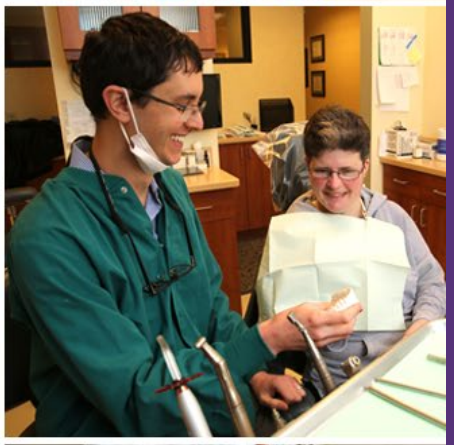
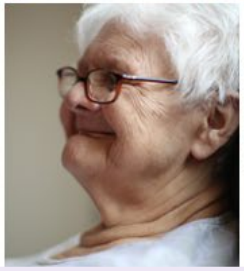


People First Care Coordination

A Training Guide for Care Managers



Revised September 2018

Developed by the New York Association of Emerging and Multicultural Providers
For the New York State Office for People With Developmental Disabilities

NYAEMP
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ACKNOWLEDGMENT

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TABLE OF CONTENTS

INTRODUCTION

PURPOSE

Development of a qualified and well-trained care management workforce is the foundation of successful person-centered outcomes for people with intellectual and developmental disabilities (I/DD) who will be served through People First Care Coordination Organization/Health Homes (CCO/HHs). These CCO/HHs will be the vehicle through which our field will deliver high-quality Health Home services: Comprehensive Care Management, Care Coordination and Health Promotion, Comprehensive Transitional Care, Individual and Family Support, Referral to Community and Social Support Services, and Use of Health Information Technology to Link Services.

To support the training and professional development of that workforce, OPWDD collaborated with the New York Association of Emerging and Multicultural Providers (NYAEMP), the NYS Department of Health (DOH) and the New York State Technology Enterprise Corporation (NYSTEC) to develop this interactive guide.

This document is designed for CCO/HHs to use as a guide in the development of curricula for care managers. It includes learning objectives and extensive resources selected from literature with a focus on current evidence-based practices and outcome measures. There are also multiple resources cited from OPWDD documents, including seven mandatory trainings (see Appendix A) or curricula that OPWDD will continue to provide that are to be integrated into the training provided by CCO/HH. Any additional OPWDD care manager trainings related to CCO/HH policy or operations will be developed as needed. Ongoing required Health Home trainings will be provided by DOH.

Transitioning Medicaid Service Coordinators (MSCs) will already be trained in many of the skill areas and are expected to complete additional training no later than July 1, 2019. Newly hired care managers would be expected to be trained within 12 months of hire on all skill areas, including OPWDD trainings that are needed for quality care management. In addition, Codes of Ethics from related health or human service professions, such as Direct Support Professionals, are cited in the guide and it is recommended that a Code of Ethics for care managers be developed in the future.

CARE MANAGEMENT

A team-based, person-centered approach designed to assist individuals in managing their long-term care needs and health and wellness by providing better access to supports and services. It also encompasses those care coordination activities needed to help manage chronic conditions.

NYAEMP

Provides advocacy, education, technical assistance, and public policy analysis to agencies that offer services to people with disabilities.

http://www.nyaemp.org/

METHODOLOGY

This guide was developed using five metrics for resource inclusion: *(1) Readability* – the language used in the resources is accessible to professionals (e.g., staff development specialists, curriculum developers, care managers); *(2) Content* – the substance of the material was assessed for accessibility, research and evidence basis, and learning progression ensuring the novices and more seasoned care managers may find it helpful; *(3) Instructiveness* –the material was assessed for the extent to which curriculum developers may use it to develop presentations, lessons plans, instructional material, lectures and tutorials; *(4) Relevance*– the content of the resources was specific to the skill-building areas for care managers, to the field of I/DD, and/or to other health-related fields; and *(5) Currency* – resources contained up-to-date information on the topic; particular efforts were undertaken to include sources that are less than 10 years old.

SKILL-BUILDING AREAS

The Care Coordination Organizations are required to deliver *10 skill-building areas* to care managers as a process to ensure consistent and targeted CCO/HH Care Management. This learning is intended to result in outcome measures informed by the person-centered planning process. As such, the guide is divided into *10 training modules*; one module per skill-building area:

1. Values Person-Centeredness and Communication
2. Builds Relationships and Establishes Communication within Care Coordination Team and Among Providers
3. Promotes Community Orientations
4. Culturally Competent
5. Knowledge of Developmental Disabilities, Chronic Diseases, and Social Determinants of Health
6. Knowledge of Community Supports and Services, New Models of Care, and Health Care Trends
7. Understand Ethics and Professional Boundaries
8. Promote Quality Improvement
9. Understand Health Information Technology
10. Proficient in Documentation and Confidentiality

TRAINING MODULES

Each module consists of learning objectives which, if achieved, would result in increased knowledge, competency, and capability in the related skill-building area. The learning objectives and goals were vetted for person-first language, pedagogical soundness, learning progression, and alignment with the six Health Home (HH) Core Services and Requirements, as well as alignment with the CCO/HH Application to Serve Individuals with Intellectual and/or Developmental Disabilities (I/DD).

Each training module is designed with a learning progression in which the basic, intermediate, and advanced contents are introduced to ensure that successful learners are ready to be capable care managers as measured by the following four outcomes:

1. Measurability of the individual's health and life goals
2. Development and advancement of the individual's electronic Life Plan
3. Professional development and expertise of care managers
4. Sustainability of the CCO/HHs

The next sections of this guide instruct users on its interactive features and ease of content access.

HH CORE SERVICES AND REQUIREMENTS

1. Comprehensive Care Management
2. Care Coordination and Health Promotion
3. Comprehensive Transitional Care
4. Individual and Family Support
5. Referral to Community and Social Support Services
6. Use of Health Information Technology to Link Services

STRUCTURE OF GUIDE

The Table of Contents and the introductory pages of this guide set the stage for the training modules. As previously mentioned, each training module (10 in total) is connected to one skill-building area. Each module is divided into two sections:

Section I: Module Overview, Key Concepts, Learning Objectives Table

Module Overview describes the overarching educational goals that care managers must achieve. Following the overview is a list of *Key Concepts* that care managers must master upon completing the training module. A table that consists of three columns labeled Topics, Learning Objectives, and Resources then follows Key Concepts; all content in this table serves as training guidelines that CCO/HHs are advised to use to develop training materials for care managers.

Section II: Training Resources

This section provides a variety of resources, including peer-reviewed journal articles, books, videos, OPWDD documents, informational and government and not-for-profit websites. Most of the resources are open-source and easily available without cost. Resources that require a paid subscription are identified with a **($)**. Although the resources listed in this guidance have been evaluated by NYAEMP and OPWDD, this review should not be construed as endorsement of any content or product. The CCO/HHs are responsible to engage in their own vetting of the materials and/or resources and make the judgment regarding use in the context of their own organizations and care managers and the need for the people with I/DD who have access to their services.

Section II begins with an *interactive menu* that lists resources by type (e.g. books, references, web resources, videos, etc.). Each resource type in the menu is a functional link that users can click on to quickly find resources without scrolling up and down through numerous pages. The next section provides further instruction on using the interactive menus in addition to other user-friendly navigation features in this guide.

LEARNING OBJECTIVES TABLE BREAKDOWN

TOPICS: Each module is broken down into several topics. Each topic lists learning objectives, which guide care managers through the completion of each module.

LEARNING OBJECTIVES: Measurable tasks connected to each topic that care managers are expected to complete/master.

RESOURCES: Training materials/tools available to CCO/HHs without cost. CCO/HHs are advised to develop their training curricula using these resources. Refer to Section II if additional resources are needed.

HOW TO NAVIGATE THE MANUAL

TABLE OF CONTENTS

Each topic listed in the Table of Contents functions as a link that users can click. Once a user clicks on a topic, the user is taken directly to the page in this guide that corresponds to the selected topic. Please click on any topic by:

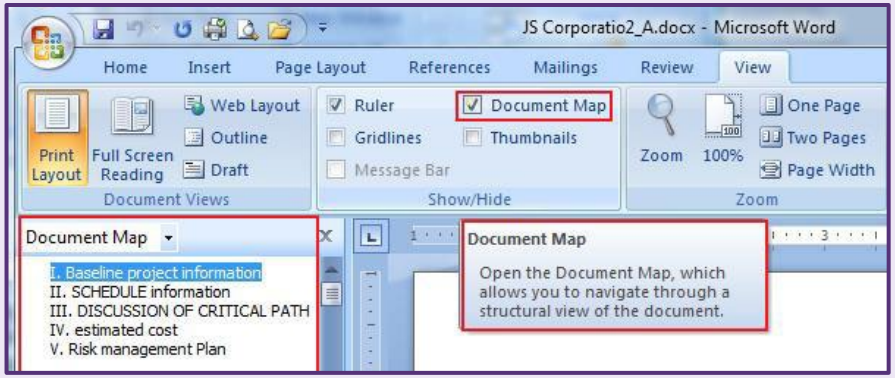
1. Hovering mouse over desired topic
2. Holding down the *Ctrl button* on computer/laptop keyboard
3. Using the left button on mouse to click on topic

NAVIGATION PANE

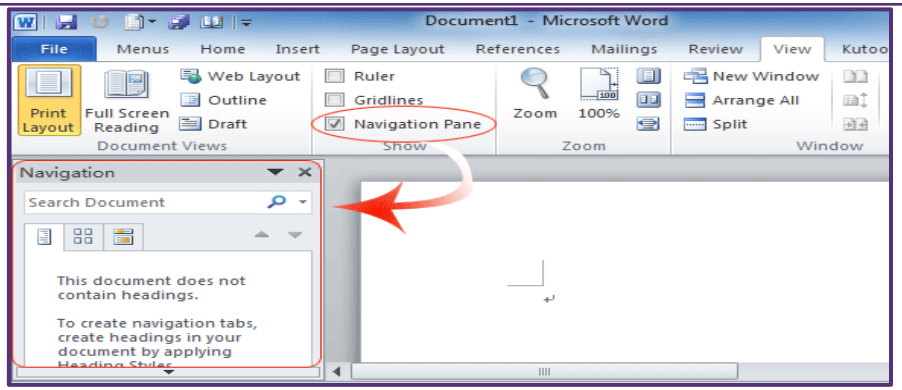
The navigation pane helps users quickly find topics and skip around the manual. To open the navigation pane, please click on the View tab at the top of the screen and check the "Navigation Pane" checkbox (located towards the left of View ribbon). The navigation pane will slide in from the left side of the screen. Once inside the Navigation pane, please click on the Headings tab to view major topics, subtopics and subsections. By clicking on any of these, the user is taken to the corresponding page in the manual. The following screenshots illustrate how to enable the navigation pane depending on the Word software version being used.

BENEFITS OF USING THE NAVIGATION PANE

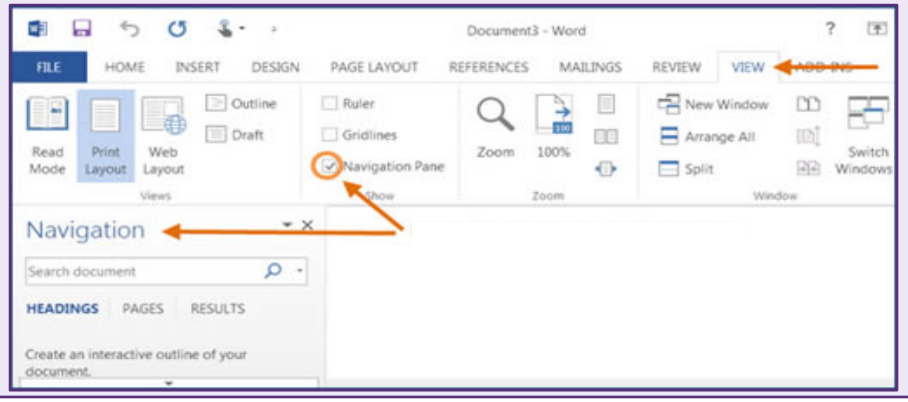
1. Users do not have to scroll back to the table of contents to skip around the guide.
2. Navigation pane includes more subtopics and subsections than the table of contents.



← DOCUMENT MAP WORD 2007



← NAVIGATION PANE WORD 2010



← NAVIGATION PANE WORD 2017

TRAINING RESOURCES

In each module, two places where users can access training resources are in the "*Resources*" column of each Learning Objectives table and Section II titled, "*Training Resources Menu*."

The resources listed in Learning Objectives table are 'hyperlinks,' which is why they appear in blue font. These are functional links that users can click on and retrieve desired content. This function will require internet access. As with the Table of Contents, users may click on these resources by:

1. Hovering mouse over desired resource
2. Holding down the Ctrl button on computer/laptop keyboard
3. Using the left button on mouse to click on resource

Section II of each module provides an extensive list of resources. Users can use the interactive menu provided by using the Ctrl button to click on the module label or the text in the light purple boxes as shown in the image below.

ADDITIONAL BUTTONS

Section II in each module has several pages of resources. Go back to Section I quickly by clicking on this button:

BACK TO SECTION I

As you scroll through Section II, quickly go back to the Training Resources Menu by clicking on this button found at the bottom of each page:

Main Menu

To click on the orange buttons, follow the three steps listed on this page

←

DISCLAIMER

OPWDD and NYAEMP have done their due diligence in preparing this guide using subject matter experts both inside and outside of the developmental disabilities field. While all attempts are made to provide accurate, current, and reliable information, OPWDD and NYAEMP recognize the possibility of human or mechanical error. OPWDD and NYAEMP do not control or guarantee the accuracy, relevance, timeliness, or completeness of information contained in a linked site. OPWDD and NYAEMP also do not endorse the organizations or individuals maintaining sites that we link, any views they express, or any products/services they offer. Readers should be aware that website URL links may change between the times this material is being read and users attempt to access the materials or when resources are developed. OPWDD and NYAEMP urge independent site-specific verification of the information contained herein. All information should be taken as educational and their currency limited. Therefore, OPWDD and NYAEMP, their employees, officers, and agencies make no representations as to the accuracy, completeness, currency or suitability of the information of resources cited and materials recommended by this guide, and disclaim any express or implied warranty as to the same. The resources contained herein may not be suitable for all your staff and are recommended as a starting point; this guide is not the final authority on any of the topics herein. For the purposes of treatment, operations, legal, strategy and implementation, OPWDD and NYAEMP advise all readers to engage the appropriate professional to discuss your specific issue. OPWDD and NYAEMP assume no liability for damages resulting from the use or misuse of any information contained or disclosed in this guide.

MODULE 1: Person-Centeredness and Communication

Section I

Module Overview: This module teaches the fundamentals of person-centeredness and communication. At the end of this module, learners will be able to:

- Advocate on behalf of the individual
- Value informed choice, the mission of the Office for People with Developmental Disabilities (OPWDD), and ethics and conflict of interest
- Define person-centered planning
- Demonstrate belief in person with developmental disability
- Recognize individual and family needs
- Encourage communication and individual engagement techniques
- Promote self-advocacy and the ability to self-direct
- Understand health literacy

Key Concepts: System-centered to person-centered**,** person-centered planning; person-centered practices; personal outcomes; Personal Outcome Measures®; Person-Centered Service Plan (PCSP); Life Plan; dignity of risk and safeguards; rights and responsibilities; ethics and conflict of interest; PRAISE - Promoting Relationships and Implementing Safe Environments; Protection of People with Special Needs Act (PPSNA); Willowbrook; Consumer Advisory Board (CAB); advocacy; informed choice; self-direction; communication and engagement strategies; conflict management; and health literacy.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
PERSON-CENTEREDNESS	1) Discuss the vision, mission, values, and guiding principles of OPWDD. 2) Identify the philosophy and principles of the person-centered planning process. 3) Describe the fundamental principles of person-centered planning practices. 4) Identify the eight hallmarks of person-centered planning. 5) Explain Personal Outcome Measures ® as described by The Council on Quality and Leadership. 6) Describe the role of the care manager in ensuring that the individual's personal outcomes are being addressed. 7) Explain the importance of inclusion, individualization, independence, contribution, and participation. 8) Distinguish between community integration and community inclusion.	• OPWDD Overview, Mission, Values, & Guiding Principles • Person-Centered Planning (OPWDD) • What is Person-Centered Planning? PowerPoint-developed by Shelly Voelker, M.Ed, Ed.S for children who are deaf and have multiple disabilities, and is also suitable for adults with developmental disabilities • The Origins of Person-Centered Planning: A Community of Practice Perspective (2000) – Connie Lyle O' Brien & John O'Brien • Eight Essential Hallmarks of Person Centered Planning • Personal Outcome Measures® The Council on Quality and Leadership • Supporting Person Centered Outcomes: An Introduction to Person Centered Planning Participant Manual (OPWDD, 2014) • Supporting Person Centered Outcomes: An Introduction to Person Centered Planning Instructor's Manual (OPWDD, 2014) • Supporting Person Centered Outcomes: An Introduction to Person Centered Planning PowerPoint (OPWDD, 2014)

	9) Identify the role of the care manager in the person-centered process and plan development. 10) Describe the role of assessment in the person-centered planning process and plan. 11) In the context of person-centeredness, evaluate: a. Dignity of risk b. Ethics c. Conflict of interest d. Rights and responsibilities e. Safeguards 12) Explain the rights and responsibilities of the person receiving support as listed in Regulation 633.4. 13) Explain the rights of the individual in Person-Centered Planning. 14) Explain the relationship of Person-Centered Planning to the Person-Centered Service Plan. 15) Describe the Person-Centered Service Plan (PCSP). 16) Explain the relationship of the Person-Centered Service Plan (PCSP) to the Life Plan.	• Role of Assessment in the Person-Centered Planning Process (OPWDD) • Standards for Person-Centered Planning and Self-Direction in Home and Community-Based Services Programs: Guidance to HHS Agencies for Implementing Principles of Section 2402(a) of the Affordable Care Act • What is meant by person-centered approaches, thinking and planning? Michael Smull (2009) - Interview (video: 5m:47m) or Important to and for. Michael Smull (2011). Video (13m) • Rights and Responsibilities of Persons Receiving Supports and Services OPWDD NYCRR 633.4 • Person-Centered Planning Rights Notice (OPWDD) • Person-Centered Planning and the rights of the individual. OPWDD Administrative Memorandum -#2014-04 for individuals living in OPWDD certified Home Community Based- Settings (HCBS) • Person-Centered Service Plan (PCSP) OPWDD • HCBS Toolkit OPWDD

	17) Identify the requirements of a Person-Centered Service Plan (PCSP). 18) Explain the role of the care manager to obtain and incorporate the Coordinated Assessment System (CAS) report in the Person-Centered Service Plan (PCSP).	
COMMUNICATION & ENGAGEMENT ❖ Putting People First; ❖ PRAISE *(Promoting Relationships and Implementing Safe Environments)*; ❖ Protecting People from Harm & Reporting Requirements; ❖ Willowbrook ❖ Advocacy ❖ Care manager communication & engagement as part of a team	**Putting People First** 1) Discuss how *putting people first* means supporting positive relationships, showing respect, and always working to ensure the person's best interests; and individual goals should always drive the approach to supporting every individual. **PRAISE & Protecting People from Harm** 2) Explain why "person-first" language is important while speaking with and about individuals; and identify an example that violates the "person-first" concept. 3) Describe in their own words the various Reportable Incidents and Notable Occurrences that are described in the course. 4) Discuss the responsibilities of every employee to protect individuals served from harm -	**Putting People First** • OPWDD People First Care Coordination • OPWDD Putting People First: Raising Expectations | Changing Lives **PRAISE & Protecting People from Harm** • PRAISE (Promoting Relationships and Implementing Safe Environments) OPWDD Training Curricula **Incident Management & Reporting** • Incident Management (OPWDD) • Part 624 and Part 625 Handbook (OPWDD)

	recognize and stop abuse as well as protect peoples' rights. 5) Demonstrate an awareness of the new regulations, definitions, and reporting requirements in place as a result of the implementation of the Protection of People with Special Needs Act (PPSNA). **Willowbrook** 6) Explain the legal advocacy role, including the Consumer Advisory Board (CAB), in pursuing individual plan changes and system change. **Advocacy** 7) Advocate for people with intellectual and developmental disabilities. **Care manager Communication & Engagement as part of a Team** 8) Explain why care coordination staff require excellent communication skills. 9) List best practices for communicating with individuals face-to-face, by phone, and email. 10) List best practices for communicating with the individual and her/his interdisciplinary team. 11) Discuss how body language and tone affect communication.	**Willowbrook** OPWDD Beyond Willowbrook **Advocacy** • Be Your Own Advocate (OPWDD) • Disability Rights NY **Care manager Communication & Engagement as part of a Team** • Care Coordination Fundamentals: Teacher Guide. l Module 9 • Care Coordination Fundamentals: Student Exercise Book. Module 9 • Person and Family Engagement Strategy: Communication; Preferences and Values, Collaboration, and Engagement; Health Literacy (CMS, 2016)

	12) Demonstrate basic conflict management skills as needed to deliver excellent person-centered services.	
HEALTH LITERACY	1) Explain health literacy. 2) Determine the implicit and explicit needs of individuals. 3) Evaluate the impact of health literacy on wellness and disease management.	• Health literacy definition, capacity, skills, strategies to improve health literacy, guidelines, laws, & standards Centers for Disease Control and Prevention (CDC). • Health literacy toolkits, universal precautions, health literacy barriers, access, and support services.
SELF-DETERMINATION, SELF-DIRECTED SUPPORTS, ADVOCACY, & INFORMED CHOICE	1) Facilitate an individual's ability to self-direct. 2) Advocate for an individual based on his/her needs and desires. 3) Describe the concept of informed choice. 4) Support informed decision-making as a strategy for selecting meaningful choices.	• Self-Direction (OPWDD) • Self-direction services and supports. Centers for Medicare and Medicaid (CMS) • Standards for Self-Direction, pages 8 – 12. • Advocacy OPWDD • Informed Choice Manual OPWDD (2012) • Informed Choice PowerPoint OPWDD (2012) • Informed / Shared Decisions: American Academy of Communication in Healthcare • Strengths and Risk Inventory: OPWDD Person-Centered Quality Committee, 2013)

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 1: PERSON-CENTEREDNESS AND COMMUNICATION

Books, Manuals, Reports, and Regulatory Guidance

References

Person-Centeredness | Communication | Health Literacy

Web Resources

Videos, Webinars, and PowerPoints

BACK TO SECTION I

PERSON-CENTEREDNESS AND COMMUNICATION

Main Menu

BOOKS, MANUALS, REPORTS, AND REGULATORY GUIDANCE

1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher's Manual*.

1199SEIU Training and Employment Funds and Primary Care Development Corporation Care (2014). *Care Coordination Fundamentals: Student Exercise Book.*

Amado, A. N., & Mc Bride, M. (2001). *Increasing Person-Centered Thinking: Improving the Quality of Person-Centered Planning: A Manual for Person-Centered Planning Facilitators.* Minneapolis, Minnesota: University of Minnesota, Institute on Community Integration. Retrieved from: https://rtc.umn.edu/docs/pcpmanual1.pdf

Medicaid.gov: https://www.medicaid.gov/medicaid/hcbs/downloads/q-and-a-hcb-settings.pdf
HCBS Final Regulations 42 CFR Part 441: Questions and answers regarding Home and Community-Based Settings (HCBS)

New York State - Office for People With Developmental Disabilities (NYS-OPWDD)

OPWDD offers numerous resources regarding person centeredness, communication, and People First Care Coordination. These are essential reading for the Care Coordination Organizations in preparation for developing care manager training.

