

## DELAWARE -- 2001 Real Choice Systems Change Grant

### Identified Problems with the States' Long-Term Care System

- No single agency coordinates and/or provides supports to persons with disabilities. The system of service delivery is fragmented and there is no cohesive, consumer-responsive assistive technology (AT) infrastructure.
- There is a lack of streamlined access to funding resources for AT.
- Staff who function in “gatekeeping” roles for AT services and supports lack awareness of existing AT.
- There is confusion about funding mechanisms for AT, particularly in regard to eligibility and scope of benefits.
- Delaware’s existing disability-related demographic, utilization, and outcomes data are not comprehensive.

### Perceived Strengths

- Various state agencies and a network of private providers offer a wide array of residential, personal assistance, and/or habilitative and rehabilitative services to persons with disabilities.
- The Delaware Assistive Technology Initiative (DATI) of the University of Delaware, funded through the state’s Assistive Technology Act, currently operates a statewide program focused on increasing access to AT.
- Several HCBS waivers provide access to AT and home modifications for some individuals: a Division of Developmental Disabilities Services (DDDS) MR waiver, which includes environmental modifications; a Division of Services for Aging & Adults with Physical Disabilities (DSAAPD) elderly and disabled waiver; and a new brain injury waiver, which included orthotics, prosthetics, and home modifications.

### Primary Focus of Grant Activities

- Increase access to AT services and supports and expand the range of options for obtaining AT.
- Better integration, provision, and tracking of AT services and information across agencies.

### Goals, Objectives, and Activities

**Overall Goal.** To establish a broad-based assistive technology (AT) infrastructure for the benefit of all with disabilities, and to make it possible for many more individuals with disabilities to live in the community safely and with enhanced independence.

**Goal.** To increase awareness and knowledge of assistive technology at all levels.

***Objectives/Activities***

- The DSAAPD and the Division of the Visually Impaired (DVI) will conduct a needs analysis to determine the types of AT that people are using and/or still need, the AT types that individuals are obtaining easily as well as those that are more difficult to obtain, the reasons for access barriers, and the primary funding sources and other mechanisms by which individuals currently obtain AT.
- Launch a comprehensive awareness and training campaign to inform and educate consumers, case managers, various “gatekeepers,” and providers about the benefits of AT for enhanced community living.
- Develop a comprehensive, sophisticated, and fully accessible web site that will serve as the central repository for project information. Information will also be available in print format.

**Goal.** To streamline and improve access to AT and AT funding options.

***Objectives/Activities***

- Develop a common format for data collection and information tracking for use by participating agencies and designate individuals in each participating agency to function as an “AT Point Person.”
- Develop a web site that includes information about AT options and inventory currently available at each DATI Assistive Technology Resource Center (ATRC).
- Encourage professional development of providers to enable them to offer comprehensive home accessibility evaluations.
- Extend ATRC’s two week equipment trial use period.
- Support agency and interagency work groups to clarify existing funding mechanisms, document this information in user-friendly formats both in print and on the web site, provide samples of model justifications that can serve as a guide, and develop a search mechanism and database on the web site, which individuals can use to explore the benefits they may be entitled to.
- Provide AT training specifically for personnel employed by Medicaid, the Medicaid managed care organizations, and private insurers that will increase their awareness of AT and its benefits, and enable them to make more consumer-responsive funding decisions consistent with the insurers’ policies.
- Clarify how to access AT utilization supports under Medicaid and other funding streams, and advocate for expansion of benefits to enable coverage for these types of services with other state and/or private payors.
- Adopt follow-up and tracking mechanisms across state agencies to document the adequacy of the AT access process (both in terms of access outcomes and consumer satisfaction), to determine if there are additional service needs based on changing circumstances, and to enable the state to maximize resources if unused equipment could be tracked and brought back into the system.

**Goal.** To expand the range of options for obtaining AT.

***Objectives/Activities***

- Explore new service options within the context of demonstration projects through alternative funding sources, if deemed necessary. Priority topics include accessible living/home modifications and mobile service delivery.
- Explore two alternate mechanisms to increase access to AT: equipment re-use/recycling and alternative financing.

**Goal.** Establish a comprehensive AT data collection, tracking, and evaluation system.

***Objectives/Activities***

- Develop a common format for data collection and information tracking for use by all participating agencies.
- Perform analyses relative to needs, equipment, expenditures, and outcomes, which can be presented to the legislature and other funders to justify continuation of the many initiatives seeded by this grant project.

**Key Activities and Products**

- Conduct AT needs analyses.
- Launch an AT awareness and training campaign, including modular, “on demand,” product-specific training, and customized training packages for agencies and organizations.
- Expand equipment inventory at ATRCs, train service providers and “gatekeepers,” and clarify/refine existing funding mechanisms.
- Develop a project web site including modules for inventory, provider directory, information and referrals, equipment loans, resource guide, and an equipment exchange program. Make this information available in print formats as well.
- Develop an alternative financing program.
- Design and implement a tracking system for AT across agencies.

**Consumer Partners and Consumer Involvement in Planning Activities**

- The Olmstead Implementation Task Force included consumers, some of whom (The Arc of Delaware, Disability Law Program, Independent Resources, Inc, and the State Council for Persons with Disabilities) participated in the grant planning and review process.
- Some members of the DATI’s consumer majority Advisory Board participated in the development of the grant proposal by reviewing, discussing, and providing input into various elements of the proposal.
- The original AT Work Group included a consumer member who is an expert in vocational rehabilitation independent living programs.

