



2021

KENTUCKY NATIONAL CORE INDICATORS RECOMMENDATIONS REPORT

Submitted by the NCI Quality Improvement Committee

Cover art by Morgan Crawford.

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KENTUCKY NATIONAL CORE INDICATORS RECOMMENDATIONS REPORT

BACKGROUND

In an effort to better understand life outcomes and improve the quality of services for people with intellectual and other developmental disabilities (I/DD) in Kentucky, the National Core Indicators Quality Improvement Committee (QIC) reviews multiple sets of data each year. A list of data sources is included at the end of this report. The Kentucky QIC was first convened in 2010 at the request of the Division of Developmental and Intellectual Disabilities (DDID). The committee was established to review and make recommendations regarding the quality assurance and improvement elements and activities within Kentucky's waivers. The QIC's broad-based group meets at least annually and produces key recommendations to assist the DDID in addressing a variety of issues related to quality.

The Kentucky National Core Indicators (NCI) data being reviewed here represent only people on two Kentucky Medicaid waivers, and therefore should be interpreted with care when comparing against other NCI participating states as responses cannot be generalized to all Kentuckians with intellectual and developmental disabilities receiving state funded supports and services. Committee recommendations are shared with the DDID and the Kentucky HB144 committee, and used for quality improvement initiatives in all programming and service delivery for people with I/DD. Regulations require providers to utilize NCI data in their quality improvement plans.

NOTE REGARDING THE 2020-2021 DATA COLLECTION CYCLE

All surveys for the 2020-2021 data cycle were completed virtually using the ZOOM platform. The decision was made to switch to all virtual surveys to protect the health of survey participants and surveyors due to the COVID-19 pandemic. While this surveying modality was new to the Kentucky project, it had been piloted with other states prior to and during the pandemic.

Surveyors received extensive training on virtual surveys prior to the start of the cycle. We believe that the data collected during this cycle are as valid and reliable as in previous cycles.

2022 QUALITY IMPROVEMENT COMMITTEE RECOMMENDATIONS

The committee made recommendations in four main areas: employment; health and wellness; relationships and community inclusion; and psychotropic medication usage. Most recommendation areas have separate recommendations for providers and organizational partners. The recommendations for providers are meant to create individual-level change and the organizational partners' recommendations are meant to

create systems-level change. The committee also suggested resources to assist individuals and organizations who attempt to implement the recommendations. This report details each recommendation and accompanying resources as well as items from the In-Person Survey that will be used to measure changes in each of the areas. The data used to inform the committee's recommendations can be found in Appendix B.



Employment

The committee made a total of 4 recommendations in the area of employment—two each for providers and for organizational partners. The recommendations are designed to not only increase the number of people who are engaged in paid community employment, but also improve meaningful work opportunities that represent a variety of career pathways.

Employment Recommendations:

For Providers:

1. Case managers engage waiver participants and their teams in discussing community involvement and employment services and ensure that the person-centered service plan accurately reflects the person's aspirations. For individuals who express a desire to work, ensure that a plan to provide employment services is included in their person-centered plan.
2. Ensure practices align with Kentucky Employment First policy as codified in Senate Bill 104 now KRS 151B.211-214.

For Organizational Partners:

1. The Kentucky Division of Developmental and Intellectual Disabilities (DDID), University of Kentucky Human Development Institute (HDI), and other partners as appropriate develop an outline of items to include in the employment and community involvement informational sessions, tips for including employment goals in person-centered services plans, and information regarding transportation options.
2. University of Kentucky Human Development Institute will provide recommendations on employment opportunities for individuals with disabilities as part of the Kentucky National Core Indicators contract.

Employment Resources for implementation:

- Kentucky Employment First <https://www.employmentfirstky.org/>
- Kentucky Supported Employment Training Project- www.hdi.uky.edu/setp
- Human Development Institute Employment Resources- <https://hdi.uky.edu/category/priority-area/employment>
- APSE resources regarding Employment First- www.apse.org/employment-first/

- Customized Employment in Kentucky video- www.youtube.com/watch?v=UJkaHkQKukQ
- Kentucky Office of Vocational Rehabilitation Videos: An Overview, Supported Employment and Pre-Employment Transition Services: <https://bit.ly/36sOF5E>
- Employment and Disability data and resources One-Pager- https://www.kentuckyocv.org/wp-content/uploads/2022/06/NCIemployment_Final_6.13.22.pdf
- Transportation Initiative <https://transportation.hdiuky.org/>
- Ruderman Foundation paper regarding restructuring of waiver rates- http://thecpsd.org/wp-content/uploads/2017/03/Policy-Brief_Can-Supported-Employment-Flourish-in-a-Medicaid-Fee-for-Service-System.pdf

NCI-IDD questions used to measure outcomes:

- Does job training?
- Paid individual job in a community-based setting. [A person working at an individual job in a local business alongside peers who do not have disabilities. Job is part of the typical labor market (e.g., competitive employment).
- Is community employment a goal in this person's service plan (also known as an Individual Service Plan, or ISP)?
- Do you have a paid job in the community?
- *If No, ask:* Do you want a paid job in the community?
- *If no job, ask:* What is keeping you from working? (Check all that apply)



Health & Wellness

The QIC recognizes that there are many factors that contribute to a person's overall health and wellness. Research has demonstrated that for people with intellectual and other developmental disabilities, physical exercise can improve general quality of life (Vogt, Schneider, Abeln, Anneken, & Studer, 2012). The QIC makes three provider recommendations and one for organizational partners that address a person's overall physical well-being. In addition, mental health concerns impact many people with I/DD in Kentucky. Outcomes for people with I/DD and mental health concerns are poor, with NCI analyses finding respondents more likely to feel lonely, more likely to want additional support to maintain relationships, and less likely to be employed (Bradley, 2019). A lack of education in mental health fields has led to students feeling ill-prepared to diagnose or work with people with mental health and I/DD (MHIDD) (Bean & Hedgpeth, 2014; Dykens, 2016; Graesser, 2014). Direct service providers cite a lack of training that contributes to service gaps for people with MHIDD, which are even more pronounced in rural areas (Kreitzer, et al., 2015). Individuals with MHIDD and their

families also report feeling uninformed and frustrated with service providers (Venville, et al., 2015). The QIC makes a recommendation for organizational partners to increase mental health service capacity.

Health & Wellness Recommendations:

For Providers:

1. Increase the number of people who follow the nutrition guidelines recommended by the Office of Disease Prevention and Health Promotion.
2. Increase the number of people who follow the physical activity guidelines as recommended by the Office of Disease Prevention and Health Promotion.
3. Increase collaboration with organizations invested in improving community health (e.g., local health departments, cooperative extension service, recreational programs) in order to leverage existing local health and wellness programs to improve the overall health and well-being of people with I/DD and their direct support staff.

For Organizational Partners:

1. DDID and stakeholders seek opportunities to collaborate on mental health initiatives aimed at increasing quality mental health services and resources.

Health & Wellness Resources for implementation:

- Office of Disease Prevention and Health Promotion Nutrition and Physical Activity Guidelines <https://health.gov/our-work/nutrition-physical-activity>
- Centers for Disease Control and Prevention (CDC) Physical Activity <https://www.cdc.gov/physicalactivity/basics/adults/index.htm>
- American Heart Association Recommendations for Physical Activity <https://www.heart.org/en/healthy-living/fitness/fitness-basics/aha-recs-for-physical-activity-in-adults>
- Kentucky Inclusive Health Collaborative: <https://www.wellness4ky.org/>
- Health and Disability data and resources one-pager: https://www.kentuckycq.org/wp-content/uploads/2022/06/NCIhealth_1pager_final-6.13.22.pdf
- Physical Activity Guidelines for Americans Guidelines: <https://health.gov/paguidelines/guidelines>
- Connect providers with local resources (e.g., Extension offices, Parks and Recreation, County Health departments) that are providing health and wellness programs.
- Cooperative Extension offices that are providing health and wellness programs: <https://extension.ca.uky.edu/>
- Mental Health and Developmental Disabilities National Training Center: <https://mhddcenter.org>

NCI-IDD questions used to measure outcomes:

- Overall, how would you describe your health?
- How many times a week do you do physical activities for at least 10 minutes at a time? Things like running, stretching, golf, gardening, or walking for exercise.
- How many times a week do you do exercise that makes your muscles work hard? Things like lifting weights, pushups, sit-ups, physical therapy?