1. **Home Based-Community Settings Toolkit**: https://opwdd.ny.gov/opwdd_services_supports/HCBS/hcbs-settings-toolkit
2. **Informed Choice Participant Manual (2012):** https://opwdd.ny.gov/opwdd_careers_training/training_opportunities/resources_for_providers_and_instructors/training_curricula/medicaid_service_coordination/informed_choice_participants_manual

BOOKS, MANUALS, REPORTS, AND REGULATORY GUIDANCE

3. **Informed Choice Power Point (2012):**
   https://opwdd.ny.gov/opwdd_careers_training/training_opportunities/resources_for_providers_and_instructors/training_curricula/medicaid_service_coordination/informed_choice_powerpoint
4. **OPWDD NYCRR Informed Choice Participant Manual: Rights and Responsibilities of Persons Receiving Supports and Services**
   https://opwdd.ny.gov/opwdd_careers_training/training_opportunities/resources_for_providers_and_instructors/training_curricula/medicaid_service_coordination/informed_choice_participants_manual
5. **OPWDD Administrative Memorandum - #2014-04:**
   https://opwdd.ny.gov/sites/default/files/documents/admin_memo_2014-04.pdf
   Subject: OPWDD Home and Community Based Settings Preliminary Transition Plan Implementation
6. **People First Care Coordination**: https://opwdd.ny.gov/opwdd_services_supports/care_coordination_organizations
   a. Cultural and Linguistic Competence
   b. OPWDD Language Access Plan
   c. Person-Centered Planning Resources
   d. Supports and Services: Self Direction
   e. Supporting Person Centered Outcomes: An Introduction to Person Centered Planning Participant Manual (OPWDD, 2014)
   f. Supporting Person Centered Outcomes: An Introduction to Person Centered Planning Instructor's Manual (OPWDD, 2014)
7. **Person Centered Planning**: https://opwdd.ny.gov/opwdd_services_supports/person_centered_planning

BOOKS, MANUALS, REPORTS, AND REGULATORY GUIDANCE

8. **PRAISE (Promoting Relationships and Implementing Safe Environments):** https://opwdd.ny.gov/opwdd_careers_training/training_opportunities/resources_for_providers_and_instructors/training_curricula/praise/instructor-manual
9. **Overview of Services for Willowbrook Class Members:** https://opwdd.ny.gov/opwdd_resources/willowbrook_class/overview_of_services_for_willowbrook_class_members
10. **Self-Direction:** https://opwdd.ny.gov/selfdirection

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Lunt, J., & Hinz, A. (Eds.). (2011). *Training and practice in person centered planning: A European perspective*. Retrieved from http://www.personcentredplanning.eu/images/New_Paths_publication.pdf

Lyle O'Brien, C., & O'Brien, J. (2000). The history of person-centered planning: A community of practice perspectives. Retrieved from: http://www.nasddds.org/uploads/documents/The_Origins_of_Person_Centered_Planning_Obrien_and_Obrien.pdf
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WEB RESOURCES

1. **Administration on Community Living (ACL) National Network of University Centers for Excellence in Developmental Disabilities Education, Research & Service:** https://www.acl.gov/programs/aging-and-disability-networks/national-network-university

2. **Administration on Community Living (ACL):** https://www.acl.gov/news-and-events/acl-blog/person-centered-planning-and-self-direction-hhs-issues-new-guidance
   Person-Centered Planning and Self-Direction: HHS Issues New Guidance on Implementing Section 2402(a) of the Affordable Care Act

3. **Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services**: http://www.ahrq.gov
   Provides extensive resources addressing cultural and linguistic competence and health disparities.

WEB RESOURCES

4. **Center for Collaboration, Motivation, and Innovation (CCMI)**: https://centrecmi.ca/
   Offers a broad range of resources including webinars, information, and tools such as support informed decision making, motivational interviewing, health literacy, and person- and family- centered care.

5. **Centers for Disease Control and Prevention**: https://www.cdc.gov/healthliteracy/learn/index.html

6. **Centers for Medicare and Medicaid Services (CMS):** Self-Direct Supports: https://www.medicaid.gov/medicaid/ltss/self-directed/index.html

7. **Citizen-Centered Leadership**: http://citizencenteredleadership.org/
   Citizen-Centered Leadership™ is a resource and learning center focused on "preserving integrity of landmark advances in the Inclusion movement while stepping boldly away from the traditional practices that hold people with disabilities back from full citizenship expression. It is a portal that invites you to explore what others are thinking and doing in the areas of person-centered planning, leadership development, community-building, employment and organizational planning as they relate to supporting the ideals of citizenship with and on behalf of people with disabilities who are vulnerable to social exclusion." Project Director is Carol Blessing and the site presents some of the leading figures and experts in the person-centered and inclusion movement, including John O'Brien, Michael Smull, Beth Mount, Denise Bissonette, Jack Pearpoint, Connie Ferrell, Mike Green, and Diana Whitney, among others.

8. **Commonwealth Fund:** http://www.commonwealthfund.org
   Offers multiple publications related to health care delivery system reform, consumer engagement, health care coverage and access, health disparities, and health literacy.

WEB RESOURCES

9. **Cornell University ILR School, Employment and Disability Institute, Person Centered Planning Education Site**: http://personcenteredplanning.org/index.cfm
   Provides person-centered planning resources including courses, tools, maps, webinars, presentations, and information.

10. **Cornell University, Yan-Tang Institute on Employment and Disability**: http://www.yti.cornell.edu/
    The mission of the Yang-Tan Institute on Employment and Disability advances knowledge, policies, and practice to enhance equal opportunities for all people with disabilities.

11. **Disability Rights New York (DRNY):** http://www.drny.org/
    Disability Rights New York (DRNY) is the Protection & Advocacy System and Client Assistance Program (P&A/CAP) for persons with disabilities in New York. As the P&A/CAP for New York, DRNY advocates for the civil and legal rights for New Yorkers with disabilities.

12. **DiversityRx**'s mission is to improve the accessibility and quality of health care for minority, immigrant, and indigenous communities. This website is helpful to care coordination organizations and care managers who are interested in developing and providing health and support services that are responsive to the cultural and linguistic differences presented by diverse populations: https://www.diversityrx.org/

13. **Institute for Community Inclusion (ICI**): http://www.communityinclusion.org/
    ICI offers training, clinical, and employment services, conducts research, and provides assistance to organizations to promote inclusion of children and adults with disabilities in school, work, and community activities.
    Key Interest Areas include:
    - Employing people with disabilities in community settings

WEB RESOURCES

- Supporting children and young adults with special health care needs
- Accessing general education, and transition from school to adult life
- Expanding local recreation and school activities to include people with disabilities
- Promoting technology that aids participation in school/community/work activities
- Building organizations' ability to serve culturally diverse people with disabilities
- Examining the impact of national and state policies on people with disabilities and their families

14. **Institute of Medicine (IOM)** is now known as the **National Academies of Sciences, Engineering and Medicine** – please see # 16 below.

15. **Joint Commission:** http://www.jointcommission.org/PatientSafety/HLC/
    Offers multiple publications related to a broad range of person-centered communication and health literacy such as effective communication, health equity resources, health literacy, and informed consent.

16. **National Academies of Sciences, Engineering, and Medicine** (the National Academies) is the new name for **Institute of Medicine (IOM):** http://www.nationalacademies.org/hmd/Global/Topics/Health-Services-Coverage-Access.aspx
    Offers numerous publications related to communication, health disparities, and health literacy.

17. National Council on Disability
    The NCD has as its strategic plan to advance the goals of the Americans with Disabilities Act by promoting policies, programs, practices, and procedures that guarantee equal opportunity and provide for economic self-sufficiency, independent living, and inclusion and integration into all aspects of society for individuals with disabilities. The strategic plan is available on their website along with other disability related resources.

18. **National Health Law Program:** http://www.healthlaw.org/
    Offers resources related to language access, racial disparities, and other topics.

WEB RESOURCES

19. **New York State - Office for People With Developmental Disabilities (NYS-OPWDD):** https://opwdd.ny.gov/
    The New York State Office for People With Developmental Disabilities (OPWDD) is responsible for coordinating services for more than 130,000 New Yorkers with developmental disabilities, including intellectual disabilities, cerebral palsy, Down syndrome, autism spectrum disorders, and other neurological impairments.

20. **Rutgers – The Boggs Center on Developmental Disabilities**: http://rwjms.rutgers.edu/boggscenter/
    The Boggs Center is New Jersey's federally designated University Center for Excellence in Developmental Disabilities and is part of Rutgers Robert Wood Johnson Medical School, Department of Pediatrics. Since its inception in 1983, The Center has emphasized a community based, lifespan approach to meeting the needs of individuals with developmental disabilities and their families. The Boggs Center provides community and student training and technical assistance, conducts research, and disseminates information and educational materials. Activities of The Boggs Center are guided by Consumer Advisory Council, and partnerships with people with disabilities, families, state and community agencies, and policy makers

21. **The Council on Quality and Leadership (CQL):** https://www.c-q-l.org/
    For more than 40 years, CQL | The Council on Quality and Leadership, has been a leader in working with human service organizations and systems to continuously define, measure and improve quality of life and quality of services. We offer training, accreditation, consultation and certification services to organizations and systems that share our vision of dignity, opportunity and community. CQL developed the Personal Outcome Measures® as a powerful tool to ensure supports and services are truly person-centered and Basic Assurances® which are a balance between concerns for individual Health, Safety and Security and the necessity of social constructs such as Respect, Natural Supports and Social Networks to ensure sustainable outcomes for people.

WEB RESOURCES

22. **The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (The National CLAS Standards):**
    https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53
    Aims to improve health care quality and advance health equity by establishing a framework for organizations to serve the nation's increasingly diverse communities.

23. **University of Minnesota, Institute on Community Integration**: https://ici.umn.edu/index.php?topics/view/21/
    The University of Minnesota is one of our nation's Centers for Excellence in Developmental Disabilities and houses several free resources as well as courses and articles that require a cost.

24. **University of New Hampshire | Institute on Disability (UCED):** https://iod.unh.edu/about-institute
    The Institute on Disability was established in 1987 to provide a university-based focus for the improvement of knowledge, policies, and practices related to the lives of people with disabilities and their families and is New Hampshire's University Center for Excellence in Disability (UCED). Located within the University of New Hampshire, the IOD is a federally designated center authorized by the Developmental Disabilities Act. Through innovative and interdisciplinary research, academic, service, and dissemination initiatives, the IOD builds local, state, and national capacities to respond to the needs of individuals with disabilities and their families. The Institute on Disability also developed and implements START (Systematic, Therapeutic, Assessment, Resources, & Treatment) which has been adopted by New York State Office for People with Developmental Disabilities (OPWDD) to support individuals with behavioral health needs.

WEB RESOURCES

25. **Westchester Institute for Human Development (WIHD):** http://www.wihd.org/
    Westchester Institute for Human Development (WIHD) is a leader in the areas of disability and human development. WIHD addresses major social and health issues by developing and delivering medical, clinical and support services to individuals, their families and caregivers. WIHD operates The Community Support Network (CSN) which is one of the Hudson Valley's resource centers for current information, referral assistance, and training on services available throughout the lifespan. CSN serves individuals with special needs and their families: from infancy to preschool, throughout the school-age years, and into the adult world of higher education and employment. The CSN assists individuals, families and professionals seeking educational, medical, financial, vocational, or recreational services. The CSN also provides workshops and training, on-line educational materials and newsletters, as well as regular communication about emerging topics, to promote best practice in service provision to individuals with disabilities and their families.

VIDEOS, WEBINARS, AND POWERPOINTS

1. Inclusion Press (Producer). (2008). *My life, my choice: stories, struggles and successes with person-directed living* [DVD]. Available from www.inclusion.com/dvdmylife.html. **($)**

2. Rudd, R. (2015, April 10). *Health literacy* [Video file]. Retrieved from https://youtu.be/4N8QxVkjHRY (59m: 59s).

3. The Joint Commission and the U.S. Department of Health & Human Services (HHS) Office for Civil Rights worked together to support language access in health care organizations with the videos Improving Patient-Provider Communication: Joint Commission Standards and Federal Laws Parts 1 and 2. These videos highlight what is required by Joint Commission standards as well as Federal civil rights laws with respect to patients who are deaf/hard of hearing or limited English proficient. A list of resources and tools that health care organizations can use to build effective language access programs accompany the video.

VIDEOS, WEBINARS, AND POWERPOINTS

- The Joint Commission. (2009, November 10). *Improving patient-provider communication part 1* [Video file]. Retrieved from https://www.youtube.com/watch?v=5mR0Vk2zHqs
- The Joint Commission. (2009, November 10). *Improving patient-provider communication part 2* [Video file]. Retrieved from https://www.youtube.com/watch?v=JJc6NQ4PzyM

4. Smull, M. (2011, March 18). *Important to and for* [Video file]. Retrieved from https://www.youtube.com/watch?v=VDqERIxM4HM (13m)

5. Smull, M. (2009, November 30). *What is person-centered planning and thinking* [Video file]. Retrieved from https://www.youtube.com/watch?v=tvANuym5VXY (5m 47s).

6. Voelker, S. (n.d.). What is Person-Centered Planning? Developed for the Florida Outreach Project. Retrieved from http://deafblind.ufl.edu/files/2012/08/What_is_Person-Centered_Planning.pdf

MODULE 2: Relationship Building and Communication Within Care Coordination Team and Among Providers

Section I

Module Overview: This module focuses on the importance of supporting the person with developmental disabilities as members of the care coordination team. Focus is placed on the roles and relationships of the various care coordination team members; and the importance of clear and timely communication is emphasized. In addition to communication skills, strategies for conflict resolution and mediation are presented. At the end of this module, learners will be able to:

- Build positive relationships among team members
- Promote communication among team members
- Demonstrate ability to listen, communicate verbally and in writing and facilitate meetings
- Manage team conflict and mediation

Key Concepts: People First Care Coordination (PFCCO); Inter-professional Collaboration; hand-off communication; Life Plan; transparency; enhanced technology; conflict resolution; mediation.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
PEOPLE FIRST CARE COORDINATION OVERVIEW	1) Explain what is meant by People First. 2) Describe the role of the care manager in People First Care Coordination. 3) Explain the benefit of enhanced technology in the team approach.	• People First Care Coordination (OPWDD) • Introduction to People First Care Coordinator – Interview with Commissioner Delaney (September 2017) OPWDD video provides a brief overview of the care manager's role on the care coordination team, the use of enhanced technology to improve communication, provide needed services, and promote transparency (3m: 46s). • Improved Care Coordination and Benefits of EHR
COMMUNICATION WITH CARE COORDINATION TEAM MEMBERS, THE INDIVIDUAL, AND FAMILY	1) Describe the requirements for care planning meetings. 2) Identify the requirements for Communicating and Sharing Information with I/DD CCO/HH Enrollees. 3) Identify the skills necessary when communicating among and with members of the care coordination team, the individual, and family. 4) Define Inter-professional collaboration. 5) Define "hand-off" communication.	• Requirements for Care Planning Meetings NYSDOH & OPWDD CCO/HH-I/DD Application. (Oct 6, 2017). Pages 25-26. • Requirements for Communicating and Sharing Information with I/DD CCO/HH Enrollees NYSDOH & OPWDD CCO/HH-I/DD Application (Oct 6, 2017). Pages 33-34. • Inter-professional Collaboration. PowerPoint developed by U.S. Department of Health and Human Services (HSS) • Communicating as Part of an Interdisciplinary Team. Care Coordination Fundamentals. Pages 131-141. • Core Competencies of Inter-professional Collaboration and Practice (2011) • **Inter-professional Definition:** The ability of the care manager and other professionals, as well as direct support workers, community health workers,

	6) Explain consequences of inadequate hand-off communication. 7) Provide examples of how the care manager can be effective in averting a potential re-hospitalization or avoidable Emergency Room visit.	persons with developmental disabilities, families, and caregivers to work effectively within and between professions and with individuals' families, caregivers and communities to provide appropriate and effective supports and services. Adapted from: (1) Definition of **hand-off communication** and (2) consequences of inadequate hand-off communication. The Joint Commission, September 2017). • 8 Tips for High Quality Hand-offs Infographic
CONFLICT RESOLUTION AND MEDIATION	1) Identify potential barriers to Inter-professional collaboration on the care coordination team. 2) Identify solutions to address these barriers. 3) Demonstrate basic conflict resolution skills. 4) Apply mediation skills to avert or minimize care team conflict.	• Barriers and Solutions to Inter-professional Collaboration. PowerPoint developed by U. S. Department of Health and Human Service. Module 4: Inter-professional Collaboration - Slides 18 and 19 • (1) Facilitating Conflict Resolution (2) Promoting and Modeling Teamwork PowerPoint developed by Team STEPPS 2.0 for Long-Term Care • Mutual Support PowerPoint developed by Team STEPPS 2.0 for Long-Term Care

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 2: RELATIONSHIP BUILDING AND COMMUNICATION RESOURCES

BACK TO SECTION I

RELATIONSHIP BUILDING AND COMMUNICATION WITHIN CARE COORDINATION TEAM AND AMONG PROVIDERS

Main Menu

BOOKS, MANUALS, AND REPORTS

Inter-professional Education Collaborative Expert Panel. (2011). *Core competencies for Inter-professional collaborative practice: Report of an expert panel*. Retrieved from https://www.aamc.org/download/186750/data/core_competencies.pdf

Marcus, L., Dorn, B. C., & McNulty. B. (2013). *Renegotiating health care: Resolving conflict to build collaboration* (2nd Eed.). San Francisco, CA: Jossey Bass. **($)**

New York State Department of Health & New York State Office for People with Developmental Disabilities. (2016). *CCO/HH-I/DD Application to serve people with intellectual and developmental disabilities*. Retrieved from https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/docs/hhI/DD_application_part_1.pdf

Primary Care Development Corporation and 1199 SEIU Training and Employment Fund (2014). *Care coordination fundamentals: Teacher guide*. Retrieved from https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Teacher-Manual-FINAL-web.pdf

- Module 2: What it means to be part of a team. Pages 29-41.
- Module 9: Communicating as part of an interdisciplinary team. Pages 133-141.

Primary Care Development Corporation and 1199 SEIU Training and Employment Fund (2014). *Care coordination fundamentals: Student exercise book*. Retrieved from https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Student-Exercise-Book-FINAL-web.pdf. Module 2: Accessing Patient Resources.

BOOKS, MANUALS, AND REPORTS

Schuldt, L. M. (Ed.). (2010). *Improving communication during transitions in care.* Oakbrook Terrace, IL: Joint Commission Resources, Inc. **($)**

Summers, N. (2016). *Fundamentals of case management practice: Skills for human services* (5th ed.). Boston, MA: Cengage Learning. Section 3: Effective Communication, pages 149–263. **($)**

U.S. Department of Health and Human Services. (2015). *Multiple chronic conditions: A framework for education and training.* - Retrieved from https://www.hhs.gov/sites/default/files/ash/initiatives/mcc/education-and-training/framework-curriculum/framework-curriculum.pdf

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Agency for Healthcare Research and Quality. (2012). *Coordinating care for adults with complex care needs in the patient-centered medical home: challenges and solutions* (AHRQ Publication No. 12-0010). Retrieved from http://pcmh.ahrq.gov/sites/default/files/attachments/Coordinating%20Care%20for%20Adults%20with%20Complex%20Care%20Needs.pdf.

Bayliss, E. A., Bonds, D. E., Boyd, C. M., Davis, M. M., Finke, B., Fox, M. H., & Stange, K. C. (2014). Understanding the context of health for persons with multiple chronic conditions: moving from what is the matter to what matters. *Annals of Family Medicine, 12*(3), 260-269. doi:10.1370/afm.1643

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Bell, B., & Thornton, K. (2011). From promise to reality achieving the value of an EHR. *Healthcare Financial Management*, *65*(2), 51-56. Retrieved from: https://www.researchgate.net/publication/50829665_From_promise_to_reality_achieving_the_value_of_an_EHR

Bennett, D., Arthur-Kelly, M., Foreman, P., & Neilands, J. (2014). Tailoring communication supports for students with multiple and severe disability using a mentor-model approach: Four case studies from classrooms in special schools. *Developmental Neurorehabilitation, 17*(2), 90–98. doi:10.3109/17518423.2013.861528 **($)**

Bridges, D. R., Davidson, R. A., Odegard, P. S., Maki, I. V., & Tomkowiak, J. (2011). Inter-professional collaboration: Three best practice models of inter-professional education. *Medical Education Online, 16*(1) 1-10. doi:10.3402/meo.v16i0.6035

Brown, J., Lewis, L., Ellis, K., Stewart, M., Freeman, T. R., & Kasperski, M. J. (2011). Conflict on inter-professional primary health care teams – can it be resolved? *Journal on Inter-professional Care, 25*(1), 4-10. doi:10.3109/13561820.2010.497750

Bujold, M., Pluye, P., Légaré, F., Haggerty, J., Gore, G. C., Sherif, R. E., & Wensing, W. (2017). Decisional needs assessment of patients with complex care needs in primary care: A participatory systematic mixed studies review protocol. *BMJ Open, 7*(11). doi:10.1136/bmjopen-2017-016400

Collier, M., Keefe, E. B., & Hirrel, L. A. (2015). Listening to parents' narratives: The value of authentic experiences with children with disabilities and their families. *School Community Journal*, *25*(2), 221- 242. Retrieved from http://www.adi.org/journal/2015fw/CollierKeefeHirrelFall2015.pdf

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Dorn, B., Marcus, L., & McNulty, E. J. (2013). Four steps to resolving conflict in health care. *Harvard Business Review.* Retrieved from https://hbr.org/2013/10/four-steps-to-resolving-conflicts-in-health-care

Hake, S., & Shah, T. (2011). Negotiation skills for clinical research professionals. *Perspectives in Clinical Research, 2*(3), 105-108. doi:10.4103/2229-3485.83224

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Institute for Healthcare Improvement. (2014). *Overview of person-and-family-centered care*. Retrieved from http://www.ihi.org/Topics/PFCC/Pages/Overview.aspx

Institute for Healthcare Improvement. (2014). *In-person training: Transforming the primary care practice*. Retrieved from http://www.ihi.org/education/InPersonTraining/TransformPrimaryCare/Pages/default.aspx

Kieckhefer, G. M., Trahms, C. M., Churchill, S. S., Kratz, L., Uding, N., & Villareale, N. (2014). A randomized clinical trial of the building on family strengths program: An education program for parents of children with chronic health conditions. *Maternal Child Health Journal*, *18*(3), 563–574. doi:10.1007/s10995-013-1273-2 **($)**

Légaré, F., Stacey, D., Pouliot, S., Gauvin, F., Desroches, S., Kryworuchko, J., & Graham, I. D. (2011). Inter-professionalism and shared decision-making in primary care: a stepwise approach towards a new model. *Journal of Inter-professional Care, 25*(1), 18-25. doi:10.3109/13561820.2010.490502

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National Committee for Quality Assurance. (2013). *Integrated care for people with Medicare and Medicaid: a roadmap for quality*. Retrieved from http://www.ncqa.org/portals/0/public%20policy/NCQAWhitePaper-IntegratedCareforPeoplewithMedicareandMedicaid.pdf.

Okun, S., Schoebaum, S. C., Andrews, D., Chidambaran, P., Chollette, V., Gruman, J., & Henderson, D. (2014). *Patients and health care teams forging effective partnerships*. Washington, DC: Institute of Medicine. Retrieved from http://macyfoundation.org/docs/macy_pubs/Patients_Forging_Effective_Partnerships_FINAL_rev15Dec14.pdf

Parekh, A. K., Goodman, R. A., Gordon, C., & Koh, H. K. (2011). Managing multiple chronic conditions: a strategic framework for improving health outcomes and quality of life. *Public Health Repository, 126*(4), 460-471. doi:10.1177/003335491112600403 **($)**

Schaefer, J., Miller, D., Goldstein, M., & Simmons, L. (2009). *Partnering in self-management support: A toolkit for clinicians*. Cambridge, MA: Institute for Healthcare Improvement. Retrieved from http://www.improvingchroniccare.org/downloads/selfmanagement_support_toolkit_for_clinicians_2012_update.pdf

Schmitt, M. H., & Stewart, A. L. (2011). Commentary on "Inter-professional ethics-a developing field?" a response to Banks et al. (2010). *Ethics and Social Welfare, 5*(1), 72-78. doi:10.1080/17496535.2011.546181 **($)**

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Tozer, R., Atkin, K., & Wenham, A. (2013). 'My brother likes meeting new people, but don't ask him any direct questions': Involving adults with autism plus learning disability in a qualitative research project. *British Journal of Learning Disabilities, 42*(4), 292-300. doi:10.1111/bld.12073 **($)**

Workforce Competencies of Patient-Centered Health Care Delivery Through Health IT: A Framework for Practice Transformation. (n.d.) Retrieved from http://www.healthit.gov/sites/default/files/hie_role-based_competencies.pdf

WEB RESOURCES

1. **Health IT:** www.healthIT.gov
   For information regarding improved care coordination and electronic health records access the following link: https://www.healthit.gov/providers-professionals/improved-care-coordination

2. **The Joint Commission:** www.jointcommission.org
   The joint commission has a broad range of resources including videos, fact sheets, on-line courses, live conferences and seminars, Sentinel Alerts, and cutting-edge information regarding the importance of Inter-professional teamwork and communication- please also refer to JCR and JCI below. Some resources that may be helpful to Care Coordination Organizations / Health Homes in developing training and curricula for care managers and relationship building and communication as part of the care coordination team and among providers include:
   - Facts Regarding Communication Hand-Off Project
   - Tackling Miscommunication Among Care Givers (November, 2017)
   - 8 Tips for High Quality Hand-Offs Infographic

WEB RESOURCES

3. The Joint Commission Resources (JCR)
   The Joint Commission Resources (JCR) is a global, knowledge-based organization providing innovative solutions to help health care organizations across all settings improve patient safety and quality.

