate policies and programs that address affordable housing issues and the needs of Ohioans who are homeless or at-risk of becoming homeless."* The Governor charged the Council to make

recommendations to assist him in devising and implementing a long-term plan to support affordable housing and to end chronic homelessness.

In 2008, the Council engaged the Technical Assistance Collaborative to assist them on behalf of people with significant and long term disabilities. Specific tasks included a thorough review and analysis of the **affordable housing and Medicaid resources available in Ohio** and how they are being utilized to expand Supportive Housing.

Developed by the Council, **the Permanent Supportive Housing Policy Framework** is the first statewide policy to define permanent supportive housing criteria and target populations. More than 275 individuals and organizations, representing interests from around the state of Ohio were involved with the vetting process for this document. The PSH Policy Framework builds a solid foundation for the Council as they work toward the goal of increasing the availability of permanent supportive housing across the state by 6,000 units in the next five years. In a letter to state agency directors, Governor Strickland stated, "After reviewing the PSH Framework and the actions of the Interagency Council over the course of my administration, I believe you have done an excellent job developing an ambitious yet attainable goal, along with a clear path forward to meet that goal."

Ohio Preservation Compact <http://www.ohiopreservationcompact.org/>

Identifying existing, at-risk affordable housing. Developing an inventory. Finding new non-profit owners and management. Providing resources for refinancing, rehabilitating and preserving the rent subsidies. The Ohio Preservation Compact is a partnership funded by the McArthur Foundation, and is comprised of three key advocates of affordable housing in the state:

- The Ohio Housing Finance Agency (OHFA), which allocates the state's housing financial resources and guides policy leadership
- The Coalition on Homelessness and Housing in Ohio (COHHIO), which provides technical assistance to increase affordable housing and has an exceptional approach to engaging tenants
- The Ohio Capital Finance Corporation (OCFC) together with its parent company Ohio Capital Corporation for Housing, which supplies predevelopment, acquisition and bridge financing to launch preservation projects

OhioHousingLocator.org: A web-based database for affordable, accessible rental housing located throughout the State of Ohio. You can use the locator to search by location, monthly rent, number of bedrooms, or accessibility features. You also can connect to other housing resources and get information on rental assistance, housing accessibility, foreclosure prevention, or buying a home. The Ohio Department of Job and Family Services, the Ohio Department of Aging, the

Ohio Developmental Disabilities Council, the Ohio Housing Finance Agency and the Ohio Department of Development make this free service available to all Ohioans.

Ohio's **Disability Housing Network** is a member driven organization with a mission focused on providing much needed support and assistance to County Boards of Developmental Disabilities and their housing boards that manage and operate homes for individuals with disabilities in Ohio, using capital funds from DODD and other state and federal housing resources (e.g. HUD 811, OHFA housing tax credits).

LOCAL EXAMPLES OF INNOVATION

One member of the Disability Housing Network, **Creative Housing** has been selected for another HUD grant of \$991,000 for the construction of accessible apartments. The fifth year in a row that Creative Housing has received funding in the highly competitive HUD 811 Program (Supportive Housing for Persons with Disabilities) brings the five year total in committed federal funds to over five million dollars. Creative Housing is working in conjunction with the Franklin County Board of Developmental Disabilities in a multi-year plan to develop fully accessible apartments on scattered sites throughout Franklin County.

Cuyahoga Metropolitan Housing Authority, Lucas Metropolitan Housing Authority, and Akron Metropolitan Housing Authority are partnering with the **Ohio Department of Job and Family Services (ODJFS)** this year to set aside approximately 60 rent subsidy vouchers for people with disabilities who are approved for the HOME Choice program. The program assists people with disabilities who currently reside in a nursing home who wish to return to the community. Transition Coordinators work directly with consumers and the PHA in obtaining the Housing Choice vouchers. Each consumer is supported by Medicaid waiver services (if necessary).

National Church Residences (NCR) announced 7/30/2010 that they have been awarded over \$7.9 million through the Assisted Living Conversion Program (ALCP) of the U.S. Department of Housing & Urban Development (HUD) to convert two of NCR's existing Ohio affordable senior housing facilities to affordable assisted living communities: Hopeton Village (Chillicothe) and Portage Trail Village (Cuyahoga Falls). The objective is to help seniors "age in place" in their existing apartment homes. NCR completed Ohio's first such project in 2009, with the conversion of Stygler Commons, a 32-unit affordable senior property in Gahanna, to affordable assisted living.

Commons at Livingston is a new construction housing credit development located in Columbus, Franklin County. This **permanent supportive housing**

for veterans with long-term homelessness consists of a three-story building with 50 one-bedroom units. It was financed with \$1,724,441 from Tax Credit Exchange (TCE) and \$500,000 in Tax Credit Assistance Program (TCAP) through the Ohio Housing Finance Agency.

http://www.ohiohome.org/newsreleases/rlsboard_feb10.aspx

Miami Valley Housing Opportunities (MVHO) provides permanent supportive housing in a scattered setting with a total of 20 units comprised of five 4-unit apartments located in suburban neighborhoods outside of Dayton. MVHO's acquisition and rehabilitation of the units was funded through the Ohio Department of Mental Health Capital Funds and Montgomery County HOME funds. MVHO owns and manages the properties that serve homeless, disabled families. The Dayton Metropolitan Housing Authority provides 20 Section 8 project-based vouchers.

South Pointe Commons, on Cleveland's southwest side, is a mix of new construction and rehabilitation of an existing four-unit building comprised of 82 apartments and commercial space. The project serves adults who have who have experienced long-term homelessness and who suffer from disabilities that inhibit their ability to sustain housing. Rental assistance is provided through sponsor-based Shelter Plus Care administered through EDEN Inc. The Cleveland Housing Network (CHN) was the lead developer of South Pointe Commons and the project is co-owned by CHN and EDEN Inc. Mental Health Service is the lead service provider partnering with the AIDS Task Force of Greater Cleveland and the Louis Stokes Cleveland VA Medical Center.