## Lance Morehouse Recommendations

- (5) The DD Systems Task Force shall make recommendations on:
- (a) The development of a system of services for persons with developmental disabilities that is consistent with the goals articulated in section 1 of this act;
  - Make DDD eligibility more meaningful. Providing a small amount of flexible funding for families who are eligible for services to access a little respite or other needs is critical. Respite is the #1 need of families based on the survey done by the DDC and Medicaid eligibility should not be a requirement to access this service.
  - 2. We need to operate the DD system in the most efficient way possible while maintaining quality services. Continuing to find efficiencies such as streamlining and reducing the number of times DD Casemanagers have to determine eligibility (eliminate re-determination at age 10) would be helpful. Continuing to utilize roads to community living funding and enhanced federal match to move people currently residing in RHC's is also a priority.
  - 3. We need to add services for people with developmental disabilities to the caseload forecast. If there was in increase in Medicaid Waivers to meet people's needs, the NPS caseload could be addressed and federal match realized.
  - 4. Development of Community Crisis Stabilization options is critical. Having a community alternative for people under the age of 21 is more cost effective and from what DDD is proposing, provides more of a wraparound service than has been provided as short term stays in the RHC's. Hopefully this service will be more successful and avoid multiple short term stays in RHC's.
  - 5. Development of Community Respite should continue. Individuals with developmental disabilities and their families should not have to travel half way across the state to access Respite in an RHC. Community respite options should be available in local communities all across the state so families can be more comfortable knowing their son/daughter is closer to them.
  - 6. Continued development of the Home Care Referral Registry is needed. These registries provide needed resources for individuals and families to find qualified care providers. In my experience, people with developmental disabilities and families are not familiar with this resource and there needs to be a more purposeful approach to publicize this resource to make it more accessible.
  - Quality assurance should be addressed and more consistent across all settings.
  - 8. Individuals and families need to have better access to information and education. We should provide outreach to the individuals on the NPS Caseload that might be eligible for Medicaid Personal Care. We should utilize the Informing Families, Building Trust project and family support

- organizations to reach more families. Families should have access to information and resources in their own language.
- 9. The reduction of casemanagers for the people on the No Paid Services caseload needs to be addressed. The reduction of these positions and going to a 1-800 phone number in each region has put yet another barrier between people with developmental disabilities and the services that they might be able to access. An idea might be to utilize community guides or provide additional funding to family support organizations. Access to culturally relevant services is very important.
- (b) The state's long-term needs for residential habilitation center capacity, including the benefits and disadvantages of maintaining one center in eastern Washington and one center in western Washington;
  - 1. SB 5459 states this language about 1 RHC on each side of the state. The conversation in the task force has been that 1 RHC on the west side should close. As we build the community services to address Respite and Crisis Stabilization, we should be able to continue to downsize and consolidate RHC's in our state using Roads to Community Living to capture maximum federal funding. We should also utilize the capacity of Supported Living providers across the state and invest in this system instead of investing more capital dollars in RHC buildings.
  - 2. Legislation providing protections of services for those moving from an RHC should be developed and supported.
  - 3. We should utilize the expertise at our RHC's to continue to develop quality services in the community. Community capacity needs to be developed and services need to be provided in a proactive manner to avoid crisis.
- (c) A plan for efficient consolidation of institutional capacity, including whether one or more centers should be downsized or closed and, if so, a time frame for closure;
  - 1. We have heard a time frame of between 2-5 years to close one of the large facilities on the west side of the state. We should continue to downsize and consolidate in a way that provides individuals and families with choices of available options. By continuing to provide and develop SOLA options and supported living capacity, this will allow options in local communities close to families live.
  - 2. The Davis Deshaies Feasibility Study from 2009 that I shared at the September 25<sup>th</sup> taskforce meeting proposes a thoughtful reduction of 250 beds over a 6 year period. If this blueprint was followed and as people move, we could develop a plan for the closure of another RHC as this progresses. The report also shows a savings of over \$47M in SFY 2018 and this was not considering the additional federal match for Roads to Community Living. There is current capacity in supported living programs that could be utilized.
  - 3. It might be more cost effective to focus on downsizing one facility at a time rather than a reduction in beds across all facilities.

- (d) Mechanisms through which any savings that result from the downsizing, consolidation, or closure of residential habilitation center capacity can be used to create additional community-based capacity;
  - 1. Since there is little possibility of a large influx of new funding to stabilize the DD system in the near future, we need to reinvest savings resulting from downsizing and consolidation into the current system. This could be used to create respite options and crisis stabilization across the state. It could also be used to increase quality assurance and address the needs of people on the NPS caseload.
  - 2. There is a precident with SB 5800 which passed the legislature and states "It is the intent of the legislature that financial savings achieved from program reductions and efficiencies within the developmental disabilities program shall be redirected within the program to provide public or private community-based services for eligible persons who would otherwise be unidentified or unserved".
- (e) Strategies for the use of surplus property that results from the closure of one or more centers:
  - 1. The property at FHMC Campus should be added to the Dan Thompson Trust so that revenue can provide basic services to some people who have no paid support. This is the only dedicated revenue source we currently have for DD services.
  - 2. Any excess property from further consolidation and closures should be immediately directed into the Dan Thompson Trust.
  - 3. We should add the possible sale of property to the Dan Thompson Trust.
- (f) Strategies for reframing the mission of Yakima Valley School consistent with this act that consider:
- (i) The opportunity, where cost-effective, to provide medical services, including centers of excellence, to other clients served by the department;
  - 1. With the information that we have received in the taskforce, it seems that there are barriers in using federal funds so that RHC's can provide services to people in the community.
- (ii) The creation of a treatment team consisting of crisis stabilization and short-term respite services personnel, with the long- term goal of expanding to include the provisions of specialty services such as dental care, physical therapy, occupational therapy, and specialized nursing care to individuals with developmental disabilities residing in the surrounding community.
  - 1. If there is expertise at YVS to provide a crisis stabilization team for Eastern Washington, this could be a possibility.