Relationships and Community Inclusion

The general goal of the recommendations around relationships and community inclusion is to increase the quality and frequency of people's interactions within their community. Themes contributing to having a "good life" have been described as relationships, community participation, independence, and hopefulness (Scott, Foley, Bourke, Leonard, & Girdler, 2014). All of these themes could be addressed by the committee's one provider recommendation and one organizational partners recommendation.

Relationships and Community Inclusion Recommendations:

For Providers:

1. Increase involvement in community groups by ensuring that individuals receiving waiver services get information and support to explore existing organizations (e.g., volunteer opportunities, faith communities), other groups, clubs that relate to their interests, registering to vote, as well as information about transportation options.

For Organizational Partners:

1. Encourage the Division of Aging and Independent Living (DAIL) to evaluate all state guardianship clients to determine if restoration of voting and/or other rights is suitable. Encourage the Kentucky Developmental Disabilities Network to set voting as a "priority".

Relationships and Community Inclusion Resources for implementation:

- Supported Decision-Making- <http://www.supporteddecisionmaking.org/> , <https://youth-voice.org/> & www.mychoiceky.org
- Transportation Initiative <https://transportation.hdiuky.org/>
- National Community of Practice on Supporting Families- www.supportstofamilies.org

- Relationships and Disability data and resources one-pager- https://www.kentuckycq.org/wp-content/uploads/2022/06/NCIrelationship_1pager_Final_6.13.22.pdf
- Institute on Community Integration- *Friends* resource: <https://ici.umn.edu/products/579>
- KY Protection & Advocacy, Your Voice, Your Vote booklet: <http://nebula.wsimg.com/cece2f4996acf728fc0cc9e04d059aa0?AccessKeyId=65CDDAA309ED09126F01&disposition=0&alloworigin=1>

NCI-IDD questions used to measure outcomes:

- What activities does the person typically do at least once a week? Where possible, please include the name of the place where this person does each activity.
 - Does things in the community with paid support
 - Volunteers
- How many times did you go out to a religious service or spiritual practice in the past month? (Examples: church, synagogue, study, or other place of worship).
- Are you a part of any groups, organizations, or communities? This can be done in-person or virtually.
- Do you want to be a part of more groups in your community?
- Do people in [*the groups, organizations, or communities the person takes part in*] include you in activities and events?
- Have you ever voted in a local, state, or federal election?



Psychotropic Medication Use

Despite ongoing recommendations to decrease psychotropic medication use, no progress has been made in this area. Therefore, it is prudent to find other ways to further examine this issue. The committee's sole recommendation in this area is systems-level aimed at getting to the root of the issue.

Psychotropic Medication Use Recommendations:

For Organizational Partners

1. DDID to continue to review Medicaid and HRST data in order to:
 - Seek to reduce polypharmacy for individuals with numerous psychotropic medications

- Provide technical assistance to providers regarding conversations with prescribers

ACS questions used to measure outcomes:

- Does this person currently take medications to treat mood disorders, anxiety, and/or psychotic disorders?
- If yes, how many medications to treat mood disorders, anxiety, and/or psychotic disorders does this person take?
- Does this person currently take medications for behavioral challenges?
- If yes, how many medications to treat behavioral challenges does this person take?

NEXT STEPS

The Quality Improvement Committee will work throughout the upcoming year to distribute the recommendations report to all interested parties. The 2020-2021 and 2021-2022 data cycles will provide important information about pandemic recovery efforts. These data will be scrutinized by the QIC and others to evaluate the response to services changes that were required during the pandemic. This information could help to inform plans for future emergencies or other unanticipated situations.

