

Dungarvin

Respect • Response • Choice

Filling the Gap: Securing State Funding for Adults Receiving HCBS

Dr. Victoria Frazier, BCBA

Emily Nalker, M.Ed, BCBA



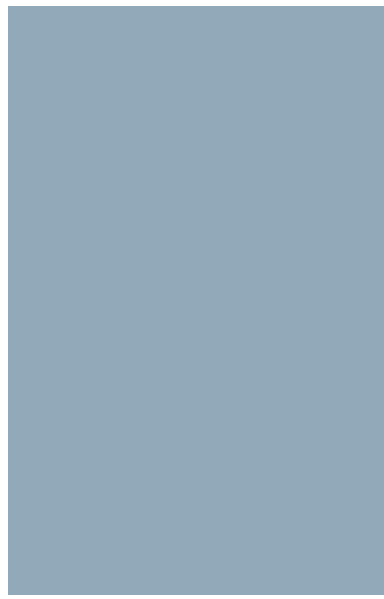
Learning Objectives

Identify the Need

Assess the Gap

Develop the Solution

Evaluate the Impact



Who We Are

- *Dr. Frazier, BCBA* is the Washington Statewide Clinical Director and supervises clinicians/programming in all four Washington locations
- *Emily Nalker, BCBA* is the Tacoma Clinical Services Manager and supervises the HSB and A-DBT Programs at the Dungeness-Tacoma location



Who

Are

You





Connection to the Association for Positive Behavior Support





Our Lens: Home & Community Based Services



Medicaid-funded programs intended to provide long term supports for people in the community VS institutional setting



Continuum of Residential Supports in Washington State

Adult Family Homes

Companion Homes

Alternative Living Services

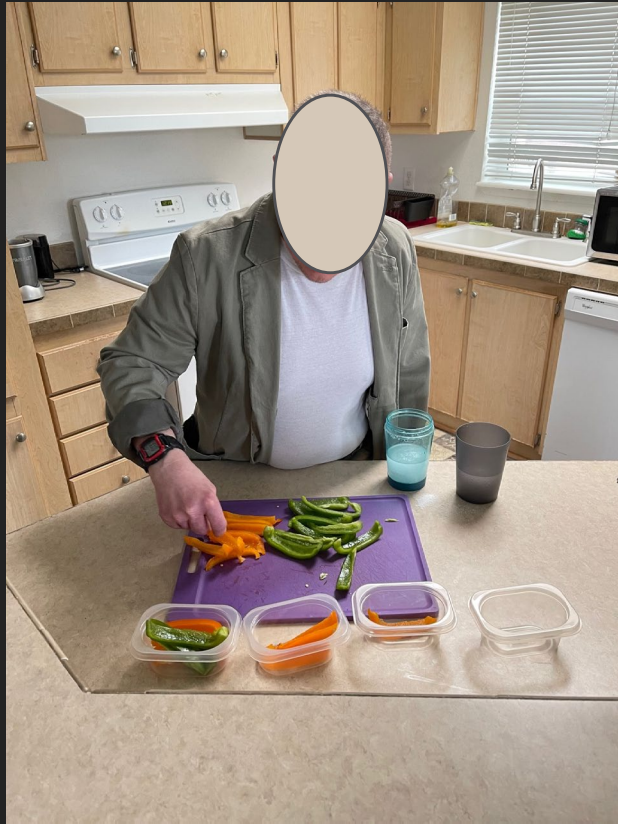
Assisted Living Facilities

Group Training Homes

Supported Living

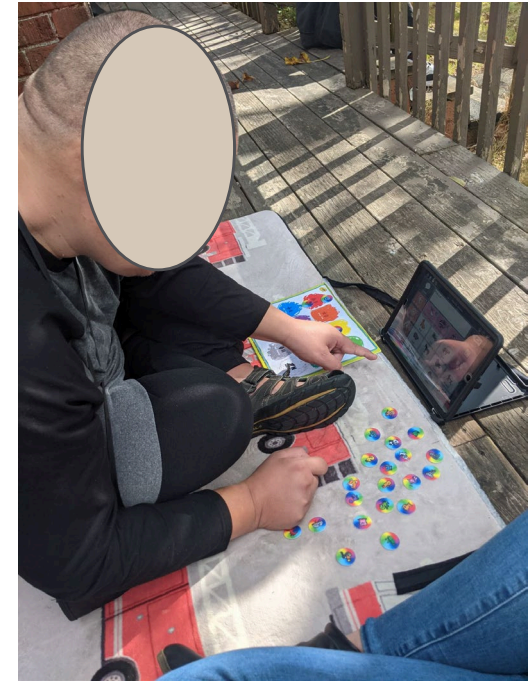
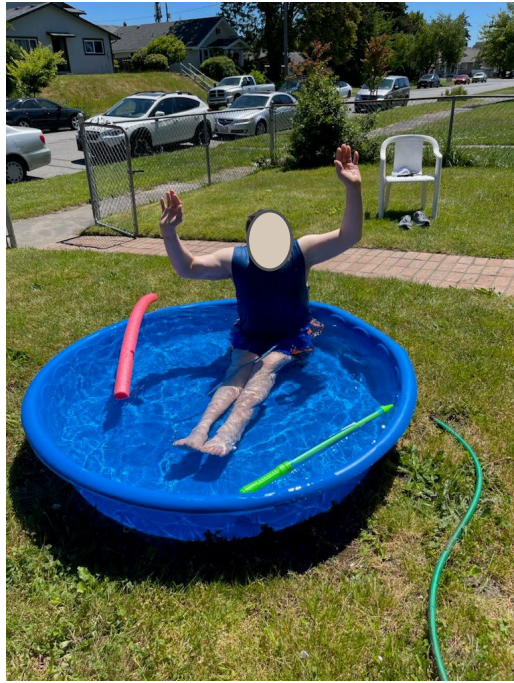
Community Protection

Residential Habilitation Centers



Supported Living





Variety of Individuals Served





Case Study #1 - TW

- TW is a 34-year-old man diagnosed with cerebral palsy and autism
- TW is double staffed and has an extensive history of property destruction and physical aggression



Case Study #2 - JP

- JP is a 23-year-old woman diagnosed with Down Syndrome and ASD
- JP has been served by out-of-home placements since she was 14 years old due to her aggressive behavior toward others






Case Study #3 - ML

- ML is a 25-year-old man diagnosed with ASD
- ML has an extensive history of property destruction and binge eating



- 
- The Habilitative Skill Building (HSB) Program was Dungarvin's solution to the gap in appropriate behavioral health services for individuals with autism or related supported needs and challenging behavior

