1. **PURPOSE**

The purpose of this procedure is to establish steps, instructions and protocols for the development of initial Individual Support Plans (ISP) for people who are eligible for services with the Department on Disability Services (DDS), Developmental Disabilities Administration (DDA).

2. **APPLICABILITY**

These procedures apply to all DDA employees, subcontractors, providers, vendors, consultants, volunteers, and governmental agencies that provide services and supports to people with intellectual and developmental disabilities.

3. **PROCEDURES**

   A. **Timing of the Initial ISP Meeting**

      1. The ISP development, approval, and dissemination shall occur within ninety (90) calendar days from the date a person is determined eligible for DDA services. In
the case where a person is unavailable for an ISP meeting within 90 calendar days, the service coordinator shall document attempts to schedule the meeting and the reason(s) for the delays. The Service Coordinator shall initiate the case closure process in the agency database when the 90 calendar day period expires. When a person has been made known to the D.C. Superior Court through a commitment or admission petition, DDA Service Planning and Coordination Division shall hold a planning meeting and develop the person’s ISP prior to the person being court committed or admitted to services. The ISP shall be updated within thirty (30) calendar days after such commitment or admission. In an emergency, a person may begin to receive residential services and be presented to D.C. Superior Court without an ISP. In those instances, DDA will ensure an ISP is developed and filed within ten (10) business days of the person’s admission or commitment hearing.

2. Notwithstanding § A.1 above, for people transitioning into DDA funded services from other service systems (e.g. D.C. Public Schools (DCPS), Child and Family Services Agency (CFSA), Department on Youth Rehabilitation Services (DYRS)), the DDA eligibility determination should occur no less than one (1) calendar year before the person transitions out of those service systems. In addition, the Initial ISP shall be developed no less than ninety (90) calendar days of transition to DDA funded services.

B. Initial ISP Meeting

1. The ISP meeting shall occur at a time, date and location that is convenient for the person.

a. The Service Coordinator shall document the meeting date, time, and location in the agency database within two (2) business days of confirming the meeting.

b. The Service Coordinator shall ask the person who they would like to attend the meeting as part of their support team, and must notify by U.S. Postal Service and/or email the invited participants of the agreed upon date, time and location of the meeting at least five (5) business days prior to the ISP meeting date.

c. The Service Coordinator shall ensure that the agency database is updated within two (2) business days if the ISP meeting is rescheduled.

d. If an interpreter is required for the ISP meeting, the DDA Service Coordinator will request interpreter services from the DDS Language Access Coordinator at least five (5) business days before the date of the meeting, in accordance with the DDS Language Access procedures.
2. The ISP shall be developed using Person-Centered Thinking (PCT) and Discovery skills and tools to determine what is important to and for the person, the person’s core values, preferences, support needs, and goals and dreams for the future. Required PCT and Discovery tools shall include, but are not limited to, the following documents: Like and Admire; Communication; Important To/Important For; Relationship Mapping; Assessing a Person’s Interest in Employment; and Assessing Most Integrated Day. At the ISP meeting, the person and his or her chosen team will develop the outcomes and goals using the PCT, Discovery tools, and other relevant assessment.

3. Service Coordinators shall discuss various resources and supports including natural supports, technology, community-based, and state plan services prior to presenting the Home and Community-Based Services Waiver for People with Intellectual and Developmental Disabilities (HCBS IDD Waiver) as an option.

4. The planning process shall include a discussion and verification to ensure that the person will be supported in the most integrated setting appropriate to meet his or her needs, in accordance with the DDA Most Integrated Setting policy. The determination must be documented in the person’s ISP. If the person is not choosing the most integrated setting appropriate to meet his or her needs, then the support team must ensure that: (1) the person has made an informed choice; (2) any barriers to the person being in the most integrated setting are being addressed; and (3) the person has goals, outcomes and activities to advance the person on his or her path to community inclusion and integration, which shall be reflected in the ISP. See Assessing Whether a Person is in the Most Integrated Day or Vocational Setting Appropriate to His or Her Needs at https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Assessing%20Most%20Integrated%20Day%20%20Informed%20Consent_0.pdf and Offering and Supporting Informed Choice of Supports and of Providers at https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Supporting%20Informed%20Choice.pdf; and Benchmarks on a Person’s Pathway to Employment and Community Integration/Inclusion, at https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Pathways%20to%20Employment%20and%20Community%20Integration%20Benchmarks.pdf.

5. The planning process shall also include the following:

a. Information and an opportunity to consent to participation in the National Core Indicators (NCI) satisfaction survey;
b. Information about abuse, neglect and exploitation; and
c. An opportunity to register to vote.
C. Developing an ISP

1. The Service Coordinator, the person and his or her support team shall review the Level of Need Assessment and Screening Tool (LON), update it if the person’s support needs have changed and incorporate a plan to address the risk factors identified in accordance with the DDA Level of Need Assessment and Screening Tool Policy.

