



## **Community-Based Services Technical Assistance Services**

With the assumption of certification activities by the Survey and Certification team, the development of new waiver services, and revision of the Division's regulations, the Division recognized the importance of providing technical assistance to community providers separate and apart from the survey process; thus, the Technical Assistance team was created in 2010.

The technical assistance team includes a Program Manager and Program Specialist who have access to Division clinicians for support as needed. Technical assistance services occur by phone, email, in-person, or via formal meetings or training opportunities.

In addition to general technical assistance in responding to questions and concerns, the Technical Assistance team:

- Assists with the initial application process, orientation and policy review for prospective applicant agencies interested in offering specialized services;
- Reviews and processes referrals for Team Behavioral Consultation (TBC), which is a service available to teams working with individuals who are experiencing challenging behaviors;
- Prepares, conducts, and/or organizes DDD sponsored trainings statewide;
- Collaborates with contracted training providers in preparing, organizing and evaluating trainings statewide;
- Develops competency tools for training sessions, retains training documentation and training materials and determines appropriate delivery methods for training (i.e., in-person, webinar, self-study);
- Monitors and assists with evaluation and improvement of processes and procedures within the Division;
- Facilitates planning and problem-solving meetings, and special projects focused on improvement;
- Assists with data collection and review for national surveys;
- Collects, aggregates and analyzes information regarding deaths of individuals served;
- Provides or arranges for presentations regarding eligibility for services and the services provided through the Division for other state agencies, schools, educational service units, and community groups;
- Conducts research on best practice approaches in the developmental disabilities field; and

- Analyzes data and prepare reports as needed.

The Division also provides some specialized technical assistance services as described in the following sections.

### ***Team Behavioral Consultation Services***

Team Behavioral Consultation (TBC) is a service available to individuals in DD services. The purpose of TBC is to address needs of children and adults with developmental disabilities who experience behavioral challenges that threaten success in community services. The TBC process involves intensive observations and assessment of the individual in natural environments, assessment of caregiver strain and development of behavioral support recommendations for the individual and his/her community team. The TBC team also provides training and mentoring regarding recommended supports and programs, monitors fidelity and remains available to the community provider/team beyond the formal involvement.

TBC services use applied behavioral assessment with a bio-psychosocial approach to hypothesize the function(s) and context(s) of problematic behaviors. As a result of onsite observation and consulting, the TBC team develops recommendations tailored to an individual's situation including interaction guidelines, behavioral data collection/use, behavioral interventions, environmental modifications, safety issues, and professional referrals.

The TA team reviews requests for TBC services and forwards them to the TBC provider. The TBC provider sends monthly and annual reports to TA for review and analysis. Data regarding response time and duration of involvement are tracked by TA, and the TA team aggregates the data for the Developmental Disabilities Quality Improvement (DDQI) Committee.

Since 2012, there has been one provider of TBC services in the state, OMNI Behavioral Health. OMNI refers to TBC as Intensive Treatment Mobile Services (ITMS). They conduct and report results of satisfaction surveys and provide an annual report that provides an aggregation of demographic data and outcomes regarding individuals served. In addition to the written annual report, TBC administrators with TA to review trends and to identify overall system needs.

In 2013, OMNI Behavioral Health contracted with the University of Nebraska-Lincoln Department of Psychology and Law to evaluate the instruments utilized as part of the TBC assessment process. As part of this evaluation, focus groups were conducted with Service Coordinators, provider administrators and provider direct service staff. The purpose of the focus groups was to evaluate the effectiveness of the information/data the TBC team collects and how to improve data collection.

Based on UNL evaluations, the TBC team discontinued the use of some assessments due to the ineffectiveness and lack of reliability of the data they were intended to collect. Currently the TBC team utilizes the following assessments: Questions About Behavioral Function (QABF), Caregiver Strain Questionnaire (CGSQ) and Satisfaction with Services (SSS). *The “ITMS Focus Group Results-Service Coordinators” report is included in the 2013 annual TBC report attached Appendix P herein.*

### ***Targeted Assessment, Support Consultations and Training***

Through the survey and certification processes, and as recognized by the Department of Justice Independent Expert, many Nebraska specialized providers struggle with performing functional behavioral assessments (FBA) and developing adequate behavioral support plans (BSPs) for the individuals they support. This is due, mostly in part, to new regulatory requirements implemented in July 2011. In preparation for the new regulations, the Division provided training to all providers in 2010 and 2011 on the FBA and BSP development processes that are utilized at BSDC; yet little improvement was seen. In an effort to assist specialized providers, the Division provided access to a contractor that assisted them in the development of FBAs and BSPs for fifty individuals covered by the Settlement Agreement. This was done in an attempt to impact a broad array of providers who serve people with challenging behavioral needs through hands-on guidance and onsite training.

In 2013, a team of professionals from BSDC developed a full-day training regarding FBAs and BSPs. They developed a notebook of resources, case studies and suggested forms for use with individuals receiving services in the community. The training was offered six times in five different locations across the state during state fiscal year 2013. Direct support professionals, mid-level managers and administrators of specialized service providers attended the trainings. Trainings were limited to 30 attendees, and all training sessions were filled to capacity. Evaluations affirmed the effectiveness and usefulness of the training, and the Division intends to offer more monthly trainings through the end of 2014. The BSDC team is developing an advanced level training for people who have background in FBA and BSP. The advanced level training will address requests from provider agencies for the opportunity to gain practical experience in applying the knowledge gained during the first training session addressing several case studies while benefiting from professional guidance by the BSDC trainers.

