

Individual Support Planning for Residential Services: Review of Staffing Ratio Guidance and Upcoming Training

ODP Announcement 21-057

AUDIENCE:

Administrative Entities (AEs), Supports Coordination Organizations (SCOs) in the Consolidated and Community Living Waivers, Providers of Residential Services in the Consolidated and Community Living Waivers, Other Interested Parties

PURPOSE:

This communication serves to:

- Sustain the expectation that AEs, SCOs and providers of waiver residential services use the guidance provided in [ODP Announcement 19-091](#) and the Annotated Individual Support Plan (ISP), dated 7/3/19, to document the staffing support that is needed and will be provided to replace residential habilitation service staffing ratios.
- Announce that additional training will be provided in the future to:
 - Standardize how risk factors and identified health and safety needs should be addressed using person-centered thinking skills,
 - Clarify documentation of supports and services in the ISP, and
 - Ensure there is a description of strategies (*ex. technology, environmental, and staff supports*) to mitigate risk(s) during specific activities and situations.

DISCUSSION:

A Paradigm Shift

In January 2018, ODP made a major change in the residential service payment system. This change involved moving from a system where rates were based on the provider's historical costs (based on expenses incurred and the people served during the cost-reporting period) to a fee schedule method that reflected each individual's current support needs.

As noted in [ODP Informational Memo 026-18](#) - the move to fee schedule rates provided "an opportunity to step away from the often-rigid adherence to strict allowable cost standards and staffing ratios that may not have best met individual needs or allowed for the best use of staffing resources." Residential staffing ratios in ISPs had been a longstanding practice that provided a clear standard to measure if staff were present. Following the change to fee schedule reimbursement and based on agreements about the need for greater flexibility in deploying and redeploying staff when all identified health and safety needs were met, **ODP developed changes in the annotated ISP to provide staffing flexibility through the elimination of the time-based staffing ratios in ISPs to refocus efforts on ensuring that health and risks specific to the person are thoughtfully and clearly addressed.**

The following considerations guided the revisions made to the Annotated ISP and continue to be the foundational concepts in the shift from staffing ratios:

- Greater flexibility in meeting individual needs must be balanced with accountability. Managing risk is better tied to how the person must be supported in meeting their needs for a healthy and safe life, not the number of staff. It should be specific in determining each type of risk and the type of attention, supervision, and support necessary to reduce risk while supporting the person's everyday life and using staff resources wisely – a person-centered approach.

- ISPs must contain sufficient detail to validate that all identified health and safety needs are being adequately addressed through staffing or other supports, that the interventions and strategies to reduce risk are clearly articulated, and that staff are properly trained and supervised.
- The Supports Intensity Scale (SIS) and Health Risk Screening Tool (HRST) should be used as resources. The HRST “training and considerations” should inform the team discussion for needed support and be captured in the ISP.
- Effective use of the Annotated ISP probe questions requires advance preparation and knowledge of the person. Team meetings should ensure they have current information so the plan can be appropriately updated and revised, as meetings occur and circumstances change.
- Use of supportive technology and environmental considerations need to be identified and addressed in addition to staff.
- Supplemental habilitation staffing, enhanced support resulting from a rate exception approval, and the need for staff qualifications such as Licensed Practical Nurse or National Association for the Dually Diagnosed (NADD) certification must be documented in the ISP.
- An alleged failure to provide support to meet identified health and safety needs continues to be reportable in accordance with the Incident Management bulletin.

Implementation of this approach of focusing on developing support strategies based on individual needs and health rather than ratios began on or after January 1, 2020, using the new Annotated ISP. Any ISP that removes or changes the staffing ratio, if currently present, requires manual review of the ISP by the AE.

Training

Eighteen face-to-face training sessions, with 30 to 35 participants per session, were held to support implementation of this approach beginning in September 2019. Approximately 30 people expressed interest in becoming ODP Designated Trainers at that time and they committed to provide two additional trainings each in 2020.

The planned 2020 trainings did not occur as a result of the COVID-19 pandemic; based on feedback from stakeholders and a review of plans, it is evident that implementation of this revised approach has been uneven throughout the Commonwealth. To ensure that the shift from ratio-based staffing information to more descriptive information about the person's support needs occurs in a consistent and comprehensive manner, **twenty (20) additional training sessions are being planned to begin in August 2021.**

Virtual training sessions will be conducted through Zoom using essentially the same material and geared towards the same audience as the initial training content. Each session is expected to include key residential provider and SCO staff that attend team meetings and AE staff who review and approve plans. These mixed audiences provided the opportunity for rich discussion during the initial training and gave the attendees exposure to various perspectives and roles.

One person per AE, SCO, and residential provider is expected to attend to provide a maximum of 30-35 people per session. Participants and their agencies will need to commit to the understanding that, upon completion, they will be a resource at their home agency. The training will be interactive. Examples will be used to apply the concepts in small groups and to reinforce understanding. While the training is available to any AE, SCO, or provider representative, **ODP strongly encourages any entity that did not have a representative at the prior 2019 training to register and attend.**

Additional information about these upcoming training sessions will be provided in a subsequent communication.

Identifying New ODP Designated Trainers and Trainings

To enhance sustainability of future training efforts, there will be an additional opportunity for people to express their interest in becoming an ODP Designated Trainer. Selected volunteers must be endorsed by their Chief Executive Officer/Director and commit to conducting at least two trainings in late 2021 or 2022.

If an agency is interested in identifying a person to become an ODP Designated Trainer, it is recommended that the agency consider sending this person to one of the twenty upcoming sessions. **Nomination forms will be available at the training sessions for those who are interested in becoming an ODP Designated Trainer.** Once all live or virtual sessions are completed and ODP identifies additional individuals to become ODP Designated Trainers, a train-the-trainer session will be scheduled. ODP will also provide logistical and technical support in arranging the training that they conduct.

ODP also intends to make future changes to the current training material based on feedback obtained from the field and questions raised during the training held in 2019 including:

- Developing trainings, tools, and resources to:
 - a) Provide basic information that can be used for the orientation of new staff.
 - b) Use by stakeholders in the preparation, revision and review of plans.

If you have questions, please contact the appropriate ODP Regional Office. The Residential ISP Staffing leads for each regional office are noted below:

- **Central Region** – Kathy Zumbrun (kazumbrun@pa.gov) and Robin Seville (c-rseville@pa.gov)
- **Northeast Region** – Kenley Hoats (khoats@pa.gov)
- **Southeast Region** – Brandi Alexander (balexander@pa.gov) and Cherron Garland (chgarland@pa.gov)
- **Western Region** – Nancy Armstrong (narmstrong@pa.gov)