2. As part of developing the ISP, the person and his or her support team shall engage in a discussion of the person’s current circumstances, including, but not limited to: his or her home, place of employment, family relationships, and any supports the person receives. The person and his or her support team shall discuss the circumstances in terms of the person's satisfaction and any changes which must be made in order for the person to achieve a balance of what is important to and for him or her, recognizing the person’s preferences, interests, and outcomes, including for the person to advance on his or her pathway to competitive, integrated employment and community integration and inclusion.

3. The person and his or her support team shall also discuss events and experiences in recent years that may affect the person's immediate future, general health, safety, or long-term goals. The person's outcomes must be driven by his or her preferences, interests, and what is important to and for the person; and shall be based on the known abilities and needs of the person, rather than the availability of such supports.

4. In identifying the person’s outcomes and related Individual Program Plan (IPP) goals, the person and his or her support team shall:

   a. Identify the most integrated setting appropriate to meet the person’s needs, including implementing strategies and supports, in accordance with the DDA Most Integrated Settings Policy.

      i. To the extent a person’s support needs cannot be met in a fully integrated setting, include a plan to address barriers to the person being in the most integrated setting and ensure that the person has goals and activities to advance the person on his or her path to community inclusion and integration, which shall be reflected in the ISP.

      ii. To the extent a person is electing to receive services and supports in a setting that is not the most integrated, the service coordinator must also ensure that the person has made an informed choice, and this shall be reflected in the ISP.

   b. Determine the person’s interest in employment; any barriers to employment; and goals and activities to advance the person on his or her path to
competitive, integrated employment, in accordance with DDS’s Employment First policy.

c. Determine the expected duration and frequency of identified supports.

d. Establish the criteria to be utilized in evaluating the effectiveness of such supports in achieving the person’s outcomes.

e. Review the Integrated Supports Star on the Front Door Tool completed by the Intake and Eligibility Unit.

f. List the settings and supports best suited for the person considering, in this order:

   i. Personal strengths and assets;
   ii. Relationship-based supports, also called natural supports;
   iii. Use of technology;
   iv. Community resources, e.g., adult literacy class through the D.C. Public Libraries; a fitness class through D.C. Parks and Recreation;
   v. Eligibility-based supports, e.g., Medicaid State Plan services; and
   vi. Supports through the HCBS IDD Waiver.

5. All ISPs shall include documentation indicating that the person or the person’s family, guardian or designated representatives were involved in the development of the ISP, and that they agree or disagree with the ISP.

6. The Service Coordinator, within two (2) business days of the ISP meeting, shall enter a note that meets the requirements specified in the Service Coordination Desk Guide, in MCIS or any DDS designated database.

7. For people seeking HCBS IDD Waiver services, the following steps shall be taken:

   a. The person, his or her team and Service Coordinator shall document in the ISP specific supports for outcomes.

   b. The Service Coordinator shall assist the person in making an informed choice about which provider shall render services.

   c. The Service Coordinator shall contact the HCBS IDD Waiver provider prior to adding them as a support to the ISP to ensure the selected provider has the capacity to provide the chosen services.

8. For people receiving services in an ICF/IID, the person’s Service Coordinator must amend his or her ISP within 30 calendar days of the person’s admission.
D. Approval, Dissemination and Implementation of the Initial ISP

1. For people receiving supports and services funded through DDA, the Service Coordinator shall complete the ISP within eighteen (18) calendar days of the date of the ISP meeting and submit it for approval to the assigned Supervisory Service Coordinator (SSC).

2. The ISP shall be reviewed by the SSC for approval or disapproval within three (3) business days of receipt.

3. If the SSC disapproves the ISP, in whole or in part, then the SSC shall discuss the reasons for the disapproval with the Service Coordinator and suggest changes to the ISP.

   a. If those changes are substantive, the Service Coordinator must re-convene team members, as needed, to address these changes within two (2) business days.

   b. The revised ISP shall be re-submitted to the SSC within one (1) business day.

   c. The SSC will review and approve the ISP within two (2) business days.

4. Upon receipt of the SSC's approval, the designated DDS Records Room staff shall disseminate the ISP to those team members who requested a copy of the document, in accordance with the ISP Distribution Procedure.

5. The person, or designated representative, shall receive notice of his or her right to request an appeal of his or her ISP within ten (10) business days of receipt of the ISP, in accordance with the ISP Appeals Procedure. If a timely appeal is not received, the ISP is deemed approved, and shall be implemented by service providers on the approval date.

6. In cases where a person is deemed to be in an emergency situation requiring immediate intervention to assure the health and welfare of the person, the Intake and Eligibility Unit will immediately request local funding for services, as needed, through the Operation Division. Upon approval, the Intake Unit will coordinate the placement and transition of or delivery of services to the person and may do so without necessary assessments or an ISP.