

Request for Proposal (RFP)
Building Capacity to Serve People with Intense Support Needs

OVERVIEW & MISSION

The Ohio Department of Developmental Disabilities (DODD) is responsible for overseeing a statewide system of services and supports for people with developmental disabilities and their families.

The mission of DODD is continuous improvement of the quality of life for Ohio's citizens with developmental disabilities and their families.

GUIDING PRINCIPLES

DODD will:

- Create less complex service delivery, with fair and logical payment systems that are federally compliant
- Continue to be good stewards of limited resources
- Provide quality outcomes through a combination of people and processes
- Design service delivery models in response to choices made by the people served, in alliance with community supports
- Develop a system-wide vision and long-range strategic plan by listening to our funding partners, constituents and stakeholders

BACKGROUND

In 2014, the Ohio Department of Developmental Disabilities (DODD) engaged several stakeholder groups to discuss issues and concerns around people with intense support needs. These groups included Building System Capacity for Individuals Experiencing Intense Challenges and Strong Families, Safe Communities. Both of these groups, as well as others, identified a significant shortage of residential providers who had the capacity to serve people with intense support needs.

Based on the findings and recommendations from the two groups, DODD convened an additional group of stakeholders to discuss best practices in serving people with intense support needs and what it would take to develop capacity. The following essential elements emerged:

1. Holistic, person-centered assessment and planning.
2. Cross-system implementation and coordination.
3. Crisis prevention and response.
4. Engagement of family and friends.
5. Competent, stable and supported workforce.
6. Trauma-informed organizational culture.

PURPOSE

As a result of this work, and through the System Transformation Funds included in HB 64, DODD is seeking to promote:

- A continued movement of all current and potential HCBS residential service providers in shifting practices to better serve people with intense support needs;
- HCBS residential service provision aligned with the Essential Elements; and
- Expanded capacity to serve people with intense support needs in HCBS settings.

Program level outcomes include:

1. Reduce utilization of emergency services across systems;
2. Reduce the use of restrictive or aversive measures;
3. Maintain people in their home/living situation;
4. Maintain continuity of staff/reduce staff turnover.

The ultimate goal of this project is fostering better outcomes for people with intense support needs, including:

1. Being understood – from a holistic perspective (not just different parts of me).
2. Receiving services and supports at the “right time” and “right intensity.”
3. Feeling safe and experiencing a sense of order in my world.
4. Feeling a sense of continuity and stability of people and supports.
5. Feeling a sense of purpose and opportunities to contribute and be engaged in my community in ways that reflect my interests and strengths.
6. Having friends – people who like me for who I am.
7. Experiencing good health.
8. Finding a voice – opportunities to express what I want my life to look like, and to know I’ve been heard.

HCBS residential service providers will identify and address barriers to implementing the Essential Elements within their agencies. The anticipated award period is October 1, 2015 – June 30, 2017.

APPLICATION

Applications will be accepted that contain the following components:

- Cover sheet including:
 - Name of Applicant
 - Title of Applicant
 - Company Name (if applicable)
 - Street address including city, state and zip
 - Tax ID number (if applicable)
 - Phone number
 - Email address
 - County(ies) Served
 - Statement of acceptance of all terms
 - Signature
- All required components (1-4) specified below in this RFP

Proposals without these items will not be considered. Proposals may not exceed 15 pages.

APPLICATION REVIEWS AND GRANT AWARDS

Providers will be selected using a selected using a competitive process. In addition to the RFP application submitted, DODD may use information from the Office of Provider Standards and Reviews to further evaluate applicants. Applications will be reviewed and scored on a scale from 0-100 (100 being the maximum awarded points) according to the following components:

1. A written description of the process used to complete the Self-Assessment (attached), including any input from people served, families, and/or local partners, board members and any barriers encountered or anticipated in implementing the Essential Elements.
 - a. How barriers were identified (10 points); and
 - b. The specific barriers this RFP will address. (10 pts) **25 pts total**
2. A detailed plan on how the applicant will address the barriers and sustainability including:
 - a. How the identified barriers will be reduced or eliminated; (5 pts)
 - b. Include the name and role of core team members and individual(s) responsible for oversight of grant funds and activities (5 pts);
 - c. Implementation strategies in SMART format or using a Logic Model (Specific, Measurable, Attainable, Relevant, Timeline to this RFP); (10 pts) and
 - d. How efforts will be sustained once funding is complete. (10 pts) **Total 25 pts**

3. A budget for requested supports/equipment/resources to address the identified barriers.
 - a. Amount requested (5 pts); and
 - b. Justification (include how budget determined and how requested items are relevant to addressing the goals of this RFP and addressing identified barriers. (20 pts) **Total 25 pts**

4. Written statement of commitment to:
 - a. Regularly attend Communities of Practice specific to this project, hosted by DODD monthly;
 - b. Participate in trainings offered by DODD relative to this project; and
 - c. Commit to full implementation of all Essential Elements by the end of the grant period. **Total 25 pts**

Applications that reflect multi-system/agency/community teams (i.e., letters of commitment, etc.) will be given up to 10 extra points.

Posting Dates: 7/31/15 – 8/21/15

Award Period: 10/1/15 – 7/30/16

For more information, please contact: Cathy Hutzel: Cathy.Hutzel@dodd.ohio.gov

Best Practice Residential Supports for People with Intense Support Needs Agency Self-Assessment and Capacity Development Guide

Background and Purpose

In the spring of 2015, representatives from provider organizations and county boards serving people with complex needs gathered for a day of planning with advocates and staff from Ohio DODD and MHAS. The purpose of the session was to identify outcomes that best practice organizations accomplish on behalf of people with complex needs and then to identify the essential components of best practice that support the achievement of these outcomes.