4. The Joint Commission International (JCI)
   JCI the international division of JCR, is the leading health care accrediting body outside of the U.S. and has been working with health care organizations, ministries of health, and global organizations in over 80 countries since 1994.

5. U. S. Department of Health and Human Services (HHS)
   HHS has a broad range of helpful topics, webinars, publications and toolkits regarding inter-professional collaboration, inter-professional education and training curricula,

VIDEOS

1. OPWDD. (2017, September 19). *People First Care Coordination: Video 2, CCOs* [Video file]. Retrieved from https://www.youtube.com/watch?v=H8Zy2YW1fAg
   Note: An interview with Acting Commissioner Kerry A. Delaney, who provides a brief overview of the care manager's role on the care coordination team and the use of enhanced technology to improve communication, provide needed services, and promote transparency. (3m: 46s)

2. OPWDD. (2017, November 20). *People First Care Coordination: Care coordination for a full and healthy life* [Video file]. Retrieved from https://www.youtube.com/watch?v=Souxcs4zY5c&feature=youtu.be (20m: 05s).

3. The Joint Commission Center for Transforming Health Care. (2012, June 25). *Targeting Solution Tool™ for hand-off communications* [Video file]. Retrieved from https://www.youtube.com/watch?v=XB5bpFBg_dM (4m:49s)

OTHER

1. Team STEPPS 2.0 for Long Term Care. *Leading teams* [PowerPoint slides]. Retrieved from https://www.ahrq.gov/sites/default/files/wysiwyg/teamstepps/longtermcare/module4/ts2-0ltc_module4_slides_lead.pdf

2. Team STEPPS 2.0 for Long Term Care. *Mutual support* [PowerPoint slides]. Retrieved from https://www.ahrq.gov/sites/default/files/wysiwyg/teamstepps/longtermcare/module6/ts2-0ltc_module6_slides_support.pdf

3. U. S. Department of Health and Human Services (HHS). Multiple Chronic Conditions Initiative. Education and Training Curriculum on Multiple Chronic Conditions. *Module 4: Inter-professional collaboration* [PowerPoint slides]. Retrieved from https://www.hhs.gov/sites/default/files/ash/initiatives/mcc/education-and-training/framework-curriculum/module-4.pdf

MODULE 3: Community Orientation

Section I

Module Overview: This module focuses on the key role the care manager plays in connecting the individual to resources and services in the community. The module provides an overview of the legal and social inclusion mandates that undergird the requirement for "the most integrated setting appropriate to the needs of qualified individuals with disabilities." People First Care Coordination is emphasized, and focus is placed on (1) principles of person-centeredness, choice, quality, and community and (2) aligning the services of OPWDD with other agency and community services within New York State's healthcare system and broader community so that they best address the needs and preferences of the individual. At the end of this module, learners will be able to:

- Connect individuals and families to community resources including housing, transportation and residential preferences
- Support individuals and families as they seek resources in the community
- Coordinate and provide access to long-term care supports and services
- Develop and maintains knowledge of community supports and services

Key Concepts: Integrated Settings; Olmstead; OPWDD Guiding Principles; social inclusion; People First Waiver; People First Care Coordination; continuum of housing options; self-direction; Life Plan; Personal Outcome Measures®; Individual Safeguards/ Individual Plan of Protection (IPOP); Pre-Employment and Employment Services; Employment First; Faith-Based Initiative; Long-Term Supports and Services (LTSS); community resources.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
THE LEGAL MANDATE: ❖ Integrated Settings ❖ ADA ❖ Olmstead v L.C. ❖ Affordable Care Act ❖ People First Waiver	1) Identify and describe key legal decisions and regulatory changes that promote the inclusion of people with developmental disabilities in the most integrated settings appropriate to their needs: a. Americans With Disability Act (ADA) b. Olmstead c. Affordable Care Act (ACA) d. Medicaid Redesign e. Justice Center 2) Define "most integrated setting." 3) Describe Medicaid Home and Community Based Standards (HCBS). 4) Describe OPWDD's Mission, Vision, and Guiding Principles.	• Environment for Change. *OPWDD Statewide Comprehensive Plan 2012 -2016* provides an overview of the ADA, Olmstead decision, ACA, Medicaid Redesign, and Justice Center on services and supports for New Yorkers with developmental disabilities. Pages 6 to 10. • Olmstead Cabinet Update (OPWDD, 2013) OPWDD Power Point that provides a brief overview of Olmstead, definition of "most integrated setting", move to managed care, challenges, and accountability • OPWDD Home and Community Based Standards (HCBS) • OPWDD HCBS Waiver Participant Manual • OPWDD Mission, Vision, Values, and Guiding Principles
THE SOCIAL INCLUSION MANDATE	1) Describe the benefits of social inclusion for people with developmental disabilities. 2) Describe the benefits to our society and community when people with developmental disabilities are fully included.	• Beautiful Justice (2012). In this video, Beth Mount presents person-centered case studies that focus on imagining greater possibilities and full inclusion. (21m:20s). • Social Inclusion for people with intellectual and developmental disabilities. (2015). National Goals 2015 presentation by Matthew Bogenschutz, PhD. (7m:07s).

		• We Have Choices. Produced by The Self-Advocacy Association of New York (SANYS). A documentary on individuals with developmental disabilities across New York State who have used individualized supports in taking greater control of their lives. (28m:45s).
CONNECTING INDIVIDUALS AND FAMILIES TO COMMUNITY RESOURCES: ❖ Housing ❖ Residential ❖ Transportation Preferences	1) Describe the continuum of housing options available to individuals under OPWDD. 2) Explain how to help people access various housing options including: a. Making an informed choice b. Developing an Action Plan to implement the choice c. Readiness planning for independent living d. Budgeting e. Maximizing financial resources for the person 3) Facilitate informed choice of housing options by conducting the following: a. At least annually, engage the individual in a discussion of housing options and whether the person is satisfied with his/her living arrangement and/or whether the person wants to make a change in	• OPWDD Community Connections: Housing Initiatives • OPWDD Criteria for Residential Support • What Does it Mean to Live in My Own Place? • Clearinghouse for information and resources on housing and technical assistance on housing matters • OPWDD Housing Options and Resources • Current Transportation Resources in NYS. Mobility Management Program: Gap Analysis (OPWDD, September, 2016). Pages 6- 7. • New York Housing Resource Center for People with Intellectual/Developmental Disabilities • OPWDD ISS Housing Subsidy

	his/her housing and *document the discussion*. b. Discuss other housing options that the person might want to consider, including non-disability specific settings, *and document*. c. Engage the person's other service providers to work on experiential learning (and visits) to alternative housing options. d. Support the person to create his/her own vision for where he/she wants to live and how he/she wants to live. e. Assess risks and develop strategies to minimize the risks so that person makes an informed choice – Presume Capability! f. Coordinate supports that will help the person to plan for and make this housing change. 4) Identify the criteria for the following residential support categories: a. Emergency Need b. Substantial Need c. Current Need 5) Describe current transportation resources in New York State.	

SUPPORTING INDIVIDUALS AND FAMILIES SEEKING COMMUNITY RESOURCES	1) Demonstrate effective skills and strategies in working with community agencies. 2) Explain how self-direction can provide an individual the flexibility to choose the mix of supports and services that are right for him/her so they can *live the life they want.* 3) Identify resources and supports for individuals and families seeking housing options and supports. 4) Identify and use resource guides to find support services related to the individual's travel training or transportation needs.	• Care Coordination Fundamentals. Module 10, pages 142-157. • Self-Direction Services and Supports (OPWDD) • How People With Intellectual and Developmental Disabilities Can Plan for Their Future Home. Video produced by WIDH. (15m: 11s). • Housing Options and Supports (OPWDD). Website includes information regarding a variety of home supports such as Developmental Disability Regional Offices (DDROs), Community Habilitation, Paid Neighbor, Live-in-Caregiver, Environmental Modifications, Family Care, and Managing Housing Costs • OPWDD Provider Directory provides information regarding transportation and travel training supports as well as other community-based resources
COORDINATING ACCESS TO LONG-TERM SERVICES AND SUPPORTS	1) Define Long-Term Services and Supports. 2) Explain the steps to follow for an individual to access Long-Term Services and Supports.	• Long-Term Services and Supports (Medicaid.gov) • Front Door (OPWDD)

COMMUNITY SUPPORTS AND SERVICES: ❖ Person-Centered Planning ❖ Personal Outcome Measures® ❖ Individual Plan of Protection (IPOP) ❖ Employment First ❖ Faith-Based Initiative ❖ ADA ❖ Barrier-Free	1) Use person-centered planning, tools, and strategies to help identify and support a person's strengths, skills and interests as they connect to community supports and services. 2) Document all services and supports; Funded and Natural/Community Resources in the person's Life Plan. 3) Evaluate risk and the individual's responsibility and ability to calculate risk. 4) Develop Individual Plan of Protection (IPOP). 5) Identify The Council on Quality Leadership (CQL) 21 Personal Outcome Measures® to evaluate the extent to which the individual is achieving valued outcomes. 6) Use Personal Outcome Measures® to evaluate the extent to which the individual is achieving valued outcomes. 7) Serve people in the most integrated settings possible and in the communities where they choose to live. 8) Summarize New York State's Employment First Policy.	• Person-Centered Planning (OPWDD) • Various Person-Centered Planning Methodologies (OPWDD) • Minimum Standards and Requirements for Health Home Life Plans. NYSDOH & OPWDD CCO/HH-I/DD Application, October, 2017. Page 24. • Safeguards, Risks, & Individual Plan of Protection (IPOP). NYSDOH & OPWDD CCO/HH-I/DD Application, October, 2017. Page 23. • Innovations in Employment Supports Trainings - all • SEMP Regulations • Pathway Regulations • Pre-Vocational Regulations • CQL Personal Outcome Measures® Overview • Employment First Policy for New York State (2015). • Faith Based Initiative. • The Americans with Disabilities Act Checklist for Readily Achievable Barrier Removal • Community Connections and Resources (OPWDD) • Guide to Community Based Resources (New York State)

	9) Link the individual who wishes to pursue work to pre-employment and/or employment services that best support his/her needs and wishes. 10) Communicate the array and content of OPWDD pre-employment and employment services. 11) Support individuals to become valued members in the house of faith of their choice by respecting their beliefs, supporting their right to belong to the faith community of their choice, and assisting them in growing and participating fully in the spiritual aspect of their lives. 12) Provide access supports to community resources.	

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 3: COMMUNITY ORIENTATION

BACK TO SECTION I

BOOKS, MANUALS, AND REPORTS

Amado, A. N. (2013). *Friends: Connecting people with disabilities and community members.* Minneapolis, MN: University of Minnesota, Institute on Community Integration, Research and Training Center on Community Living. Retrieved from https://ici.umn.edu/products/docs/Friends_manual.pdf

HCBS Advocacy Coalition. (2016). *HCBS setting rules: How to advocate for truly integrated community settings.* Retrieved from http://www.aucd.org/docs/policy/HCBS/HCBS%20Setting%20Rules%20Settings%20Advocacy%20Final%201%2022%202016.pdf

James, A., & Stanfield, S. (2011). *101 Ways to make friends: Ideas and conversation starters for people with disabilities and their supporters.* Vancouver, British Columbia: Spectrum Society for Community Living. **($)**

New York State Department of Health & New York State Office for People With Developmental Disabilities. (2016). *CCO/HH-I/DD Application to serve people with intellectual and developmental disabilities*. Retrieved from https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/docs/hhI/DD_application_part_1.pdf

New York State Office for People With Developmental Disabilities (OPWDD). (2012). *State-wide comprehensive plan 2012 -2016*. Retrieved from http://www.clmhd.org/img/uploads/file/507_Final_1_4_12.pdf

BOOKS, MANUALS, AND REPORTS

New York State Office for People With Developmental Disabilities (OPWDD). (2016). *Study to design a mobility management program: Gap analysis.* Retrieved from https://opwdd.ny.gov/sites/default/files/documents/NY_OPWDD_Mobility_Management_Gap_Analysis_FINAL_Feb__2017.pdf

Primary Care Development Corporation and 1199 SEIU Training and Employment Funds (2014). *Care coordination fundamentals: Teacher guide*. Retrieved from https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Teacher-Manual-FINAL-web.pdf

Primary Care Development Corporation and 1199 SEIU Training and Employment Funds (2014). Care coordination fundamentals: Student exercise book. Retrieved from: https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Student-Exercise-Book-FINAL-web.pdf.

LEGAL REFERENCES

Americans With Disabilities Act of 1990, Pub. L. No. 101-336, 104 Stat. 328 (1990).

New York State Department of Health. (2011). *New York State Medicaid redesign*. Retrieved from https://www.health.ny.gov/health_care/medicaid/redesign/

New York State Department of Health. (n.d.). *New York 1115 Medicaid waiver information*. Retrieved from https://www.health.ny.gov/health_care/medicaid/redesign/medicaid_waiver_1115.htm

Olmstead v. L. C., 527 U.S. 581 (1999). Patient Protection and Affordable Care Act, 42 U.S.C. § 18001 (2010).

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Amado, A. N., Wesely, E., Stancliffe, R. J., & O'Donnell, K. (2015). Promoting relationships with community members: What are the best strategies? Minneapolis, MN: University of Minnesota Research and Training Center on Community Living. Retrieved from https://ici.umn.edu/products/docs/Promoting_Relationships_Community_Members.pdf

Freeman, S., Bishop, K., Spirgiene, L., Koopmans, E., Bothelo, F. C., Fyfe, T., . . . MacLeod, M. (2017). Factors affecting residents transition from long term care facilities to the community: a scoping review. *BMC Health Services Research, 17,* 1-19. doi 10.1186/s12913-017-2571-y

Hulbert-Williams, L., Hastings, R., Owen, D. M., Burns, L., Day, J., Mulligan, J., & Noone, S. J. (2014). Exposure to life events as a risk factor for psychological problems in adults with intellectual disabilities: A longitudinal design. *Journal of Intellectual Disability Research, 58*(1), 48-60. doi:10.1111/jir.12050 **($)**

Morin, D., Rivard, M., Crocker, A. G., Boursier, C. P., & Caron, J. (2013). Public attitudes towards intellectual disability: A multidimensional perspective. *Journal of Intellectual Disability Research, 57*(3): 279-292. doi:10.1111/jir.12008 **($)**

Van Asselt, D., Buchanan, A., & Peterson, S. (2015). Enablers and barriers of social inclusion for young adults with a intellectual disability: A multidimensional view. *Journal of Intellectual & Developmental Disability, 40*(1), 37–48. doi:/10.3109/13668250.2014.994170

WEB RESOURCES

OPWDD Community Web Resources:

1. **Home and Community-Based Standards (HCBS):** https://opwdd.ny.gov/opwdd_services_supports/HCBS/home
    - **HCBS Waiver Participant's Manual:** https://opwdd.ny.gov/sites/default/files/documents/HCBS_Waiver_Participant_Manual.pdf

2. **OPWDD Care at Home (CAH):**
   https://opwdd.ny.gov/opwdd_services_supports/supports_for_independent_and_family_living/Care_at_Home
   "Individuals who are currently being served under the OPWDD Care at Home (CAH) Waiver #NY.40176 and the DOH CAH Waiver #NY.4125 that will transition to Health Homes or who will meet the "level of care" criteria (i.e., the medically fragile I/DD population) established in the proposed Children's Section 1115 Medicaid Redesign Team Waiver and are eligible for Children's HCBS will be served in Health Homes currently designated to serve children. Health Homes will be responsible for verifying and documenting Health Home eligibility criteria for this group of individuals." *Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities.* (October 6, 2017). Page 6. Retrieved from:
   https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/

3. **OPWDD Employment Resources and Supports**:
   https://opwdd.ny.gov/opwdd_services_supports/employment_for_people_with_disabilities
    - Pathway to Employment (PTE)
    - Pre-Vocational Regulations
    - Employment Training Program (ETP)
    - Supported Employment (SEMP)

WEB RESOURCES

OPWDD Employment Resources and Advocacy: OPWDD works closely with the following agencies/organizations to support individuals' dreams to be part of our workforce:

- NY Makes Work Pay – Information and resources for individuals with disabilities, employers, providers and advocates. Through research, policy analysis, training, and technical assistance, the New York Makes Work Pay Initiative provides policy and practice solutions to address New York State's estimated 70 percent of working-age people with disabilities who are not employed.
- Independent Living Centers (ILCs) – ILCs are run by people with disabilities, for people with disabilities. Core programs include information and referral services, peer counseling, individual and systems advocacy, and independent living skills training.
- Self-Advocacy Association of NYS (SANYs) – SANYs is a not-for-profit, grassroots organization run by and for people with developmental disabilities. SANYs is committed to empowering people with disabilities to be active members of their communities, including participation through competitive employment.
- Parent to Parent of NYS – Parent to Parent is a place where families of individuals with special needs can support each other and share information about accessing needed services. A great resource for family members who have questions about what to expect from supported employment services, and how to connect with providers of supported employment services.
- National Youth Leadership Network (NYLN) – NYLN is a youth-led organization working to build power among people with disabilities between the ages of 16-28 years old.

Main Menu

WEB RESOURCES

- Association for Persons in Supported Employment (APSE) – A grassroots network committed to improving and expanding integrated employment services and outcomes for individuals with disabilities. Through advocacy and policy development, APSE works to enhance social and economic inclusion and empowerment of all persons with disabilities.
- Disability.gov/Employment – Disability.gov is the federal government website for comprehensive information on disability programs and services in communities nationwide. The employment page has a wealth of resources related to career planning, job training, job opportunities, and self-employment.

4. **OPWDD Housing Initiatives**: https://opwdd.ny.gov/opwdd_community_connections/housing_initiatives/home
   - **a)** Living at Home with Family or Living Independently
     - Community Habilitation
     - Environmental Modifications
     - Live-in Caregiver
     - Paid Neighbor
   - **b)** Certified Residential Opportunities
     - Individualized Residential Alternatives (IRAs)
     - Family Care
   - **c)** OPWDD's Multi-Family Integrated Supportive Housing Program (ISH)
   - **d)** The Home of Your Own (HOYO) Program

WEB RESOURCES

e) Managing Housing Costs
- Market Rate Home/Apartment
- Subsidized Apartment
- Public Housing
- Customized Residential Option
- Home Ownership

f) Housing Information and Resource Links
- Information for Renters:
  NYS HCR Rental Housing Page | NY Housing Search.Gov
- Housing Subsidy Resources:
  Section 8 Housing Choice Voucher | OPWDD Housing Subsidy
- Shared Housing:
  NYSACRA Toolkit for Providing Shared Housing in NYS | Weatherization Assistance
- Home of Your Own" Home Ownership Financing Partners:
  State of New York Mortgage Agency (SONYMA) | United States Department of Agriculture (USDA)
- Regional Housing Information:
  Down Payment Assistance Programs in the Capital District | Monroe Housing Collaborative
  New York City Affordable Housing | Westchester Housing Resource Guide

5. **OPWDD Person-Centered Planning and Outcomes**:
   https://opwdd.ny.gov/opwdd_services_supports/person_centered_planning

6. **OPWDD Provider Directory**: https://providerdirectory.opwdd.ny.gov/

WEB RESOURCES

7. **Self-Direction**: https://opwdd.ny.gov/selfdirection

8. **OPWDD Person-Centered Planning and Outcomes**:
   https://opwdd.ny.gov/opwdd_services_supports/person_centered_planning

OTHER COMMUNITY WEB RESOURCES

1. **ACCES-VR** (Vocational Rehabilitation): http://www.acces.nysed.gov/vr/
   ACCES-VR assists individuals with disabilities to achieve and maintain employment and to support independent living.

2. **American Network of Community Options and Resources (ANCOR)**: http://www.ancor.org/
   ANCOR is a national, nonprofit trade association representing more than 1,400 private community providers of services to people with disabilities. Combined, ANCOR supports over one million individuals with disabilities, and work to shape policy, share solutions, and strengthen community.

3. **CapacityWorks2**: http://www.capacityworks2.com/
   Launched in 2013, CapacityWorks2 reflects the spirit of a global network of activists who are creating a person-centered world view that honors the capacities of people with disabilities and supports their engagement in civic life. CapacityWorks2 seeks to authenticate the art form of the imaginative journey of thousands who are finding their way toward a larger purpose in life.

4. **HCBS Advocacy**: https://hcbsadvocacy.org/national-resources/
   This website provides national-level advocacy resources on Home and Community-Based Services (HCBS) and the Centers for Medicare and Medicaid Services final rule regarding HCBS in the Medicaid program.

OTHER COMMUNITY WEB RESOURCES

5. **Inclusion Press**: http://inclusion.com/
   Inclusion Press focuses on inclusion, community, and diversity. This website provides person-centered resource materials for training events, public schools, high schools, community colleges, universities, human service agencies, health organizations, government agencies, families, and First Nations organizations - nationally and internationally.

6. **Medicaid.gov:** https://www.medicaid.gov/medicaid/ltss/index.html
   Information regarding Long Term Services and Supports as well as other information.

7. **National Consumer Voice for Quality Long-Term Care**: http://theconsumervoice.org/
   The Consumer Voice is a leading national voice representing consumers in issues related to long-term care, helping to ensure that consumers are empowered to advocate for themselves. The Consumer Voice is a primary source of information and tools for consumers, families, caregivers, advocates and ombudsmen to help ensure quality care for the individual.

8. **National Council on Independent Living (NCIL):** https://www.ncil.org/
   NCIL advances independent living and the rights of people with disabilities. The NCIL website offers current news, training and events nationwide, and NCIL's extensive national legislative and policy positions.

9. **New York State Department of Health (DOH)**: https://www.health.ny.gov/

10. **New York State Office of Mental Health (OMH):** https://www.omh.ny.gov/

11. **NYSID**: http://nysid.org/about-us.cfm
    Established in 1975 and based in Albany, NYSID is a not-for-profit membership organization with a 40-year mission of creating jobs for New Yorkers with disabilities. NYSID and its member agencies are a proven procurement solution for government agency customers.

OTHER COMMUNITY WEB RESOURCES

12. **NYS Office of Alcohol and Substance Abuse (OASAS):** https://www.oasas.ny.gov/

13. **Quality Mall**: http://www.qualitymall.org/main/
    Quality Mall offers free information about person-centered supports for people with intellectual and/or developmental disabilities. Each of the Mall stores has departments that present positive practices that help people with intellectual and/or developmental disabilities live, work and participate in our communities and improve the quality of their supports.

14. **TASH:** https://tash.org/
    TASH is an international leader in disability advocacy. Founded in 1975, TASH advocates for human rights and inclusion for people with significant disabilities and support needs – those most vulnerable to segregation, abuse, neglect and institutionalization. TASH works to advance inclusive communities through advocacy, research, professional development, policy, and information and resources for parents, families and self-advocates. The inclusive practices TASH validates through research have been shown to improve outcomes for all people.

15. **The Council on Quality and Leadership (CQL):** https://www.c-q-l.org/the-cql-difference/personal-outcome-measures
    For more than 40 years, CQL | The Council on Quality and Leadership has been a leader in working with human service organizations and systems to continuously define, measure and improve quality of life and quality of services. CQL offers a range of training, accreditation, consultation and certification services to organizations and systems. They also developed 21 Personal Outcome Measures® (POMs).

VIDEOS

1. New York State. (2015). *Employment first policy for New York State* [PowerPoint slides]. Retrieved from https://www.ny.gov/sites/ny.gov/files/atoms/files/EmploymentFirstPresentationMISCC.pdf

2. Parks and Recreation Ontario (2014, February 11). *Maximizing inclusion and participation* [Video file]. *Retrieved from* https://www.youtube.com/watch?v=-gLUEcTChj4&app=desktop (5m:46s).

