

FLORIDA -- 2001 Real Choice Systems Change Grant

Identified Problems with the States' Long-Term Care System

- Strains on the long-term care system from increased numbers of frail elderly, disabled veterans, and persons with permanent physical or mental limitations.
- Lack of interagency cooperation around consumer choice and access to services.
- Confusion around multiple entry points, varying eligibility determinations for functional and financial assessments, and restrictive financing streams.
- Care options largely determined by funds available in discrete programs.
- Organized support for the informal care system of family and friends as caregivers has either declined or remained limited over the past 10 years.
- Lack of affordable and accessible housing needed for community residence.
- Provider participation across the four selected Medicaid waivers is hindered by regulatory requirements (e.g., separate enrollment and complex and unique rules).
- Critical shortage of nursing assistants and other direct support positions.

Perceived Strengths

- Increased funding for a range of community supports for persons with disabilities.
- Passage of consumer-directed care legislation.
- Implementation of several pilot programs to increase consumer choice.
- Four Medicaid waivers that serve distinct populations (e.g., MRDD).

Primary Focus of Grant Activities

- Removing barriers to receiving and providing services through the state's Medicaid waivers (target: national and state policies and procedures).
- Improving access for people with disabilities and long-term illnesses to information and linkages to community-based resources (target: individual consumers).
- Building capacity for integrated community living choices for people with severe disabilities (demonstrated in three demonstration areas) (target: local communities).

Goals, Objectives, and Activities

Overall Goal. Increase capacity to support real choices for persons with disabilities and long-term illnesses through activities directed at state government, local communities, and individual consumers.

Goal. Create linkages that will result in communication and coordination among key stakeholders and informed choices for people with severe disabilities and long-term illnesses.

Objectives/Activities

Create an Interdepartmental Systems Change Team (SCT).

Goal. Improve the delivery of services to consumers by removing barriers to participation.

Objectives/Activities

Analyze state and federal policies and regulations to identify unnecessary barriers and develop recommendations and implement strategies to address these barriers.

Goal. Create a comprehensive single point of inquiry for persons with disabilities and long-term illnesses, caregivers, and service providers to obtain information and linkages to state and local resources.

Objectives/Activities

- Develop Clearinghouse as a comprehensive single point of entry by developing a statewide educational campaign (toll-free number and web site), consumer feedback mechanisms on Clearinghouse services, and referral procedures.
- Determine costs and benefits of a statewide automated and accessible benefits screening program for professionals and consumers.

Goal. Build community capacity for assisting people with disabilities and long-term illnesses to live in integrated community settings of their choice when appropriate; capacity methods to be demonstrated in three Florida counties.

Objectives/Activities

- Create local grassroots Long-Term Care (LTC) Resource Networks to increase local capacity to support community-based choices (each demonstration site).
- Design and implement a recruitment, retention, and training initiative targeting direct support workers for home and community settings (each demonstration site).
- Develop and implement an outreach and referral strategy to link consumers most at-risk of institutionalization with resources and information.
- Create a housing initiative to increase housing choices for people with disabilities and long-term illnesses.
- Implement a *Help for the Caregiver Initiative* to recruit and place volunteers to provide support services for people with disabilities and long-term illnesses and/or their caregivers.

Key Activities and Products

- Develop report that outlines barriers to increasing provider access under Medicaid waiver programs, best practices from other states, and recommendations for Florida.
- Establish toll-free number and web site, consumer feedback mechanisms, and referral procedures for Clearinghouse.
- Conduct surveys of consumers and families to assist with increased recruitment, retention, and training of direct support workers.

- Develop a replicable staff recruitment campaign, replicable staff retention program, and a replicable cross-disability/cross-cultural training curriculum.
- Develop outreach strategy to reach consumers at risk of institutionalization and identify and educate potential referral sources.
- Develop assessment tool for home modification and assistive technology and identify individuals to be certified in its use.
- Inventory existing voluntary services and programs for caregivers.
- Partner with consumers and other key stakeholders to develop and implement a *Help the Caregiver Initiative*.

Consumer Partners and Consumer Involvement in Planning Activities

Input from an Ad Hoc Consumer Task Force meeting in June 2001, which included public comment, was incorporated into the proposal.

Consumer Partners and Consumer Involvement in Implementation Activities

- The Partnership, consisting of representatives from disability organizations and consumers, will review recommendations drafted by the Systems Change Team, identify unnecessary barriers to consumer choice, and disseminate the project's best practices.
- The Consumer Task Force (CTF), created for this project by the Partnership, will include members of the Partnership and additional consumer representation from each of the three demonstration sites.
- Consumers will also be partners in organizing and serving on the LTC Resource Networks and organizing the town meetings.
- The LTC Resource Networks in each demonstration site will include consumers, CILs, other agencies serving people with disabilities, and the AAA and aging service provider agencies. The Networks will work with full-time resource developers to identify barriers to community-based living, provide technical assistance in addressing the barriers, and assist in implementation of the outreach and referral strategy and the housing initiative.