## **Consumer Partners and Consumer Involvement in Implementation Activities**

- The AT Work Group and the Consumer/Stakeholder group have been combined into a single functioning body.
- An intensive planning retreat with project staff, the Consumer Stakeholder Advisory Board and AT Work Group, and contractors is being planned for this summer.
- A Consumer/Stakeholder Advisory Board will provide oversight to the proposed project.
- Guidance regarding essential data elements for the needs analysis will be solicited from the Consumer/Stakeholder Advisory Board and AT Work Group.
- Consumers will also be involved as advisors, trainers, evaluators, and potentially as staff (two vacant project positions will be filled after notification of funding).
- All activities will include a strong consumer feedback and satisfaction system.

## **Public Partners**

- Delaware Department of Health and Human Services.
- Division of Developmental Disabilities Services (DDDS).
- Division of Services for Aging & Adults with Disabilities (DSAAPD).
- Division of Substance Abuse and Mental Health (DSAMH)—to be determined.
- Division of Social Services (Medicaid) (DSS).
- Division for the Visually Impaired (DVI).
- Birth to Three Early Intervention Part C—role to be further clarified.
- Department of Education (DOE)—role to be clarified.
- Department of Labor (DOL)/Division of Vocation Rehabilitation (DVR).

## **Private Partners and Subcontractors**

- The Center for Applied Sciences and Engineering (AS&E)/DATI and the Center for Disabilities Studies (CDS), both at the University of Delaware, were involved in planning activities.
- Easter Seals.

## **Public and Private Partnership Development/Involvement in the Planning Phase**

### **Public Partners**

- The Stakeholder Task Force, formed as part of the Starter Grant, included all state agencies involved in serving individuals with disabilities. The Task Force and contractors held several meetings and reviews to develop the outline for the Systems Change Grant. Input was solicited from interested consumer organizations and representatives. Consumer and Division representatives suggested additional representation as needed and input from these individuals was obtained.

- DATI and DDDS took responsibility for writing the grant. Input and information was obtained from all members of the group including CDS.

## **Public and Private Partnership Development/Involvement in Implementation**

### **Public Partners**

- DSAAPD and DSAMH will each conduct needs analyses.
- Multiple state agencies serving individuals with disabilities will be involved in implementation activities, including: (1) conducting a needs analysis, (2) assist in development, implementation and finalization of the awareness and training campaign, (3) be involved in training service providers, clarifying/refining existing funding mechanisms, and developing project web site and materials, and (4) take part in the demonstration projects, the design and implementation of the tracking system and project evaluation.

### **Private Partners**

- The DATI will be responsible for implementing most of the AT-specific elements of the project:
- A DATI Associate Policy Scientist (APS) will assist DSAAPD and DSAMH in conducting needs analyses, clarifying/refining existing funding mechanisms, web site development, and the equipment re-use/recycling and alternative financing programs.
- The DATI Information and Outreach Coordinator (I&OC) will assist in development, implementation, and finalization of the awareness and training campaign; be involved in expansion of the ATRCs' capacity to support equipment demonstration and loan; will lead development of the project web site and other materials; and will take part in project evaluation.
- The DATI Assistive Technology Resource Centers (ATRCs) will be involved in all aspects of the awareness and training campaign, streamlining AT access, and project evaluation activities.

### **Existing Partnerships That Will Be Utilized to Leverage or Support Project Activities**

- DDDS has undertaken various systems change activities in conjunction with DATI and will continue to do so under the Real Choice grant. The DATI will also function as the interface among various constituents in this project, given its longstanding efforts with and on behalf of the disability and aging community, with AT service providers, with state and local agencies, and with private interests.

- DSAAPD receives an annual appropriation ranging from \$100,000 to \$250,000 from the state legislature for its Specialized Services Fund, which is used as a payor of last resort for AT and home modifications needed by its clients. The Independent Living program of DVR works collaboratively with DSAAPD and the DE-MD Paralyzed Veterans Association to provide home modifications to those in need, and DVR maintains an extensive database for tracking these expenditures. DVI offers a cross-age continuum of supports for the visually impaired while DOE invests in AT access through demonstration grants and equipment purchases.
- This year, the National Institute of Disability and Rehabilitation Research (NIDRR) intends to award funds for low interest loan programs for the purchase of AT devices and services. As part of the Real Choice grant project, an application for such federal funding will be made as part of the proposed alternative financing program.

### **Oversight/Advisory Committee**

A Consumer/Stakeholder Advisory Board will provide oversight for the proposed project.

### **Formative Learning and Evaluation Activities**

- CDS will assume primary responsibility for a 3-year formative and summative evaluation to monitor the extent to which the identified infrastructure elements have been implemented as specified. CDS will rely on data collected by state agencies and stakeholder feedback.
- The project team's data analyses will focus on the extent to which the project has resulted in: (1) greater access to, choice among, and autonomy related to community services and supports, (2) better outcomes (including fewer hospitalizations, higher levels of satisfaction with life and care, fewer unmet needs), (3) differences in patterns of services provided (fewer nursing home admissions, more discharges from nursing facilities to the community and greater use of alternative residential facilities), and (4) differences in the cost of services provided.

### **Evidence of Enduring Change/Sustainability**

The tracking system that will be used to document expenditures for AT devices/services, and the AT web site, equipment re-use/recycling, and alternative financing programs, and training curriculum and materials will all continue after the grant ends.

### **Geographic Focus**

Statewide.