3. TEDX Creative Coast (2012, May 31). *Beautiful justice* [Video file]. *Retrieved from* https://www.youtube.com/watch?v=lXMALqo4E24&version=3 (21m:20s).

4. RTC Media, (2015, December 16). *Social inclusion for people with intellectual and developmental disabilities* [Video file]. Retrieved from https://www.youtube.com/watch?v=eM3OE7oGTlI (7m:07s). National Goals 2015 presentation by Matthew Bogenschutz, Ph.D.

5. WiHD 10595 (2016, November 8). *Introduction to housing: How people with intellectual and developmental disabilities can plan for their future home* [Video file]. *Retrieved from* https://www.youtube.com/watch?v=XQ9O8HM7AyY *(15m:11s).*

MODULE 4: Cultural Competence

Section I

Module Overview: This module teaches the fundamentals of cultural competence: awareness so that care managers are aware of their assumptions, values, and beliefs and how these may be harmful to members of culturally diverse groups; knowledge so that learners develop an understanding of the worldviews of culturally diverse individuals; skills so that learners use culturally appropriate modalities and interventions that facilitate culturally different individuals to access and receive the services they want and need. At the end of this module, culturally competent learners will be able to demonstrate the following skills:

- Recognize individuals' and families' cultural needs /factors that influence choices and engagement in services
- Provide culturally appropriate and person and family-centered services
- Communicate with individuals and families in a culturally competent manner
- Promote inclusion

Key Concepts: Cultural competence; enculturation; acculturation, worldview, cultural encapsulation, cultural humility, emic versus etic orientation, cultural versus functional paranoia, indigenous healing, sexual minorities (internalized homophobia, coming out), sexual stigma, heterosexism, and sexual prejudice; ethnic, racial, and health disparities; identity development models; linguistic competence; health literacy; motivational interviewing; American's With Disability Act (1990, 2008); Self-Determination.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
CULTURAL COMPETENCE TERMS AND CONCEPTS	1) Define cultural competence. 2) Distinguish between conscious and unconscious bias. 3) Identify personal biases and how they affect your role as a care manager. 4) Evaluate one's self identity in the context of one identity development model. 5) Recognize that different groups experience help, support, and guidance differently. 6) Demonstrate effective interviewing skills by describing the types of questions you would ask to better understand an individual's culture. 7) Advocate in a manner that respects group and individual differences. 8) Promote a culturally sensitive and competent work environment. 9) Exemplify what a culturally competent care manager does.	• Dreachslin, J. L., Gilbert, M. J., & Malone, B. (2013). *Diversity and cultural competence in health care: A systems approach.* San Francisco, CA: Jossey-Bass. • Rose, P. (2013). *Cultural competency for the health professional* (1st Ed.). Burlington, MA: Jones & Bartlett Learning. • 1199SEIU TEF and PCDC (2013). *Care Coordination Fundamentals Teacher's Manual*: Modules 7 and 8. • 1199SEIU TEF and PCDC (2014). *Care Coordination Fundamentals: Student Exercise Book.* • OPWDD's Cultural Competence Training Instructor's Manual, Cultural Competence Training Participant's Manual and Cultural Competency PowerPoint • What is Cultural Competency? U.S. Department of Health and Human Services, The Office of Minority Health • Multi-Cultural Resources for Health Care U.S. Department of Health and Human Services.

ETHNIC, RACIAL, AND HEALTH DISPARITIES	1) Explain how ethnic, racial, and health disparities affect access to and engagement in services.	• See PowerPoints entitled (1) Race and Health Disparities in Adults With Intellectual & Developmental Disabilities (2014) and (2) National Core Indicators, Exploring Health Disparities Among People with Intellectual and Developmental Disabilities • Department of Health and Human Services (HSS) Action Plan to Reduce Racial And Ethnic Health Disparities (2011)
LINGUISTIC COMPETENCE HEALTH LITERACY	1) Define linguistic competence. 2) Describe effective interviewing skills to better understand an individual's culture. 3) Explain how health literacy can impact access to and engagement in health care.	• OPWDD's wide range of cultural and linguistic competency resources including guidelines, manuals, planning and assessment tools • 1199SEIU TEF and PCDC (2013). *Care Coordination Fundamentals Teacher's Manual*: Modules 7 and 8. • 1199SEIU TEF and PCDC (2014). *Care Coordination Fundamentals: Student Exercise Book.* • Health Literacy and Cultural Competence (2016) Video (3m:20s) • Cultural and Linguistic Competence Georgetown University National Center for Cultural Competence – web resources • Quick Guide to Health Literacy

LAW, POLICY AND STANDARDS ❖ Americans With Disabilities Act (ADA) ❖ Affordable Care Act ❖ Improving Access to Services for Persons with Limited English Proficiency ❖ National Standards on Culturally and Linguistically Appropriate Services (CLAS) ❖ Civil Rights	1) Provide examples of how the law, policies or standards impact a culture of inclusion.	• Americans With Disabilities Act (1990): Lists facts related to the ADA. Published by the U.S. Equal Opportunity Employment Commission • See video regarding the impact of the ADA: Google Impact Challenge: Disabilities | ADA 25th Anniversary • Affordable Care Act Section 1557 (PDF, 66 KB) Section 1557 of the Affordable Care Act ensures meaningful access to health programs receiving funding from U.S. Department of Health and Human Services for individuals with limited English proficiency U.S. Department of Health and Human Services • Executive Order 13166: Improving Access to Services for Persons with Limited English Proficiency Executive order requires federal agencies to identify need for services and implement a system to provide those services to people with limited English proficiency Civil Rights Division, U.S. Department of Justice • Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons Policy guidance document Office for Civil Rights, U.S. Department of Health and Human Services

		• Language Access Publications from National Health Law Program
		Publications related to language access
		National Health Law Program
		• National Standards on Culturally and Linguistically Appropriate Services (CLAS)
		  ○ Standards
		  ○ Executive Summary (PDF, 278 KB)
		  ○ Final Report (PDF, 602 KB)
		  ○ Cultural Health
		Office of Minority Health, U.S. Department of Health and Human Services
		• Office for Civil Rights - Get Help in Other Languages
		Fact sheets in multiple languages
		U.S. Department of Health and Human Services

SELF-DETERMINATION AND SELF-DIRECTED SUPPORTS	1) Value self-directing models of care and core tenets of self-determination.	• Self-direction services and supports Medicaid.gov website provides an overview of self-directed options and technical guidance • Self-Determination Self-Assessment Checklist (2012) Published by the National Training Initiative on Self-Determination and the Association of University Centers on Disabilities

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 4: CULTURAL COMPETENCE

BACK TO SECTION I

BOOKS, MANUALS, AND REPORTS

1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher's Manual*.

1199SEIU Training and Employment Funds and Primary Care Development Corporation Care (2014). *Care Coordination Fundamentals: Student Exercise Book.*

Centers for Disease Control and Prevention. (2011). CDC Health Disparities and Inequalities Report—United States, 2011. *MMWR 2011*: *60 (Suppl).* Retrieved from https://www.cdc.gov/mmwr/pdf/other/SU6001.pdf

Dreachslin, J. L., Gilbert, M. J., & Malone, B. (2013). *Diversity and cultural competence in health care: A systems approach*. San Francisco, CA: Jossey-Bass. **($)**

Goode, T., & Jones, W. (2007). *A guide for advancing family-centered and culturally and linguistically competent care.* Washington, DC: National Center for Cultural Competence, Georgetown University Center for Child and Human Development. Retrieved from https://nccc.georgetown.edu/documents/fcclcguide.pdf

Leigh, J. W. (1997). *Communicating for cultural competence (*1st ed.). Boston, MA: Allyn & Bacon, Inc. **($)**

National Association of Social Workers (2015). *Standards and indicators for cultural competence in social work practice*. Washington, DC: NASW Press.

BOOKS, MANUALS, AND REPORTS

Ring, J. M., Nyquist, J. G., Mitchell, S., Flores, H., & Samaniego, L. (2008*). Curriculum for culturally responsive healthcare: The step-by-step guide to culturally competent training.* London, England: Radcliffe Publishing, Ltd. **($)**

Rose, P. (2013). *Cultural competency for the health professional* (1st Ed.). Burlington, MA: Jones & Bartlett Learning. **($)**

Sue, D. W., & Sue, D. (2016). *Counseling the culturally diverse: Theory and practice* (7th Ed.). Hoboken, NJ: John Wiley & Sons. **($)**

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Bernal, G., & Domenech-Rodriguez, M. (2012). *Cultural Adaptations: Tools for Evidence-Based Practice with Diverse Populations*. Washington, DC: American Psychological Association Press. **($)**

Calzada, E., & Suarez-Balcazar, Y. (2014). Enhancing cultural competence in social service agencies: A promising approach to serving diverse children and families. *The Office of Planning, Research, and Evaluation* (*OPRE) Report #2014-31.* Retrieved from https://www.acf.hhs.gov/sites/default/files/opre/brief_enhancing_cultural_competence_final_022114.pdf

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Cross, T., Bazmn, B. J., Dennis, K. W., & Isaacs, M. R. (1989). Towards a culturally competent system of care*: A Monograph on Effective Services for Minority Children Who Are Severely Emotionally Disturbed.* Retrieved from http://archive.mhsoac.ca.gov/Meetings/docs/Meetings/2010/June/CLCC_Tab_4_Towards_Culturally_Competent_System.pdf

Fadiman, A. (2012). *The spirit catches you and you fall down: A Hmong child, her American doctors, and the collision of two cultures* (FSG Classics), New York, NY: Farrar, Straus, & Giroux. **($)**

Finlay, W. M. L., & Antaki, C. (2012). How staff pursue questions to adults with intellectual disabilities. *Journal of Intellectual Disability Research, 56*(4), 361–370. doi: 10.1111/j.1365-2788.2011.01478.x

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[1]An excellent PowerPoint describing Scott and Havercamp (2014) findings as well as the National Core Indicators presentation on Exploring Health Disparities Among People With Intellectual and Developmental Disabilities can be found on https://www.eiseverywhere.com/file_uploads/0780fe96d5dba7fc73f25138fd912b3e_IDD.pdf

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WEB RESOURCES

1. **American's With Disabilities Act:** https://www.eeoc.gov/eeoc/publications/fs-ada.cfm

2. **Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services**: http://www.ahrq.gov
   Provides extensive resources addressing cultural and linguistic competence and health disparities.

3. **Case Management Society of America (CMSA) Educational Resource Library:** http://www.cmsa.org/education
   Offers multiple web-based courses, including *Cultural Diversity: Working Together in a Diverse World.*

4. **Centers for Disease Control and Prevention (CDC), Office of Minority Health and Health Disparities (U.S. Department of Health and Human Services):** http://www.cdc.gov/omhd.
   Partners with governments and organizations to improve health among racial and ethnic minorities; offers training opportunities for students and recent graduates.

5. Centers for Medicare and Medicaid Services (CMS)

6. **Commonwealth Fund:** http://www.commonwealthfund.org
   Offers multiple publications related to cultural and linguistic competence.

7. **The Disparities Solutions Center at Massachusetts General Hospital:** https://mghdisparitiessolutions.org/
   Offers publications and partners with local, state, and national organizations on various projects to reduce health care disparities.

8. **Health Resources and Services Administration (HRSA) (U.S. Department of Health and Human Services):**
   https://www.hrsa.gov/cultural-competence/index.html
   Features a web page dedicated to cultural competence resources for health care providers and organizations.

WEB RESOURCES

9. **National Association of Social Workers (NASW):** http://www.socialworkers.org
   Offers standards and indicators to guide culturally competent social work practices.

10. **National Center for Cultural Competence (Georgetown University):** https://nccc.georgetown.edu/
    Offers numerous online resources related to cultural and linguistic competence, including self-assessments for health care practitioners and community health centers.

11. **National Committee for Quality Assurance (NCQA):** http://www.ncqa.org/hedis-quality-measurement/research/health-care-disparities Offers a free toolkit, *Multicultural Health Care: A Quality Improvement Guide*, developed in collaboration with Eli Lilly and Company, and an extensive resource library related to cultural and linguistic competence.

12. **National Council on Disability (NCD):** https://ncd.gov/
    The NCD has as its strategic plan to advance the goals of the Americans with Disabilities Act by promoting policies, programs, practices, and procedures that guarantee equal opportunity and provide for economic self-sufficiency, independent living, and inclusion and integration into all aspects of society for individuals with disabilities. The strategic plan is available on their website along with other cultural competence and disability related resources.

13. **National Health Law Program:** http://www.healthlaw.org/
    Offers resources related to language access, racial disparities, and other topics.

14. **International Multicultural Institute:** http://www.nmci.org
    Provides consulting, training, and publications to individuals, organizations, and communities.

WEB RESOURCES

15. **National Quality Forum:** http://www.qualityforum.org
    Addresses multiple topics related to cultural competence, including measurement frameworks, organizational strategies, and disparity-reducing guidelines.

16. **New York State - Office for People With Developmental Disabilities (NYS-OPWDD)**
    - Cultural and Linguistic Competence
    - Training Curricula - Medicaid Service Coordination
    - OPWDD Language Access Plan
    - Supports and Services: Self Direction

17. **Office for Civil Rights (U.S. Department of Health and Human Services):**
    http://www.hhs.gov/ocr/civilrights/resources/specialtopics/index.html
    Offers information about several topics, including health disparities, HIV/AIDS, and serving people with limited English proficiency.

18. **Office of Minority Health (U.S. Department of Health and Human Services):** https://minorityhealth.hhs.gov/
    Offers multiple resources related to cultural competence and health disparities, including *National Standards on Culturally and Linguistically Appropriate Services* (CLAS) and training tools for health care providers.

19. **The National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (The National CLAS Standards):** https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53
    Aims to improve health care quality and advance health equity by establishing a framework for organizations to serve the nation's increasingly diverse communities. More information including assessment tools is on the web page linked above.

WEB RESOURCES

20. The New York State Cultural Competence Centers of Excellence:
https://www.omh.ny.gov/omhweb/cultural_competence/research.html
(1) Nathan Kline Institute Center of Excellence in Culturally Competent Mental Health and (2) New York State Psychiatric Institute Center of Excellence for Cultural Competence.

21. U.S. Department of Health and Human Services: U.S. Department of Health & Human Services

- Basic Cultural Competence Principles
- Build Linguistic and Cultural Competence in Your Program (HHS, Administration for Children & Families, National Clearinghouse on Families & Youth); June 2015
- Challenges and Strategies in Achieving Cultural Competence in Child Welfare Driven Systems of Care (HHS, Administration for Children & Families)
- Cultural Competence in Specific Settings
- Culture and Language
- Effective Communication Tools for Healthcare Professionals (HHS, Health Resources and Services Administration)
- Enhancing Cultural Competence in Social Service Agencies: A Promising Approach to Serving Diverse Children and Families - PDF (HHS, Office of Planning, Research, and Evaluation); July 2014
- Health Literacy for Public Health Professionals (HHS, Centers for Disease Control and Prevention
- National Standards on Culturally and Linguistically Appropriate Services (HHS, Office of Minority Health)
- Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health - PDF (HHS, Centers for Disease Control and Prevention); 2008
- Promoting Health Equity in Your Community: Utilizing the Working with Diverse Communities (WDC) Strategies Guided by Best Practice - PDF (HHS, Office of Adolescent Health); May 2013
- Social Determinants of Health

WEB RESOURCES

22. U. S. Equal Opportunity Commission
The EEOC investigates discrimination complaints based on an individual's race, children, national origin, religion, sex, age, disability, sexual orientation, gender identity, genetic information, and retaliation for reporting, participating in, and/or opposing a discriminatory practice.

23. University of Buffalo | Center for International Rehabilitation Research Information & Exchange (CIRRIE):
http://cirrie-sphhp.webapps.buffalo.edu/culture/monographs/
Located in the School of Public Health and Health Professions since 1999, CIRRIE facilitates the sharing of information and expertise between the U.S. and world-wide partners to improve the conditions of people with disabilities. The website offers a cultural competence monograph series and simulation cases focusing on the top ten countries of origin of the foreign-born population in the United States, according to the U.S. Census Bureau: **Mexico, China, Philippines, India, Vietnam, Dominican Republic, Korea, El Salvador, Jamaica,** and **Cuba**. There are additional monographs on the culture of **Haiti** and the **Muslim** perspective. Each monograph contains general information about the culture, its values and recommended ways to interact with persons from that culture. There is also specific information about how disability and rehabilitation are viewed in each culture. The monographs are concise and written in non-technical language, to insure that they are user-friendly for busy rehabilitation service providers. The series also contains an initial introductory monograph, **Culture Brokering: Providing Culturally Competent Rehabilitation Services to Foreign-Born Persons.** This monograph explains the role of the rehabilitation provider as a "culture broker." Practical information, such as general outreach strategies, actions needed to become familiar and trusted by other cultures, the importance of understanding our own culture, and how to use translators effectively, are also included.

WEB RESOURCES

24. Working with Asian American Clients

25. Working with Elderly Clients

26. Working with Lesbian, Gay or Transgendered Clients

VIDEOS

The following training videos focus on cultural competence and are available for purchase on the American Psychological Association website - www.apa.org. They are intended for educational purposes for care workers in the mental health professions.

1. Working With Arab Americans: By Abi-Hashem, Naji
   Dr. Naji Abi-Hashem demonstrates his approach to working with clients with MI/DDle-Eastern and Arab backgrounds. Copyright: 2008 | DVD [Closed Captioned]

2. Counseling Latina/Latino Clients: By Arredondo, Patricia
   Dr. Patricia Arredondo demonstrates her contextual, psychohistorical approach to therapy with clients whose heritage is from one of the many Spanish speaking countries. Copyright: 2005 | DVD.

3. Counseling Latina/Latino Clients Using a Family Systems Perspective: By Joseph M. Cervantes
   In Counseling Latina/Latino Clients Using a Family Systems Perspective, Dr. Joseph M. Cervantes demonstrates an indigenous therapeutic approach integrated with more mainstream psychological practice. Copyright: 2010 | DVD [Closed Captioned]

VIDEOS

4. Working With Asian American Clients: By Chin, Jean Lau
   Dr. Jean Lau Chin demonstrates an approach that addresses issues of culture and cultural competence within the therapeutic session, in essence acknowledging the client's culture as a "third person" in the therapy room. Copyright: 2005 | DVD

5. Multicultural Care in Practice: By Comas-Diaz, Lillian
   This DVD demonstrates culturally adapting psychotherapy to the needs of the clients, employing cultural competence to maximally connect with clients. Copyright: 2013 | DVD [Closed Captioned]

6. Working With Immigrants: By Chung, Rita Chi-Ying
   Dr. Rita Chi-Ying Chung demonstrates a multicultural approach to counseling clients who are immigrants or come from families that have immigrated to the United States. Copyright: 2009 | DVD [Closed Captioned]

7. Culturally Oriented Career Counseling: By Fouad, Nadya A.
   Dr. Nadya A. Fouad demonstrates her approach to vocational counseling. The fundamental assumption of culturally oriented career counseling is that every client is influenced by his or her cultural context. Copyright: 2009 | DVD [Closed Captioned]

8. Working With African American Clients: By Parham, Thomas A.
   Dr. Thomas A. Parham demonstrates an African-centered, culturally based approach that can augment any therapy with African American clients. Copyright: 2005 | DVD

VIDEOS

9. Mixed-Race Identities: By Root, Maria P. P.
   Dr. Maria P. P. Root demonstrates her approach to working with clients who are experiencing conflicts or distress because of mixed-race identity. Copyright: 2006 | DVD

10. Working With Native Americans: By Simms, Winona F.
    Dr. Winona F. Simms illustrates her approach to working with clients who are of Native American descent. Copyright: 2005 | DVD

OTHER

1. Improving Patient-Provider Communication Part 1
   Improving Patient-Provider Communication Part 2
   The Joint Commission and the U.S. Department of Health & Human Services (HHS) Office for Civil Rights worked together to support language access in health care organizations with the videos Improving Patient-Provider Communication: Joint Commission Standards and Federal Laws Parts 1 and 2. These videos highlight what is required by Joint Commission standards as well as federal civil rights laws with respect to patients who are deaf/hard of hearing or limited English proficient. A list of resources and tools that health care organizations can use to build effective language access programs accompany the video.

2. For a quick overview of the impact of the American's With Disability Act (1990):
   Google Impact Challenge: Disabilities | ADA 25th Anniversary

3. Racial and cultural identity developmental models:
   http://www.socsci.uci.edu/~castellj/ss70c/webpres/Minority%20Identity%20Model2014%20[Compatibility%20Mode].pdf

MODULE 5: Developmental Disabilities, Chronic Diseases, and Social Determinants of Health

Section I

Module Overview: This module prepares the care manager to conduct and/or evaluate comprehensive assessments for people with intellectual and developmental disabilities to identify medical, behavioral, social and community services. At the end of this module, learners will (1) possess knowledge of characteristics of common developmental disabilities; (2) understand chronic disease and comorbidities most relevant to the I/DD population and role of disease management in care planning; (3) recognize and address health and safety issues and the balance between risk and personal choice; (4) recognize the key social determinants of health that are relevant to the I/DD population and how to address in care planning; (5) possess ability to act quickly, assess and act accordingly in crisis situations; and (6) promote a high quality of life.

Key Concepts:

Developmental Disabilities

- Developmental disabilities (DD)
- Developmental Disability Health Home
- Chronic Conditions Categories:
  a) Intellectual Disability
  b) Cerebral Palsy
  c) Epilepsy
  d) Common Neurological Impairments
  e) Familial Dysautonomia
  f) Prader-Willi Syndrome
  g) Autism
- Care Coordination Organization/ Health Home for Developmental disabilities (CCO/HH-I/DD)
- Willowbrook Class

Chronic Disease & Co-Morbidities

- Chronic diseases (CD)
- Co-morbidities
- Care model for chronic diseases
- Clinical Risk Group (CRGs):
  a) Alcohol & Substance Abuse
  b) Mental Health Condition
  c) Cardiovascular Disease
  d) Metabolic Disease
  e) Respiratory Disease
  f) Body Mass Index
- Prevention and management of CD in I/DD population
- Primary care's role in CD
- Care Coordination in CD
- Health promotion & wellness
- Self-management

Social Determinants of Health

- Risk factors - general
- Health disparities;
- Health access;
- Practical intervention;
- Poverty;
- Health effects of:
  a) early life,
  b) unemployment,
  c) transportation,
  d) stress,
  e) food,
  f) access to health care and
  g) social exclusion
- Key SDH with I/DD population (housing, family support)

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES

DEVELOPMENTAL DISABILITIES	1) Define developmental disability.
	
	2) List the characteristics of common developmental disabilities.
	
	3) Explain health homes serving people with intellectual and / or developmental disabilities (CCO/HH-I/DD).
	
	4) List the seven developmental disability health home chronic conditions.
	
	5) Explain the process for individuals to transition to a CCO/Health Home.
	
	6) Identify behavioral support services for people with I/DD.
	
	7) Evaluate the legacy of Willowbrook for people with developmental disabilities.
		• OPWDD Eligibility and Definition of Developmental Disabilities
		• NIH Fact Sheet; Intellectual and Developmental Disabilities
		• American Psychiatric Association, (2013). Diagnostics and Statistical Manual of Mental Disorders. Pages 31 – 86.
		• Summary of New York 1115 Medicaid Redesign Team (MRT) Waiver Amendment. (August 2017)
		• Health Homes Serving Individuals with Intellectual and/or Developmental Disabilities (Care Coordination Organization/Health Home (CCO/HH))
		• People First Coordination: What MSCs Need to Know (December 2017) OPWDD webinar (52m:36s)
		• For the seven developmental disability health home chronic conditions categories, see CCO/HH Application to Serve Individuals with Intellectual and/or Developmental Disabilities (Oct 6, 2017). Pages 5-6.
		  ○ Classification and Intellectual Disability AAI/DD (10m:06s)
		  ○ Cerebral Palsy Video: (5:08)
		  ○ Epilepsy Foundation Learn series of short videos presented by the Epilepsy Foundation
		  ○ Familial Dysautonomia
		  ○ Prader-Willi Syndrome video by Prader-Willi Syndrome Association (PWSA) (3m:05s)
		  ○ Autism Platform OPWDD webpage

		• Draft Transition Plan for Home and Community-Based Services (HCBS), Health Home Care Management for Individuals with Intellectual and/or Developmental Disabilities (I/DD), and the Development of Specialized Managed Care (December 2017). NYSDOH & OPWDD:
		  ○ Attachment A: Initiating Health Home Services: care manager checklist
		  ○ Attachment B: Health Home Comprehensive Care Management and HCBS Care Management
		• Crisis Intervention and Response - NYSTART
		• Beyond Willowbrook (OPWDD)
		• Unforgotten: Twenty-Five Years After Willowbrook Video (57:21). Critically acclaimed, award winning documentary produced by Filmrise, 2014.

