PROCEDURE

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<thead>
<tr>
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<th>Procedure No.: 2017-DDA-PR06</th>
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<tbody>
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<td>Cross Reference, Related Policies and Procedures, and Related Documents: ISP Policy; Person Centered Thinking Procedure; Assessing a Person’s Interest and Progress Towards Employment; Benchmarks on a Person’s Pathway to Employment and Community Integration/ Inclusion; Assessing Whether a Person is in the Most Integrated Day or Vocational Setting Appropriate to His or Her Needs and Supporting Informed Choice Tool; Supporting Informed Choice tool; DDA Level of Need Assessment and Screening Tool Policy; Service Coordination Desk Guide</td>
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1. PURPOSE

The purpose of this procedure is to establish steps, instructions and protocols for the development of ongoing 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. Annual Pre-Planning Procedure

1. Pre-planning shall commence at least ninety (90) calendar days prior to the
ISP meeting date. Providers shall upload in the agency database, documentation in accordance with the Electronic Checklist *i.e.* assessments, progress on the previous year’s outcomes and goals; Positive Personal Profiles (PPP) & the Job Search/Community Participation Plan (Discovery tools), etc. at least 10 business days but no more than 90 calendar days prior to the ISP Meeting date.

2. The ISP meeting shall be scheduled based on times and locations convenient to the person. The assigned Service Coordinator shall contact the person and/or his or her decision-maker, to ascertain their preference regarding the date, time and location of the meeting.

3. The Service Coordinator shall send an email and/or mail a letter to inform the team of the ISP meeting date, time, and location within two (2) business days of confirming the agreed upon date, time and location of the ISP meeting.

4. The ISP meeting shall be scheduled no more than ninety (90) calendar days prior to the ISP meeting.

5. The ISP meeting shall be held no less than thirty (30) calendar days prior to the ISP effective date.

6. 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.

7. The Service Coordinator shall document the ISP meeting date, time, and location in the “Schedule ISP Meeting” section of the agency database within two (2) business days of confirming the date and time with the person and his or her decision maker. In addition, the Service Coordinator shall confirm, via the “Schedule ISP” section of the agency database that the person and their decision maker had input into the date, time, location and participants at the meeting.

8. The Level of Need (LON) assessment must begin no more than ninety (90) calendar days prior to the effective date of the ISP. It must be committed at least ten (10) business days prior to the ISP meeting date.

**B. Annual ISP Update**

1. 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, their satisfaction with services, and any changes which must be made for the person to achieve his or her preferences, interests, and outcomes.
This includes changes needed for the person to advance on his or her pathway to competitive, integrated employment, community integration and inclusion.

2. At least ten (10) business days prior to the ISP meeting date the day provider will develop and upload the person’s Positive Personal Profile and Job Search and Community Participation Plan. If the person does not have a day provider, this shall be completed by the residential provider. If the person resides in a natural home and does not have a day provider, the person’s service coordinator and support team will develop these plans.

3. At the ISP meeting, the team will review and amend, as needed: the required PCT and Discovery tools i.e., Like and Admire; Communication; Important To/Important For; Relationship Map, and Characteristics of the People who Support Me Best. The team may complete additional optional tools, including but not limited to, Rituals and Routines, Good Day/Bad Day and any other additional PCT Tools. At the ISP meeting, the team reviews the results of the tools with the person, revises as needed and finalizes the PCT, Discovery Tools & Guided Discussion Tools.

4. At the ISP meeting, the person and his or her chosen support team will review annual assessments, recommendations, and risk factors in the Level Of Need (LON) and develop a plan to address risk factors. The team also develops meaningful outcomes based on person’s vision and goals for the person’s Individual Program Plan (IPP). The strategies for addressing the risk factors in the LON are documented on the LON Analysis page of the person’s ISP.

   a. In accordance with DDS’s Employment First policy, every working-age person with a disability who receives supports shall be presumed to be capable of individualized, competitive integrated employment on a long-term basis in the community over other less integrated alternatives. Discovery tools and guided discussions such as “Assessing a Person’s Interest and Progress Towards Employment” shall be used to 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 and shall be reflected in the ISP. See also Benchmarks on a Person’s Pathway to Employment and Community Integration/Inclusion: https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Pathways%20to%20Employment%20and%20Community%20Integration%20Benchmarks.pdf.

   b. To ensure that the person is supported in the most integrated setting appropriate to meet his or her needs, in accordance with the DDA Most Integrated Setting policy, the team must review and complete the following tool: Assessing Whether a Person is in the Most Integrated Day
or Vocational Setting Appropriate to His or Her Needs and Supporting Informed Choice. The determination must be documented in the Most Integrated Day/Employment section of the person’s ISP. If the person is not choosing the most integrated setting appropriate to meet his or her needs, then the Service Coordinator 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 and activities to advance the person on his or her path to community inclusion and integration, which shall be reflected in the ISP.

5. 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 outcomes. 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.

