



# Oregon

Theodore R. Kulongoski, Governor

## Department of Human Services

Office of the Director

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March 13, 2006

The Honorable Peter Courtney, Co-Chair  
The Honorable Karen Minnis, Co-Chair  
State Emergency Board  
900 Court Street, NE  
H-178 State Capitol  
Salem, OR 97301-4048



RE: Budget Note Report by the Department of Human Services (DHS) on  
the Implementation of a Comprehensive Integrated System of  
Services and Supports for Children with Disabilities and Their  
Families

Dear Co-Chairpersons:

### **NATURE OF THE REPORT**

The Department of Human Services (DHS) was instructed in a budget note by the 2005 Legislative Assembly to report to the April 2006 State Emergency Board regarding the "Implementation of a Comprehensive Integrated System of Services and Supports for Children with Disabilities and Their Families" Budget Note.

### **AGENCY ACTION**

The department has compiled the information as requested above. The department's report on the status of services to children within Seniors and People with Disabilities is attached.

### **ACTION REQUESTED**

The department requests the Emergency Board acknowledge receipt of this report.

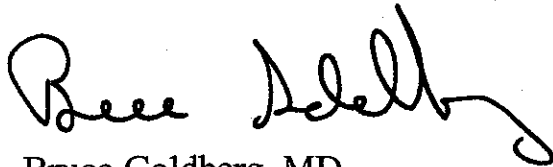


The Honorable Peter Courtney, Co-Chair  
The Honorable Karen Minnis, Co-Chair  
March 13, 2006  
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**LEGISLATION AFFECTED**

None.

Sincerely,

A handwritten signature in cursive script, appearing to read "Bruce Goldberg". The signature is written in black ink and is positioned above the printed name and title.

Bruce Goldberg, MD  
Director

Enclosures

BG:rm1

**DEPARTMENT OF HUMAN SERVICES  
REPORT TO THE STATE EMERGENCY BOARD  
April 2006**

**RESPONSE TO SPECIFIC INFORMATION REQUEST:  
The Implementation of a Comprehensive Integrated System of Services and  
Supports for Children with Disabilities and Their Families**

**INTRODUCTION**

The 2005 Legislative Assembly included a budget note requesting the Department of Human Services (DHS), Seniors and People with Disabilities (SPD), in collaboration with the Oregon Council on Developmental Disabilities, convene a workgroup to review institutional, residential, foster care, waiver and family support programs that serve children, birth to eighteen years of age, with disabilities. The agency was requested to report to the appropriate Interim Committee early in 2006 with their findings and recommendations for implementation of a comprehensive integrated system of services and supports for children with disabilities and their families, including a range of options to prevent out-of-home placement whenever possible. (A copy of the Budget Note is enclosed.)

**BACKGROUND**

The SPD program currently provides family support, foster care, residential services, in-home comprehensive services, specialized waiver services, and nursing home services to children, birth-to-eighteen years of age. Most developments in the service system have occurred in the past ten years.

Over 800 children with disabilities are currently in SPD care. Over 5,000 children receive some type of case management, and over 1,000 families and children receive small amounts of family support funding. The demands for assistance continue to grow. Advocates, families and professionals in the field of disability believe it is time to take a critical look at how these services are meeting the needs of children and families. The intent of the budget note is to facilitate stakeholder discussions within and outside the agency and to make policy and program recommendations for a comprehensive integrated service system that strengthens in-home support options and prevents out-of-home placement whenever possible.

## STATUS UPDATE

The Children's Budget Note Steering Committee was convened in the Fall of 2005 with representatives from local government, services providers, advocates, families, and SPD staff. Technical assistance and specific expertise on best practices, programmatic design, waivers and budget issues have been provided by others at the request of the Steering Committee. Fact-finding meetings to gather service delivery information have occurred with other stakeholder groups.

The Steering Committee activities have focused on an overview of current data and policies including eligibility demographics, funding sources, program design, and implementation practices. Following the overview, the Steering Committee focused on several areas where immediate and positive benefits to children with disabilities and their families might be achievable. These areas of focus include children in nursing homes, children who require significant medical involvement, and children with developmental disabilities who are involved in the Juvenile Justice System. In addition, the Steering Committee will continue its review of best practices necessary to develop an integrated system including funding options, service design and administration, eligibility, and family support.