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APPENDIX A

2019 NCI QUALITY IMPROVEMENT COMMITTEE MEMBERS

Laura Butler

Harold Kleinert

Kelly Knoop

Cathy Lerza

Tony Lobianco

Heather McClure

Philip Rumrill

Kathy Sheppard-Jones

Meg Steinman

Arline Wilson

Jeff White

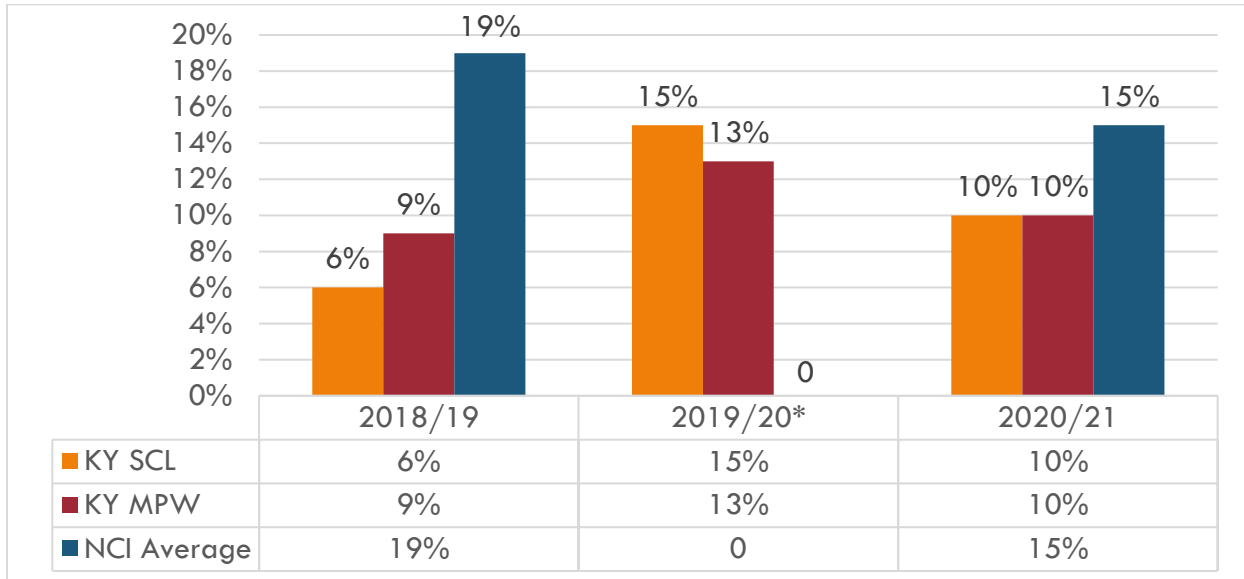
Katie Wolf Whaley

APPENDIX B

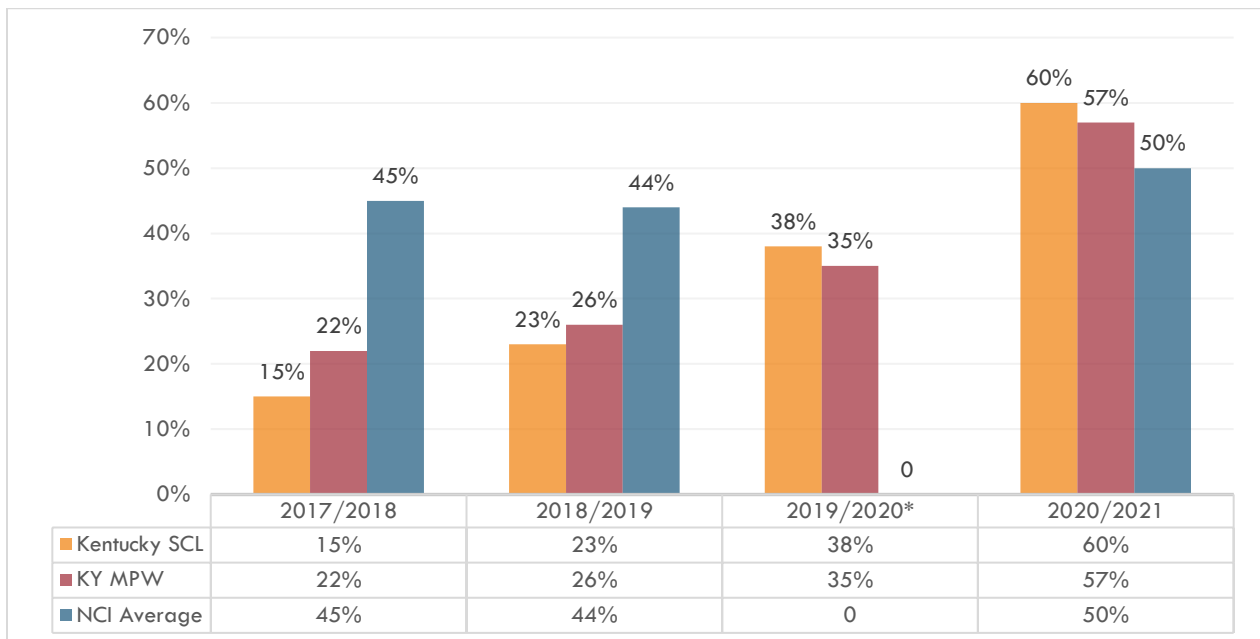
RECOMMENDATIONS DATA

Employment Data

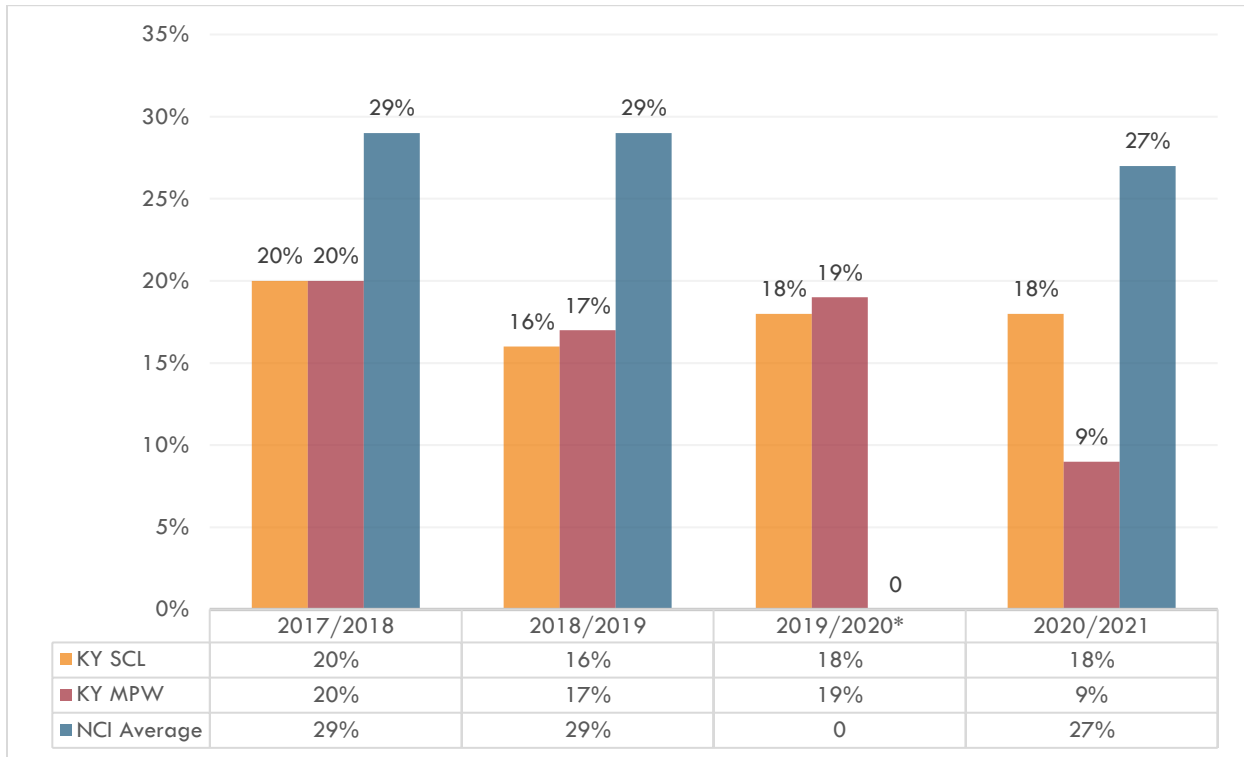
HAS A PAID JOB IN THE COMMUNITY; individual, group and/or business that primarily hires people with disabilities



Would you like to have a job?



Community job in service plan (all survey participants)



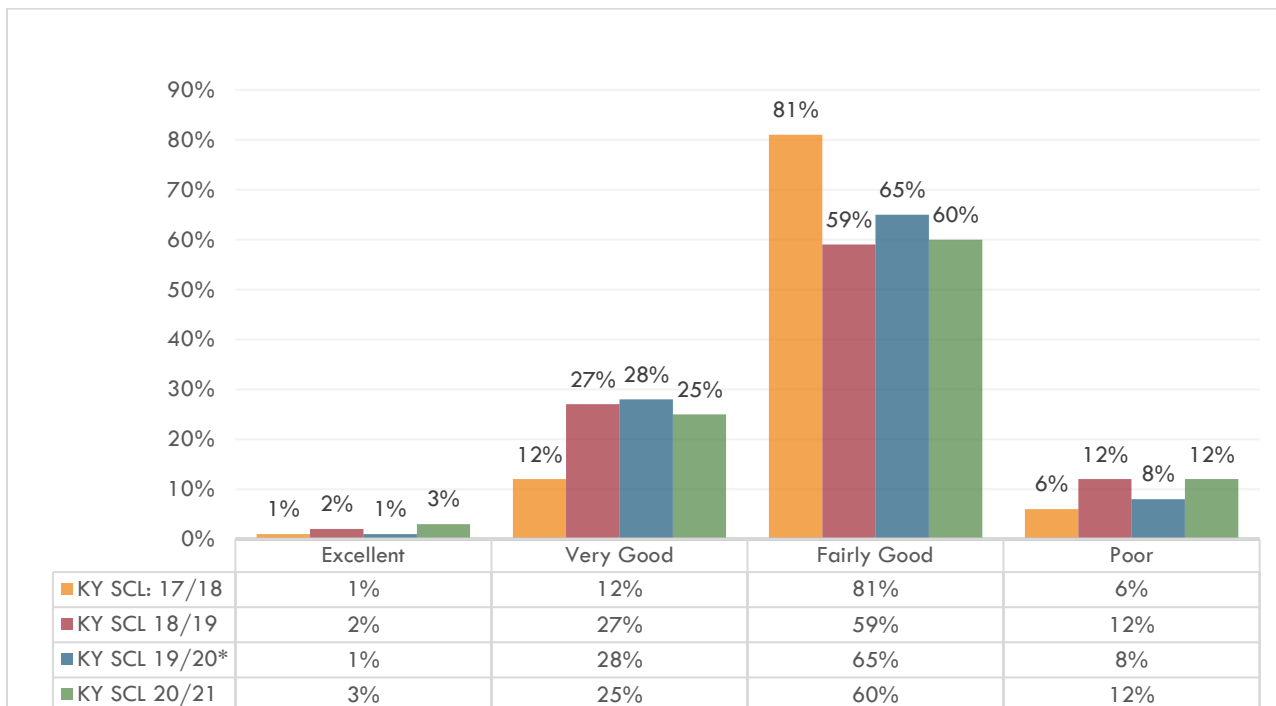
What keeps you from working? (KY-specific question)

2020/2021	KY	SCL	MPW
Doesn't want to work	4%	5%	3%
Needs assistance finding work	32%	35%	30%
No jobs available in the area	18%	18%	18%
Doesn't want to lose benefits	1%	0%	1%