### ***Training and collaborative opportunities***

OMNI Behavioral Health: As a result of OMNI’s targeted assessment of quality assurance indicators and a survey of provider, the Division entered into a partnership with OMNI Behavioral

Health to provide training across the state on identified areas of need. The TA works directly with OMNI to provide the logistics related to the training such as contracting with trainers, securing locations and audio/visual needs, working with presenters to develop pre- and post-tests as appropriate, registering participants and collecting and aggregating evaluations. Trainings provided during the latter part of 2013 include Elder Abuse: Financial Exploitation and Elder Rights Issues, Serving Individuals with Co-Occurring Intellectual/Developmental Disabilities and Mental Illness, and Nurturing the Development of Young Children with Developmental Disabilities from Birth to Age 5. A training calendar and session descriptions can be found at: <http://www.omnibehavioralhealth.com/training/>

Fritz & O'Hare Associates: The TA team has worked with Fritz & O'Hare Associates in developing online training for individuals and their families and service providers. Five user-friendly videos are in various stages of development. "Together We Can!" is designed for individuals and providers to view together and provides engaging information about how individuals and providers can work together to increase the individual's opportunities to live, work and participate in the community. "It's All About the Plan!" is a series of four video learning opportunities that targets individuals and their parents. The series educates about and encourages ways for individuals and parents or guardians to be involved in the process of developing Individual Education Plans (IEPs) and Individual Program Plans (IPPs).

*It's My Life!* Conference: Every two to three years, the Division hosts a major conference for a wide audience: DD staff, service providers, community professionals, self-advocates, parents, and guardians. The Division began developing an agenda in 2013 to bring best practices to Nebraska. National and international presenters will provide vital information in five tracks: behavioral, habilitation, health, leadership and Therap. The theme of the conference, *It's My Life!*, was created with the vision of harnessing systems and resources to support people with developmental disabilities in living an enviable life. The featured speaker is Eustacia Cutler, mother of Dr. Temple Grandin, a woman known world-wide sharing her experience as someone with autism who has extreme talent in the area of animal science and research. Eustacia will speak from the perspective as a mother who was told to institutionalize and forget her daughter. There will be over 75 breakout sessions for attendees to choose from on a wide variety of topics.

Community presentations: The Division has responded to numerous requests from the community for presentations regarding the services offered and the process for determining eligibility. In 2013, the team provided 29 presentations for almost 500 participants across the state.

Easter Seals: The Division partnered with Easter Seals Nebraska to provide employment calendars for individuals and Service Coordinators. The calendars are a helpful employment resource that includes hints for job interviews, pockets to collect paystubs, areas to record work schedules and hours worked, sample budgets and places to record expenses.

### ***Targeted Medical/Clinical Reviews and Consultations***

Through the survey and certification processes, and as recognized by the Independent Expert Monitoring Team, many Nebraska specialized providers struggle with recognizing and coordinating the healthcare needs of the individuals they support. In order to address this challenge, the Division has incorporated the Health Risk Screen (HRS) tool used by BSDC into Community Based Services. Service coordinators were trained on and implemented on all individuals in services to identify individuals who may have significant medical needs. This information is used to determine whether there are needs an individual's team needs to address, if additional nursing supports are recommended or if consultative services might be requested. All individuals in services were screened in 2011, new individuals in services are screened upon entry and upon any time there is a change of medical status. Individuals covered by the Settlement Agreement are screened annually.

The Division also created a Community Based Services Medical Services Team that consists of two Program Specialist Registered Nurses (RN) and the BSDC Medical Director. This team operates separate and apart from the BSDC Medical/Professional Team, but often collaborates with them when additional medical or clinical expertise is needed. The Medical Services Team's first priority has been to perform reviews on individuals covered by the Settlement Agreement. These individuals are prioritized based on the results of the Health Risk Screens; those with the highest risk are evaluated first. The Team meets with the individual, guardians and families, providers, and service coordinator and provides any recommendations or finding that arise from their review. The Program Specialist RN also works closely with the individual's service coordinator to individualize their monitoring schedule and to develop specialized monitoring tools if necessary. Members of the Medical Services Team also provide training to the service coordinator where necessary on recognizing and responding/reporting items of concern. The Team is also available to consider need based referrals from all service coordinators throughout the state, or to support the general technical assistance and certification teams when medical issues arise. *For your reference, a report entitled "Community: New Initiatives and Future Directions" is included in the Appendix Q herein.*

### ***Health Supports Curriculum***

As a result of the efforts of the Medical Services Team, the Division felt that community providers would benefit from additional resources in equipping staff to recognize and respond to the health and medical needs of the people they support. As a result, Dr. Nabih Ramadan, MD, MBA, developed a video-based curriculum that providers can utilize to train staff on an array of different

health support areas. The curriculum continues to be available to all Nebraska specialized DD providers at no cost to them.

An overview of the curriculum was presented to provider administrators on February 5, 2013. Additional sessions were scheduled for February and March of 2013 to present the training modules to provider representatives responsible for staff training and oversight. The curriculum materials consist of a training guide (which includes the PowerPoint presentations for each module shown in the videos along with competency-based exams), DVDs of each module, an outline, and recommendations for implementing the training. The training modules were provided to the Division's Bridges program and recorded for distribution to providers.

*A summary of the curriculum entitled "Supporting the Health & Well-Being of Persons with IDD" is included Appendix R herein.*