Habilitative Skill Building (HSB) Program

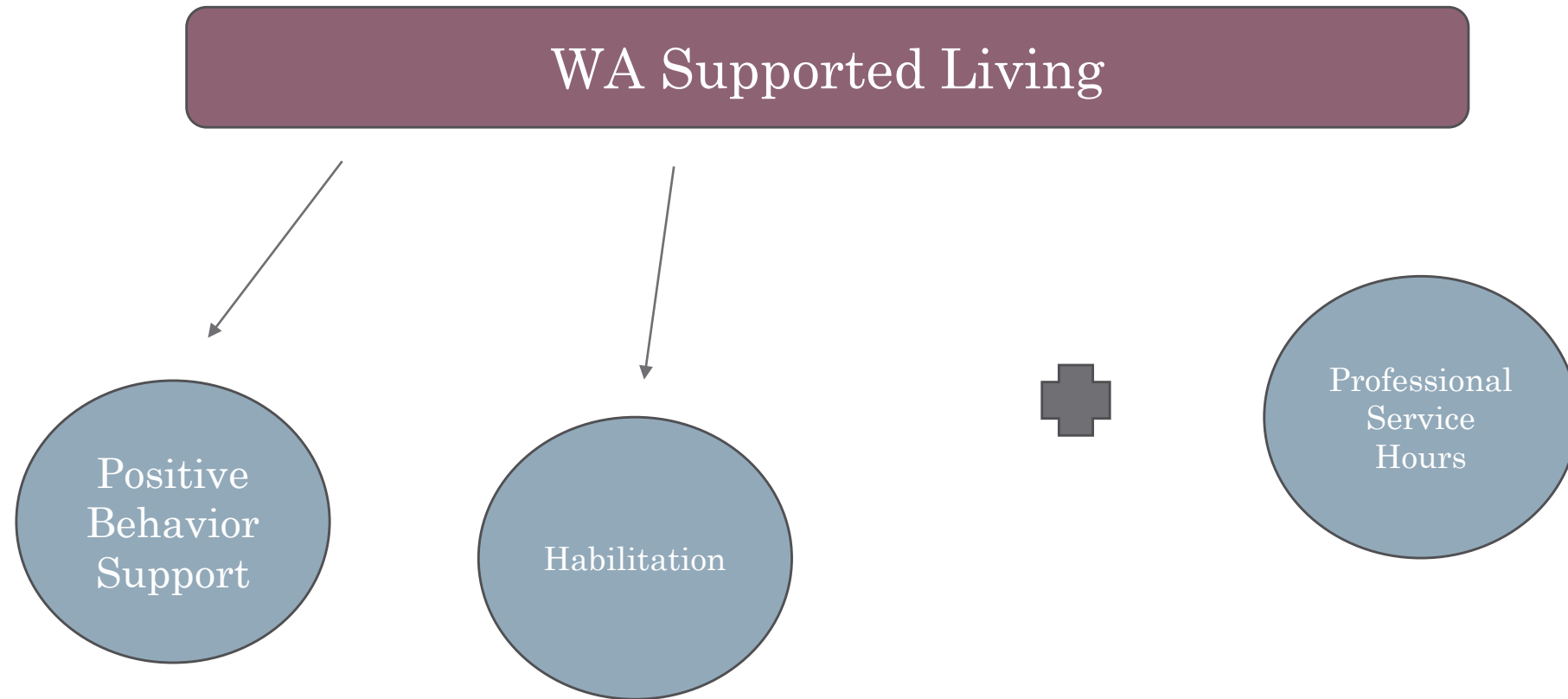
- The Developmental Disabilities Administration defines *habilitation* as “services delivered by community residential service providers to assist persons with developmental disabilities to acquire, retain, and improve upon the self-help, socialization and adaptive skills necessary to reside successfully in the community.”

Why "Habilitation"





What Worked For Us



The ask: How our new request for additional funding would exceed traditional supports already required within the waiver program

1. Identify the Need



What is a Needs Assessment? Why Do It?

An unmet need is defined as:

- Recognition of a problem
- Satisfactory solutions are not accessible, adequate or do not exist
- Need to reallocate existing resources or appropriate new resources

A needs assessment should accomplish the following things:

- Provide data to determine the needs within the community
- Systematically evaluate existing resources
- Provide information for planners on new service programs



Research Who Needs Services: Nationally

National Core Indicators Reports:

- Data driven reports for both IDD and Aging and Disabilities.
- Generated by state, as well as national averages.
- Feedback from individuals and families on issues of support, access to services and needs of individuals.





Medicaid Managed Care Organizations (MCO) in your state may help you compile data on where services exist and who is accessing services.

May need to produce your own reports with anecdotal stories on what is working and not working for your population.

Contact service agencies independently and inquire about availability and waiting lists for people who need services.

Where to
look: Locally
(*State &
County*)



Example from WA – Data Request

Dungarvin requested data from Health Care Authority of Washington (Medicaid) on how many individuals with Autism were eligible and accessing ABA.

2019 Data request included:

- Number of individuals accessing ABA that met the following criteria:
 - Medicaid recipients eligible for ABA
 - Residents of Pierce County (*Population: 905,719*)
 - Ages 10-20*

*At the time of the request 21+ data was not available as only EPSDT data was accessible



