Kentucky National Core Indicators Recommendations Report

Submitted by the NCI Quality Improvement Committee









2024 Quality Improvement Committee Recommendations

The committee made recommendations in five main areas:

- employment
- health and wellness
- relationships and community inclusion
- psychotropic medication usage
- rights and respect

Rights and respect

• The area of rights and respect was added last year by the committee after reviewing the related items in the full 2022-2023 data report as well as preliminary Kentucky data from the 2023-2024 survey cycle.

Providers vs. partners

- Most recommendation areas include separate recommendations for providers and organizational partners.
- The recommendations for providers are meant to promote individual-level change and the organizational partners' recommendations are meant to promote systems-level change.

Resources

- The committee also suggested resources to assist individuals and organizations who implement changes based on 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.

Data

• The data used to inform the committee's recommendations can be found in Appendix B.





Background	1
2024 Quality Improvement Committee Recommendations Employment Health and Wellness Relationships and Community Inclusion Psychotropic Medication Use Rights and Respect	2 3 5 7 9 11
Next Steps	13
References	14
Appendix A: Committee Members	15

16

Appendix B: Recommendations Data

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 National Indicators and other data annually. 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 available data and provide guidance regarding the quality assurance and improvement elements and activities within Kentucky's waivers. The QIC's broad-based group produces key recommendations to assist the DDID and other organizations 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—Supports for Community Living and Michele P.—therefore should be interpreted with care as responses cannot be generalized to all Kentuckians with intellectual and other developmental disabilities. Committee recommendations are shared with the DDID, the Kentucky HB144 committee, service provider organizations, and other groups and are used for quality improvement initiatives in all programming and service delivery for adults with I/DD. Regulations require that providers utilize NCI data in their quality improvement plans.





Art by Morgan Crawford





The committee made a total of five recommendations in the area of employment—three for providers and two 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.

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.
- 2. For individuals who express a desire to work, ensure that a plan to provide employment services is included in their person-centered plan.
- 3. 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 information about the possibilities of employment for people with disabilities, including how to access help to find and keep a good job and the overall benefits to employment for people with disabilities as part of the Kentucky National Core Indicators contract.

Employment Resources for Implementation

Disability Benefits 101 kydb101.org

Kentucky APSE kyapse.org

Kentucky Employment First Council kcc.ky.gov

Kentucky Supported Employment Training Project https://hdi.uky.edu/setp/

Human Development Institute Employment Resources hdi.uky.edu/category/priorityarea/employment/

<u>Customized Employment in Kentucky video</u> hdi-l.com/2c

<u>Kentucky Office of Vocational Rehabilitation Videos:</u> <u>An Overview of Supported Employment and Pre-</u> <u>Employment Transition Services</u> hdi-l.com/2d

Employment and Disability data and other resources One Pager kentuckycq.org/employment/

Transportation Initiative transportation.hdiuky.org/

NCI-IDD questions used to measure outcomes



- Do you do any type of job training?
- Person has a 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)
- *If working*: Do you want to work more hours?
- *If not working*: Does case manager has talk to you about finding a job?



🕣 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).

- 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 and new professionals feeling illprepared 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).
- To address these issues, the QIC makes four provider recommendations and two for organizational partners that address a person's overall well-being.

For Providers

- 1. Determine and implement activities aimed at increasing the percentage of people who report their overall health as "good" or better.
- 2. Determine and implement activities aimed at increasing the percentage of people who report they can do healthy things (exercising, sports, gardening, eating healthy food, etc.).
- 3. Determine and implement activities to increase the number of people who follow the physical activity guidelines as recommended by the <u>Office of Disease</u> <u>Prevention and Health Promotion</u> and the <u>National Institutes of Health</u>.
- 4. 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 partners seek opportunities to collaborate on mental health initiatives aimed at increasing quality mental health services and resources.
- 2. Use the state training initiative Merge that aims to increase and improve the application of personcentered services and referral systems.

Health & Wellness Resources for Implementation

Office of Disease Prevention and Health Promotion Nutrition and Physical Activity Guidelines odphp.health.gov/our-work/nutrition-physical-activity

<u>Centers for Disease Control and Prevention (CDC) Physical Activity</u> cdc.gov/physical-activity-basics/guidelines/adults.html

American Heart Association Recommendations for Physical Activity

heart.org

Kentucky Inclusive Health Collaborative wellness4ky.org/

Health and Disability data and resources one-pager kentuckycq.org/health-wellness/

Connect providers with local resources (e.g., Extension offices, Parks and Recreation, County Health departments) that are providing health and wellness programs.

