

Olmstead Progress Report

Communication of key efforts DHS is making regarding system and service development for persons with mental illness and disabilities.

Alignment with Olmstead: *DHS has a number of efforts underway that improve choice, community capacity and opportunities for community integration. DHS will specifically ensure these plans are aligned with each other and in compliance with Olmstead. This means the MHDS State DD plan; Money Follows the Person, Crisis services for both MR/DD (IPART) and MH, children's mental health, sub-acute capacity, employment options and other plans. We begin with the feedback from consumers and advocates who have shared their expertise, and take advantage of the expertise of the state facilities, the Iowa Medicaid Enterprise commitment to the health of Iowans, and other key stakeholders to align our initiatives.*

DHS vision and internal consistency: *Secure the focused partnership within DHS in bi-weekly action oriented collaboration sessions. The purpose of the internal consultations is to maintain the joint commitment and internal alignment to secure completion of the projects so that planned services are timely provided to the consumers in need of the service.*

External Communication: *Communicate the internal DHS work plan to the public and report on the status of the current work plan monthly to the Boards, Commissions, Advisory Boards, and to the public on the web.*

Current Work Plan for January 15, 2010 through July 15, 2010

- 1. Goal: Identify and implement strategies that allow Iowans in crisis to maintain their current living arrangements. The strategies we will implement are :**
 - Mobile Crisis Response Services to stabilize and meet the need of the Consumer with Developmental Disabilities in the community, avoiding inappropriate inpatient hospitalizations and transfers to the State Resource Centers. The IPART program will be implemented in January 2010. The project originates from the Woodward Resource Center and includes on-site technical assistance and training for community based practitioners treating individuals with serious dual diagnosis (MR/MI) and behavioral issues. The program is funded by the Iowa Medicaid Enterprise through the Iowa Plan for Behavioral Health (Magellan) and the Money Follows the Person grant.
 - Mobile Crisis Response Services for individuals with mental illness, through the Iowa Plan (Magellan). Under the Iowa Plan contract, mobile crisis services will be developed statewide by July 2010.
 - Examine the processes, needs of individuals, and current gaps in services to identify how the state can reduce the number of Iowans placed out of state for treatment. Complete this assessment by March 15, 2010.

2. Goal: Iowans have choice in where they live whenever possible and in work opportunities when appropriate and how they participate in their community of residence.

- Continue implementation of Iowa's Money Follows the Person grant. The grant assists individuals who have been living in an ICF/ MR for more than 6 months to move into the community through the Brain Injury and Intellectual Disability waivers. The target is 528 individuals over the course of 5 years (through 2012).
- Develop new HCBS waiver services to address key barriers to members living successfully in the community, including Crisis Intervention, Mental Health Outreach and Behavioral Intervention. File rules by March 1, 2010.
- Advance Competitive employment opportunities for persons with disabilities by acting on the State Employment Leadership Network (SELN) model to identify opportunities to improve employment outcomes achieved by the individuals receiving publicly financed support. Partner with sister state agencies to identify further opportunities. Because this is a large agenda, progress will be measured in process steps toward the goal and will be reported on monthly.

3. Goal: Develop and expand staff competencies, service capacity, and assure quality within the provider network.

Expand training opportunities for providers through the development of curriculum on best practices for persons with dual diagnosis (MR/MI), and through web-based training opportunities such as the College of Direct Support. Trainings begin in January 2010.

4. Goal: Improve care coordination and informed choice for members.

As part of the Medicaid Health Information Technology Plan, due to be complete by April 1, 2010, address strategies for sharing information on vacancies, placements, and client needs electronically and developing providers' health information technology infrastructures.

DHS

1/07/2010