CHRONIC DISEASES AND CO-MORBIDITIES	1) List five major Chronic Diseases.
	
	2) Recognize risk factors for chronic diseases and understand the change process.
	
	3) Explain the difference between chronic and acute disease.
	
	4) Explain the difference between illness and disease.
	
	5) Understand the mechanisms for prevention of Chronic Diseases to include primary, secondary, tertiary, and quaternary.
		• *Care Coordination Fundamentals Teacher's Manual*.
		  ○ Common Chronic Diseases: Modules 3, 4, 5, 6
		  ○ Basics of Mental Illness and Crisis Management, Parts 1 and 2: Modules 11 & 12
		• Expanded Chronic Care Model in Chronic Disease Prevention (2011)
		• The Chronic Care Model
		• American Psychiatric Association, (2013). Diagnostic and Statistical Manual of Mental Disorders.
		• Aging and Intellectual / Developmental Disabilities video developed by Center for Developmental Disabilities and Research (January 2017) (15m:48s)
		• Common Medical Problems in Patients with I/DD

	6) Describe the basics of Chronic Diseases. 7) Explain a Chronic Care Model and its essential elements. 8) Explain the concept of risk stratification. 9) Give examples of models of care for the following: a. cancer b. lung disease c. heart diseases d. diabetes e. asthma f. aging and adults with I/DD 10) Identify common medical conditions in individuals with I/DD. 11) Recognize unique presenting symptoms of common medical conditions in individuals with I/DD. 12) Assess the individual's support system and identify review areas where support is needed.	• Centers for Disease Control and Prevention: Developmental Disabilities • People with disabilities and Living Healthy, Safety, Assistive Technology, School, Transitions, Independent Living, and Finding Support (CDC)
SOCIAL DETERMINANTS OF HEALTH	1) List the major social determinants of health and their implications on wellness.	• Social Determinants of Health and Community Based Organizations (NYS DOH, 2015). Power Point • Exploring Health Disparities Among People with Intellectual and Developmental Disabilities: What are

	2) Identify which social determinants of health are present for each person on his or her caseload. 3) Know the evidence-based interventions and link people with the appropriate supports. 4) Explain the prevalence and risk factors for health disparities for people with I/DD. 5) Understand health inequalities and health co-morbidities for different populations. 6) Execute a Life Plan to address presenting social determinants of health.	the Issues and do Race and Ethnicity Play a Role? (2014) National Core Indicators, HRSI, and NASDDS. Power Point • Care Coordination and Social Determinants of Health (2014). Epilepsy Foundation. Focus is on children but is also applicable to adult populations. Video (5m:11s) • World Health Organization: Social Determinants of Health Learnings and Tools
HEALTH PROMOTION	1) Educate and engage individuals in making decisions that promote his/her maximum independent living skills and lifestyle choices that achieve the following goals: a. Good health b. Pro-active management of chronic conditions c. Early identification of risk factors d. Appropriate screening for emerging health problems e. Medication regimen compliance 2) Promote wellness and prevention programs by assisting individuals with resources that address:	• Living Well with a Disability, a Self-Management Program. Centers for Disease Control and Prevention. (2016). • Self-Management Resource Center Stanford University • Self-Management Support in Patient-Centered Medical Homes • State Strategies for Promoting Wellness and Healthy Lifestyles for People with Disabilities • New York State Department of Health Disability and Health Program • New York State Department of Health: Health & Safety at Home and Outdoors • Health and Wellness Tips for People with Developmental Disabilities (The Arc)

	a. Exercise b. Nutrition c. Stress Management d. Substance abuse reduction/cessation e. Smoking cessation f. Self-help recovery g. Other wellness resources based on individual's needs and preferences 3) Support self-management initiatives and individual empowerment. 4) Follow preventative measures to decrease risk of choking and aspiration. 5) Follow procedures for control of tuberculosis as described in Regulation 633.14.	• Health Screening Recommendations for People with I/DD (2017) • Preventative Healthcare for Women with DD (2013). Brandeis University. PowerPoint • Preventative Care and Health Screening for People with DD (2017) • Preventative Healthcare Screening Guidelines for People Aging with I/DD (2009) • Preventative Screening for Males with DD • Mammograms for Women with DD • Special Olympics | Healthy Athletes • Substance Abuse in People With Intellectual and Developmental Disabilities — Breaking Down Treatment Barriers. Article (2013) • SLMS Class for Decreasing the Risk of Choking and Aspiration (Mandatory OPWDD training) • Choking Prevention Training Resources • OPWDD Procedures for Tuberculosis Control (Mandatory OPWDD training) • Procedures for the Control of Tuberculosis: 14 CRR-NY 633.14

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button on the keyboard, you may click on a column heading and any item in each column. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 5: Developmental Disabilities, Chronic Diseases, Social Determinants of Health

DEVELOPMENTAL DISABILITIES		CHRONIC DISEASES	SOCIAL DETERMINANTS OF HEALTH
Books, Manuals, and Reports		***Books, Manuals, and Reports***	***Books, Manuals, and Reports***
References		***References***	***References***
Research Articles by Condition		***Web Resources***	***Web Resources***
Autism Spectrum Disorders Cerebral Palsy Down Syndrome Epilepsy Fragile X Syndrome Prader-Willi Syndrome Rett Syndrome Williams Syndrome Developmental Disabilities and Mental Illness/Behavioral Health Nutrition, and Dietetics Substance & Tobacco Abuse Health Promotion	Autism Video (6:20) Cerebral Palsy Video: (5:08) Epilepsy Video (3:26) Familial Dysautonomia Video: (8.25) Prader-Willi Syndrome Video (3:40) Intellectual Disability Video (6:32) Unforgotten: Twenty-Five Years After Willowbrook Video (57:21) Common Neurological Impairments Video (3:05)	***Other***	***Videos***
Web Resources			
Other Resources | Related Links			
Other			

BACK TO SECTION I

DEVELOPMENTAL DISABILITIES

BOOKS, MANUALS, AND REPORTS

American Psychiatric Association. (2013). *Diagnostics and statistical manual of mental disorders*. (5th ed.). Arlington, VA: Author. **($)**

Baron-Cohen, S., Lombardo, M., & Tager-Flusberg, H., (Eds.) (2013*). Understanding other minds: Perspectives from developmental cognitive neuroscience* (3rd ed.). Oxford, England: Oxford University Press. **($)**

Burack, J. A., Hodapp, R. M., Iarocci, G., & Zigler, E. (Eds.). (2012). *The Oxford manual of intellectual disability and development*. New York, NY: Oxford University Press. **($)**

Florian, L. (Ed.) (2014). *The SAGE handbook of special education* (2nd ed.). London, England: Sage. **($)**

Jacobson, J. W., Mulick, J. A., & Rojahn, J., (Eds.). (2009). *Handbook of intellectual and developmental disabilities.* New York, NY: Springer. **($)**

Mazzocco, M. M., & Ross, J. L. (Eds.) (2007). *Neurogenetic developmental disorders*. Cambridge, MA: MIT Press. **($)**

Odom, S.L., Horner, R. H., Snell, M. E., & Blancher, J. (Eds.) (2007). *Handbook of developmental disabilities*. New York, NY: Guilford Press. **($)**

Shogren, K. A. Wehmeyer, M. L., & Singh, N. N. (Eds.). (2017). *Handbook of positive psychology in intellectual and developmental disabilities: Translating research into practice*. New York, NY: Springer. **($)**

BOOKS, MANUALS, AND REPORTS

Singh, N. N. (Ed.). (2016). *Handbook of evidenced-based practices in intellectual and developmental disabilities*. Cham, Switzerland: Springer International Publishing. **($)**

Van Herwegen, J., & Riby, D. (2014). *Neurodevelopmental disorders: Research challenges and solutions*. London, England: Psychology Press. **($)**

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Lind, A., & Archibald, N. (2013). Structuring new service delivery models for individuals with intellectual and developmental disabilities. *Centers for Health Care Strategies (CHCS) Policy Brief*, 1-5. Retrieved from https://www.chcs.org/resource/structuring-new-service-delivery-models-for-individuals-with-intellectual-and-developmental-disabilities/

McManus, M. A., Pollack, L. R., Cooley, W. C., McAllister, J. W., Lotstein, D., Strickland, B., & Mann, M. Y. (2013). Current status of transition preparation among youth with special needs in the United States. *Pediatrics, 131*(6), 1090-1097. Retrieved from http://pediatrics.aappublications.org/content/131/6/1090

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Cerebral Palsy

Mutlu, A., Kara, O. K., Livanelioğlu, A., Karahan, S., Alkan, H., Yardimci, B. N., & Cooley Hidecker, M. J. (2017). Agreement between parents and clinicians on the communication function levels and relationship of classification system of children with cerebral palsy. *Disability and Health Journal.* Advance online publication. http://dx.doi.org/10.1016/j.dhjo.2017.11.001

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Epilepsy

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Fragile X syndrome

Dew-Hughes, D. (Ed.) (2004). *Educating children with fragile X syndrome: A multi-professional view*. London, England: Routledge Falmer. **($)**

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Prader-Willi syndrome

Whitman, B. Y., & Myers, S. E. (2013). Prader-Willi syndrome and growth hormone therapy: Take a deep breath and weigh the data. *Journal of Pediatrics, 162*(2), 224-226. doi:10.1016/j.jpeds.2012.09.024

Rett syndrome

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Bellugi, U., & St. George, M. (Eds.) (2001). *Journey from cognition to brain to gene: Perspectives from Williams syndrome*. Cambridge, MA: MIT Press. **($)**

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RESEARCH ARTICLES BY CONDITION

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WEB RESOURCES

1. American Association on Intellectual and Developmental Disabilities (AAI/DD)
   AAI/DD is an interdisciplinary organization of professionals and citizens working to support individuals with disabilities by promoting policy, research, and practice.
   - Classification and Intellectual Disability AAI/DD (10m:06s)
2. Association of University Centers on Disabilities (AUCD)
   AUCD is a network of interdisciplinary centers advancing policy and practice for and with individuals with developmental and other disabilities, as well as their families and communities.
3. **Autism Speaks**: https://www.autismspeaks.org/
4. **Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities**. (October 6, 2017). Retrieved from: https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/
5. Center for Parent Information and Resources (CPIR)
   The CPIR serves as a central resource of information and products to the community of Parent Training Information Centers and the Community Parent Resource Centers, so that they can focus their efforts on serving families of children with disabilities.

WEB RESOURCES

6. **Centers for Disease Control and Prevention:** www.cdc.gov
    - Cigarette Smoking Among Adults with Developmental Disabilities
7. **Cerebral Palsy**: https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Hope-Through-Research/Cerebral-Palsy-Hope-Through-Research
8. **Child Neurological Foundation**: http://www.childneurologyfoundation.org/
   The Child Neurology Foundation connects partners from all areas of the child neurology community so those navigating the journey of disease diagnosis, management, and care have the ongoing support of those dedicated to treatments and cures.
9. Department of Education
   The U.S. Department of Education (DOE) has resources to assist with the educational needs of children with developmental disabilities.
    - The DOE's Office of Special Education and Rehabilitative Services (OSERS) provides support to parents and individuals, school districts.
10. Disability.gov
    Offers comprehensive information on disability programs and services in communities nationwide. The site links to more than 14,000 resources from federal, state, and local government agencies; academic institutions; and nonprofit organizations.
11. DisabilityMeasures.org
    An online resource with measurement tools for assessment, screening, and research concerning individuals with disabilities.
12. **Familial Dysautonomia Foundation:** www.familialdysautonomia.org
    The Dysautonomia Foundation is a 501c3 nonprofit organization that has established the world's only FD treatment centers. The Dysautonomia Foundation is the largest source of funding for FD treatment and research in the world.

WEB RESOURCES

13. **First Signs:** http://firstsigns.org/
    Dedicated to educating parents and professionals about early identification and intervention for children at risk for developmental delays and disorders, including autism.
14. Insure Kids Now!
    Each state provides no-cost or low-cost health insurance coverage for eligible children through Medicaid and the Children's Health Insurance Program. This website has basic facts about these programs. It also has links to each state's insurance program for children, where you can learn who is eligible for the programs, how to apply, and what services are covered. Information is available in English and Spanish.
15. International Classification of Functioning, Disability, and Health (https://www.cdc.gov/nchs/icd/icf.htm)
    The *International Classification of Functioning, Disability, and Health* provides a unifying framework for classifying the consequences of disease and for measuring health and disability at both individual and population levels.
16. MedlinePlus
    A service of the U.S. National Library of Medicine and the National Institutes of Health, provides information on many different types of developmental disabilities, as well as resources on prevention and screening, research, statistics, law and policy, and more.
17. My Child Without Limits
    Provides resources for families of young children from birth through 5 years of age with developmental delays or disabilities, as well as for professionals who work with these individuals. The site also has a national resource locator where visitors can find local service providers, community organizations, and government agencies.
18. National Association of Councils on Developmental Disabilities (NACDD)
    The NACDD supports state and territorial councils in implementing the Developmental Disabilities Assistance and Bill of Rights Act and promoting the interests and rights of individuals with disabilities and their families.

WEB RESOURCES

19. National Eye Institute (NEI)
    The NEI studies ways to prevent and treat eye diseases and vision problems and to improve the lives of people with these conditions.
20. National Institute of Child Health and Human Development (NICHD)
    The NICHD conducts and supports research on all stages of human development to better understand the health of children, adults, families, and communities, including those with developmental disabilities.
21. National Institute on Deafness and Other Communication Disorders (NIDCD)
    The NIDCD studies hearing loss, deafness, and problems with speech and language.
22. National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR)
    NIDILRR is a federal government grants-making agency that sponsors grantees to generate new disability and rehabilitation knowledge and promote its use and adoption.
23. National Institutes of Health (NIH)
    Several institutes within the NIH conduct and fund research about developmental disabilities. They also offer information to the public and educational programs for health professionals.
24. National Institute of Mental Health (NIMH)
    The NIMH studies mental illness and behavior problems, including such conditions as autism, attention-deficit/hyperactivity disorder, and learning disabilities.
25. National Institute of Neurological Disorders and Stroke (NINDS)
    NINDS studies the causes, diagnosis, treatment, and prevention of brain and nervous system disorders such as cerebral palsy and epilepsy.
26. **New York Crisis Prevention and Response- Systemic, Therapeutic Assessment, Resources and Treatment (NYSTART)**: https://opwdd.ny.gov/ny-start/home

WEB RESOURCES

27. **New York State Office for People With Developmental Disabilities (OPWDD):** https://opwdd.ny.gov
    - Autism Platform
    - I/DD OPWDD 1115 Waiver (PDF)
    - NYSTART Crisis Prevention and Response
    - Summary of New York 1115 Medicaid Redesign Team (MRT) Waiver Amendment. (August 2017)
28. PBS Parents: Children with Disabilities

    PBS Parents provides information about child development from birth through the early school years. The Children with Disabilities page covers topics such as inclusive education, assistive technology, and advocating for your child.
29. Rett Syndrome
30. Special education: Office of Special Education Programs (OSEP)
31. The Arc

    The Arc is a national, community-based organization advocating for individuals with intellectual and developmental disabilities and their families through public policy and provision of supports and services.
32. The International Classification of Diseases(https://www.cdc.gov/nchs/icd.htm)

    The *International Classification of Diseases, Ninth Revision, Clinical Modification* (*ICD-9-CM*) is the official system of codes for diagnoses and procedures in the United States. The International Classification of Diseases, Tenth Revision (ICD-10) is used internationally.
33. The State of the World's Children 2013: Children with Disabilities

    The 2013 edition of this report focuses on the situation of children with disabilities across the world.
34. Vocational rehabilitation: Rehabilitation Services Administration (RSA)

Other Resources

1. Links to websites related to autism spectrum disorder(https://www.cdc.gov/ncbddd/autism/links.html)
2. Links to websites related to cerebral palsy(https://www.cdc.gov/ncbddd/cp/links.html)
3. Links to websites related to hearing loss(https://www.cdc.gov/ncbddd/hearingloss/links.html)
4. https://www.cdc.gov/ncbddd/developmentaldisabilities/articles.html

Related Links

1. A-Z Index of Birth Defects, Blood Disorders & Disabilities(https://www.cdc.gov/ncbddd/sitemap.html)
2. Disability and Health(https://www.cdc.gov/ncbddd/disabilityandhealth/index.html)
3. Information for Parents(https://www.cdc.gov/parents/index.html)
4. "Learn the Signs. Act Early." Campaign(https://www.cdc.gov/ncbddd/actearly/index.html)
5. Living with a Disability(https://www.cdc.gov/ncbddd/disabilityandhealth/people.html)

OTHER

1. **American Association on Intellectual and Developmental Disabilities**
   Frequently asked questions on intellectual disability.
   http://aaI/DD.org/intellectual-disability/definition/faqs-on-intellectual-disability#.WhR2NLpFz88
2. **Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities**
   https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/
3. **New York State Office for People With Developmental Disabilities**
   https://opwdd.ny.gov
4. **New York State Office for People With Developmental Disabilities: Willowbrook Resources**
   https://opwdd.ny.gov/opwdd_resources/willowbrook_class
5. **Web Resources for Developmental Disabilities**
   Adolescents and Adults with Autism (AAA): Lifespan Family Research, University of Wisconsin-Madison houses open-source articles and book chapters related to people with autism spectrum disorders.
   http://www.waisman.wisc.edu/family/pubs_autism.html

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National Council on Disability, (2009). *The current state of health care for people with disabilities*. Retrieved from https://ncd.gov/rawmedia_repository/0d7c848f_3d97_43b3_bea5_36e1d97f973d.pdf

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WEB RESOURCES

1. **Academy of Nutrition and Dietetics**
   http://www.eatrightpro.org/
2. **American Academy of Developmental Medicine and Dentistry:**
   http://aadmd.org/
3. **National Network for Oral Health Access**
   www.nnoha.org
4. **New York State Office for People With Developmental Disabilities**
   - Preventative Healthcare Screening Guidelines for People Aging with Intellectual and Other Developmental Disabilities (2009)
5. **Oral Health Collaborative**
   http://www.nnoha.org/oralhealthcollab.html

WEB RESOURCES

Health Promotion

6. Parish, S. L. & Marks, N., L. (2013). Preventative healthcare for women with developmental disabilities. Brandeis University. PowerPoint. Retrieved from: https://aadmd.org/sites/default/files/D2%2003%20Parish.pdf
7. Resources for Integrated Care. (2017). Preventive Care and Health Screenings for Persons with Disabilities. [PowerPoint slides]. Retrieved from https://www.resourcesforintegratedcare.com/sites/default/files/Preventive_Care_and_Health_Screenings_for_Persons_with_Disabilities_Slides.pdf
8. Self-Management Resource Center (SMRC) and Chronic Disease Self-Management Program (CDSMP) are dedicated to helping improve health status and self-management skills for people with chronic diseases and their caregivers. http://www.selfmanagementresource.com/
9. The American Association on Health and Disability (AAHD) is a cross-disability national non-profit 501(c)(3) organization committed to reducing health disparities and promoting health and wellness initiatives for children and adults with disabilities. https://www.aahd.us/

Patient-Centered Medical/Health Home Initiatives

10. Compare and Contrast: Medicaid Health Homes and Patient-Centered Medical Homes from the National Council for Behavioral Health provides a brief overview of the differences between Medicaid Health Homes and Patient-Centered Medical Homes.
11. HRSA Patient-Centered Medical/Health Home Initiative Program Assistance Letter 2015-02: https://bphc.hrsa.gov/qualityimprovement/pdf/pal201502.pdf
12. Health Home Information Resource Center on https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/health-homes-technical-assistance/health-home-information-resource-center.html

WEB RESOURCES

13. **National Center for Medical Home Implementation:** http://www.medicalhomeinfo.org/
14. **National Committee for Quality Assurance Patient-Centered Medical Home recognition:** http://www.ncqa.org/tabid/631/default.aspx
15. **Patient-Centered Health Home Action Guide:** http://www.nnoha.org/generalpage.html
16. SAMHSA's webpage houses a host of information, including state guidance on ACA Sec. 2703 (the health home provision) for people with behavioral health disorders.
17. The Collaborative Care: An Evidence-Based Approach to Integrating Physical and Mental Health in Medical Health Homes webinar highlighted details of the Collaborative Care Model, describes the evidence documenting its effectiveness, and describes how it operates from the perspective of primary care providers, specialty mental health providers, and payers. It also provides a brief update on health home activities at the national level with a focus on efforts to integrate physical and behavioral health services.
18. The Joint Principles of the Patient-Centered Medical Home were developed by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, and American Osteopathic Association to describe the characteristics of the Patient-Centered Medical Home.
19. The National Academy for State Health Policy's (NASHP) Medical Home Map tracks state efforts to advance medical homes for Medicaid and CHIP participants. In addition to analysis of medical home programs in each state, map users can now explore state medical home activity across five key domains: payments to medical homes, multi-payer initiatives, ACA Section 2703 health homes, medical home qualification standards, and shared practice supports.
20. The National Council for Behavioral Health developed Behavioral Health/Primary Care Integration and The Person-Centered Healthcare Home, a report that assesses the need and importance of health homes, models, and policies that affect the implementation and sustainability of health homes. The Care Models for Persons with Chronic Substance Use video also discusses the National Council report.

WEB RESOURCES

Health Information Technology and Health Centers

21. Tips for the Safety Net Community on Using Health IT within a Patient-Centered Medical Home:
https://www.youtube.com/watch?v=Q3hEGjAYsRc

Health Center Controlled Networks

22. https://bphc.hrsa.gov/qualityimprovement/strategicpartnerships/hccn.html

OTHER

1. **Centers for Disease Control and Prevention (CDC)**
2. **Improving Chronic Illness Care (ICIC)**
3. http://www.improvingchroniccare.org/index.php?p=The_Chronic_Care_Model&s=2
   http://www.cdc.gov/chronicdisease/index.htm
4. **New York State Department of Health**
   https://www.health.ny.gov/
5. **New York State Department of Health**
   Health Homes Serving Individuals with Intellectual and/or Developmental Disabilities (Care Coordination Organization/Health Home (CCO/HH))
   https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/
6. **Substance Abuse and Mental Health Services Administration**
   https://www.samhsa.gov/
7. **U. S. Department of Health and Human Services (HHS) – HHS Initiative on Multiple Chronic Conditions**
   http://www.hhs.gov/ash/initiatives/mcc/

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Martinez, I. L., Artze-Vega, I., Wells, A. L., Mora, J. C., & Gillis, M. (2015). Twelve tips for teaching social determinants of health in medicine. *Medical Teacher, 37*(7), 647-652. doi: 10.3109/0142159X.2014.975191

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Theiss, J., & Regenstein, M. (2017). Facing the need: Screening practices for the social determinants of health. *The Journal of Law, Medicine & Ethics, 45*(3), 431-441. **($)**

Trudel-Fitzgerald, C., Chen, Y., Singh, A., Okereke, O. I., & Kubzansky, L. D. (2016). Psychiatric, psychological, and social determinants of health in the nurses' health study cohorts. *American Journal of Public Health, 106*(9), 1644–1649. doi:10.2105/AJPH.2016.303318

WEB RESOURCES

1. **Association of State and Territorial Health Officials** (ASTHO). (2013). *State strategies for promoting wellness and healthy lifestyles for people with disabilities*. Retrieved from http://www.astho.org/Wellness-and-Healthy-Lifestyles-for-People-with-Disabilities-Issue-Brief/
2. **New York State Department of Health** (NYSDOH). (2015). Social Determinants of Health and Community Based Organizations Power Point
3. **Special Olympics**: http://www.specialolympics.org

VIDEOS

Center for Health Progress. (2013, November 11). *Social determinants of health, center for progress* [Video file]. Retrieved from https://www.youtube.com/watch?v=I7iSYi3ziTI (10m: 04s).

