

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT ON DISABILITY SERVICES**



PROCEDURE	
Subject: Annual Individual Support Plan	Procedure No.: 2015-DDA-PR00X
Responsible Program or Office: Developmental Disabilities Administration	Effective Date: May 1, 2015
	Number of Pages: 7
Date of Approval by Director: April 15, 2015	Expiration Date: N/A
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;	

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-ISP Meeting

1. The Pre-ISP meeting shall be scheduled based on the person’s preference of date, time, and location. The Service Coordinator will document the Pre-ISP meeting date, time, and location in the note section of MCIS.
2. The Service Coordinator will send an email and/or mail a letter to inform the team of the Pre-ISP meeting date, time, and location within two (2) business days of scheduling the Pre- ISP meeting.

3. If an interpreter is required for the pre-meeting, the DDA Service Coordinator will assist in making those arrangements
4. The Pre-ISP meeting shall occur no more than ninety (90) days prior to the effective date of the ISP.
5. At the Pre-ISP meeting, the Service Coordinator/ Qualified Developmental Disabilities Professional (QDDP) shall meet with the person, his or her substitute decision-maker, as appropriate, and whomever the person has selected to participate in his or her support team, including but not limited to the person's family, friends, peer counselor, advocate, or other designated representative. The Service Coordinator shall review the progress on previous year's goals, current assessments, consultations, Person Centered Thinking (PCT) and Discovery Tools (Positive Personal Profile, Job Search/Community Participation Plan, etc.), to determine what is important to and for the person. See, Person Centered Thinking Procedure.
6. The following tools may also be helpful at the Pre-ISP meeting, but are not required: Life Trajectory Worksheet and Tool for Developing a Vision, attached, and please see the Overview of the Lifecourse Framework webinar, available at: <http://supportstofamilies.org/cop/resources/innovations-in-supporting-families-community-of-practice-framework-for-systems-change-webinar-series/>, for guidance.
7. During the Pre-ISP meeting, if the team determines that revisions are required to the clinical assessment and/or supporting documentation, including PCT and Discovery tools, the revised documents will be presented at the ISP meeting.
8. At the Pre-ISP meeting, the Service Coordinator will complete the Required ISP Documentation Checklist. Provider issues will be generated for missing documentation.
9. At the Pre-ISP meeting, the team will review, update, and commit the Level of Need Assessment and Screening Tool (LON).
10. The ISP meeting will be scheduled at the end of the Pre-ISP meeting, based on the person's preference with time, and location.

B. Annual ISP Update

1. The Service Coordinator will email and/or mail a letter to the people who are invited to attend the ISP meeting within two business days of scheduling the ISP meeting.
2. The Service Coordinator will document the ISP meeting date, time, and location in MCIS, using the Schedule ISP Meeting section.

3. If an interpreter is required for an ISP meeting, the DDA Service Coordinator will assist in making those arrangements in accordance with the DDS Language Access policy and procedure.
4. The ISP meeting shall occur no less than thirty (30) days prior to the effective date of the ISP
5. 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, 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 his or her preferences, interests, and goals, including for the person to advance on his or her pathway to competitive, integrated employment and community integration and inclusion. At the ISP meeting, the team will review and amend, as needed:
 - a. Required PCT and Discovery tools. This shall include, but is not limited to the following required documents: Like and Admire; Good Day/ Bad Day; Relationship Mapping; Positive Personal Profile; and Job Search and Community Participation Plan; as well as at least one additional PCT tool that the support team determines is most useful for planning, considering the person's circumstances. Please see Person Centered Thinking Procedure for additional guidance.
 - b. Assessing a Person's Interest and Progress Towards Employment tool 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, which shall be reflected in the ISP. In accordance with DDS's Employment First policy, every working-age person with a disability who receives supports shall be presumed to prefer and be capable of individualized competitive integrated employment on a long-term basis in the community over other less integrated alternatives. See also, Benchmarks on a Person's Pathway to Employment and Community Integration/ Inclusion, attached.
 - c. Assessing Whether a Person is in the Most Integrated Day or Vocational Setting Appropriate to His or Her Needs and Supporting Informed Choice tool 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 determination must be documented in the person's ISP. If the person is not choosing the most integrated setting appropriate to meet the his or her needs, then the service coordination 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.

6. 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 goals must be driven by his or her preferences, interests, and what is important to and for a person; and shall be based on the known abilities and needs of the person, rather than the availability of such supports.
7. The Service Coordinator, the person and his or her support team shall review the Level of Need Assessment and Screening Tool (LON) and incorporate a plan to address the risk factors identified in the LON, in accordance with the DDA Level of Need Assessment and Screening Tool Policy.
8. For those people who express an interest in receiving supports through the Home and Community Based Services Waiver for Individuals 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.
 - c. The Service Coordinator shall contact the HCBS provider prior to developing the Plan of Care to ensure the selected provider has the capacity to provide the chosen services
9. 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 will 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.

10. The Service Coordinator and support team shall also:

- a. Determine the expected duration and frequency of identified supports.
- b. Establish the criteria to be utilized in evaluating the effectiveness of such supports in achieving the person's goals.
- c. Include a record of specific staff/ training required.
- d. Include a record of the persons responsible for monitoring and implementation of a person's goals as well as the format and frequency of such monitoring and reporting.
- e. List the settings 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.

Please see the Integrated Supports Star and Integrated Support Options tools, attached. These are optional tools that may be helpful during this discussion, but are not required.

11. All ISP goals and objectives must be SMARTER. 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**.

12. 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.

13. The Service Coordinator, within two (2) days, shall make a comprehensive note in MCIS of the ISP Meeting.

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 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 approval 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 goals 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/ID 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 of 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) days, shall make a comprehensive note of the ISP amendment meeting in MCIS or any 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 within twenty-four (24) hours or less of the emergency, for approval.
 - b. The Supervisory Service Coordinator shall approve the amended ISP document no more than twenty-four (24) hours or less of the emergency.

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 alternate monitoring schedules that meet the specific needs of people must be identified in the ISP as approved by the team. 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.