2019 Medicaid Receptients Eligible For ABA: Ages 10-20

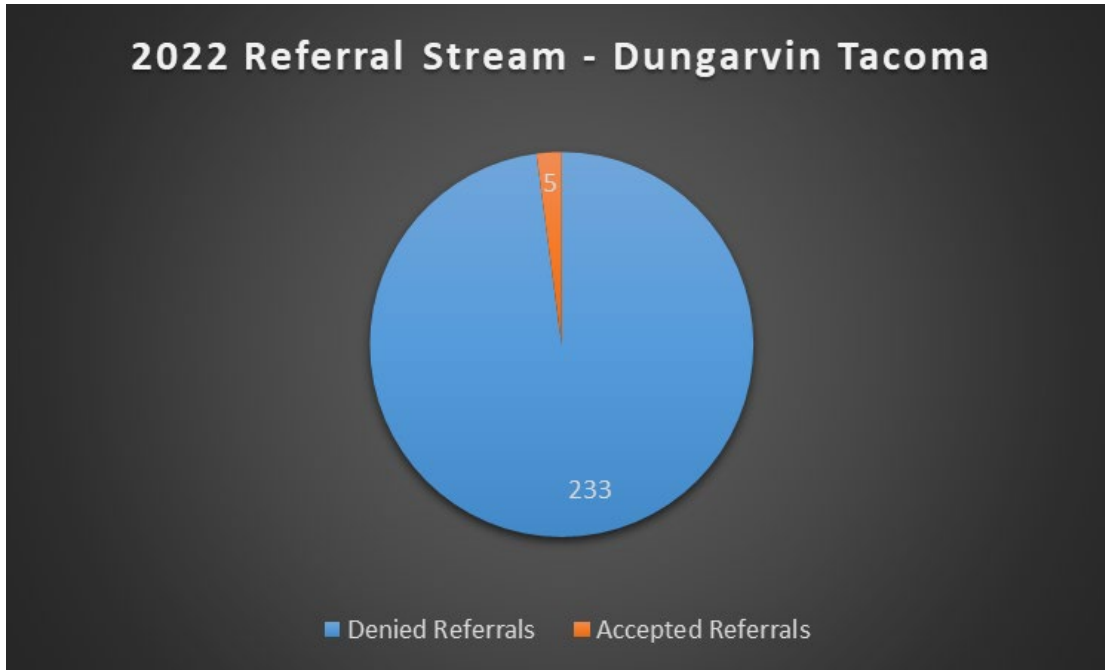


■ Accessed ABA ■ No ABA provided

Example from WA – Results

**Out of 951
individuals
eligible to access
ABA, only 51
accessed ABA
(5% of eligible
participants in
our County)**

2022 Pierce County Referrals

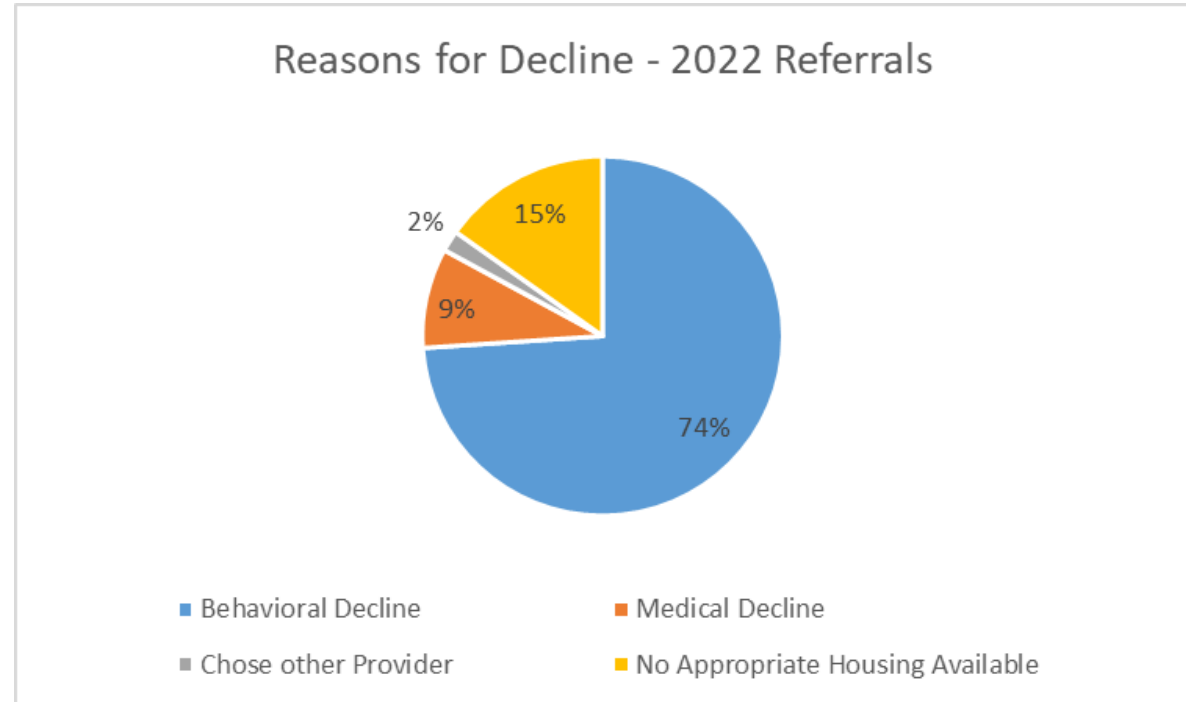


- As shown by the graph, Dungarvin-Tacoma received 238 referrals during 2022 and was only able to accept 5 of them
- This equates to a 2% acceptance rate



Referral Declines

- The vast majority of referrals were declined due to behavioral needs (74%)
- 15% of referrals were declined due to medical needs (typically requiring G-tube feeding, catheterization, or other more complex care procedures)
- 9% of referrals were declined due to lack of available housing (typically lack of ADA housing)
- **Only 2% of declines were individuals the agency pursued but they had found another provider**





Referral Anecdotes

Behaviorally complex referrals often take 6 months or more to transition into services, despite intense pressure from stakeholders to move quicker – Case Study JH

Just one of these referrals often takes up significant amounts of clinical and operational resources, preventing other complex referrals from transitioning – Case Study RL



Step 1 – Identify the Need

Conduct needs assessment using data from internal sources, Managed Care Organizations, local behavioral health agencies, and/or your state Health Care Authority

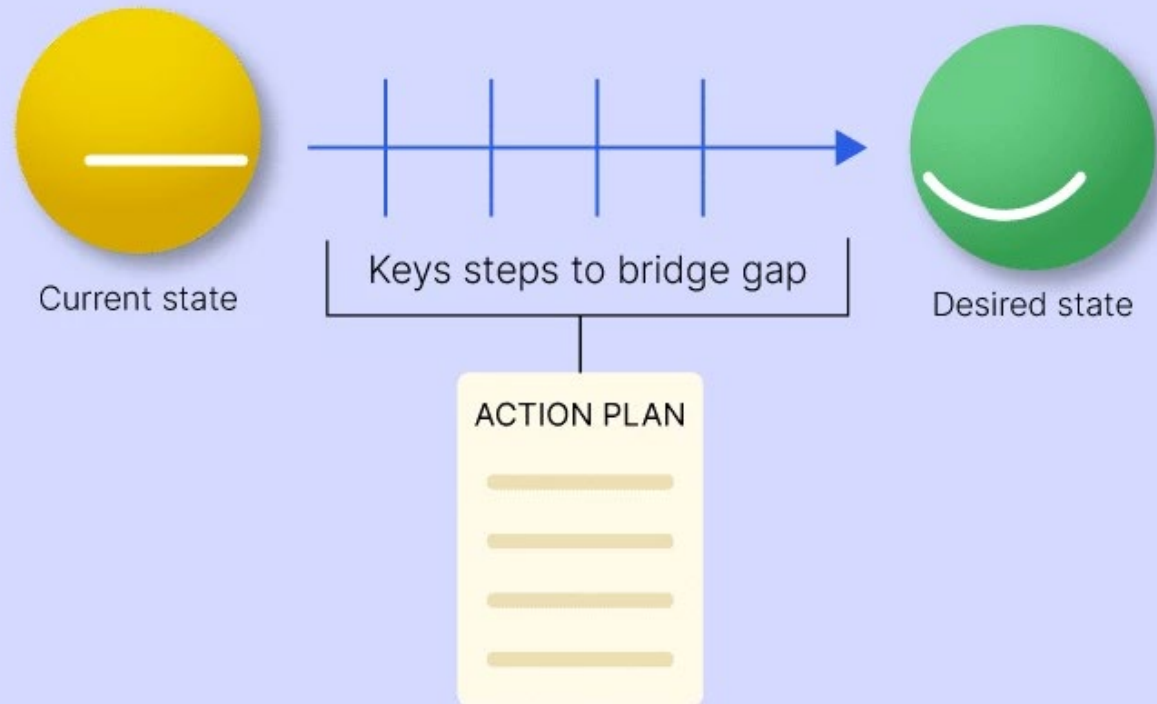
Analyze the type of referrals your agency is regularly turning down – what are the barriers to serving them and where are they going if not served by your agency



2. Assess the Gap



Gap Analysis



Why assess the gap?

