

Texas Council for Developmental Disabilities`

Executive Committee

Date: 2/04/2015

Review of Proposed Activities & Budget

ITEM:

Grantee: Texas Tech University

Year: 2 of 5

Project Title: Building Community Capacity through Collaboration

Project Location: West Texas

Website: none

TCDD RFP Intent:

To establish and/or strengthen a network of appropriately diverse organizations to develop a strategic plan to build the capacity of that community to provide community-based services that will decrease the need for individuals with developmental disabilities to be served in an institution.

Authorized Funding: Up to \$150,000 per year for up to five years.

Expected Results: The West Texas Community Network (WTCN) is a partnership among the Burkhart Center, High Point Village, and the HALI Project established to increase access to community-based and strength-based supports and services for individuals with developmental disabilities and their families. WTCN developed a strategic plan "to encourage higher expectations for individuals with DD to live, work and play in more inclusive communities that value their contributions and unique gifts."

Project Goals and Accomplishments for Year 1:

Goal: Develop a strategic plan, based on a community needs assessment, and identify resources necessary to build the capacity of a community to provide: culturally appropriate, person-centered or family-centered healthcare services (including both physical and mental health supports); behavior supports; respite to community members who have developmental disabilities and their families; and other supports identified by the community support network. Goals for Year 1 included addressing some areas of the needs assessment and a revising the proposed strategic plan.

Accomplishments per goal:

Partnerships were established and/or strengthened with several community organizations to address respite, transportation, employment opportunities, behavior support, occupational and physical therapy, family support services and training. A strategic plan was developed and submitted for TCDD consideration. The project was advised to conduct additional needs assessment activities and revise the strategic plan accordingly to address the intent of the RFP.

Proposed Goals and Objectives for Year 2:

Goal: Strengthen the capacity of local communities located along the I-27 corridor from Lubbock to Amarillo to increase their capacity to provide community-based services that support people with developmental disabilities to improve and maintain their health and to have access as needed to necessary healthcare, behavior supports, and/or respite.

Objectives and Activities:

1. Complex medical and behavioral issues are major contributing factors that cause families to seek admissions to SSLCs for their family members with DD. WTCN will connect families with specialists and professionals (e.g., BCBAs, mental health services, doctors, respite services) who can provide the services and supports they need in order to reduce the needs for admission to SSLCs in Texas.
 - a. Create a **Partner Provider Network** of healthcare, behavior supports and respite services and supports. The project currently includes 54 professionals and will add a minimum of 10 per year.
 - b. Hold **Community Connections** events, quarterly events for medical, mental health, and other community service providers to talk to families about services and support needs with free dental screenings, etc. The project served* 80 families in the previous year with the goal of serving* 200 in Year 2.
 - c. The project will maintain a **Social Media Presence**. The proposed activities would increase media presence by 10% annually, with 575 on email list and Facebook reaching over 500 people with information about trainings, workshops, and respite opportunities.
 2. In response to the WTCN Provider Needs Assessment, the WTCN will work to expand the number of trained and qualified professionals in the areas of respite, behavioral interventionists, and medical services thereby increasing access and capacity of community-based services to support individuals with DD and their families/caregivers to keep individuals with DD out of SSLCs.
 - a. Dr. Wes Dotson's **Respite Training** model will be used to train respite workers to increase the capacity of respite services throughout the WTCN catchment area. 150 respite workers trained year 1; propose training 50 additional workers in year 2.
 - b. Implement the **Burkhart Center Teacher Training Institute** to increase the pool of trained BCBAs in rural schools challenging behavior through a Train the Trainer model. The project will conduct trainings for up to 20 teachers from rural schools as BCBAs who will bring that training back to their districts.
 - c. **First Responder Training** will be conducted in at least 2 locations in the project catchment area in 2015
 - d. Facilitate and Support **Provider Networking** by providing lunch at community connections events
 - e. Provide free **Medical, Vision, & Dental Screenings**; at least 2 free screening events that serve 15 individuals in 2015
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3. Using feedback from the WTCN Family Needs Assessment, provide training and networking opportunities for families, caregivers, and self-advocates to empower them to access and/or provide support and services to one another that can prevent unnecessary admissions to SSLCs
 - a. **Coordinate and disseminate information** about training opportunities for families, caregivers, and self-advocates to address needs noted in the WTCN Needs Assessment. 885 participants year 1; propose increasing by 20% yearly.
 - b. Expand **Community Connections Parent Partners Training** model to training “Family Support Specialist.” At least 2 trainings will be conducted for Family Support Specialist, who will act as case managers referring families to services, therapy and support opportunities
 - c. **Parents Night Out** events will serve 30 families each month. Propose expanding to at least 2 additional respite programs year 2.
 - d. **Parent training classes** will be provided dealing with issues such as compliance, behavior modification, and general parenting skills for 8-10 families attending the 8-week long class as well as shorter workshops. These classes will provide parent education as well as respite. Childcare will be provided.
4. Research and identify how the WTCN and its Partner Provider Network can support and impact public policy that affects individuals with DD living in their communities with community-based supports rather than being placed in SSLCs.
 - a. Provide data to policy makers from our Need Assessment and contribute insights from parents and self-advocates to help grow community-based supports and services.
 - b. Provide information on legislative issues and encourage Project Advisory Committee members to engage in discussions on actions that WTCN can take to impact policy.