6. For those people who express an interest in receiving supports through the Home and Community-Based Services Waiver for Persons with Intellectual and Developmental Disabilities (HCBS IDD Waiver), the Service Coordinator shall discuss the waiver program with the person and his or her support team. The Service Coordinator will complete the remaining HCBS IDD Waiver documentation if the person selects that program. Additionally, the following steps shall be employed:

   a. The person, his or her team and Service Coordinator shall identify specific supports to be included in the ISP.

   b. The Service Coordinator shall assist the person in making an informed choice about which provider shall render services and discuss settings options, including the choice of non-disability specific settings.

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

7. At the ISP meeting, the Service Coordinator will complete the Required ISP Documentation Checklist. Provider issues will be generated for missing documentation. For people who receive services through the HCBS IDD Waiver, a provider’s failure to submit all documents required for authorization during the ISP meeting may result in a delay of the approval of services and the services will be documented as an unmet need. Any failure on the part of the provider to submit required documents to approve service authorizations will result in sanctions by DDS up to and including a ban on authorizations for new service recipients. Service interruptions to the person
receiving waiver services due to service provider’s failure to submit required
documentation will initiate referrals to a choice of a new service provider to
ensure a continuation of services for the person. The ISP will be amended to
include the service upon receipt of the required documentation. The service
authorization will not be back-dated but effective at the receipt of the
required documentation for service authorization.

8. The Service Coordinator and support team shall also:

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

b. List the support options or setting 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.

For examples please refer to the Integrated Services and Supports at
https://dds.dc.gov/sites/default/files/dc/sites/dds/publication/attachments/Integrate

9. All IPP goals and objectives must be SMARTER and correlate with the
   outcomes documented in the ISP. The support team should review each goal
   and objective to ensure that they:
   
   a. Are Specific and highly individualized;
   b. Are Measurable (or has measurable objectives);
   c. Are Action-oriented;
   d. Are Reasonable and/or reachable;
   e. Have a Timeframe for the person to achieve the goal and/or
      objectives;
   f. Can be Evaluated; and
   g. Can be Revised.

10. 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.

11. The Service Coordinator, shall document the ISP meeting by entering a note
    in the agency database within two (2) business days of the ISP Meeting. The
requirements for the comprehensive note are detailed in the Service Coordination Desk Guide.

C. Approval, Dissemination and Implementation of an Updated ISP

1. For people receiving supports and services funded through DDA, the Service Coordinator shall complete and submit the updated ISP for approval eighteen (18) calendar days prior to the effective date of the ISP.

2. The ISP shall be reviewed by the Supervisory Service Coordinator (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/QDDP and suggest changes to the ISP.

   a. If those changes are substantive, the Service Coordinator must re-convene the team, 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.

D. Amendment of the ISP

1. The ISP shall be amended when necessary to reflect changes in the person’s outcomes and needs, and/or to promote the person’s quality of life.

2. Review of the ISP shall be conducted no less than quarterly in accordance with the applicable federal and local regulations depending on the services being provided (e.g., ICF/IID or HCBS waiver services). Informed choice shall be offered and supported whenever changes to the ISP are made.

3. The Service Coordinator, person or any team member can request an amendment meeting for any of the following changes, unless proposed as part of the annual review process:

   a. Any change in recommendations from any clinical assessments.
   b. Any change in the goals/needs/preferences and Person Centered assessments pertaining to the person.
c. Any change in medical and/or mental health.
d. Any change in the person’s residence, day/vocational setting.
e. Any change in the strategies, types of supports and frequency services.
f. Any change in services and/or service provider.
g. Any change in benefits, or financial status.
h. Any change in the person’s ability to give informed consent.
i. Assessments, recommendations by clinicians or service providers

4. The Service Coordinator/QDDP shall schedule a meeting or conference call with the person and team members to address the requested amendment as soon as possible but, at minimum, within three (3) business days of the request for the amendment.

5. The Service Coordinator, within two (2) business days, shall complete a note in the DDS designated database.

6. In the case of Emergency ISP amendments, i.e., in response to circumstances that pose a serious or immediate threat to the health and safety of the person or others, the following shall apply:

   a. Emergency ISP amendments shall be forwarded to the Supervisory Service Coordinator for approval as quickly as possible and no more than one (1) business day from the emergency.

   b. The Supervisory Service Coordinator shall approve the amended ISP document as quickly as possible and no more than one (1) business day from receipt.

E. ISP Appeal

The person, and/or designated representative, shall receive notice of his or her right to request reconsideration and/or file for a Medicaid fair hearing upon completion of a person’s annual ISP, and at each ISP amendment, in accordance with the DDA ISP Appeals Procedure.

F. Monitoring the ISP

Each person’s assigned Service Coordinator shall advocate and monitor implementation of the ISP services and supports as outlined in DDA’s Service Coordination Monitoring Policy and Procedures. Any failure to provide services and supports identified in the ISP shall be addressed as outlined in DDA’s Service Coordination Monitoring Policy and Procedures.