An extension of the needs assessment process

To effectively develop a solution, you should be able to:

1. Identify who needs services and why (Step 1)
2. Identify why the people who needs services are not able to access them



Barriers to Service – State Law

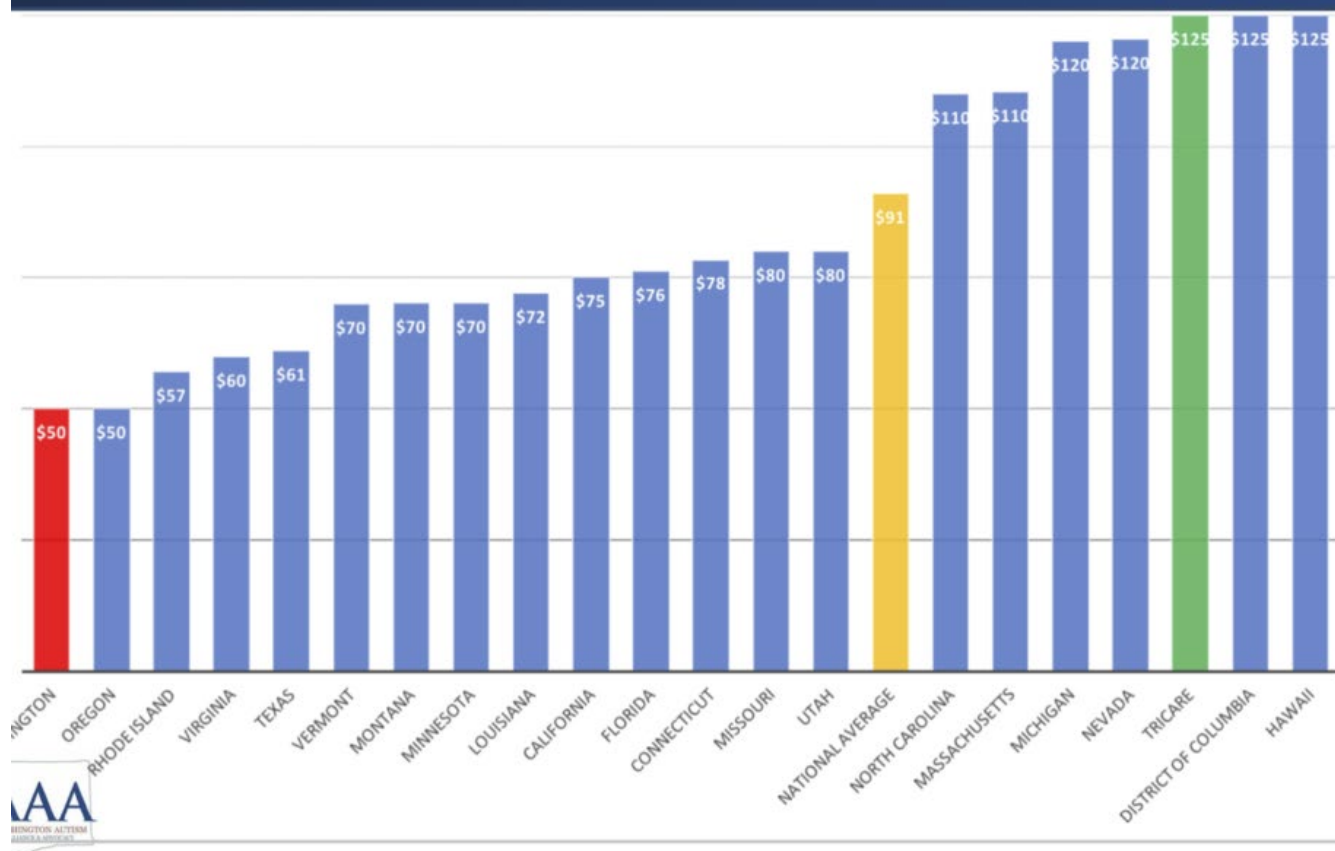


Barriers to Service – Waiver Programs

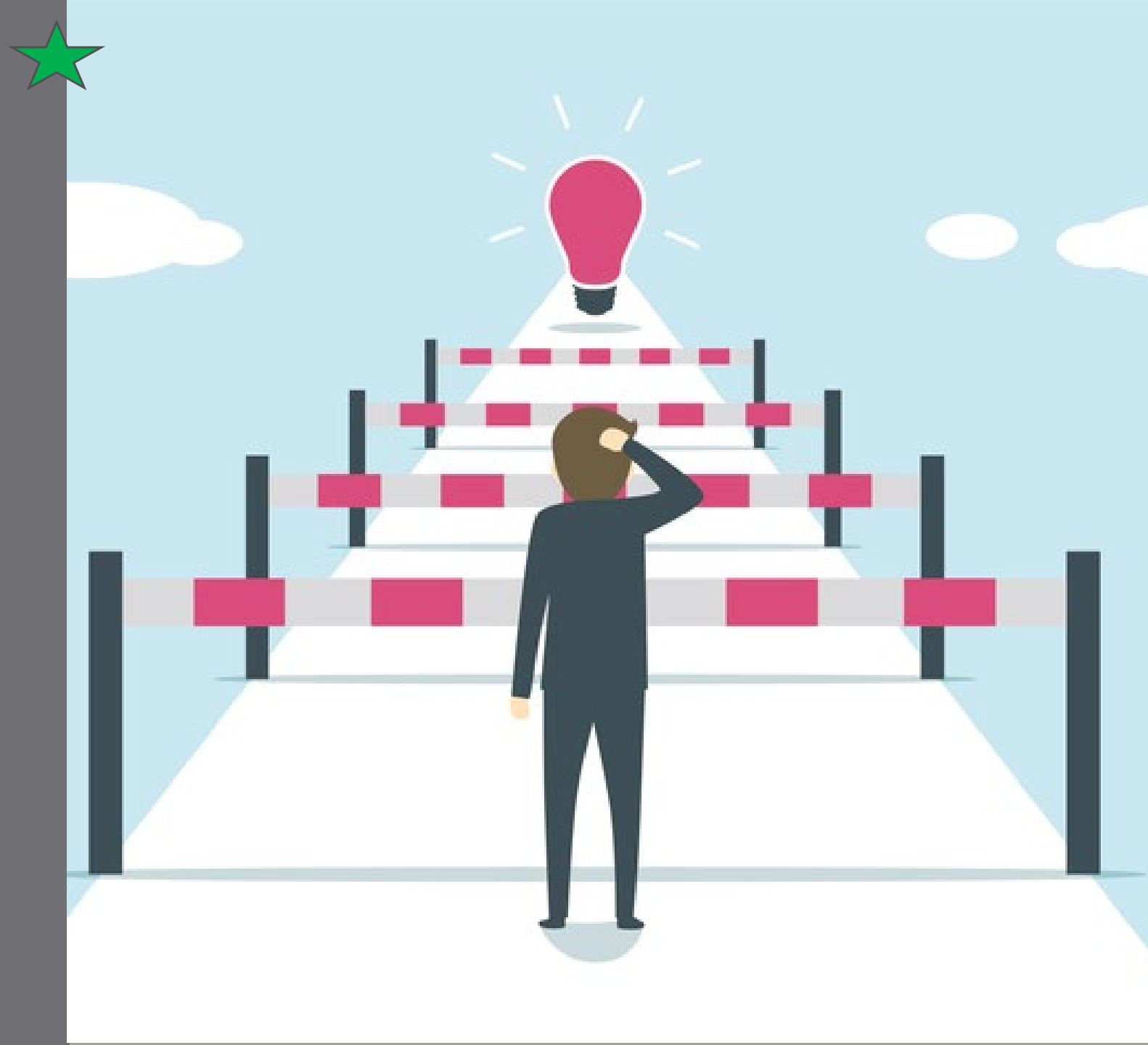




Medicaid BCBA treatment rates by state



Barriers
to Service
—
Medicaid
Rates



Barriers to Service – ABA Providers



Barriers to Service – Supported Living



**CRISIS
RESPONSE
TEAM**

Barriers to Service - Community Mental Health Crisis Supports



Step 2 – Assess the Gap

There are likely a variety of barriers to serving your desired population: these may include state law, waiver rules, Medicaid reimbursement rates, and amount of available/qualified existing community providers

Assess these barriers and show your local funding agency how you can fill the gap between the services/providers currently available and the number of people that need those services (as determined in step 1, identify the need)

3. Develop the Solution



Identifying Shared Goals

01

Find shared goals with
your state partners

02

Identify why a new
program is needed and
that this shared goal
cannot be met with
current available
resources



Initial Proposal Process



Dungarvin put together a proposal for DDA leadership that included both a written document as well as a PowerPoint presentation

Language Semantics

Avoid ABA
jargon.
Instead, use
the language
of what your
state agency
is allowed to
fund.