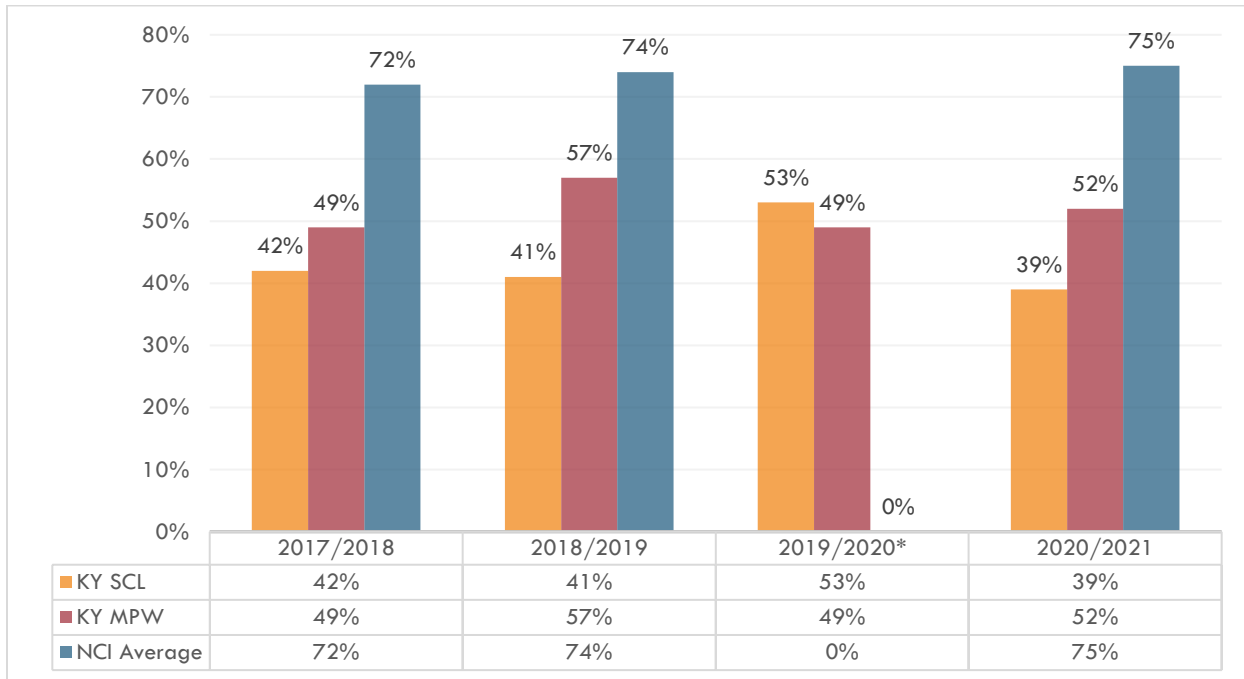
Transportation issues	3%	4%	1%
Other people don't want them to work	0%	0%	0%
Can't physically work	17%	15%	19%
Other	14%	14%	13%
Was working before COVID	2%	1%	3%

Health & Wellness

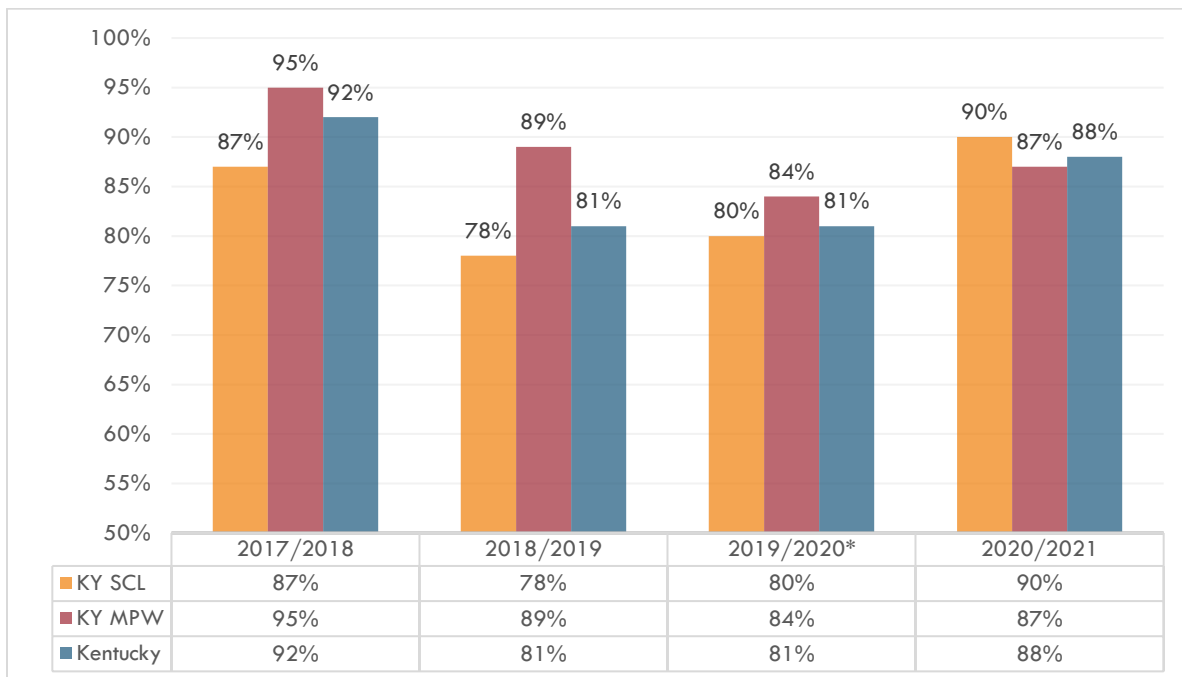
How would you describe your overall health?



Does moderate physical activity or exercise in which you are active for at least 10 minutes at a time, at least once per week

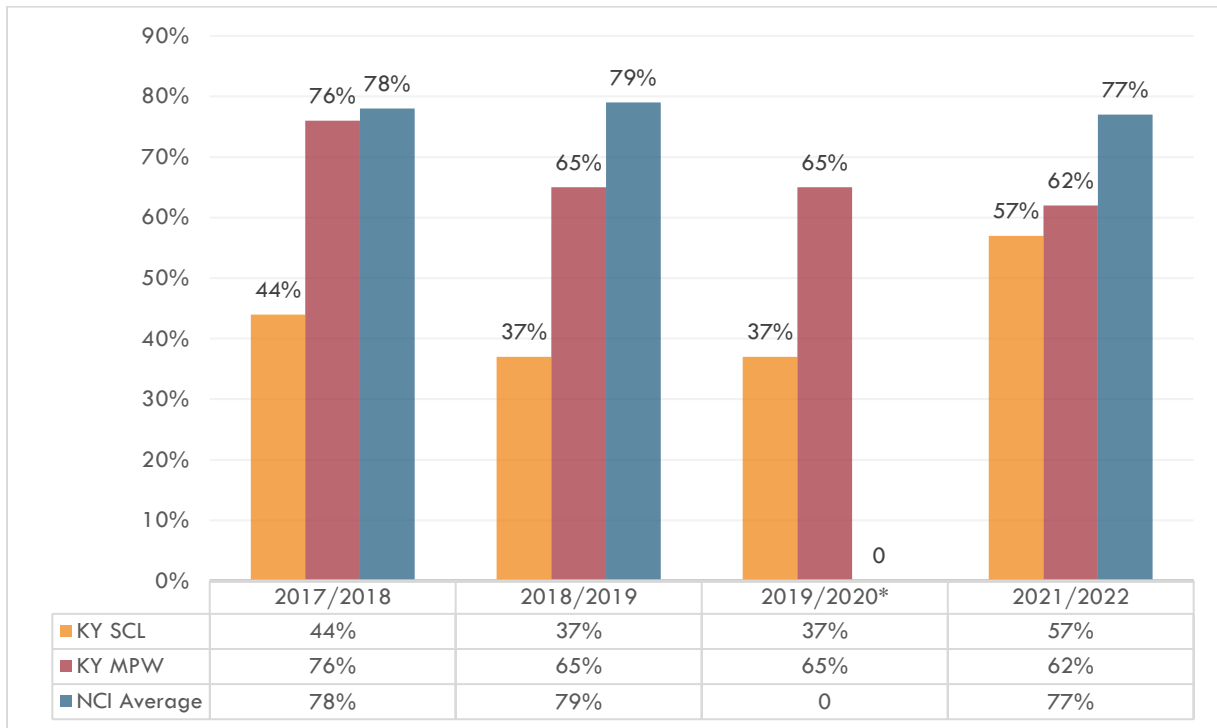


Exercise lasts at least 30 minutes (Kentucky-specific question)