MODULE 6: Knowledge of Community Supports and Services

Section I

Module Overview: This module focuses on knowledge of community supports and services, new models of care, and health care trends and their application with the New York State Office for People With Developmental Disabilities (OPWDD) environment. At the end of this module, learners will be able to:

- Develop and maintain knowledge of OPWDD, community, and natural supports and services; including housing and employment services
- Understand the U.S. healthcare system and new models of care
- Demonstrate knowledge of entitlements, benefits and how to access such services
- Assess individuals' and families' needs
- Demonstrate knowledge of care coordination
- Coordinate and provide access to preventive and health promotion services, mental health and substance abuse services and transitional care across settings
- Coordinate and provide access to high-quality health care services informed by evidence-based clinical practice guidelines

Key Concepts: Affordable Care Act (ACA); Managed Care; Accountable Care Organizations (ACO); Medical Home; Medicaid Redesign Team (MRT); I/DD Fully Integrated Duals Advantage (FIDA) Demonstration; 1915(b) Waiver; Home and Community Based Services (HCBS); Medicaid Service Coordination; 1115 Waiver; People First Care Coordination; Voluntary Service Providers; Care Coordination/Health Home for people with developmental disabilities (CCO/HH or Health Home); CCO/HH Care Management; CCO/HH Care Management For All; Life Plan; individual safeguards; Behavioral and Medical Care Coordination; Long-Term Services and Supports (LTSS); natural supports; prevention; health maintenance; disease management; Front Door; health outcomes; personal outcome measures; Valued-Based Payment; Per Member, Per Month (PMPM) rates for CCO/HH

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
KNOWLEDGE OF COMMUNITY SUPPORTS AND SERVICES: ❖ Overview of OPWDD community and natural supports ❖ Entitlements and Benefits	**Overview of OPWDD, Community, and Natural Supports:** 1) Describe the role and structure of OPWDD. 2) Provide an overview of the range of services and supports available under OPWDD including: a. Home and Community-Based Services b. Self-direction c. Home or living supports and services, residential services, and family support d. Employment supports and services e. Day services f. ISS Housing Subsidy 3) Describe the process for accessing OPWDD supports and services for people who are new to the system or have a service added. 4) Define person-centered planning. 5) Define natural supports. 6) Explain the role of the following key documents in person-centered planning and in assessing individuals' and families' needs. a. Person-Centered Service Plan (PCSP)	**Overview of OPWDD, Community, and Natural Supports:** • OPWDD Overview • OPWDD Supports and Services • Home and Community-Based Services • Self-direction • OPWDD Housing Options and Resources Power Point – pages 16 to 28. • Home or living supports and services • Residential Services • Family Supports Services • Employment Supports and Services • Day Services • Front Door Access to Services • Person Centered Planning and Outcomes • Person-Centered Service Plan • Person Centered Planning Methodologies • Life Plan • Coordinated Assessment System • Individual Plan of Protection (IPOP) – page 23 • New York Housing Resource Center for People with Intellectual/Developmental Disabilities • OPWDD ISS Housing Subsidy

	b. Life Plan c. Individual Safeguards d. Coordinated Assessment System (CAS) **Entitlements and Benefits:** 7) Demonstrate knowledge of available entitlements and government benefits, and how to support individuals with I/DD to access the various entitlements and benefits to which they may be entitled, including: a. Medicaid b. Medicare c. Supplementary Security Income (SSI) d. Social Security Benefits (SSA) e. Supplemental Nutrition Assistance Program (SNAP) f. Home Energy Assistance Program (HEAP) g. Work Incentives h. Resource Management i. Liability for Services 8) Explain how individuals can save for qualified disability expenses without the risk of losing their benefits from assistance programs like SSI and Medicaid. 9) Demonstrate an understanding of the OPWDD regulations impacting governmental income, benefits and resources; and requirements to	**Entitlements and Benefits:** • OPWDD Website: Benefits Information • Benefit Development Resource Guide (OPWDD) • Medicaid and OPWDD • Medicare • Supplementary Security Income (SSI) • Social Security Disability Insurance (SSDI) • Social Security's Representative Payee Program (OPWDD) Pages 98 - 100 • Social Security Benefits (SSA) • Supplemental Nutrition Assistance Program (SNAP) • Home Energy Assistance Program (HEAP) • Work Incentives and Public Benefits • Personal Allowance Manual (OPWDD) • Liability for Services (OPWDD) • Statewide Learning Management System (OPWDD) • Management of Personal Funds: 14 CRR-NY 633.15 • Liability for Services: Sub-Part 635-10 (New York Codes, Rules, and Regulations) • How to save without losing benefits • Overview of Services for Willowbrook Class Members OPWDD Power Point (February, 2017) • Willowbrook Permanent Injunction

	maintain compliance to ensure benefits continue for individuals with I/DD. 10) Demonstrate knowledge of requirements for the Willowbrook Class Members and entitlements guaranteed through Willowbrook Permanent Injunction.	
NEW MODELS OF CARE Introduction to the CCO/HH and Care Coordination	**New Models of Care – Overview** 1) Describe OPWDD's organizational change from system-centered to person-centered practices. 2) Provide an overview of new models of care including: a. Accountable Care Organization (ACO) b. Managed Care Organization (MCO) c. Fully Integrated Duals Advantage (FIDA) d. Specialized Managed Care e. Care Coordination Organization (CCO) 3) Describe People First Care Coordination. 4) Describe the purpose and provide an overview of the Amended NYS Section 1115 Waiver.	**New Models of Care – Overview** • Guidance for Implementing Standards for Person-Centered Planning and Self-Direction in Home and Community-Based Services Programs - Section 2402(a) of the Affordable Care Act (2014) • OPWDD: Road to Reform: Putting People First (2013) • Accountable Care Organizations (ACOs) (1m:59s) • People First Care Coordination (OPWDD) • Amended NYS Section 1115 Waiver • Draft Transition Plan for Home and Community Based Services (HCBS), Health Home Care Management for Individuals with Intellectual and/or Developmental Disabilities, and the Development of Specialized Managed Care

	Care Coordination Organization/Health Home for Individuals with Intellectual and/or Developmental Disabilities (CCO/HH-I/DD) 5) Describe the role and relationship of OPWDD to the following: a. the Care Coordination Organization/ Health Home (CCO/HH) b. Voluntary Service Providers 6) Describe the role of the CCO/HHs in the I/DD Medicaid Transformation. 7) Identify the six core Health Home services for supporting people with intellectual and developmental disabilities (I/DD) in health homes. 8) Identify the seven developmental disability Health Home chronic conditions categories (eligibility requirements). **Role and Responsibilities of the care manager within the CCO/HH-I/DD model** 9) Describe the role of the care manager in relation to the care team. 10) Summarize the 10 care manager skill-building areas.	**Care Coordination Organization / Health Home for Individuals with Intellectual and/or Developmental Disabilities (CCO/HH-I/DD)** • Care Coordination Organization / Health Home for Individuals with Intellectual and/or Developmental Disabilities • Care Coordination Organization/Health Homes (CCO/HH) Application to Service Individuals with Intellectual and/or Developmental /Disabilities ○ CCO/HH role in Medicaid Transformation – page 3 ○ Six core Health Home services – page 2 ○ Eligibility requirements for HH – page 5 **Role and Responsibilities of the care manager within the CCO/HH-I/DD model** • 1199SEIU TEF and PCDC Care Coordination Fundamentals (2014). Care Coordination Fundamentals: Teacher Guide. Retrieved from: https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Teacher-Manual-FINAL-web.pdf .

	11) Outline the responsibilities of the care manager.	○ Modules 1 & 2: Care Coordination Basic Skills ○ Module 17: Navigating the Insurance System • 1199SEIU TEF and PCDC Care Coordination Fundamentals (2014). Care Coordination Fundamentals: Student Exercise Book. Retrieved from: http://wpcdn01.seiumedia.net/87-ee50c3a1364f-CC-Student-Exercise-Book-FINAL-web.pdf • Care Coordination Organization/Health Homes (CCO/HH) Application to Service Individuals with Intellectual and/or Developmental /Disabilities ○ 10 care manager Skill-Building Areas – pages 27 and 28 ○ Health Home care manager Requirements and Responsibilities – pages
HEALTH CARE TRENDS	1) Describe how federal, state, and local governments, businesses, providers, and advocates are working together to build a better health care system. 2) Describe the basics of Medicare, Medicaid and private insurance as well as the basics of payment structures and their purpose in health care reform.	• CMS Quality Strategy • Health Care Trends. (2015). CUNY. Video (1h:01m:01s). • How the Performance of the U. S. Health Care System Compares Internationally (2014) • 1199SEIU TEF and PCDC Care Coordination Fundamentals (2014). Care Coordination Fundamentals: Teacher Guide. Retrieved from: https://www.1199seiubenefits.org/wp-content/uploads/2014/07/CC-Teacher-Manual-FINAL-web.pdf .

	3) Identify environmental factors including biological, physical and chemical factors that affect the health of a community. 4) Demonstrate an understanding of practices associated with the delivery, quality, and costs of health care for individuals with I/DD. 5) Coordinate and provide access to preventive and health promotion services, mental health and substance abuse services, and transitional care across settings. 6) Explain how health care reform will impact the delivery of health care services. 7) Coordinate and provide access to high-quality health care services informed by evidence-based clinical practice guidelines.	○ Modules 11 & 12: Mental Illness & Crisis Management ○ Module 14: Home Visits ○ Module 15: Transitions in Care • Care Coordination Organization/Health Homes (CCO/HH) Application to Service Individuals with Intellectual and/or Developmental Disabilities ○ Care Coordination and Health Promotion: Pages 11 -13 ○ Comprehensive Transitional Care: Pages 13 -18 • The Next Revolution in Health Care: Empathy. (2012). Rosen, P. Video (12m:40s). • Experience Design in Healthcare. (2013). Senior, J. O. Mayo Clinic video. (19m: 28s)

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 6: KNOWLEDGE OF COMMUNITY SUPPORTS AND SERVICES, NEW MODELS OF CARE, AND HEALTH CARE TRENDS

BACK TO SECTION I

KNOWLEDGE OF COMMUNITY SUPPORTS AND SERVICES, NEW MODELS OF CARE, AND HEALTH CARE TRENDS

BOOKS, REPORTS, AND MANUALS

Abramsky, S., 2013. *The American way of poverty: How the other half still lives*. New York, NY: Nation Books. **($)**

Centers for Disease Prevention and Control. (2014). *Essentials for childhood: Steps to create safe, stable, nurturing relationships and environments.* National Center for Injury Prevention and Control Division of Violence Prevention. *Retrieved from* https://www.cdc.gov/violenceprevention/pdf/essentials_for_childhood_framework.pdf

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Department of Developmental Services and Supports Section. (n.d.). *How to develop natural supports*. Retrieved from http://www.dds.ca.gov/Publications/docs/Natural_Supports.pdf

Erickson, W., Lee, C., & von Schrader, S. (2016). *2015 Disability status report: United States*. Ithaca, NY: Cornell University Yang Tan Institute on Employment and Disability (YTI). Retrieved from http://www.disabilitystatistics.org/StatusReports/2015-PDF/2015-StatusReport_US.pdf?CFID=3550507&CFTOKEN=db07e55efc446a55-F96F7A8E-E904-9310-E687E2C61360DAD7

Healthy People 2020. (2016a). *Disability and health goals*. Retrieved from https://www.healthypeople.gov/2020/topics-objectives/topic/disability-and-health

BOOKS, REPORTS, AND MANUALS

Healthy People 2020. (2016b). *Disparities*. Retrieved from https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities

Hensel, E., Rose, J., Kroese, B. S., & Banks-Smith, J. (2002). Subjective judgments of quality of life: A comparison study between people with intellectual disability and those without disability. *Journal of Intellectual Disability Research, 46*(2), 95-107. doi:10.1046/j.1365-2788.2002.00343.x **($)**

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WEB RESOURCES

1. **Administration for Community Living (ACL):** https://www.acl.gov/
   ACL brings together the efforts and achievements of the Administration on Aging (AoA), the Administration on Intellectual and Developmental Disabilities (AI/DD), and the Department of Health and Human Services' Office on Disability to serve as the Federal agency responsible for increasing access to community supports, while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
   - Aging and Disability Resource Centers can act as a gateway to a broad range of services and supports for older adults and people with disabilities.

2. **Centers of Disease Control and Prevention (CDC):** https://www.cdc.gov/
   The CDC is one of the major operating components of the Department of Health and Human Services. CDC works to protect America from health, safety and security threats, both foreign and in the U.S. Whether diseases start at home or abroad, are chronic or acute, curable or preventable, human error or deliberate attack, CDC fights disease and supports communities and citizens to do the same. CDC increases the health security of our nation. As the nation's health protection agency, CDC saves lives and protects people from health threats. To accomplish their mission, CDC conducts critical science and provides health information that protects our nation against expensive and dangerous health threats, and responds when these arise.

3. **Centers for Medicare and Medicaid (CMS):** www.cms.gov
   CMS is part of the Department of Health and Human Services (HHS). CMS administers several programs including: Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Health Insurance Marketplace. The following websites are operated by CMS and HHS:
   - Medicare.gov; MyMedicare.gov
   - Medicaid.gov
   - InsureKidsNow.gov
   - HealthCare.gov
   - HHS.gov/Open

WEB RESOURCES

4. **Data Resource Center for Children and Adolescent Health (DRC):** http://childhealthdata.org/
   The DRC is a non-profit, national data resource providing easy access to children's health data on a variety of important topics, including the health and well-being of children and access to quality care. The DRC promotes active understanding and use of this data by policymakers, MCH program leaders and professionals, family and child health advocates, and researchers in order to inform and advance key national and state child and youth health goals. These data are specifically designed to assist states with child health needs assessment, program planning and evaluation, policy and standards development, monitoring, training, applied research and development of systems of care for children and youth.

5. **Disability Statistics:** www.disability.org
   Disability Statistics can be found on Cornell University Yan Tan Institutes website which is an online resource for U. S. disability statistics

6. **National Council on Disability (NCD):** https://ncd.gov/
   NCD is an independent federal agency charged with advising the President, Congress, and other federal agencies regarding policies, programs, practices, and procedures that affect people with disabilities. NCD is comprised of a team of Presidential and Congressional appointees, an Executive Director appointed by the Chair, and a full-time professional staff.

7. **New York State Department of Health:** https://www.health.ny.gov/
   - Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities (October 6, 2017)

WEB RESOURCES

8. **New York State Office of Temporary and Disability Assistance (OTDA):** http://otda.ny.gov/
   OTDA is responsible for supervising programs that provide assistance and support to eligible families and individuals. OTDA's functions include: Providing temporary cash assistance; providing assistance in paying for food; providing heating assistance; overseeing New York State's child support enforcement program; determining certain aspects of eligibility for Social Security Disability benefits; supervising homeless housing and services programs; and providing assistance to certain immigrant populations.
   - The Home Energy Assistance Program (HEAP) helps low-income people pay the cost of heating their homes.

9. **NY ABLE:** https://www.mynyable.org
   The Stephen Beck, Jr. Achieving a Better Life Experience (ABLE) Act of 2014 allows those with disabilities to save for qualified disability expenses without the risk of losing their benefits from assistance programs like SSI and Medicaid.
   NY ABLE is an ABLE program designed specifically for New York residents. NY ABLE accounts give earnings the ability to grow tax-deferred, and allow savings to be withdrawn tax-free for qualified expenses.

10. **NYS Office for Persons with Developmental Disabilities**: www.opwdd.ny.gov
    New York State Department of Health & New York State Office for People with Developmental Disabilities. (October 6, 2017). *Care Coordination Organization/Health Home (CCO/HH) Application to Service People with Intellectual and /or Developmental Disabilities.*

    New York State Department of Health & New York State Office for People with Developmental Disabilities. (December 5, 2017). *Draft Transition Plan for Home and Community Based Services (HCBS), Health Home Care Management for Individuals with Intellectual and / or Developmental Disabilities, and the Development of Specialized Managed Care*

WEB RESOURCES

11. Overview of OPWDD, Community, and Natural Supports

- OPWDD Overview
- OPWDD Supports and Services
- Home and Community-Based Services
- Self-direction
- OPWDD Housing Options and Resources Power Point – pages 16 to 28
- Home or Living Supports and Services
- Residential Services
- Family Supports Services
- Employment Supports and Services
- Day Services
- Front Door Access to Services
- Person Centered Planning and Outcomes
- Person-Centered Service Plan
- Person Centered Planning Methodologies
- Life Plan
- Consolidated Assessment System

Benefits and Eligibility:

- OPWDD Website: Benefits Information
- Benefit Development Resource Guide (OPWDD)
- Medicaid and OPWDD
- Medicare
- Supplementary Security Income (SSI)

WEB RESOURCES

- Social Security Disability Insurance (SSDI)
- Social Security's Representative Payee Program OPWDD Benefit Resource Guide [pp. 98 – 100]
- Overview of Services for Willowbrook Class Members OPWDD Power Point (February, 2017)
- Centers for Independent Living are community-based centers are run by and for people with disabilities of all ages and offer a broad range of services to empower and enable people to stay in the community.
- Assistive Technology Act program that can help people find, try, and obtain assistive technology (AT) devices and services. Assistive Technology includes everything from "low tech" helping tools like utensils with big handles to high tech solutions like talking computers. Every state and territory has an Assistive Technology Act program.
- Eldercare Locator: Visit eldercare.gov or call 800-677-1116 to be connected with the local Area Agency on Aging or Aging and Disability Resource Center. These organizations can help people with disabilities understand what services are available in their community and provide in enrollment.

12. **Robert Wood Johnson Foundation:** https://www.rwjf.org
    The Robert Wood Johnson Foundation (RWJF) is the nation's largest philanthropy dedicated solely to health. RWJF's key focus areas are Health Leadership, Health Systems, Healthy Communities, Healthy Kids, Healthy Weight, and building a culture of health.

13. **The Commonwealth Fund:** www.commonwealthfund.org
    The Commonwealth Fund is a private foundation that promotes a high-performance health care system providing better access, improved quality, and greater efficiency. The Fund's work focuses particularly on society's most vulnerable, including low-income people, the uninsured, minority Americans, young children, and elderly adults. The Fund carries out this mandate by supporting independent research on health care issues and making grants to improve health care practice and policy. An international program in health policy is designed to stimulate innovative policies and practices in the United States and other industrialized countries.

WEB RESOURCES

14. **U. S. Department of Agriculture | Food and Nutrition Service |Supplemental Nutrition Assistance Program (SNAP):** https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program-snap

15. **U.S. Department of Human Services and Health Services| National Institutes of Health | National Institute of Child Health and Human Development:** https://www.nichd.nih.gov/about/Pages/index.aspx
NICHD was established in 1962 by President John F. Kennedy, with the support of Congress, to study the "complex process of human development from conception to old age." In pursuit of its mission, NICHD conducts and supports laboratory research, clinical trials, and epidemiological studies that explore health processes; examines the impact of disability and disease; and sponsors training programs for scientists, health care providers, and researchers.

VIDEOS

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2. Cleveland Clinic. (2015, September 28). *Coordinating Care and Managing Transitions* – Beth Ann Swan [Video file]. Retrieved from https://www.youtube.com/watch?v=O28wx9zHSxw (36m:30s)
3. Cornell University Yan Tan Institute (YTI). (2017, February 1). *Disability statistics 2015* [Webinar]. Retrieved from http://disabilitystatistics.org/webinar-ds.cfm (21m:59s)
4. Democracy Now! (2013, March 1). *Salt, sugar, fat: NY Times reporter Michael Moss on how the food giants hooked America on junk food* [Video file]. Retrieved from https://www.youtube.com/watch?v=I3fiYKnYECQ (18m:25s)
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6. Harvard Business School. (2012, February 21). *How healthcare can become higher in quality, lower in cost & widely accessible: Clay Christensen* [Video file]. Retrieved from https://www.youtube.com/watch?v=yoW5x71vbJc (1hr:03m:15s)

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16. The Agenda with Steve Paikin. (2013, August 19). *Michael Moss*: *How the food giants hooked us* [Video file]. Retrieved from https://www.youtube.com/watch?v=bs2auTOPUxE (25m:55s)
17. The Boston Consulting Group. (2012, June 19). *Michael Porter on paving the way for value based health care* [Video file]. Retrieved from https://www.youtube.com/watch?v=KXecsdrQ-YI (12m:09s)

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19. WithTheEconomist. (2014, October 21). *Hospitals and health care of the future* [Video file]. Retrieved from https://www.youtube.com/watch?v=EJYvDGv7lOc (44m:10s)

20. Yale University. (2014, April 4). *When one person has many diseases: Multiple chronic conditions in older adults* [Video file]. Retrieved from https://www.youtube.com/watch?v=nD1WhyAxdns VIRE (24m:28s)

21. Yale University. (2014, April 4). *Why humans have friends: The evolutionary biology of lifelong social interactions*: *Nicholas Christakis* [Video file]. Retrieved from https://www.youtube.com/watch?v=WVgaQs_sOYc (23m:39s)

MODULE 7: Ethics and Professional Boundaries

Section I

Module Overview: This module focuses on understanding ethics and professional boundaries. At the end of this module, care managers will be able to:

- Demonstrate knowledge of ethical and professional responsibilities and boundaries
- Participate in opportunities for continued training and education
- Demonstrate professional work habits including
    - Dependability
    - Time management
    - Independence
    - Responsibility

Key Concepts: Ethical decision-making framework; moral agency; ethics code; preamble, principles, and standards; person-centered supports; promoting physical and emotional well-being; integrity and responsibility; confidentiality; justice, fairness, and equity; respect; relationships; self-determination; advocacy; personal boundaries and burn-out; professional boundaries; continuum of professional behavior; compassion fatigue; stress management.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
ETHICS	1) Identify a framework for ethical decision-making. 2) Explain the purpose for a code of ethics. 3) Describe the history of the treatment of persons with developmental disabilities and discuss the rationale for the current ethical guidelines. 4) Describe Individual Rights in the Person-Centered Planning Process. 5) State the nine central principles of the Code of Ethics (OPWDD/NADSP). 6) Provide examples of "Putting People First." 7) Demonstrate professional working habits including: a. dependability b. time-management c. independence d. responsibility 8) Explain the importance of continuing education for care managers.	• OPWDD/ NADSP Code of Ethics • Code of Ethics Webinar Series. RCWT-NADSP • A Framework for Ethical Decision Making • Moral Agency: An Ethical Decision-Making Framework • Credo for Support – People First version. Video (5m: 08s) • 1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher Guide.* Modules 2, 23 and 24. • 1199SEIU Training and Employment Funds and Primary Care Development Corporation (2014). *Care Coordination Fundamentals: Student Exercise Book.* Modules 2, 23 and 24. • When the Moon Come Up: Norman Kunc – Video (6m: 01s) Norman Kunc was born with cerebral palsy and is a well-known disability rights advocate. In this collage of powerful images set to poignant music, Norman Kunc contemplates what might have happened if he had been institutionalized as his mother was recommended to do by professionals. • OPWDD Putting People First: Raising Expectations, Changing Lives (2015) • OPWDD Putting People First: Work Settings Plan (2016)

		• The Dos and Don'ts in a Professional Workplace. Video (4m: 11s). • The Successful Person's Guide to Time Management and Self-Assessment Tool. • Responsibility. Video (1m: 42s).
PROFESSIONAL BOUNDARIES	1) Define professional boundaries. 2) Describe the importance of having professional boundaries in supporting individuals. 3) Describe ways to maintain healthy boundaries. 4) Identify and explain risky behaviors that lead to boundary violations. 5) Explain the relationship between personal boundaries and burn-out. 6) Explain why it is important for care managers to be aware of Compassion Fatigue. 7) Identify ways to prevent Compassion Fatigue. 8) Use a continuum of professional behavior to analyze what happens when there is: a. too little care management involvement	• 1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher Guide.* Modules 23 and 24. • 1199SEIU Training and Employment Funds and Primary Care Development Corporation (2014). *Care Coordination Fundamentals: Student Exercise Book.* Modules 23 and 24. • Setting Boundaries with Difficult People. Video (8m: 50s) • Preventing Compassion Fatigue Lisa Wessan. Accompanying video: Self-Care for Social Workers. (8m: 18s).

	b. too much care management involvement 9) Provide examples of when to ask for help from the care coordination team. 10) Identify the benefits of stress management in the role of care manager.	