BEHAVIOR ANALYST CERTIFICATION BOARD®

Professional and Ethical Compliance Code for Behavior Analysts

Navigating the BACB Ethics Code



Identifying Pilot Participants

Needs
assessment
scores

Behavioral
incident reports
from recent
years

Rate of staff
injuries

Cost of property
destruction

DSP
morale/retention



Key components of our program design included:

- Budget (start-up and ongoing)
- Clinician schedules
- Program infrastructure
- Collaboration with operations department

Program Design

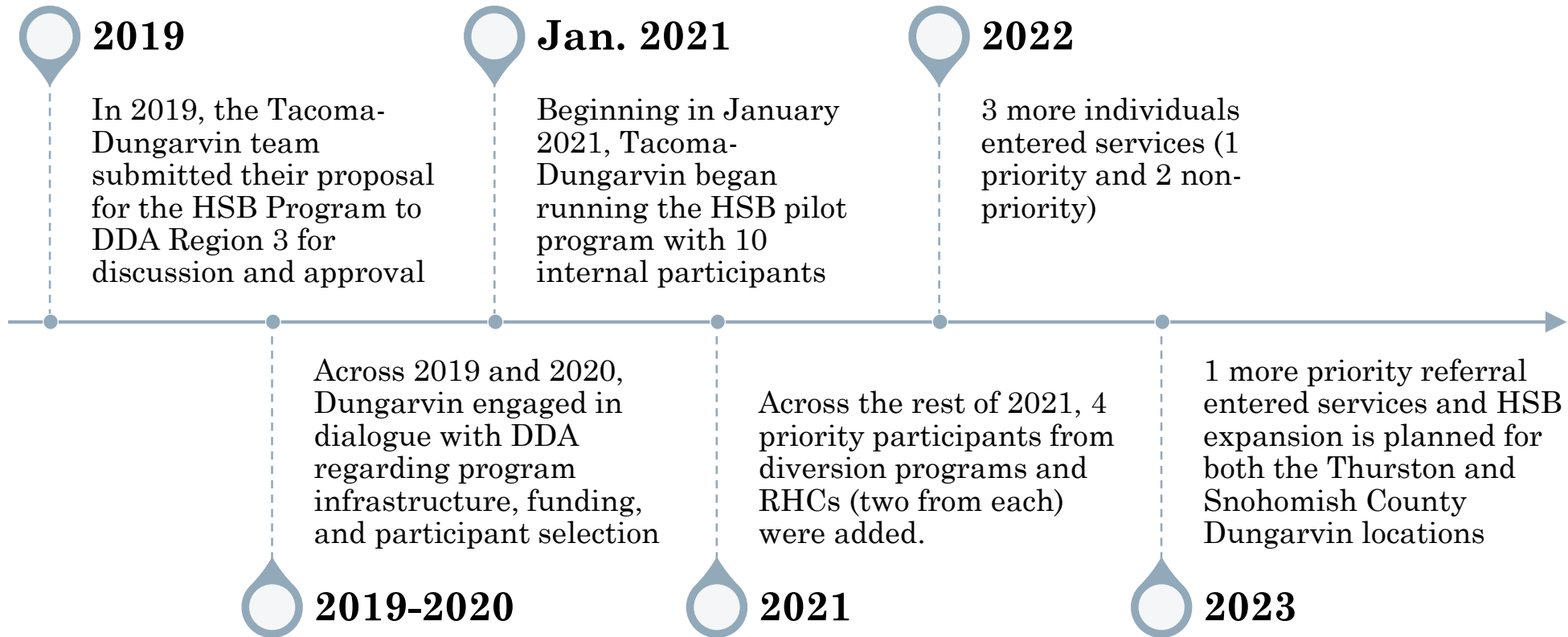


	SL-Provided Supports	ABA-Provided Supports	HSB-Provided Supports
Individual Sessions	No	Yes	<u>Yes</u>
Group Sessions	No	Limited	<u>Yes</u>
Support Team Training	<u>Yes</u>	Limited	<u>Yes</u>
Art or Skill Classes	No	No	<u>Yes</u>
Reinforcement/Social Events	No	No	<u>Yes</u>
House Visits	<u>Yes</u>	<u>Yes</u>	<u>Yes</u>
Licensed Clinical Oversight	No	<u>Yes</u>	<u>Yes</u>
Progress Reports	No	<u>Yes</u>	<u>Yes</u>
Initial Assessment and Support Plan	No	<u>Yes</u>	<u>Yes</u>
Annual Assessment Update	No	<u>Yes</u>	<u>Yes</u>
Evidence-Based Curriculums and Supports	No	<u>Yes</u>	<u>Yes</u>
Formal Annual Program Evaluation	No	No	<u>Yes</u>
House Meetings	<u>Yes</u>	No	<u>Yes</u>
House Configuration and Roommate Compatibility	Limited	No	<u>Yes</u>
Referral Support - Intakes	Limited	No	<u>Yes</u>
Implementation and Training on Restrictive Procedures	Limited	No	<u>Yes</u>

SL vs ABA vs HSB Supports



Collaboration/Negotiation Timeline





Step 3 – Develop the Solution

In order to secure funding from state sources, identify shared goals and use shared language, prepare a detailed presentation with timelines, and highlight the differences between what is already offered and what is being added

Be prepared for a lengthy process that may involve compromise on both sides and involve other internal stakeholders to ensure promised timelines/results are realistic