<u>Cooperative Extension offices</u> that are providing health and wellness programs extension.ca.uky.edu/



Project MERGE hdi.uky.edu/merge/

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?
- Do you get to do the type of healthy things you like to do?
- Do you get to do those healthy things as often you like?
- Do your doctors talk to you about your healthcare and medicine in a way that is easy for you to understand?



Relationships & 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 two provider recommendations and one organizational partners recommendation.

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.
- 2. Ensure practices align with the Medicaid Home and Community Based Services Settings Rule.

For Organizational Partners

1. Encourage the Kentucky Division of Adult Guardianship 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

National Resource Center on Supported Decision-Making supporteddecisionmaking.org

Center on Youth Voice/Youth Choice youth-voice.org/

My Choice Kentucky mychoiceky.org

Transportation Initiative transportation.hdiuky.org

National Community of Practice on Supporting Families supportstofamilies.org

Institute on Community Integration- Friends resource ici.umn.edu/products/579

<u>KY Protection & Advocacy, Your Voice, Your Vote booklet</u> nebula.wsimg.com/cece2f4996acf728fc0cc9e04d059aa0

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?



: A Psychotropic Medication Use



Despite ongoing recommendations to decrease psychotropic medication use, little progress has been made in this area. Therefore, it is prudent to find other ways to further examine this issue. Until that is solution is found, the Committee would like to bring awareness to the issue and suggests heightened attention to record keeping and awareness of medication usage among providers, health care professionals, and waiver participants.

For Providers

- 1. Ensure that medication information is kept up to date in HRST
- 2. Ensure that the purpose of their medication is explained to each person
- 3. Ensure that medication review is done during each person's annual physical
- 4. Ensure that each prescribing physician is provided a listing of all of a person's medications at each appointment

For Organizational Partners

- 1. DDID to continue to review Medicaid and HRST data in order to:
 - a. Seek to reduce polypharmacy for individuals with numerous psychotropic medications
 - b. Provide technical assistance to providers regarding conversations with prescribers





Psychotropic Medication Use



NCI-IDD 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?
- If you take medication, do you know what it's for/why you take it?





The Committee added this focus area, in part, to measure the degree to which HCBS "final rule" is being implemented. The setting rule is designed in provide waiver participates with access to the community, guarantee privacy and independence, and increase choice and control. According to the NCI data Kentucky is preforming well below average in several of these areas.

For Providers

- 1. Increase the percentage of people who have access to their home (key, code for a keypad lock, app to unlock door, etc.) to their home.
- 2. Increase the percentage of people who are able to stay at home when others in the home leave.
- 3. Decease the number of people who have others enter their bedrooms without permission.
- 4. Increase the number of people who participate in or have access to self-advocacy events and activities.
- 5. Increase the number of people who vote in local, state, and/or national elections, in part by providing information and access to early voting and absentee voting options.
- 6. Ensure practices align with the Medicaid Home and Community Based Services Settings Rule.



Rights & Respect Resources for Implementation

<u>Home and Community Based Services Final Regulations</u> medicaid.gov/medicaid/home-community-basedservices/guidance/home-community-based-services-finalregulation/index.html

HCBS Settings Rule from ACL acl.gov/programs/hcbs-settings-rule

<u>Kentucky Memo regarding Final Settings Rule</u> chfs.ky.gov/agencies/dms/ProviderLetters/1915cFinalRu leReminder.pdf



NCI-IDD questions used to measure outcomes



- Does this person have a key to the home?
- Can this person stay at home if others go somewhere (if not living alone)?
- Do people let the person know before entering the bedroom?
- Has this person participated in a self-advocacy event?
- Has this person ever voted in a local, state, and/or national elections?

Next Steps

The Quality Improvement Committee will work throughout the upcoming year to distribute the recommendations report to all interested parties. The information from 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

2024 NCI Quality Improvement Committee Members

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Appendix B Recommendations Data







Has paid job in the community; individual, group and/or business that primarily hires people with disabilities.



Would you like to work more hours? (KY specific question)







Would you like to have a job?



Community job in service plan (all survey participants)







If not working, case manager has talked about finding a job (KY specific question)







How would you describe your overall health? (response options changed in 2021/2022)



Able to do healthy things they like to do (KY specific question)







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









Medication for mood, anxiety, and/or psychotic disorders

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







Has friends who are not staff or family



Has ways of communicating with friends







Has a way to get places wants to go outside of the home for fun



Community Inclusion (at least once in the past month)







Medication for behavior challenges



Number of meds for behavior challenges







Can stay at home if others go somewhere



People always let them know before entering bedroom



*Incomplete data cycle due to COVID-19.





If takes medication, understands what it is for/why they take it (KY specific question)







Participated in a community group in the past month



Have ever (or had opportunity to vote) voted







Participated (or had opportunity to participate) in a self-advocacy event or organization



Has a key to the home