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 7: ETHICS AND PROFESSIONAL BOUNDARIES

Books, Manuals, and Reports

Ethics | Professional Boundaries

References

Ethics | Professional Boundaries

Web Resources

Videos

Ethics | Professional Boundaries

BACK TO SECTION I

ETHICS AND PROFESSIONAL BOUNDARIES

BOOKS, MANUALS, AND REPORTS

Ethics

1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher's Manual*.
Modules 2, 23, and 24

1199SEIU Training and Employment Funds and Primary Care Development Corporation Care (2014). *Care Coordination Fundamentals: Student Exercise Book.*
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Akhtar, F. (2013). *Mastering social work value and ethics*. London, England: Jessica Kingsley Publishers. Available from https://www.jkp.com/uk/mastering-social-work-values-and-ethics.html **($)**

Barsky, A. E. (2010). Ethics and values in social work: An integrated approach for a comprehensive curriculum. New York, NY: Oxford University Press. Available from http://global.oup.com/?cc=us **($)**

BOOKS, MANUALS, AND REPORTS

Professional Boundaries

1199SEIU Training and Employment Funds and Primary Care Development Corporation (2013). *Care Coordination Fundamentals Teacher's Manual.*
Modules 23 and 24.

1199SEIU Training and Employment Funds and Primary Care Development Corporation Care (2014). *Care Coordination Fundamentals: Student Exercise Book.*
Modules 23 and 24.

Cooper, F. (2012). *Professional boundaries in social work and social care: A practical guide to understanding, maintaining and managing your professional boundaries.* London and Philadelphia: Jessica Kingsley Publishers. Available from https://www.amazon.com/Professional-Boundaries-Social-Work-Care/dp/1849052158

Wagner, M. (2006). *Exploring the Therapeutic Relationship: Practical Insights for Today's Clinician*. Salt Lake City, UT: Aardvark Global Publishing. Available from https://books.google.com/books/about/Exploring_the_Therapeutic_Relationship.html?id=vAIlbXHzvmkC **($)**

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Edwards, I., Delany, C. M., Townsend, A. F., & Swisher, L. L. (2011). Moral agency as enacted justice: A clinical and ethical decision-making framework for responding to health inequities and social injustice. *Physical Therapy*, *91*(11): 1653-1663. doi: 10.2522/ptj.20100351.20

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McDonald, K. E., Kidney, C. A., & Patka, M. (2012). "You need to let your voice be heard": Research participants' views on research. *Journal of Intellectual Disability Research*. *57*(3), 216-225. doi: 10.1111/j.1365-2788.2011.01527.x.

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WEB RESOURCES

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   http://www.nursingworld.org/codeofethics

2. **American Psychologist Association (APA): Ethical Principles of Psychologists and Code of Conduct (Effective 2003 with amendments effective 2010 and 2017):**
   https://www.apa.org/ethics/code/index.aspx

3. **Behavior Analyst Certification Board (BACB): Professional and Ethical Compliance Code for Behavior Analysts (revised 2017):** https://www.bacb.com/wp-content/uploads/2017/09/170706-compliance-code-english.pdf

WEB RESOURCES (Ethics)

4. **National Association of Social Workers (NASW): NASW Code of Ethics (revised 2017):** https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English.aspx

5. **National Organization for Human Services (NOHS): Ethical Standards for Human Services Professionals (2015):** http://www.nationalhumanservices.org/ethical-standards-for-hs-professionals

6. **New York State Office for People with Developmental Disabilities (OPWDD) Code of Ethics:** https://opwdd.ny.gov/code-of-ethics/home

VIDEOS

Ethics

1. Active Nation UK. (2013, July 22). *Responsibility* [Video file]. Retrieved from: https://www.youtube.com/watch?v=-QRqIGznHvU&app=desktop
2. GV Engineering Modules. (2011, April 13). *The Do's and Don'ts of the Professional Workplace* [Video file]. Retrieved from: https://www.youtube.com/watch?v=Zex9hKT2XZI
3. Kunc, N. (2006, September 9). *When the Moon Come Up* [Video file]. Retrieved from: https://www.youtube.com/watch?v=k2OxpzPybT4
4. Kunc, N. & Van der Klift, E. (2006, October 16). *Credo for Support – People First Version* [Video file]. Retrieved from: https://www.youtube.com/watch?v=wunHDfZFxXw

VIDEOS (Ethics)

5. Let's Talk. (2010, February 27): *Time Management Skills At Work* [Video file]. Retrieved from: https://www.youtube.com/watch?v=IdCnZMkOArY&feature=youtu.be (8m:14s)
6. Regional Centers for Workforce Transformation. (2017).*Code of Ethics Webinar Series*. Retrieved from: http://www.workforcetransformation.org/informational-webinar-series/code-ethics-webinar-series/

Professional Boundaries

1. Hanks, J. (2011, December 9). *Don't be Afraid to Set Boundaries* [Video file]. Retrieved from: http://www.youtube.com/watch?v=fVmbVgYgcWc&feature=related
2. Hanks, J. (2014, July 9). *Setting Boundaries with Difficult People* [Video file]. Retrieved from: https://www.youtube.com/watch?v=tdzrDV8FqcA
3. Sabo, B. (2013, March 1). *Self-Care for Health Care Professionals: Strategies to Address Caring Work* [Video file]. Retrieved from: https://www.youtube.com/watch?v=95kHDIuENVU&feature=youtu.be (49m:05s)
4. Wessman, L., & National Association of Social Workers. (2014, January 9). *Self-Care in Social Work* [Video file]. Retrieved from: https://www.youtube.com/watch?v=vJ5fqsWskkE (8m:18s)

MODULE 8: Quality Improvement

Section I

Module Overview: This module aims to introduce the fundamentals of quality improvement, quality metrics/performance measures, and performance evaluation to prepare and support learners as they drive quality improvement projects from planning to sustainment within their care coordination organization. By covering the four major topics (*Quality Improvement Concepts and Strategies, Quality Improvement Process, Metrics and Performance Measures, Tools and Methods to Measure and Report on Performance),* learners will gain the necessary technical knowledge to:

- Understand quality improvement methods and processes
- Provide quality driven, cost-effective, culturally appropriate services

The goal of this module is to help establish a robust culture that upholds safety for individuals and employees while minimizing risk for the care coordination organization.

Key Concepts: Continuous quality improvement, quality assurance, risk management, quality metrics, process metrics, process improvement, performance management, quality reporting, benchmarking, care coordination and quality care, person-centered planning.

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
QUALITY IMPROVEMENT CONCEPTS AND STRATEGIES	1) Explain the role of Federal government and local municipalities in defining and implementing health care policy. a. Discuss how standards are set in healthcare for what should be measured, how and when. 2) Define quality improvement in health care, behavioral health, aging, and Long Term Supports and Services. 3) Explain the importance of measuring quality and maintaining data integrity. 4) Differentiate between quality improvement and quality assurance. 5) Identify the overlapping functions between quality improvement and risk management. 6) Explain basic methodologies and strategies of quality improvement by: a. Defining: *Quality improvement, quality plan, quality infrastructure, performance measure, SMART goal, quality communication, and health outcomes*. b. Explaining effective quality improvement strategies (e.g. educating provider	• 1199 SEIU TEF and PCDC Care Coordination Fundamentals: Module 22 (Pages 298-306) *(CC Supervisor, CCO Admin)* • Bureau of Primary Health Care Health Resources and Services Administration Department of Health and Human Services. PowerPoints: ○ Health Resources & Services Administration - Session 2: *"How to leverage resources to design a successful health center QI program"* (March 10, 2011) *(CCO Admin)* ○ Health Resources & Services Administration - Session 3: *"Tips for Implementing Your QI Plan"* (March 31, 2011) *(CCO Admin)* • CMS - Quality Measure vs. Quality Improvement. These webpages define the mechanism of quality improvement as *standardization*, and the mechanisms of quality measurement as *selection and choice*. ○ CMS Quality Measure and Quality Improvement *(All)* ○ CMS Quality Programs *(CC Supervisor, CCO Admin)* ○ CMS Home Health Quality Reporting Requirements *(CCO Admin)* • CMS – Medicare Advantage Quality Improvement Project (QIP) and Chronic Care Improvement Program (CCIP) (2017-2018) (*CCO Admin)*

	agencies and individuals and families; promotion of self-management; audit and feedback; etc.) 7) Identify the current trends impacting the I/DD population with a focus in the following areas: a. Mental health needs in I/DD population b. Current health disparities experienced by I/DD population c. Different models of crisis avoidance and stabilization 8) Make the connection between effective care coordination work and quality-driven care that is both cost-effective and person-centered. a. Explain the importance of collecting accurate data b. Demonstrate how data collection plays a role in identifying problematic trends that indicate a need for improvement in the individual's care c. Describe how data can be used to determine what kind of follow-up care coordination is needed to address performance indicators and improve outcomes	• Creating a Culture of Quality. Harvard Business Review. *(CC Supervisor, CCO Admin)* • Total Quality Management (TQM). YouTube video (8m:45s) *(CC Supervisor, CCO Admin)* • Plan Do Study Act (PDSA) • Plan Do Study Act (PDSA). YouTube video (5m:39s) *(All)* • The PDSA Cycle – Part 1. YouTube video (8m:06s) • The PDSA Cycle – Part 2. YouTube video (3m:48s) *(All)* • Quality Improvement in Healthcare. YouTube video (11m:08s) • I/DD and Mental Illness: Three Approaches to Client Empowerment and Crisis Avoidance. • Race and Health Disparities in Adults with Intellectual and Developmental Disabilities. (Pg. 10, 27, 30-36) • Medicaid Managed Care Quality Performance among Individuals with Developmental Disabilities, New York State, 2013

QUALITY IMPROVEMENT PROCESS	1) Identify the duties and responsibilities of all key stakeholders in the quality improvement process. 2) Explain key components of the person-centered review related to Care Coordination and quality improvement processes. 3) Describe what makes quality improvement processes both effective and efficient. a. Discuss quality determinants and quality aspects of integrated care 4) Make the connection between ongoing/continuous quality activities (e.g. monitoring, evaluating, trending, preventing, improving, etc.) and achieving measurable improvement. 5) Explain the difference between individual personal outcomes and agency-specific goals as related to quality improvement. 6) Practice problem-solving skills that address the most current issues in the care coordination field: a. List the top five care coordination issues that have led to poor outcomes and/or individual's dissatisfaction	• 1199 SEIU TEF and PCDC Care Coordination Fundamentals: Module 22 (Pages 298-306) *(All)* • Safety Net Medical Home Initiative: Organized, Evidence Based Care *(All)* • US Dept. Of Health & Human Services: Systems Based Practice Module *(All)* • OPWDD Quality Improvement Road Map • Person-Centered Care Planning for Clients With Complex Needs. Damian Smith and Eileen Carey. Learning Disability Practice. 2013, December. Vol. 16, Number 10. • Rapid Cycle Quality Improvement (RCQI). (2016). *(CCO Admin)* • Joint Commission Webinar – "Ensuring eCQM Accuracy" (October, 2017) *(CCO Admin)* • Joint Commission Webinar – "Establish Your eCQM A-Team" (September, 2017) *(CCO Admin)* • Joint Commission Webinar – "Keys to eCQM Success" (August, 2017) *(CCO Admin)* • Institute for Healthcare Improvement – QI Essentials Toolkit

	b. Propose at least three solutions for each issue, and explain how all solutions will ensure compliance with OPWDD/DQI requirements as well as improve outcomes for the individual c. List at least two ways in which a care manager will monitor the proposed solutions and document the desired outcomes 7) Identify and implement systemic improvements and corrective actions necessary to address identified issues and inadequacies. 8) Demonstrate how to conduct quality improvement protocols using different process improvement tools such as: Rapid Cycle Quality, process flow charts, activity logs, value-stream mapping, etc. 9) Identify an *Incident* and/or *Event* (as defined by OPWDD Part 624 regulations) and report it in a timely manner to the required stakeholders. 10) Follow agency procedures and protocols as care managers in the OPWDD system with respect to fire safety.	

QUALITY IMPROVEMENT METRICS AND PERFORMANCE MEASURES FOR I/DD	1) Summarize the role of quality metrics and performance measures in an effective quality improvement plan: a. Explain how a strategic quality management plan is structured and how metrics/measures are connected to organizational performance 2) Identify performance measures for effective care coordination: a. Identify emerging trends in Care Coordination Measurement b. List measures used in Electronic Health Records (EHR) that assess care coordination c. List at least five measures outside EHR that also assess care coordination. d. Describe a care manager's job performance standards including the Care Coordination Organization's (CCO's) expectations for training participation and completion 3) Employ quality metrics and performance measures that will result in achieving both individuals' personal outcomes and agency-specific goals.	• Bureau of Primary Health Care Health Resources and Services Administration Department of Health and Human Services. PowerPoint (SLIDE 17): Health Resources & Services Administration - Session 3: *"Tips for Implementing Your QI Plan" (All)* • OPWDD Quality Metrics and Performance Management (Pages 34-37). Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities *(CCO Admin)* • OPWDD Agency Quality Performance Standards. (Pg. 12-13). *(All)* • CCO/HH Performance Measures as per NY.GOV *(CCO Admin)* • 2018 Summary Table of HEDIS Measures, Product Lines and Changes *(CCO Admin)* • Quality measures for Health Homes for Individuals with Chronic Conditions Amount, Duration, and Scope of Medical and Remedial Care Services; Categorically Needy (Pg. 13-21) *(CCO Admin)* • Quality measures to Improve Disease-Related Care for Chronic Conditions (Pg. 3-4) *(CCO Admin)* • CMS 2014 Clinical Quality Measures (CQMs) Adult-Recommended Core Measures *(All)* • The Joint Commission – National Hospital Inpatient Quality Measures *(CCO Admin)*

	a. Refer to CMS, OPWDD and other tools (e.g. NCQA/HEDIS, CQL, etc.) to identify required and appropriate metrics 4) Analyze key data points to measure quality and identify improvement areas. a. Define key metrics for I/DD population: medical, clinical, valued outcomes or personal outcome measures, habilitation goals, satisfaction with Life Plan, satisfaction with staff, and financial domains 5) Assess the quality of the person-centered planning process using the OPWDD's person-centered planning assessment tools/indicators and CQL's Personal Outcome Measures framework.	• Kaiser Permanente – Measuring Care Quality (November, 2016) *(CCO Admin)* • Kaiser Permanente – "Measuring Patient Safety in Our Hospitals - Patient Falls" *(CCO Admin)* • Measuring Care Quality in Our Hospitals - Kaiser Foundation Hospital, Northern California Region Fresno *(CCO Admin)* • Kaiser Permanente's Hospital Quality and Safety Survey (August, 2016) *(CCO Admin)* • The State of the Science of Health and Wellness for Adults with Intellectual and Developmental Disabilities – Journal Article *(All)* • Using National Core Indicators (NCI) Data for Quality Improvement Initiatives. April 30, 2012. (Pg. 7-8) *(CCO Admin)* • Measuring and Improving Quality • Reimagining Quality Measurement • OPWDD: Person-Centered Planning Checklist • OPWDD: Eight Essential Hallmarks to Person Centered Planning (plus performance indicators) • OPWDD: Personal Outcome Measures • The Arc New York: Using CQL Personal Outcome Measures POM data and benchmarks to improve quality • OPWDD: Person-Centered Planning Methodologies • OPWDD: Facilitating a Person-Centered Plan

QUALITY IMPROVEMENT TOOLS AND METHODS TO MEASURE AND REPORT ON PERFORMANCE	1) Describe the importance of accurate data in quality measurement. 2) Facilitate a process for quality communication including reporting findings/results and making recommendations to the individual's team (e.g. additional staff training, changes/revisions in Life Plan). 3) Describe expectations of the Care Coordination Organization's reporting.	• Six Dimensions of Healthcare Quality. YouTube video (6m:44s) *(CCO Admin)* • 1199 SEIU TEF and PCDC Care Coordination Fundamentals: Module 22 (Pg. 298-306) *(CC Supervisor, CCO Admin)* • Agency for Healthcare Research and Quality: Quality Measure Tools & Resources *(All)* • INTERACT: Interventions to Reduce Acute Care Transfers. *(CCO Admin)* • Using National Core Indicators (NCI) Data for Quality Improvement Initiatives. April 30, 2012. (Pg. 19-21) *(CCO Admin)* • Exploring Robust Methods for Evaluating Treatment and Comparison Groups in Chronic Care Management Programs. *(CCO Admin)* • Creating Safe Harbors for Quality Measurement Innovation and Improvement *(CCO Admin)* • Improving the Quality of Quality Improvement Reporting Standards for Quality Improvement Reporting Excellence (SQUIRE) 2.0 Guidelines *(CCO Admin)* • "Accountability Measures — Using Measurement to Promote Quality Improvement." *(CCO Admin)* • Measuring the Cost of Quality Measurement - A Missing Link in Quality Strategy *(CCO Admin)* • Tension Between Quality Measurement, Public Quality Reporting, and Pay for Performance. *(CCO Admin)*

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 8: QUALITY IMPROVEMENT

BACK TO SECTION I

BOOKS, MANUALS, AND REPORTS

1199SEIU Training and Employment Funds and Primary Care Development Corporation. (2013). *Care Coordination Fundamentals Teacher's Manual, 298-306.*

Agency for Healthcare Research and Quality. (2014). Chapter 4: Emerging Trends in Care Coordination Measurement. Care Coordination Atlas. Retrieved from https://www.ahrq.gov/sites/default/files/publications/files/ccm_atlas.pdf

Langley, G., Moen, R., Nolan, K., Nolan, T., & Norman, C. (2009). *The Improvement Guide: A Practical Approach to Enhancing Organizational Performance* (2nd Ed.). San Francisco, CA: Jossey-Bass. Available from https://www.wiley.com/en-us/The+Improvement+Guide%3A+A+Practical+Approach+to+Enhancing+Organizational+Performance%2C+2nd+Edition-p-9780470192412 **($)**

Treadwell, J., Perez, R., Stubbs, D., McAllister, J. W., Stern, S., & Buzi, R. (2015). *Case Management and Care Coordination: Supporting Children and Families for Optimal Outcomes,* Chapters 3 and 9. New York, NY: Springer International Publishing**.** Available from http://www.springer.com/us/book/9783319072234 **($)**

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Anderson, L. L., Humphries, K., McDermott, S., Marks, B., Sisarak, J., & Larson, S. (2013). The state of the science of health and wellness for adults with intellectual and developmental disabilities. *Intellectual and Developmental Disabilities*, *51*(5), 385-398. doi:10.1352/1934-9556-51.5.385

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Baker, D. W., & Chassin, M. R. (2016). Measuring and improving quality. *Journal of the American Medical Association* (JAMA); *315*(24), 2733. doi:10.1001/jama.2016.4613 **($)**

Barelds, A., Van De Goor, I., Bos, M., Van Heck, G., & Schols, J. (2009). Care and service trajectories for people with intellectual disabilities: Defining its course and quality determinants from the client's perspective. *Journal of Policy and Practice in Intellectual Disabilities, 6,* 163–172. doi:10.1111/j.1741-1130.2009.00224 **($)**

Beadle-Brown, J., Hutchinson, A., & Whelton, B. (2012). Person-centered active support – increasing choice, promoting independence and reducing challenging behavior. *Journal of Applied Research in Intellectual Disabilities*, *25*(4), 291-307. doi:10.1111/j.1468-3148.2011.00666.x **($)**

Burgers, J., Voerman, G., Grol, R., Faber, M., & Schneider, E. (2010). Quality and coordination of care for patients with multiple conditions: Results from an international survey of patient experience. *Eval Health Prof, 33*(3), 343-64. doi: 10.1177/0163278710375695

Chassin, M., Loeb, J., Schmaltz, S., & Wachter, R. (2010). Accountability measures — using measurement to promote quality improvement. *New England Journal of Medicine*, *363*(7), 683-688. doi:10.1056/NEJMsb1002320

Doyle, A., Hourigan, S., & Fanagan, S. (2016). *Annual report of the national intellectual disability database committee 2016 main findings*. (HRB Statistics Series 33). Retrieved from the Health Research Board website: http://www.hrb.ie/uploads/tx_hrbpublications/NI/DD_2016_Annual_Report.pdf

Farmer, S., Black, B., & Bonow, R. (2013). Tension between quality measurement, public quality reporting, and pay for performance. *Journal of the American Medical Association*, *309*(4), 349–350. doi:10.1001/jama.2012.191276

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Kurey, B., & Srinivasan, A. (2014). Creating a culture of quality. *Harvard Business Review.* Retrieved from: https://hbr.org/2014/04/creating-a-culture-of-quality

Malloy, K., Cogan, L., & Matson, J. (2015). *Medicaid managed care quality performance among individuals with developmental disabilities, New York State, 2013* (Statistical Brief #8). Retrieved from The New York State Department of Health Office of Quality and Patient Safety Division of Performance Improvement and Patient Safety website: https://www.health.ny.gov/health_care/managed_care/reports/statistics_data/8quality_performance_individuals_with_developmental_disabilities.pdf

McGlynn, E., Schneider, E., & Kerr, E. (2014). Reimagining quality measurement. *New England Journal of Medicine, 371*(23), 2150-2153. Retrieved from http://www.nejm.org/doi/pdf/10.1056/NEJMp1407883

McGlynn, E., Kerr, E. (2016). Creating Safe Harbors for Quality Measurement Innovation and Improvement. *Journal of the American Medical Association. 315*(2):129–130. doi:10.1056/NEJMp1407883 **($)**

Mezzich, J., Appleyard, J., Botbol M., Salloum, I., & Kirisci, L. (2016). Conceptualization and metrics in person-centered medicine. *The International Journal of Person Centered Medicine, 6*(4), 213-218. Retrieved from http://www.ijpcm.org/index.php/IJPCM/article/view/213-218

Mueck, K., Putnam, L., & Kao, L. (2016). Improving the quality of quality improvement reporting standards for quality improvement reporting excellence (SQUIRE) 2.0 Guidelines. *Journal of the American Medical Association Surg., 151*(4), 311–312. doi:10.1001/jamasurg.2015.4719 **($)**

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Office for People with Developmental Disabilities. (2017). *Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities*, 34-37. Retrieved from New York State Department of Health website:
https://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/I/DD/docs/hhI/DD_application_part_1.pdf
Note: This document outlines OPWDD's required performance management and quality metrics.

Office for People with Developmental Disabilities. (2015). *OPWDD Agency Quality Performance Standards*, 12-13. Retrieved from https://opwdd.ny.gov/sites/default/files/documents/Final_AQP_Domains_Standards.pdf
Note: This document outlines OPWDD's required quality performance standards intended to be applied to and referenced by all agencies providing service and supports to individuals with developmental and intellectual disabilities.

Ouslander, J., Bonner, A., Herndon, L., & Shutes, J. (2014). INTERACT: Interventions to reduce acute care transfers. *J Am Med Dir Assoc*, *15*(3), 162–170. doi:10.1016/j.jamda.2013.12.005

Samuel, P. S., Rillotta, F., & Brown, I. (2012). The development of family quality of life concepts and measures. *Journal of Intellectual Disability Research, 56*(1), 1–16. doi:10.1111/j.1365-2788.2011.01486.x

Schuster, M., Onorato, S., & Meltzer, D. (2017). Measuring the cost of quality measurement - a missing link in quality strategy. *Journal of the American Medical Association*, *318*(13), 1219-1220. doi: 10.1001/jama.2017.11525 **($)**

Scott, H. M., & Havercamp, S. M. (2014). Race and health disparities in adults with intellectual and developmental disabilities. *Intellectual and Developmental Disabilities, 52*(6), 409-18. doi: 10.1352/1934-9556-52.6.409

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Stanford University–UCSF Evidence-based Practice Center (2007). *Closing the quality gap: A critical analysis of quality improvement strategies* (Publication No. 04-0051-1). Retrieved from Agency for Healthcare Research and Quality website: https://www.ahrq.gov/downloads/pub/evidence/pdf/caregap/caregap.pdf

Smith, D., & Carey, E. (2013). Person-centered care planning for clients with complex needs. *Learning Disability Practice, 16*(10), 20-23. doi:10.7748/ldp2013.12.16.10.20.e1465

U.S. Department of Health and Human Services. (2015). Strategies & tools to support health professionals caring for people living with MCC. *Multiple Chronic Conditions Initiative: Education and Training Curriculum on Multiple Chronic Conditions*. Retrieved from https://www.hhs.gov/sites/default/files/ash/initiatives/mcc/education.../module-5.ppt

Wells A.R., Hamar B., Bradley C., & Pope, J. E. (2013). Exploring robust methods for evaluating treatment and comparison groups in chronic care management programs. *Population Health Management*, *16*(1), 35-45. doi:10.1089/pop.2011.0104.