This initial work has been edited and expanded in order to create a self-assessment tool that residential provider organizations can use to gauge current practice and set the stage for building capacity to offer best practice supports for people with complex needs. Residential providers and DODD can use this tool as the foundation for conversations about how to work together toward a shared vision of high quality services and supports.

Outcomes for People with People with Intense Support Needs – What Best Practice Programs Help People Accomplish

- Being understood – from a holistic perspective (not just different parts of me)
- Receiving services and supports that are “right time and right intensity”
- Feeling safe and experiencing a sense of order in my world
- Feeling a sense of continuity and stability of people and supports
- A sense of purpose and opportunities to contribute and be engaged in my community in ways that reflect my interests and strengths
- Friends – people who like me for who I am
- Experiencing good health
- Finding a Voice – opportunities to express what I want my life to look like, and to know I’ve been heard

Program Level Outcomes - What Best Practice Programs Accomplish

- Reduce utilization of emergency services across systems;
- Reduce the use of restrictive or aversive measures;
- Maintain people in their home/living situation;
- Maintain continuity of staff/reduce staff turnover.

Essential Components of Best Practice Residential Programs for People with People with Intense Support Needs

There six components – shown in the boxes below - are essential to providing best practice residential supports for people with complex support needs. Each component (box) includes a cluster of best practices. This Self-Assessment and Capacity Development Guide offers a way for an organization or program to self-assess its capacity related to each of these practices, and identify what helps and what gets in the way of delivering best practice.

HOLISTIC, INDIVIDUALIZED
ASSESSMENT AND
PLANNING

CROSS SYSTEM
IMPLEMENTATION
AND COORDINATION

CRISIS
PREVENTION AND
RESPONSE

ENGAGEMENT
OF FAMILY AND
FRIENDS

COMPETENT, STABLE
AND SUPPORTED
WORKFORCE

TRAUMA-INFORMED
ORGANIZATIONAL
CULTURE

Instructions for completing the Self-Assessment and Capacity Development Guide

Read the statement and place a check in the box that best describes your organization's practices. Use the space in the box to add any additional information that describes your current practices. Use the last column to reflect ideas of what helps and what gets in the way.

Agency or Program _____ Date _____

**HOLISTIC,
INDIVIDUALIZED
ASSESSMENT AND
PLANNING**

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
Assessments are completed in these areas: 1. Physical health and medication 2. Behavioral health and medication 3. Mobility 4. Sensory system 5. Trauma history				
Agency staff actively engage with the person, family and SSA to incorporate assessment findings into the plan				
Agency staff actively engage with the SSA in developing other aspects of the plan, such what works/doesn't work, important to/important for, identification of people in the person's life, and risk assessments (when applicable)				
Plans and schedules are in place that outline responsibilities and timelines for implementation				
List other best practices here				

Agency or Program _____ Date _____

CROSS SYSTEM
IMPLEMENTATION,
AND
COORDINATION

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
Staff work with the SSA to reach out to other agencies that have served the person in the recent past, and/or are currently serving the person				
Staff work with the SSA to engage staff from other organizations in the assessment and planning process				
Staff work with the SSA to coordinate information sharing across organizations serving the person				
Staff work with the SSA to encourage utilization of successful approaches across settings				
List other best practices here				

Agency or Program _____ Date _____

Tauma-informed,
Organizational Culture

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
Staff receive training in trauma, it's impact, ways to promote healing, and secondary trauma				
Staff consistently ask: "What happened to you?" vs "What's wrong with you?"				
Self-care is encouraged and practiced				
Problem-solving occurs in a mutually supportive environment				
The organization intentionally designs activities that build togetherness, fun, and connection				
Leadership and supervision is emotionally intelligent				
The organization has ways to filter in (and filter out) staff that embrace (and don't embrace) principles of trauma-informed care				

Agency or Program _____ Date _____

Engagement of Family and Friends

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
Staff have frequent conversations with family and friends about what's working/not working				
Staff engage family and friends in order to better understand the person from the perspective of family/friends				
Family is supported to recognize the value of a "good life", not just health and safety				
Family and friends understand trauma and its impact, and are supported to contribute to helping the person heal				
Staff help the person stay connected with friends and family				
Staff help the person develop connections and friendships with community members				
List other best practices here				

Agency or Program _____ Date _____

**Competent, Stable
and Supported
Workforce**

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
DSPs and managers and leadership have a clear understanding of the competencies necessary to do their work				
DSPs, managers, and leadership have access to training and support to achieve these competencies				
Specialists and DSPs are compensated for achieving training benchmarks				
The agency offers team building and staff recognition				
Staff have opportunities to work with an experienced and competent mentor				
List other best practices here				

Agency or Program _____ Date _____

**Crisis
Prevention and
Response**

Best Practices	Rarely	Most of the Time	Always	What helps? What gets in the way? What will it take to improve in this practice area?
The assessment and planning process yields practical information that staff can use in order to prevent crisis				
Staff understand the person's triggers and implement practices to reduce them				
Strategies are in place to help the person respond positively to stresses and triggers				
Plans are in place to prevent events and issues that have led to past crisis				
Staff know what to do when a crisis occurs				
De-briefing occurs immediately after the crisis				
List other best practices here				