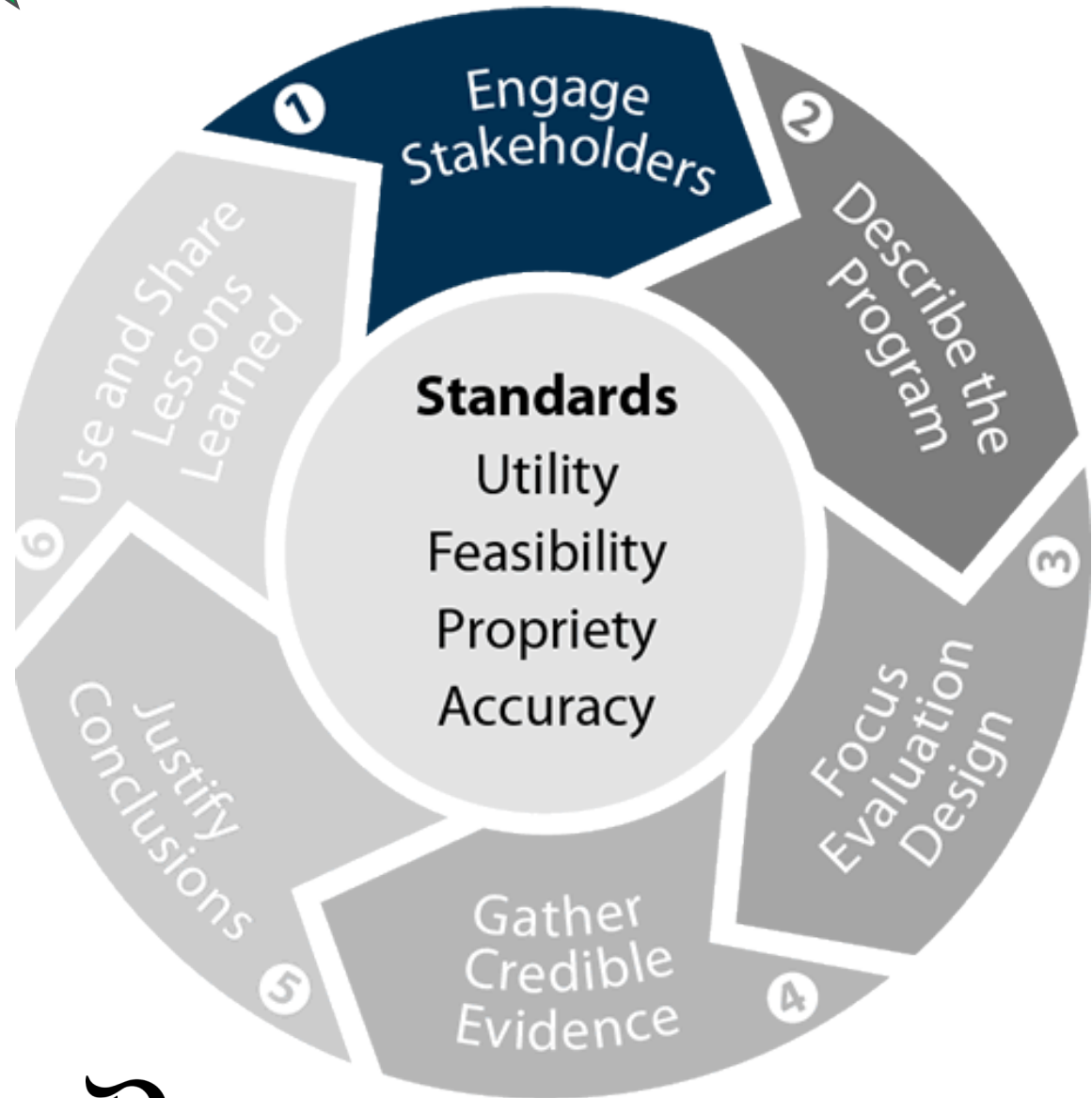
4. Evaluate the Impact



Needs Assessment vs Program Evaluation

Needs Assessment: Evaluates the relevance and appropriateness of a program. *What is the need for this, and why?*

Program Evaluation: Evaluates the effectiveness and efficiency of the program. *Is the need being met, and how?*



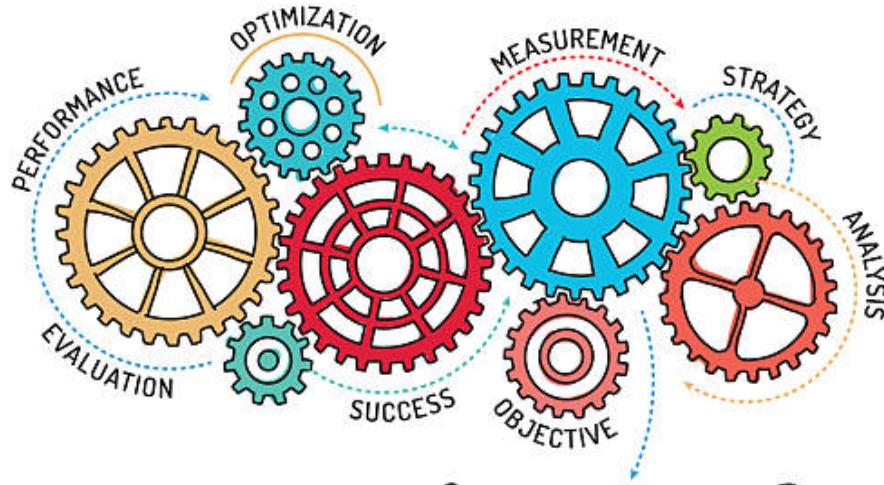
Program Evaluation: CDC Framework

Utilizing a framework can help provide structure and efficiency to program evaluation.

(Centers for Disease Control and Prevention, 1999).



Program Evaluation: What & Why



Key Performance
Indicator

90 Days

6 Months

1 Year



Key Performance
Indicator
(KPI) Descriptions

DSP Retention/Satisfaction

Participant/Guardian/Support
Circle Satisfaction

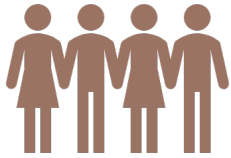
Growth

Participant Progress

Medication Management



DSP Retention & Satisfaction



Retaining front line care staff
is difficult in SL



Turnover rates average 50%



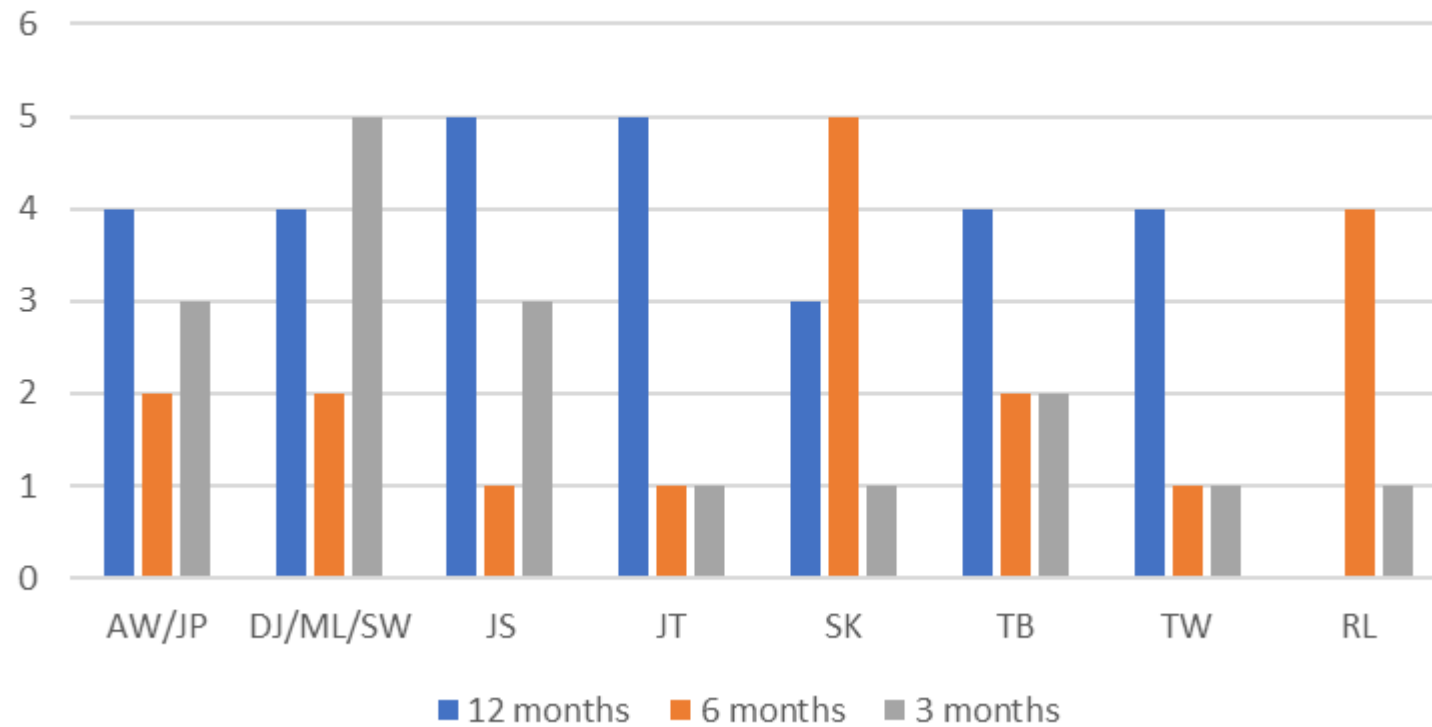
Higher turnover leads
to behavioral issues due to
lack of training and rapport