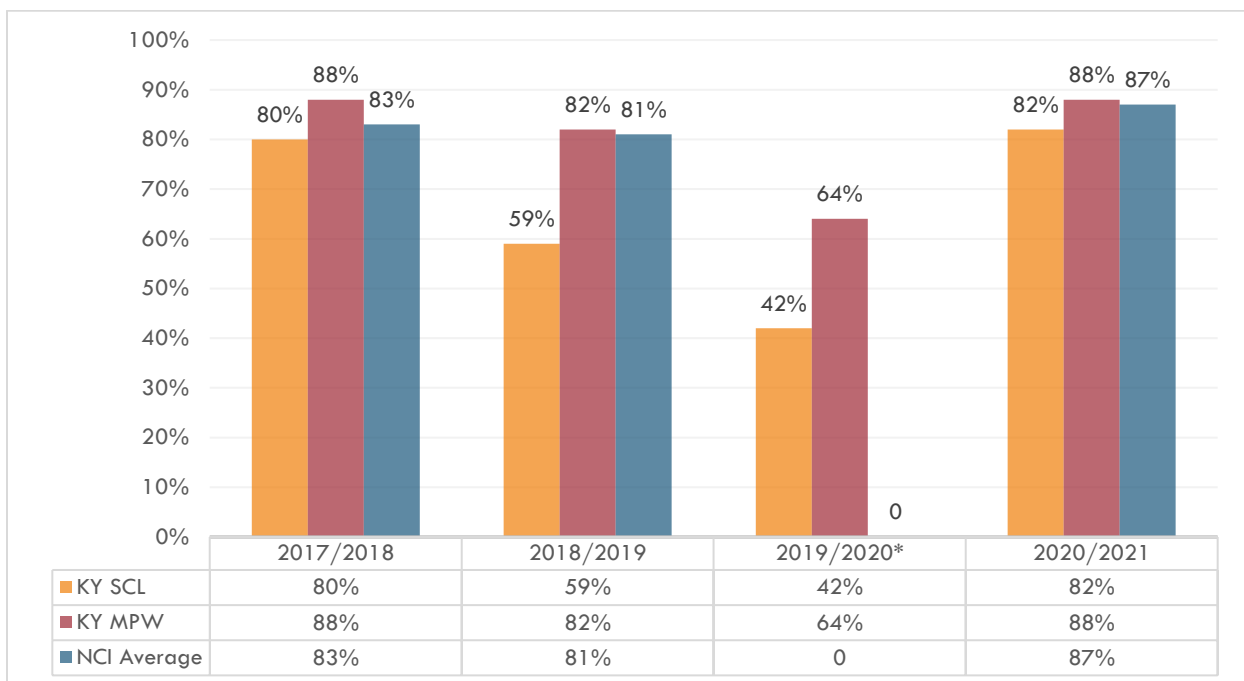


Relationships and Community Inclusion

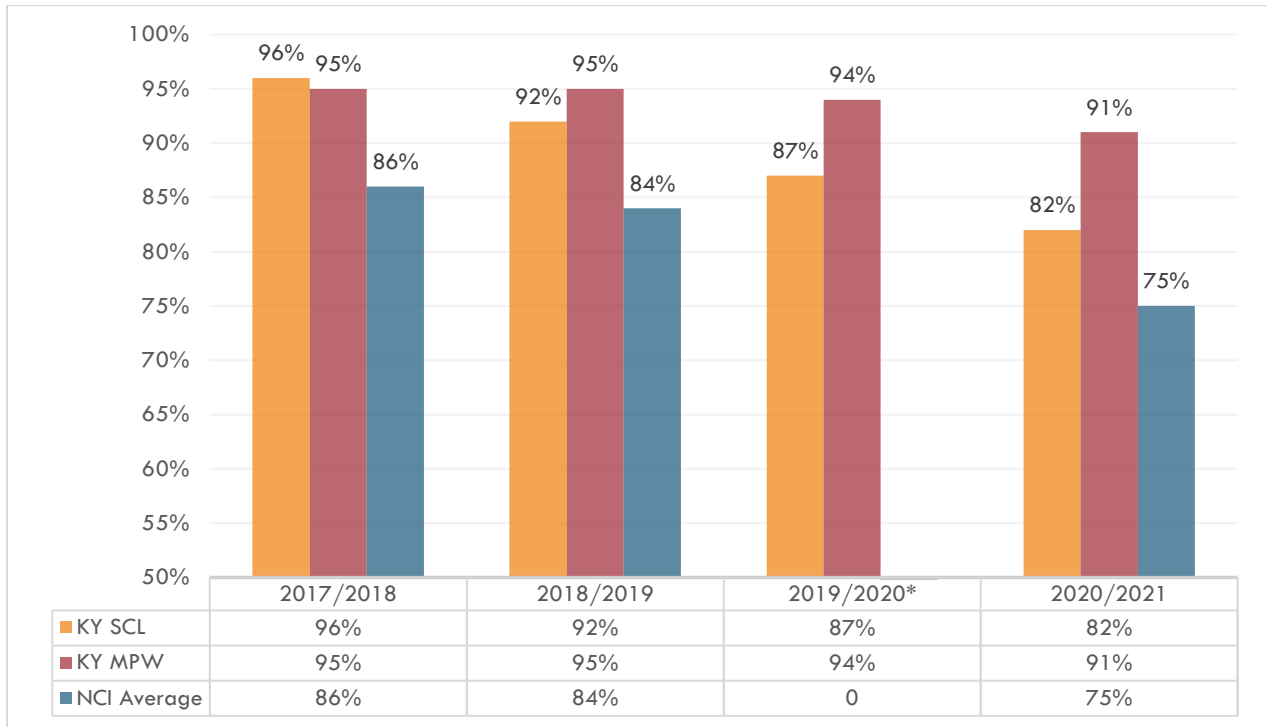
Has friends who are not staff or family



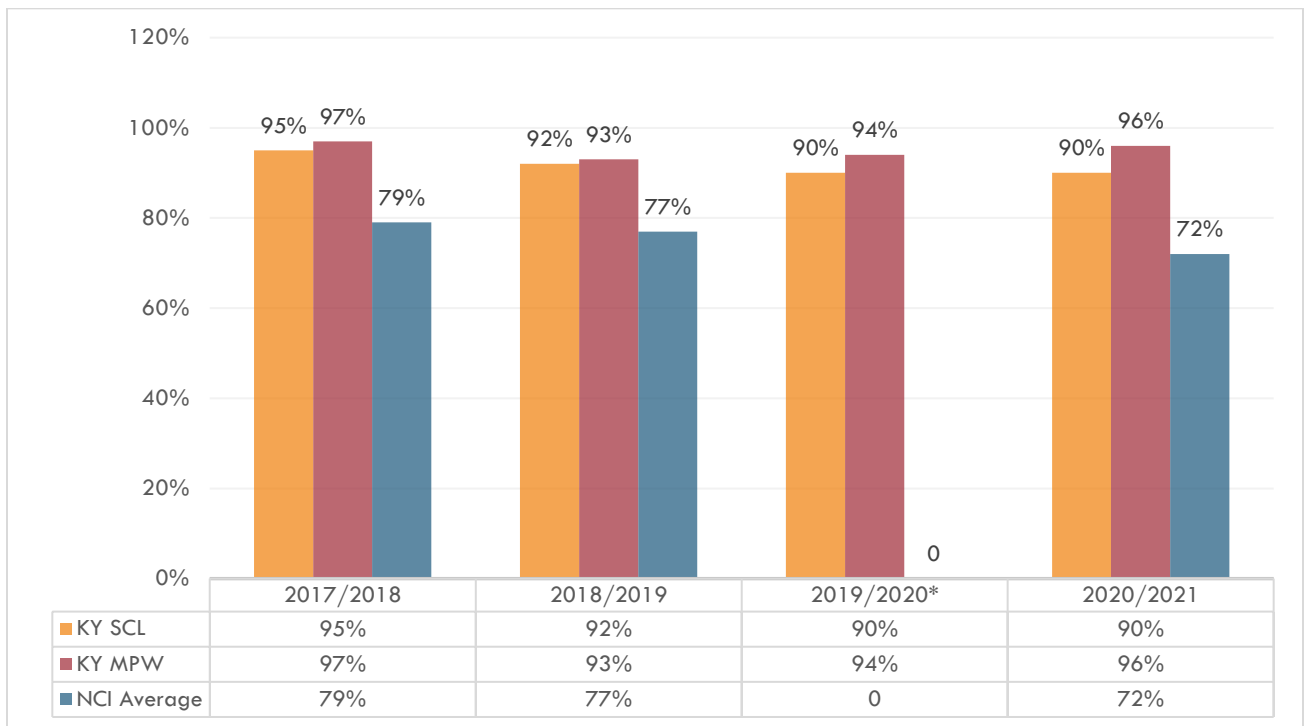
Has ways of communicating with friends