Public Partners

Numerous public agencies were involved in the planning process or will be involved in the grant implementation. They include:

- Advocacy Center for Person with Disabilities.
- Agency for Health Care Administration.
- Department of Health.
- Developmental Disabilities Program Office.
- Department of Education.
- Executive Office of the Governor.
- Department of Elder Affairs (DOEA).
- Mental Health Program Office.

- State Long-Term Care Ombudsman Program.
- University of Miami, Center on Aging and Disabilities.
- Public Housing Agencies (PHAs).

Private Partners and Subcontractors

Numerous private organizations were involved in the planning process or will be involved in implementation. They include:

- Area Agencies on Aging.
- Brain Injury Association of Florida.
- Florida Advocates for Community Care for Disabled Adults, Inc.
- Florida Association of Centers for Independent Living.
- Florida Association of Homes for the Aging.
- Florida Developmental Disabilities Council.
- Florida Housing Coalition.
- Florida Independent Living Council.

Public and Private Partnership Development/Involvement in the Planning Phase

Public Partners

The proposal was developed through collaborative efforts between an Ad Hoc Consumer Task Force (now the Real Choice Partnership [RCP] Consumer Task Force) made up of representatives who are cross age and disability and, the Coalition, an open ended invitation body of representatives from public, private non/for profit, and faith-based organizations. Within the Consumer Task Force and the Coalition. The public entities listed previously were key participants in the development of the proposal:

Private Partners

Private organizations such as the National Brain Injury Association and the National Family Care Council informed their state chapters/affiliates of the grant initiatives being developed by CMS. The Real Choice Partnership Coalition (formerly the Florida Olmstead Coalition) comprising numerous private organizations participated in the development of the grant by developing the key goals, objectives, and activities.

Public and Private Partnership Development/Involvement in Implementation

Public Partners

- Interdepartmental Systems Change Team (SCT), made up of representatives from DCF, DOE, DCA, DOEA, DOH, and AHCA, will lead efforts to streamline four Medicaid waiver programs and address state’s activities related to Olmstead case requirements.
- The Resource Developers and LTC Resource Networks will work with public housing agencies to increase housing choices for people with disabilities and long-term illnesses.

- Officials from the Long-Term Care Ombudsman program, CARES and the Medicaid Nursing Home Diversion Program will work with the project to refer people residing in institutional settings who may be appropriate for community-based alternatives for an assessment by CARES (state's nursing home assessment and diversion process). Private Partners
- Activities for Goal 4 will be carried out by a subcontractor.
- In 1999, the Governor created the Americans with Disabilities Act Working Group (ADAWG), a 15-member advisory body representing the cross-disability communities. This body, in conjunction with the Department of Management Services (DMS), will administer the project in close consultation with the SCT, CTF, and Partnership.

Oversight/Advisory Committee

- Reorganize coalition established for grant, Governor's Americans with Disabilities Act Working Group (ADAWG), and use Real Choice Partnership (the Partnership) to advise project.
- Establish Ad Hoc Consumer Task Force (CTF) to advise project.
- The CTF will develop and review recommendations generated by the project and will also serve as an advisory body.
- The Consumer Task Force (CTF), Real Choice Partnership (RCP), and Interdepartmental Systems Change Team (SCT) will serve in advisory roles for the project.

Formative Learning and Evaluation Activities

- Project staff will collect data to monitor progress and outcomes for activities focused on statewide systems. The focus of outcome data is on number of consumers who benefited from proposed system; accessed the systems available for information and resources; were referred to community-based programs and services; and the number of provider staff trained across disabilities and cultures.
- The SCT, Partnership, and CTF will receive and provide input into all areas of the project's implementation.

Evidence of Enduring Change/Sustainability

- At state level, through the integration of Florida's Medicaid waivers, consumers will experience greater choices and access to services.

- At community level, the project will demonstrate the effectiveness of cross-disability partnerships in building capacity for providing support systems for people with disabilities; building a cross-disability/cross-culturally trained direct support workforce, increasing outreach to consumers at-risk of institutionalization, increasing affordable housing options, and sustaining non-paid caregivers through assistance provided by volunteers.

Geographic Focus

Statewide (with demonstrations in three sites).

Key People to Interview

- Project Director (TBD).
- Management contractor (TBD).
- Members of Partnership and Consumer Task Force.
- Resource Developers and Caregiver Support Specialists in demonstration sites.

Internal Deliverables of Potential Use for RTI's Evaluation

- Report that outlines barriers to increasing provider access under Medicaid waiver programs, best practices from other states, and recommendations for Florida.
- Findings from case studies and best practices by LTC Resource Networks.
- Findings from surveys of consumers and families to assist with increased recruitment, retention, and training (three components) of direct support workers.
- Best practices and lessons learned report on housing efforts.
- Best practices guidelines from *Help the Caregiver Initiative*.