This relationship can also be
cyclical



DSP Retention - 2022

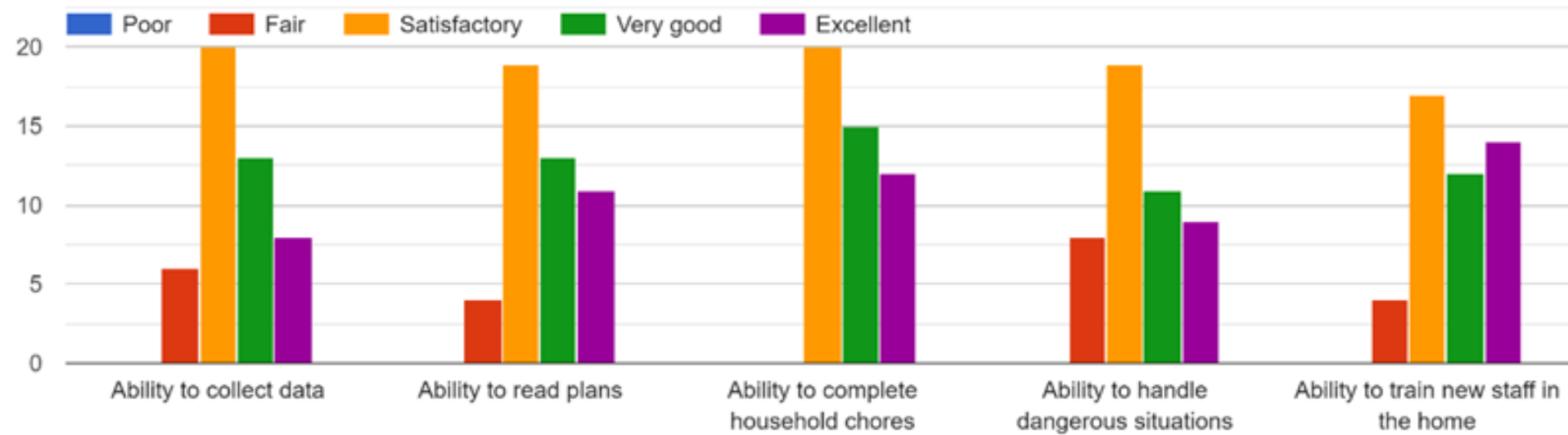


Example DSP Retention Analysis



January 2023

How confident are you in your job duties?



DSP Satisfaction



Participant Satisfaction

What Makes Me Happy?





Guardian/Support Circle Satisfaction



Growth goals are typically set by DDA leadership

- An important part of achieving ongoing funding from state sources is to work with them on growth in areas they find important
- Measuring growth is important because we want to help achieve shared goals with our funding source while protecting the integrity of the program