Council Considerations: At the November 5, 2014, Executive Committee meeting partial funding necessary for Texas Tech to revise and resubmit a plan with quantifiable outputs and measurable outcomes was approved. The strategic plan submitted for consideration in February identified issues but did not propose clear outcome measures and did not sufficiently address how the project will build capacity for individuals with complex needs in West Texas communities.

Public Policy Considerations: As of September 1, 2014, all persons who receive SSI, with the exception of those using Medicare, receive their Medicaid medical services via managed care. There are a number of activities in the revised plan relating to accessing medical/dental services and professionals, but no mention is made of managed care organizations participation in securing those health professionals and services and no mention is made regarding their inclusion in the network. If funded, the grantee is should contact all MCOs in the region and make reasonable efforts to include those organizations in the Network and project activities. MCOs should also be included in sustainability planning efforts.

Grants Management Considerations: Proposed workplan outcomes are vague and lack quantifiable outputs and measureable outcomes. It’s not evident what will be accomplished as a result of the needs identified and how the project will build capacity to decrease the need for people with DD to seek institutional placement. Some activities appear logical, but should result in measureable outcomes. Regarding the proposed objectives and activities:

1. Medical and behavior needs are not thoroughly addressed in a manner likely to result in a measureable increase in capacity. The proposed activity does not address specialized care, but rather will connect providers “willing” to work with individuals with DD. There is no evidence of how the project will address medical **complexities** and acute health care needs. The commitment made by members of the provider network is not clear. There is no mention of managed care organizations nor of any follow-up activities to ensure families receive and are satisfied with services. In this sense, the impact of the proposed “outcome” Meeting health care providers is an important part of the process but that alone does not reflect more individuals receiving needed services. Furthermore, local I/DD and MH authorities should be well versed in how to link individuals to community services. A partnership with local authorities is required by the RFP, but not thoroughly addressed in the workplan.
2. The respite training activity does not include follow-up activities to ensure that families are receiving and benefitting from respite services. These respite training activities are not included in the budget so it is not clear how this activity is related to this project.
3. The teacher training institute appears to be conducted in partnership with the Texas Education Agency, independently of this grant. It is not included in the budget and does not appear to be related to this project.
4. Background information and rational for the proposed first responder training was not included in the revised plan.
5. Providing lunch to members of the provider network is not an allowable expense and does not relate to RFP goals.
6. Medical, vision, and dental screenings may be logical, but the grantee does not provide a rationale for those screenings.
7. It is not clear what the Family Support Specialists will do and how the role is distinct from a local authority service coordinator. There is no related item in the budget, so it is unclear how the activity is funded. If not funded by this grant, there is no relationship.
8. Workshops with topics “TBD” are mentioned, but cannot be evaluated without knowing the topics and how many individuals/families will be trained.

The most recent submission is not responsive to direction from the Executive Committee at the November 2014 meeting. If funded, this project would require increased grants monitoring due to the award amount and award-within-award

Staff Recommendation: Since the proposal as submitted is not responsive to the direction of the Committee during the November meeting, TCDD staff do not recommend funding for the proposed activities.

Continuation Budget Detail Summary

	Federal	Match	Totals
Expended Planning Year: (Consultant:\$8,860)	\$74,996 / \$74,935	\$25,226/\$25,205	\$100,222/\$100,140
Expended Year 1: (Consultant: \$38,000)	\$150,000/\$89,762	\$50,455/\$30,192	\$200,455/\$119,954
Amount requested for Year 2 budget:			
I. Personnel services	71,325	0	71,325
II. Travel	6,644	0	6,644
III. Purchased Services (\$38,000 consultants)	40,429	0	40,429
IV. Property/Materials	534	0	534
V. Rental/Leasing	0	0	0
VI. Utilities	0	0	0
VII. Other (Indirect Costs)	11,893	44,005	64,091
Budget period totals	\$130,825	\$44,005	\$174,830