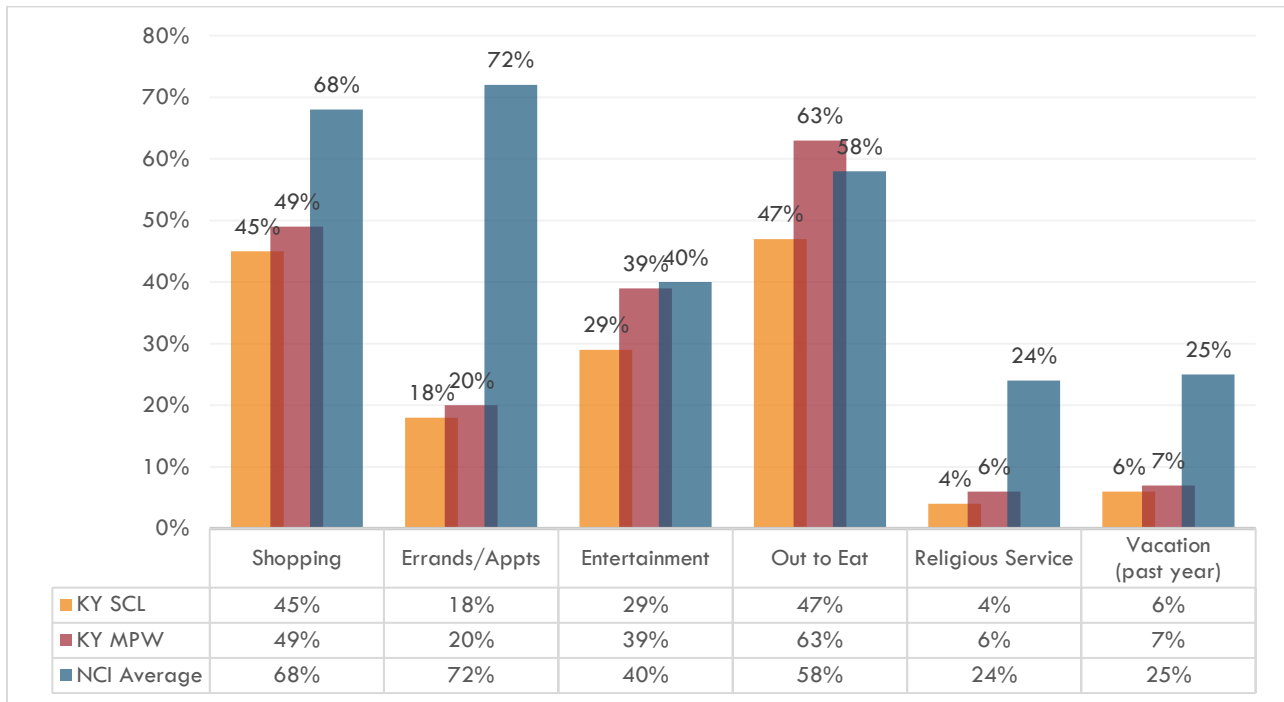
Are you able to go out and do thing you like?



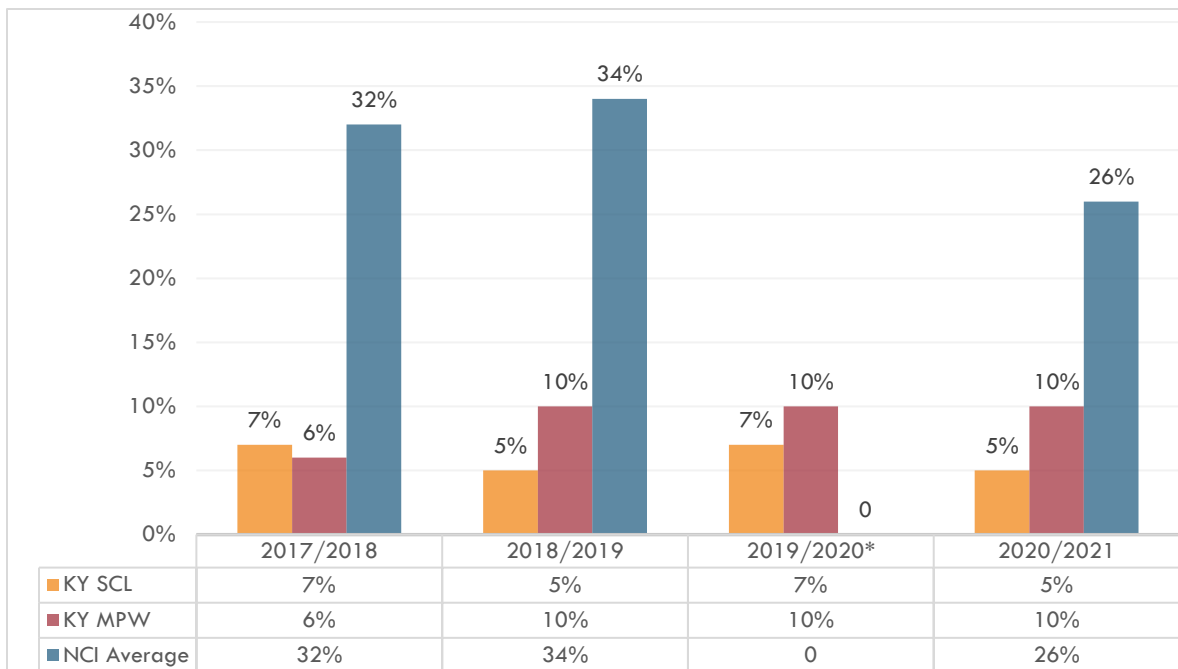
Are you able to go out as often as you want?



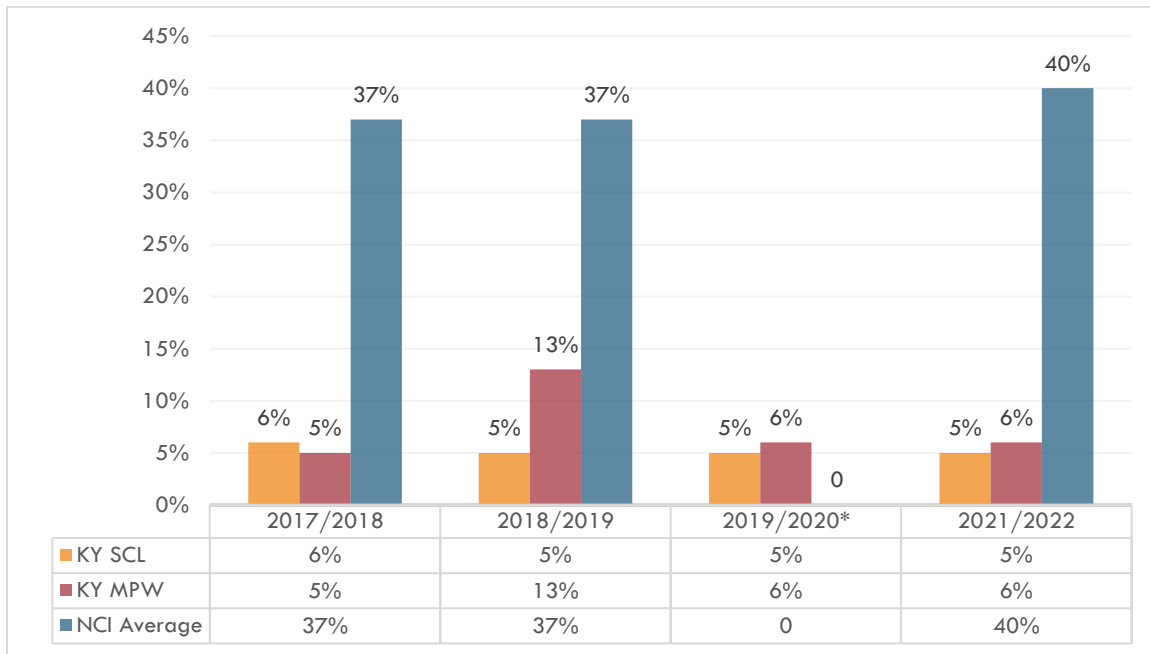
Community Inclusion (at least once in the past month)