Growth



Participant Progress

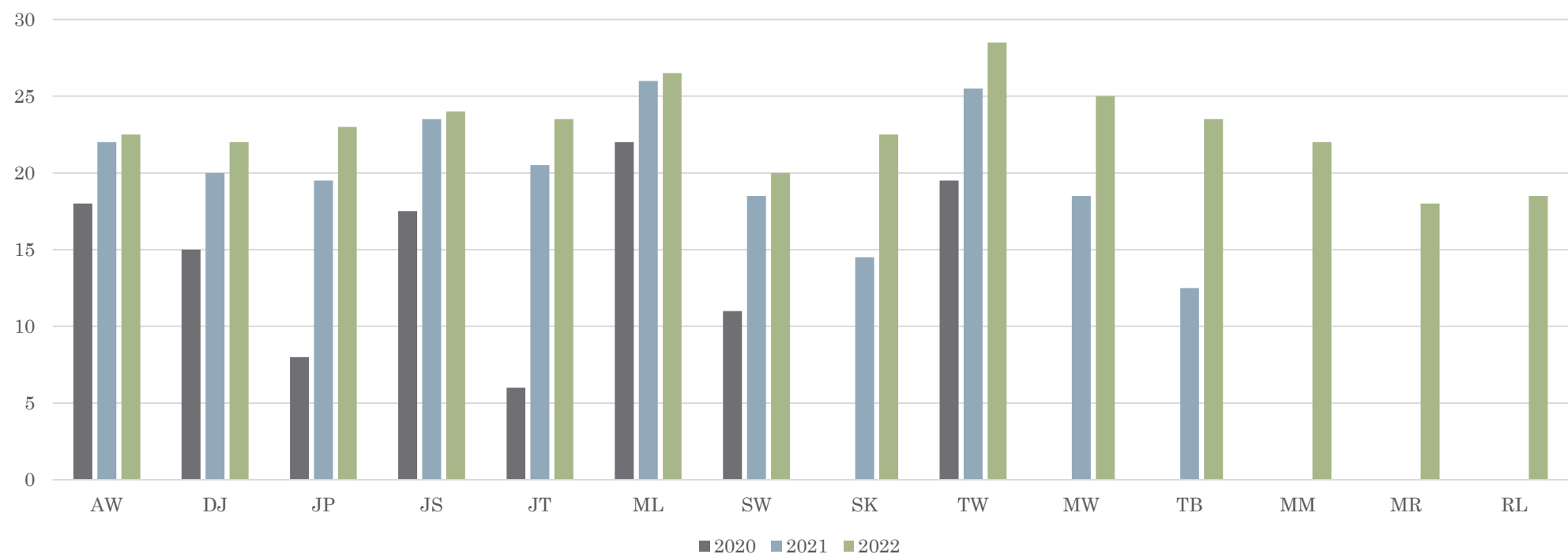
Annual CHIRPS Assessment

Six Month Progress Reports

Habilitative Skill Building Goals

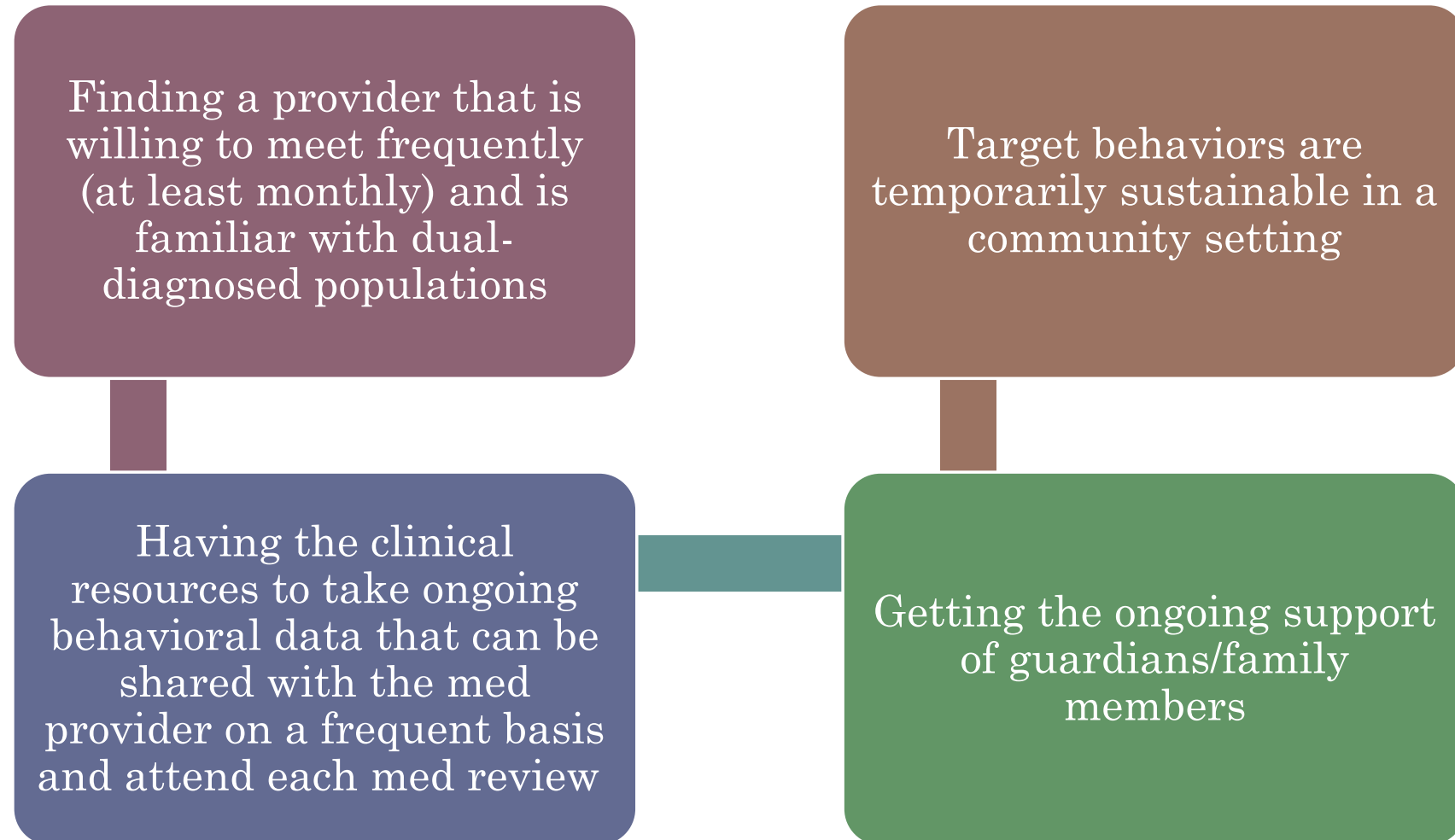


HSB Participant CHIRPS Progress



Example CHIRPS Graph

Medication Management



Medication Management Case Studies

Case of JS, a 41-year-old man diagnosed with autism and PTSD

Case of TF, a 30-year-old man diagnosed with autism, anxiety, and ADHD with a significant sexual abuse history





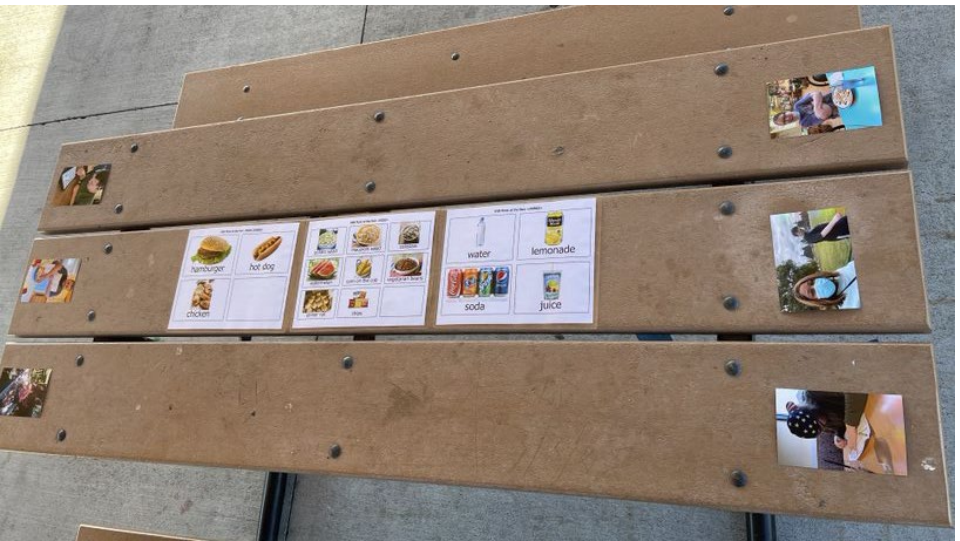
Participant Success Story - TW

Participant Success Story - JP





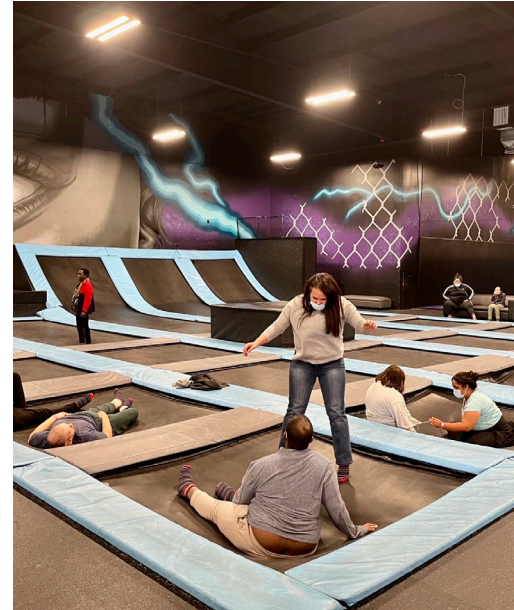
Participant Success Story - ML



HSB Summer Picnic –
September 2021



HSB at the
Movies –
April 2022



HSB at Defy Trampoline Park – October 2022

Step 4 – Evaluate the Impact

In order to achieve ongoing funding, plan to complete a program evaluation that includes quantitative data on program success. Example KPIs could include participant progress, staff satisfaction/retention, guardian/participant satisfaction, and growth

Program evaluations should also include qualitative descriptions of success: anecdotes of individual progress and improved quality of life are powerful and humanizing examples of why ongoing funding should be provided



Summary – Learning Objectives

- There are four steps to achieving sustainable program funding:
 - *Identify the Need* – show your state agencies who the underserved populations are
 - *Assess the Gap* – determine how many individuals would benefit from your novel service programming and why
 - *Develop the Solution* – find common ground with state funding agencies to achieve shared goals and provide a detailed proposal on how those goals will be achieved/on what timeline
 - *Evaluate the Impact* – create ongoing program evaluation infrastructure to show progress and ensure continued funding

Dungarvin

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Questions?

Email vrozell@gmail.com or emilynalker92@gmail.com with further questions

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