Whedon, J., Punzo, M., Dehen, R., Brown Menard, M. Fogel, D., & Olejownik, J. (2016). Relevance of quality measurement to integrative healthcare in the United States. *The Journal of Alternative and Complementary Medicine, 22*(11), 853–858. doi:10.1089/acm.2016.0173 **($)**

Zimmerman, B., & Vaidya, A. (2017). 100 patient safety benchmarks. *Becker's Clinical Leadership and Infection Control.* Retrieved from https://www.beckershospitalreview.com/quality/100-patient-safety-benchmarks-2017.html

WEB RESOURCES

1. **Agency for Healthcare Research and Quality: Quality Measure Tools & Resources:**
   https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/index.html
   This webpage features various quality improvement measurement, tools, and information, including AHRQ's Quality Indicators Hospital Toolkit, ambulatory clinical performance measures, and the National Quality Measures Clearinghouse.

2. **Centers for Medicaid and Medicare:**
   - These webpages define the mechanism of quality improvement as *standardization*, and the mechanisms of quality measurement as *selection and choice*:
   - CMS Quality Measure and Quality Improvement | CMS Quality Programs | CMS Home Health Quality Reporting Requirements
   - Medicare Advantage: Quality Improvement Project (QIP) and Chronic Care Improvement Program (CCIP) Resource Document.
   - Clinical Quality Measures (CQMs)-Adult Recommended Core Measures.

3. **Discern Health:** Measuring Person-Centered Care

4. **Health Workforce Technical Assistance Center:**
   School of Public Health, University at Albany. (2016). Rapid Cycle Quality Improvement (RCQI). A Resource Guide to Accelerate Improvement Efforts for Health Resources and Services Administration (HRSA) Grantees.

5. **Institute for Health Improvement:** This toolkit provides essential Quality Improvement tools such as a Case and Effect Diagram, Driver Diagram, Failure Modes and Effect Analysis, Flowchart, Histogram, Pareto Chart, PDSA Worksheet, Project Planning Form, Run Chart, Control Chart, and Scatter Diagram.
   http://www.ihi.org/resources/Pages/Tools/Quality-Improvement-Essentials-Toolkit.aspx

WEB RESOURCES

6. **Kaiser Permanente:**
   - Measuring Care Quality – Northern California Region. (2016) Clinical effectiveness of care measures of performance from Health Plan Employer Data and Information Set (HEDIS).
   - Measuring Patient Safety in Our Hospitals - Patient Falls. (2016) Reducing Patient Falls in Kaiser Foundation Hospitals.
   - Measuring Care Quality In Our Hospitals - Kaiser Foundation Hospital, Northern California Region Fresno. (2017)
   - Kaiser Permanente's Hospital Quality and Safety Survey. (2016)

7. **Minnesota Department of Health:**
   PDSA: Plan-Do-Study-Act (also called Rapid Cycle Improvement, and PDCA "Plan-Do-Check-Act")

8. **National Committee for Quality Assurance (NCQA):**
   2018 Summary Table of HEDIS Measures, Product Lines and Changes
   https://innovations.ahrq.gov/qualitytools/multicultural-health-care-quality-improvement-guide - Offers a free toolkit, *Multicultural Health Care: A Quality Improvement Guide*, developed in collaboration with Eli Lilly and Company, and an extensive resource library related to cultural and linguistic competence.

9. **National Core Indicators:**
   Using National Core Indicators (NCI) Data for Quality Improvement Initiatives, 7-8, 19-21. (2012) National Association of State Directors of Developmental Disabilities Services and Human Services Research Institute.

WEB RESOURCES

10. New York State Department of Health:

- NYS Health Home Clinical, Core Set, HHSC Application and Process Measures. (2016) This is a table of performance metrics and their descriptions, arranged by population (including I/DD). This document also lists source documents and data sources.
- DRAFT- NYS Health Home SPA for Individuals with Chronic Conditions, 13-21. (2011) Quality measures for Health Homes for Individuals with Chronic Conditions Amount, Duration, and Scope of Medical and Remedial Care Services; Categorically Needy.
- NYS Health Home SPA for Individuals with Chronic Behavioral and Medical Health Conditions, 3-4. (2012) Goal-based quality measures.

11. Northwell Health (2017):

Clinical Excellence and Quality Report. This is a best-practice example of comprehensive QA/QI reporting.

12. Office of the Assistant Secretary for Health (U.S. Department of Health and Human Services):

Multiple Chronic Conditions Education and Training

13. Office for People With Developmental Disabilities:

- Final Regulations: Implementation of the Protection of People with Special Needs Act and Reforms to Incident Management. The addition of a new 14 NYCRR part 625 and amendments to 14 NYCRR parts 624, 633, and 687.
- Part 624 Handbook - 2017
- Reportable Incident and Allegation of Abuse Forms OPWDD Categories/Classifications of Incidents (effective 1/1/2016)
- Reporting Potential Crimes to Law Enforcement

WEB RESOURCES

- Guidelines for Willowbrook Incident Reporting (5/1/2017)
- Jonathan's Law Requirements
- NYS Social Service Law, Article 11 – Section 488. Definitions of Abuse
- OPWDD Training Curricula – Fire Safety
- NYS OPWDD Training Requirements by Occupational Group
- Audit Protocols
- OPWDD ADM #2014-04. HCBS Preliminary Transition Plan Implementation (Quality Standards, Pg. 2)
- Eight Essential Hallmarks to Person Centered Planning (plus performance indicators)
- Personal Outcome Measures
- Person-Centered Planning Methodologies
- Facilitating a Person-Centered Plan
- Person-Centered Planning Checklist
- Supporting Person-Centered Outcomes: An Introduction to Person-Centered Planning Instructor Manual
- Supporting Person-Centered Outcomes: An Introduction to Person-Centered Planning Participant Manual
- Supporting Person-Centered Outcomes: An Introduction to Person-Centered Planning PowerPoint
- Strengths and Risk Memo
- Strengths and Risk Inventory Tools
- Guidance for Implementing Standards for Person-Centered Planning and Self-Direction in HCBS Programs
- Value-Based Payment Arrangements for Adults with Intellectual or Developmental Disabilities (I/DD). Progress Report of the I/DD Value Based Payment Advisory Group
- DQI Site Review Protocol

WEB RESOURCES

14. **Safety Net Medical Home Initiative: Organized, Evidence-Based Care:**
    http://www.safetynetmedicalhome.org/change-concepts/organized-evidence-based-care

15. **The Joint Commission: National Hospital Inpatient Quality Measures:**
    https://www.jointcommission.org/specifications_manual_for_national_hospital_inpatient_quality_measures.aspx

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1. Boehner, M. (2016, November 27). *Quality assurance vs quality improvement* [Video file]. Retrieved from https://www.youtube.com/watch?v=3OInfFr8i3w (2m:31s)
2. Brown, A. (2014, September 2). *Quality improvement versus quality assurance* [Video file]. Retrieved from https://www.youtube.com/watch?v=q9kDZw-4p6A (10m:48s)
3. Evans, M. (2014, November 26). *Quality improvement in healthcare* [Video file]. Retrieved from https://www.youtube.com/watch?v=jq52ZjMzqyI (11m:08s)
4. Institute for Health Improvement. (2009, January 26). *The PDSA cycle – Part 1* [Video file]. Retrieved from https://www.youtube.com/watch?v=STXZHfINZGk (8m:06s)
5. Institute for Health Improvement. (2009, January 26). *The PDSA cycle – Part 2* [Video file]. Retrieved from https://www.youtube.com/watch?v=eYoJxjmv_QI (3m:48s)
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   - Health Resources & Services Administration - Session 2: *"How to leverage resources to design a successful health center QI program"* (2011).
   - Health Resources & Services Administration - Session 3: *"Tips for Implementing Your QI Plan"* (2011).

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6. Texas Council of Community Centers PowerPoint: Parker, M., McClary, B., & Smith, I. I/DD and Mental Illness: Three Approaches to Client Empowerment and Crisis Avoidance.

MODULE 9: Health Information Technology

Section I

Module Overview: Care Coordination Organization/Health Homes (CCO/HHs) are required to ensure that all care managers are qualified to provide and meet the standards and requirements of CCO/HH care management and deliver the six core Health Home services. This module is designed to provide care managers with a general understanding of the Health Information Technology (HIT) standards used to help promote better Health Home care management within the CCO/HH model.

The two skill-building areas outlined in the CCO/HH Application that CCO/HH care managers will employ in the delivery of Health Home care management include:

- Demonstrating capacity to use Health Information Technology (HIT) to link services and facilitate communication among team members, and among the care management team, the individual, and the individual's family and/or representatives.
- Understanding basic technology skills and health records.

At the end of this module, care managers will understand the following:

- An integrated, electronic and person-centered Life Plan including all integrated services and providers, such as OPWDD HCBS.
- The requirements of the CCO/HH Life Plan.
- How to work with the individual and family to access the Life Plan portal and send messages through the system.
- Basic HIT and Health Information Exchange (HIE) concepts that apply to CCO/HH care management.

Key Concepts: Person-Centered Planning, Life Plan, Health Information Technology (HIT), Electronic Health Record (EHR), Health Information Exchange (HIE), Statewide Health Information Network for New York, Qualified Entities (QEs).

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
INTEGRATED, ELECTRONIC, AND PERSON-CENTERED LIFE PLAN	1) Use an integrated, electronic, and person-centered Life Plan to deliver the six HH Core Services and Requirements, including OPWDD HCBS. 2) Demonstrate a comprehension of OPWDD regulations governing person-centered planning, consistent with the care planning requirements of the CCO/HH model. 3) Describe the requirements of the CCO/HH Life Plan as outlined in Attachment E of the Draft 1115 Transition Plan.	• NYS OPWDD Person Centered Planning • NYS OPWDD Person Centered Planning Regulation FAQ • Individuals with Intellectual and/or Developmental Disabilities (I/DD) 1115 Waiver Transition
BASIC TECHNOLOGY SKILLS AND UNDERSTANDING HEALTH RECORDS	1) Summarize the basic concepts of HIT and how it influences care management. 2) Explain how care managers can access patient information through an EHR. 3) Explain the basic concepts of the HIE. 4) Describe how care managers can access patient information in the SHIN-NY and the role of the QEs. 5) Identify the HIT standards that apply to CCO/HH.	• Health Information Technology (HIT) • Electronic Health Record (EHR) • Health Information Exchange (HIE) • Statewide Health Information Network for New York (SHIN-NY) • Qualified Entities (QEs) • NYS DOH Health Homes and Health Information Technology (HIT) Standards

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 9: HEALTH INFORMATION TECHNOLOGY

References
Web Resources
Videos

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2. **Department of Health & Human Services (HHS)**: in coordination with the Health Information Technology (HIT) Policy Committee and the HIT Standards Committee, the following recommendations were developed for interoperable and secure standards and protocols that facilitate electronic enrollment of individuals in Federal and State health and human services programs. Retrieved from https://www.healthit.gov/policy-researchers-implementers/health-it-legislation-and-regulations. (November 30, 2017)
    - Consumer Usability – The Consumer Centric Approach
    - Core Data Analysis
    - Verification Interfaces
    - Transmission of Enrollment Information
    - Privacy and Security

WEB RESOURCES

3. **The Office of the National Coordinator (ONC) for Health Information Technology:**
    - *Standards and Interoperability Framework.* The S&I Framework represents a unique approach to developing and evolving a transparent model of health information exchange. The S&I Framework includes a full set of components needed to achieve the seamless electronic exchange of health information between different organizations and different information systems. https://www.healthit.gov/sites/default/files/hie-interoperability/standards-and-interoperability-framework-data-sheet.pdf
    - *ONC's Office of Interoperability and Standards*. The Office of Interoperability and Standards (OIS), a division within the Office of the National Coordinator for Health IT (ONC), provides the leadership and direction that supports the secure and seamless exchange of health information in compliance with the national health IT agenda. https://www.healthit.gov/sites/default/files/hie-interoperability/onc-office-of-interoperability-and-standards.pdf
    - *Three Important Things to Know About Electronic Health Information*
    - *Permitted Uses and Disclosures: Health Care Operations Examples*. (2016). 45 Code of Federal Regulations (CFR) 164.506(c)(4). Retrieved from https://www.healthit.gov/sites/default/files/exchange_health_care_ops.pdf
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MODULE 10: Proficiency in Documentation & Confidentiality

Section I

Module Overview: Care Coordination Organizations/Health Homes (CCO/HHs) are required to ensure that all care managers are qualified to provide and meet the standards and requirements of CCO/HH care management and deliver the six core Health Home services. This module provides CCO/HH care managers with a general understanding of documentation and confidentiality standards required for CCO/HH care management within the CCO/HH model.

The three skill-building areas outlined in the CCO/HH Application that CCO/HH care managers will need to employ in the delivery of HH care management include:

- Knowledge of confidentiality and guidelines, including ensuring Health Insurance Portability and Accountability Act (HIPAA) compliance, Protected Health Information (PHI), and Personally Identifiable Information (PII).
- Develop and maintain the person-centered Life Plan that coordinates and integrates all of an individual's clinical and non-clinical healthcare related needs and services, including the monitoring and implementation of the Life Plan.
- Develop and maintain appropriate records, including documentation of required training(s).

At the end of this module, care managers will understand the following:

- The standards established by HIPAA.
- How Health Information Privacy relates to Protected Health Information (PHI) and Personally Identifiable Information (PII)
- The role of the care manager in supporting all key linkages, including communication among the care team, the individual, and the individual's family and/or representative.
- Understand the importance of thorough and proper documentation.
- Understand how to write meaningful case notes.

Key Concepts: Health Insurance Portability and Accountability Act of 1996 (HIPAA), Health Information Privacy, Protected Health Information (PHI), Personally Identifiable Information (PII)

TOPICS	LEARNING OBJECTIVES *(Learner will be able to …)*	RESOURCES
CONFIDENTIALITY AND GUIDELINES	1) Explain and apply the requirements of HIPAA. 2) Define Health Information Privacy as it relates to PHI and PII.	• Health Insurance Portability and Accountability Act (HIPAA) • Health Information Privacy • Protected Health Information (PHI) • Personally Identifiable Information (PII) **Centers for Medicare and Medicaid (CMS)** • Operating Rules and guidelines for the electronic exchange of information • HIPAA Basics for Providers: Privacy, Security, and Breach Notification Rules • Privacy and Security Standards
HIT TO LINK SERVICES AND FACILITATE COMMUNICATION	1) Explain the role of the care manager in supporting all key linkages, including communication among the care team, the individual, and the individual's family and/or representative. 2) Use the CCO/HH system to assign and accommodate user access and permission for varying members of the team based on the individual's consent. 3) Provide individual and family/representatives with access to the Life Plan portal and inform them how to send messages through the system.	• Individuals with Intellectual and/or Developmental Disabilities (I/DD) 1115 Waiver Transition • Upon pre-designation of the CCO/HH applicants, the CCO/HH will provide specific curriculum based on their IT systems.

DOCUMENTATION	1) Define what a health record is. 2) Describe the importance of thorough and proper documentation. 3) Demonstrate effective use of health information technology and population health management platforms. 4) Demonstrate proper and secure documentation of minimum data sets necessary for each transition of care. 5) Employ effective processes and methods for writing meaningful case notes.	• Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities • OPWDD Care Coordination Data Definitions

TRAINING RESOURCES MENU

Section II: *Please use the links in the table below to navigate through this section. Holding down the CTRL button, you may click on the module label to view **all** resources. To view specific resources, you may click on any item listed below. To use the orange buttons, please hold down the CTRL button first, and then click.*

MODULE 10: PROFICIENCY IN DOCUMENTATION & CONFIDENTIALITY

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WEB RESOURCES

1. **Centers for Medicare and Medicaid (CMS)**
   - Operating Rules and guidelines for the electronic exchange of information
   - HIPAA Basics for Providers: Privacy, Security, and Breach Notification Rules
   - Privacy and Security Standards

2. **Electronic Code of Federal Regulations:**
   - Confidentiality of Substance Use Disorder Patient Records
   - Title 42 Subpart B – Administration § 484.10 Conditions of participation: Patient rights (5)(d).

3. **New York eHealth Collaborative:**
   https://www.nyehealth.org/

WEB RESOURCES

4. **New York State Laws and Regulations pertaining to HIPAA privacy rules and the confidentiality of HIV-related PHI:**
   - NY Mental Hygiene Law § 33.13 | NY Mental Hygiene Law § 33.16
   - NYS Public Health Law:
     - Article 27-F | 10 NYCRR Part 63 |14 NYCRR 633.19 | 42 CFR Part 2

5. **Office for People With Developmental Disabilities (OPWDD):**
   - Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities – Definition of a Life Plan (Pg. 10)
   - Care Coordination Organization/Health Home (CCO/HH) Application to Serve Individuals with Intellectual and/or Developmental Disabilities –Activities and services that must be reflected and documented in each Life Plan:
     - General activities – Pg. 11
     - Health promotion services – Pg. 12
     - Individual and family support services – Pg. 14
     - Referral services – Pg. 15
     - Minimum Standards and Requirements for Health Home Life Plans – Pg. 20-24
     - Requirements for Care Planning Meetings – Pg. 25-26

6. **U.S. Department of Health:** *Health Homes and Health Information Technology (HIT) Standards* (SHIN–NY Policy Guidance)

WEB RESOURCES

7. **U.S. Department of Health and Human Services, Health Information Technology:**
   https://www.healthit.gov/

8. **U.S. Department of Health and Human Services:**
   - Health Information Technology (HIT) Definition
   - Personal Health Records and the HIPAA Privacy Rule
   - HIPAA Privacy Rule and Electronic Health Information Exchange in a Networked Environment – HIPAA's Privacy and Security Framework
   - Privacy Rule's Right of Access and Health Information Technology
   - HIPAA Security Rule
   - HHS Cyber Security Checklist | Fact Sheet: Ransomware and HIPAA | HIV and HIPAA

9. **U.S. General Services Administration:**
   https://www.gsa.gov/

VIDEOS

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APPENDIX A

CCO/HHs are responsible for developing care managers' competencies in all 10 skill building areas. This is expected to be an ongoing process. The OPWDD required trainings and curricula below are to be integrated into the CCO/HHs' workforce development plan and are aligned with facets of the skill-building learning objectives. This is designed to help with planning and integration into overall curricula.

- Transitioning MSCs will already have completed many of the learning objectives, but must be trained in all 10 skill-building areas, including OPWDD required curricula identified below, no later than July 1, 2019.
- Newly hired care managers must be trained within 12 months of the date of hire in all 10 skill-building areas, as well as OPWDD-required trainings identified below.
- The following trainings and/or curricula will be provided by OPWDD and must be used by CCOs:
    - Online trainings
        - Foundations of OPWDD
        - Prevention of Choking and Aspiration
    - Presented by OPWDD, registration via Statewide Learning Management System (SLMS)
        - Benefits and Entitlement (Medicaid, Medicare, Social Security, Supplemental Security Income)
        - Personal Allowance
        - Supplemental Nutrition Assistance Program
        - Liability for Services
        - Overview of Services for Willowbrook Class Members
- OPWDD will make the following training curricula available, however CCOs may use their own curricula for training on these areas:
    - Online training
        - Tuberculosis
    - In-person curricula
        - PRAISE
        - Fire Safety Training
- OPWDD will develop additional care manager trainings related to policy or operations of the CCO/HH as needed.

TRANSITIONING MSCs = Trained by July 1, 2019 NEWLY HIRED CARE MANAGERS = Trained within 12 months of date of hire				
SKILL-BUILDING AREA		**SKILLS**	**OPWDD TRAININGS/CURRICULA SUPPORTING SKILL-BUILDING AREAS *(Frequency noted)***	**LINKS TO OPWDD TRAININGS**
1	**VALUES PERSON-CENTEREDNESS AND COMMUNICATION**	a. Advocate on behalf of the individual b. Define person-centered care planning c. Value informed choice, the mission of the Office for People With Developmental Disabilities (OPWDD), and ethics and conflict of interest d. Demonstrate belief in person with developmental disability e. Recognize Individual and family needs f. Encourage communication and individual engagement techniques g. Promote self-advocacy and the ability to self-direct h. Understand health literacy	• Foundations of OPWDD (Once) • PRAISE (Annual)	• Foundations of OPWDD • PRAISE Curriculum
2	**BUILDS RELATIONSHIPS AND ESTABLISHES COMMUNICATION WITHIN CARE COORDINATION TEAM AND AMONG PROVIDERS**	a. Build positive relationships among team members b. Promote communication between team members c. Demonstrate ability to listen, communicate verbally and in writing and facilitate meetings d. Manage team conflict and mediation		

3	**PROMOTES COMMUNITY ORIENTATION**	a. Connect individuals and families to community resources b. Support individuals and families as they seek resources in the community c. Coordinate and provide access to long-term care supports and services d. Develop and maintains knowledge of community supports and services		
4	**CULTURALLY COMPETENT**	a. Recognize individuals' and families' cultural needs/factors that influence choices and engagement in services b. Provide culturally appropriate and person and family-centered services c. Communicate with individuals and families in a culturally competent manner d. Promote inclusion		
5	**KNOWLEDGE OF DEVELOPMENTAL DISABILITIES, CHRONIC DISEASE AND SOCIAL DETERMINANTS OF HEALTH**	a. Possess knowledge of characteristics of common developmental disabilities b. Understand chronic disease and co-morbidities including mental health and substance abuse disorders c. Recognize and address health and safety issues including social determinants of health d. Possess ability to act quickly, assess and act accordingly in crisis situations e. Coordinate and provide access to chronic disease management; including knowledge of self-management skills f. Promote a high quality of life	• Foundations of OPWDD (Once) • Prevention of Choking and Aspiration (Once) • Tuberculosis (Annual)	• Foundations of OPWDD • OPWDD Choking Prevention Training • OPWDD Procedures for Tuberculosis Control

6	**KNOWLEDGE OF COMMUNITY SUPPORTS AND SERVICES, NEW MODELS OF CARE, AND HEALTHCARE TRENDS**	a. Develop and maintain knowledge of OPWDD, community, and natural supports and services; including housing and employment services
		b. Understanding of the U.S. healthcare system and new models of care
		c. Knowledge of entitlements, benefits and how to access such services
		d. Ability to assess individuals' and families' needs
		e. Knowledge of care coordination
		f. Coordinate and provide access to preventive and health promotion services, mental health and substance abuse services and transitional care across settings
		g. Coordinate and provide access to high-quality health care services informed by evidence-based clinical practice guidelines
			• Benefits and Entitlement (Annual)
			  • Medicaid
			  • Medicare
			  • Social Security
			  • Supplemental Security Income
			• Personal Allowance (Annual)
			• Supplemental Nutrition Assistance Program -SNAP (Every 3 years or with regulatory changes)
			• Liability for Services Training (Every 3 years or with regulatory changes)
			• Overview of Services for Willowbrook Class Members (As needed)
				• Training presented by OPWDD
				• Training presented by OPWDD
				• Training presented by OPWDD
				• Training presented by OPWDD
				• Training presented by OPWDD

7	**UNDERSTAND ETHICS &**	a. Knowledge of ethical and professional responsibilities and boundaries		

	PROFESSIONAL BOUNDARIES	b. Participate in opportunities for continued training and education c. Demonstrate professional work habits including dependability, time management, independence and responsibility		
8	**PROMOTE QUALITY IMPROVEMENT**	a. Understanding of quality improvement methods and process b. Provide quality driven, cost-effective, culturally appropriate services	Fire Safety (Annual)	Fire Safety Curriculum
9	**UNDERSTAND HEALTH INFORMATION TECHNOLOGY**	a. Demonstrate capacity to use Health Information Technology to link services, facilitate communication among team members and between the care coordination team and individual and family caregivers b. Basic technology skills and understanding of electronic health records		
10	**PROFICIENT IN DOCUMENTATION & CONFIDENTIALITY**	a. Knowledge of confidentiality and guidelines; including ensuring Health Insurance Portability and Accountability Act (HIPAA) compliance b. Develop and maintain the person-centered Life Plan that coordinates and integrates all of an individual's clinical and non-clinical health-care related needs and services; including monitoring and implementation of the Life Plan c. Develop and maintain appropriate records; including maintain documentation of required training		

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