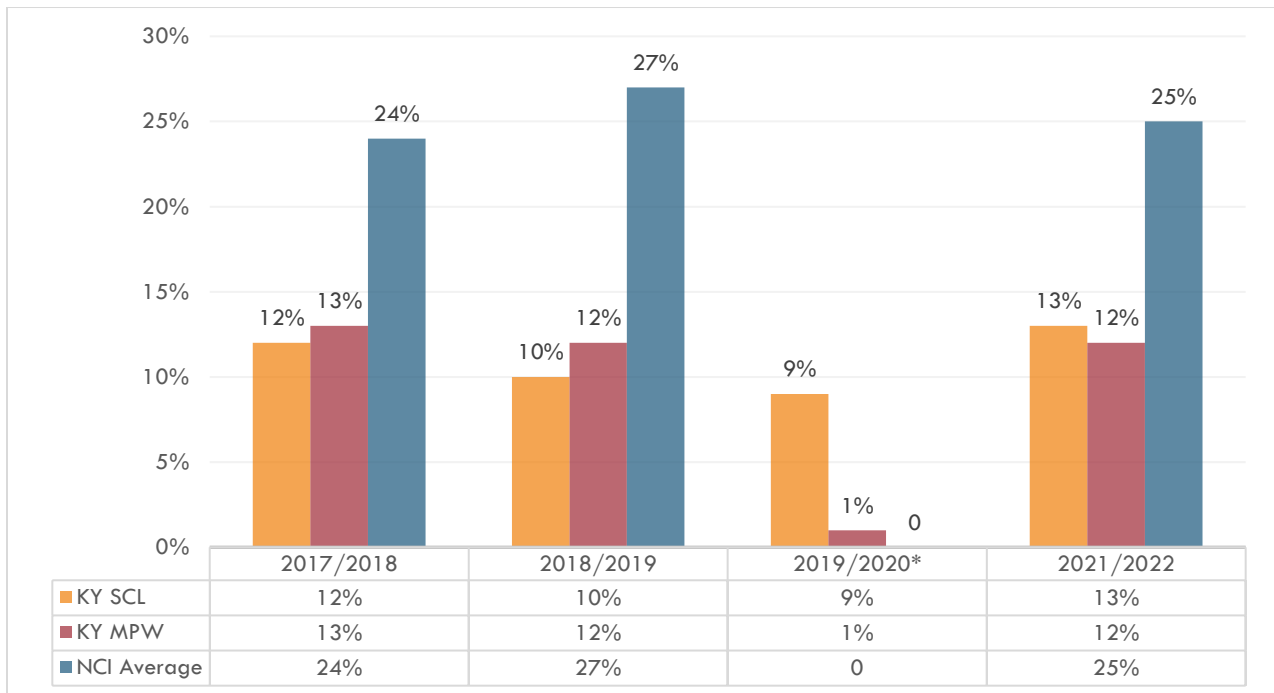
Participated in a community group in the past month