## CONCLUSIONS AND NEXT STEPS

Eligibility: Developmental disability eligibility for children is provisional and must be re-confirmed by ages six and eighteen. A significant percentage of children in 24-hour residential and foster care services have both a developmental disability and an accompanying mental health diagnosis. The Steering Committee recommends revision of the process to establish provisional eligibility and investigation of collaborative service provision for children with this dual diagnosis.

Children with Juvenile Justice Involvement: As a result of SB 232 (2005), Seniors and People with Disabilities (SPD) has been reviewing services to children with developmental disabilities who have significant law violations and are involved in the juvenile justice system. The Steering Committee recommends collaboration with the Office of Mental Health and Addiction Services (OMHAS) in the development of treatment services and funding options for this group of children. SPD will make periodic progress reports to the Juvenile Code Revision Sub-Committee of the Oregon Law Commission prior to a final report to the 2007 Legislature, as required by SB 232.

Medically Involved Children: Medically Involved refers to children with complex disabilities who require long-term medical care, live at home with their families and meet criteria for nursing home level of service. Common challenges for this group are lack of or inadequate health insurance, limited access to in-home supports and family income slightly above Medicaid eligibility. To obtain a medical card for their child, families face decisions of maintaining artificial impoverishment, or placement in nursing homes or foster care. The Steering Committee recommends investigation of a model waiver to prevent unnecessary out-of-home placement.

Nursing Homes: The Steering Committee found that over fifty children are living in nursing facilities with an average length of stay exceeding six years. Individual record review demonstrated the need for child focused admission criteria, increased case management, and greater awareness of community-based options for these children and their families and guardians. The Steering Committee recommends development of a child admission assessment and procedures, rules and service options to provide alternatives to placement in nursing facilities to manage length of stay and address the issue of children growing up in nursing facilities.

Family Support: Family Support is currently a General Fund program serving over 1,000 children and their families through the local county developmental disabilities structure. SPD has utilized data and information from a federal grant to explore Medicaid funding options and national best practice. The Steering Committee will continue to review program design, Oregon Administrative Rules (OARs), administrative structure and potential funding sources to develop the service to more appropriately meet the needs of families.

The Children's Budget Note Steering Committee will submit a final report in January, 2007.

The following budget note was approved:

Budget Note

The Department of Human Services, Seniors and People with Disabilities, in collaboration with the Oregon Council on Developmental Disabilities, shall convene a work group to review institutional, residential, foster care, waiver, and family support programs that serve children aged birth to eighteen with disabilities.

The work group shall review eligibility, demographics, funding options, program design, administration, implementation, and best practice. The work group will report to the appropriate Interim Committee early in 2006, with their findings and recommendations for implementation of a comprehensive integrated system of services and supports for children with disabilities and their families, including a broad range of options to prevent out of home placement whenever possible.



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June 1, 2006

The Honorable Peter Courtney, Co-Chairperson  
The Honorable Karen Minnis, Co-Chairperson  
State Emergency Board  
900 Court St, NE  
Salem, OR 97301



RE: The Implementation of a Comprehensive Integrated System of Services and Supports for Children with Disabilities and Their Families

Dear Co-Chairs:

## **NATURE OF THE REPORT**

The Department of Human Services (DHS) was directed by a 2005 legislative budget note to report to the June 2006 Emergency Board regarding the Implementation of a Comprehensive Integrated System of Services and Supports for Children with Disabilities and Their Families.

## **AGENCY ACTION**

The Department has compiled the information as requested above. The report on the status of policy initiatives and ongoing planning with the Developmental Disabilities Council is attached.

## **ACTION REQUESTED**

The Department requests the Emergency Board acknowledge receipt of this report.

*"Assisting People to Become Independent, Healthy and Safe"*  
An Equal Opportunity Employer



The Honorable Peter Courtney, Co-Chair  
The Honorable Karen Minnis, Co-Chair  
June 1, 2006  
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**LEGISLATION AFFECTED**

None.

Sincerely,

A handwritten signature in cursive script, appearing to read "Bruce Goldberg for".

Bruce Goldberg, M.D.  
Director

Enclosures

**DEPARTMENT OF HUMAN SERVICES  
REPORT TO THE STATE EMERGENCY BOARD  
June 1, 2006**

**RESPONSE TO SPECIFIC INFORMATION REQUEST:**

The Implementation of a Comprehensive Integrated System of Services and Supports for Children with Disabilities and Their Families

**INTRODUCTION**

Seniors and People with Disabilities (SPD) was requested to report during the 2006 legislative interim with recommendations for implementation of a comprehensive integrated system of services and supports for children with disabilities and their families. SPD is working in partnership with the Developmental Disabilities Council to review prioritized service areas and to recommend changes that will directly benefit children and families.

**BACKGROUND**

The Children's Budget Note Steering Committee was convened in the fall of 2005 with representatives from local government, service providers, advocates, families and SPD staff. The Steering Committee meets monthly, at minimum, and has provided direction to the established system change priorities and policy initiatives.

**STATUS UPDATE**

The Steering Committee has continued to focus on specific priority areas where immediate and positive benefits to children with disabilities and their families might be achievable. Since the February 6, 2006 report to the Emergency Board, significant actions are underway in each priority area.

**CONCLUSIONS AND NEXT STEPS**

Eligibility: Developmental disability eligibility determination for children can be a complex process, particularly for the children with both a developmental disability and an accompanying mental health diagnosis. A work group of state and county staff, consumers and providers met on May 19, 2006. Recommendations include minor revision to OAR and the development of

specific guidance in determining DD eligibility for children who also have a mental health diagnoses. The target date for completion, including training of partners and field staff, is December 20, 2006. An additional stakeholder group of providers and local partners will meet by July 2006 to develop best practice service models for youth with support and treatment needs in both service systems. This work group will conduct research and plan throughout the remainder of the biennium.

Children with Juvenile Justice Involvement: SPD is actively planning an appropriate public safety and treatment response to DD youth who have committed serious law violations. Periodic reports to the Juvenile Code Revision Sub-Committee of the Oregon Law Commission are occurring prior to the final required 2007 Legislature report. A work group including members from the juvenile justice system who drafted SB 232 met during January, 2006 to review options and; this group will meet again to review progress before July, 2006. Negotiations have begun with potential closed-custody and 24-hour care and treatment providers. SPD is developing a legislative concept to begin the budget and legislation process necessary for this initiative.

Medically Involved Children: The Steering Committee recommends a model waiver option and exploration of the Medicaid buy-in possibilities for health insurance contained in the proposed Family Opportunity Act. The issues and some of the potential solutions for medically involved children dovetail with actions to address prevention and discharge of children in nursing homes and with Oregon's Healthy Kids planning. A model waiver is part of the SPD preliminary policy package development and would serve functions for nursing home prevention and service alternatives at discharge. (Is this premature??)

Nursing Homes: Over fifty children are living in nursing facilities. The average length of stay exceeds six years. The Steering Committee recommended development of specific child admission assessment and alternative service options that prevent or reduce admissions facilitate discharge and manage length of stay. SPD has begun Oregon Administrative Rule (OAR) revision for Pre Admission Screening and Review (PASR). The target date for filing the revised OAR is September 2006. A plan for SPD central review of all child nursing home admissions and plans is being implemented on the same timeline. Policy meetings with SPD and nursing facility administrators are scheduled for late June and July 2006. A limited

duration staff position has been added June through November 2006 to implement statewide recruitment of medical foster homes that can provide a safe, family based alternative for children who cannot live in their family home. SPD is developing a proposed policy package relating to this group of (again, seems premature) children, which overlaps with the medically involved group. Model waiver options and Family Opportunity Act provisions are being explored as additional potential solutions to support this population.

Family Support: Family Support program serving over 1,000 children and their families through the local county developmental disabilities structure. This program is funded entirely with State General Fund. SPD is awaiting the final report from a federal grant utilized to explore Medicaid funding options and national best practice. The summary and recommendations, expected in May, will be submitted in June 2006. Reassessing the function of Family Support was the focus of the May 26, 2006 Steering Committee meeting and is the primary agenda for the June 21, 2006 meeting. (Need to expand a little)

The Children's Budget Note Steering Committee will submit a final report in January 2007.