Have ever voted

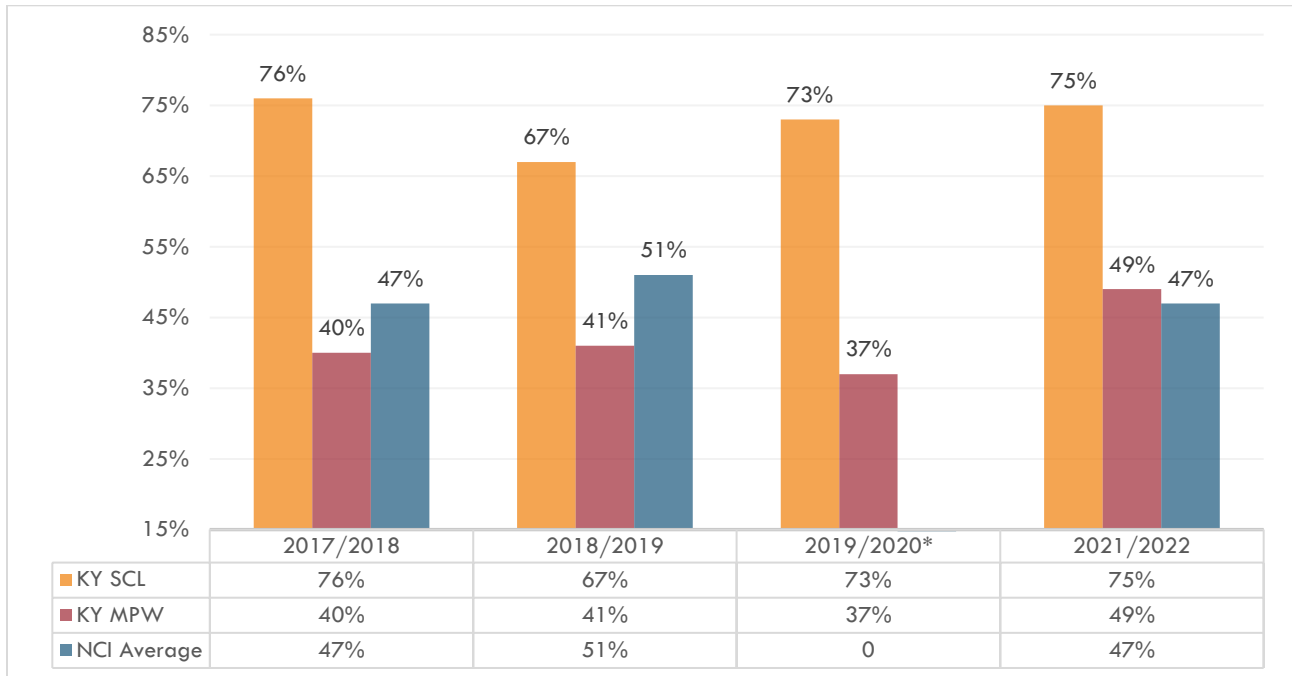


Participated in a self-advocacy event or organization

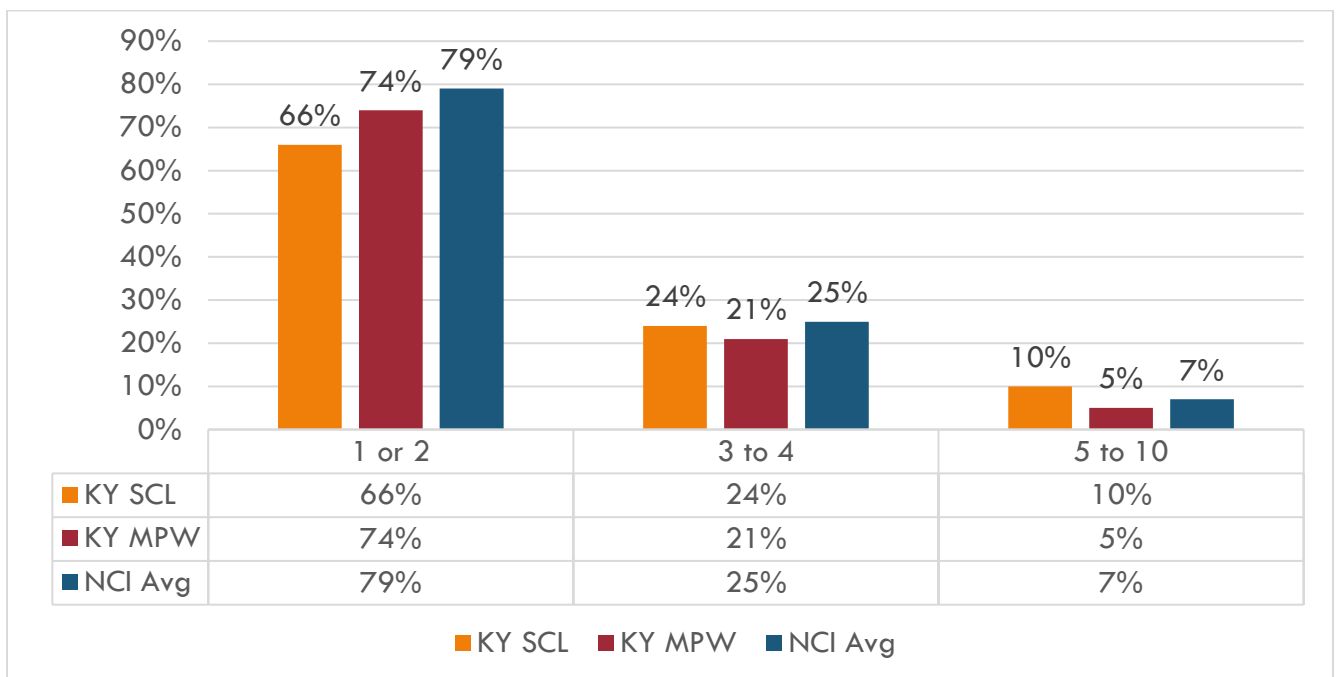


Psychotropic Medication

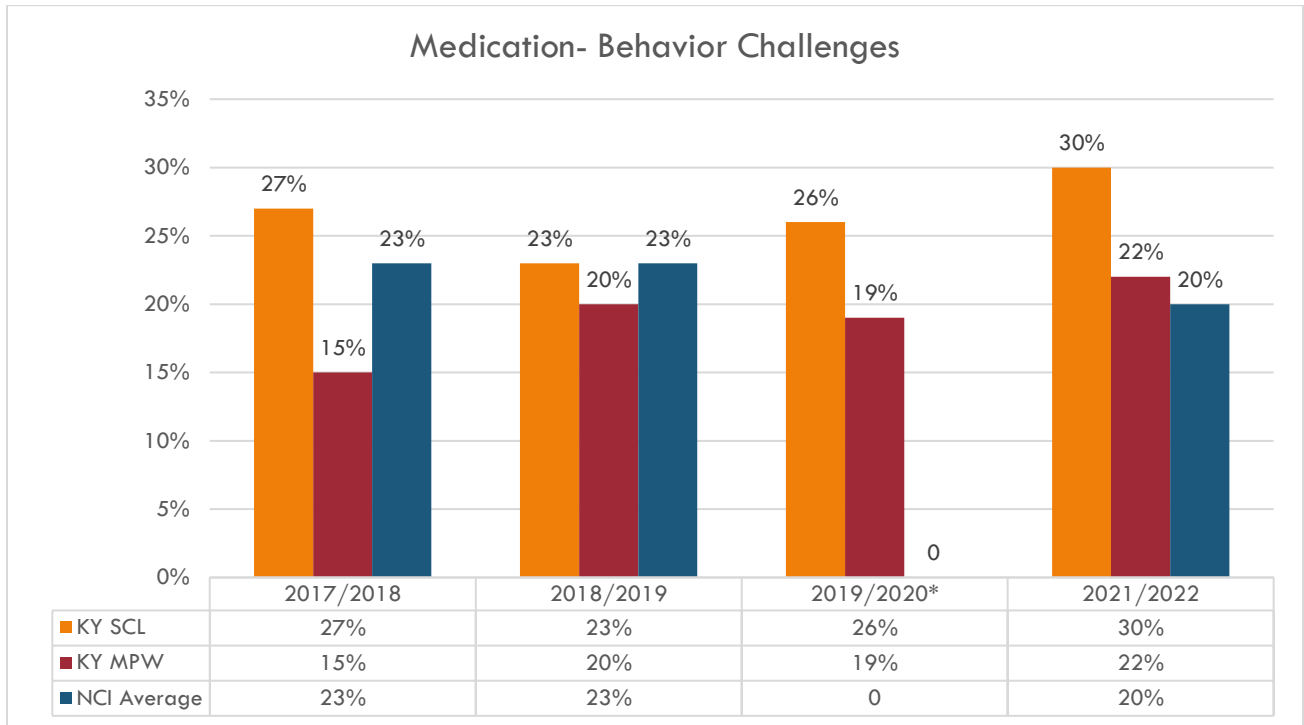
Medication for mood, anxiety, and/or psychotic disorders



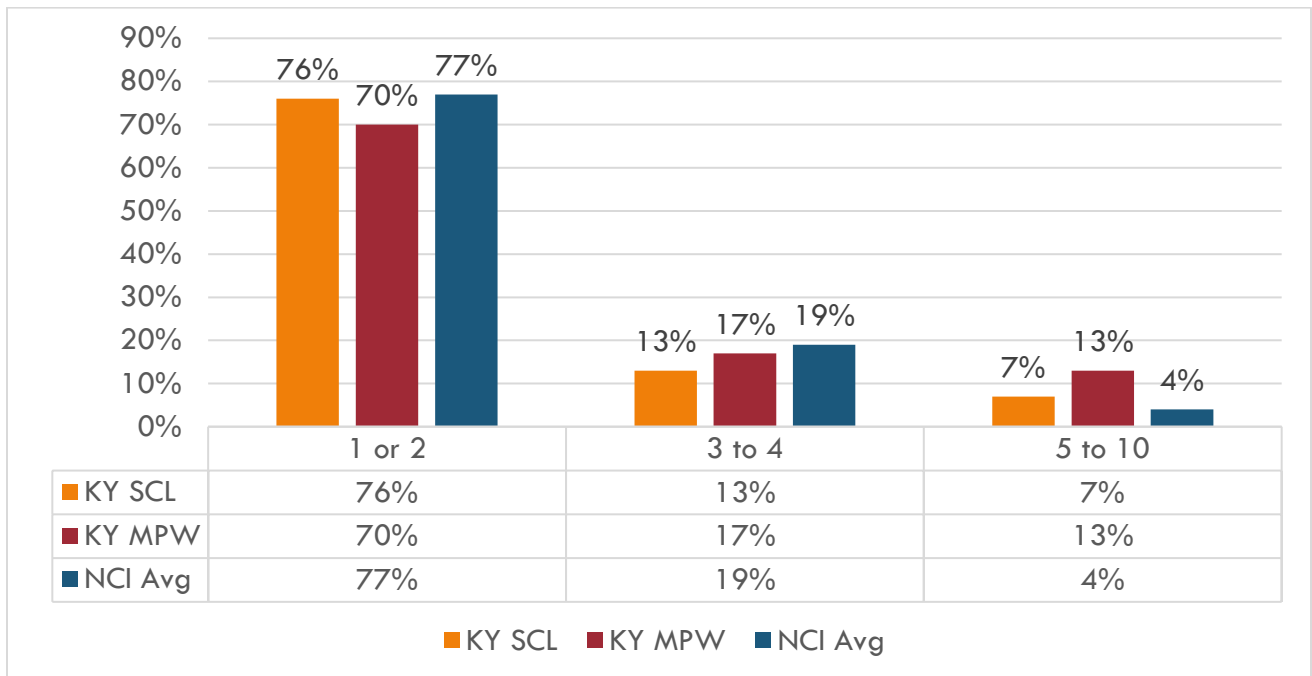
Number of meds for mood, anxiety, and/or psychotic disorders



Medication for behavior challenges



Number of meds for behavior challenges



*Incomplete data cycle due to COVID-19.