



**MINUTES**  
**Colorado Choice Transitions Advisory Council**

3033 S. Parker Rd, Aurora 80014  
 8th Floor Conference Room (Tower 1)

July 30, 2015  
 1:00-4:00 p.m.

**Present:**

Sam Murillo, HCPF	Nicole Storm, HCPF	Ian Engle, ILC
Eden Mayne, ADRC	Anaya Robinson, ILC and TCA	Julie Farrar, CDDC
Jose Torres, CCDC	Kelsey Meredith, Legal Center	Eden Mayne, ARDC
Ed Milewski, HCBS Consumer	Jennifer Reeves, Ombudsmen	Dawn Russell, ADAPT
Marijo Rymer – Arc of Colorado	Ashley Sandoval, SEP	Kitty Reed MacDonald, JCMH
Jami Cowan, ADRC, DRCOG, OC	Heather Kamper, ADRC, DRCOG	Tracy Martinez, Provider
Chris Roe, DOH	Amy Pulley, ADRC, DRCOG	

1. WELCOME AND INTRODUCTIONS

- a. Sam noted the gap between meetings and reason for April cancellation
- b. Sam acknowledged the changes with Liaison and program director role. Mentioned department’s intention to reframe CCT perception and begin to focus on the CCT legacy through the support of the AC.

2. OLD BUSINESS

- a. Review of minutes from January meeting. Approved with caveat that people on phone could edit.
- b. Review of AC-Charter. Sam provided CMS Sustainability Plan feedback that narrative wasn’t clear about stakeholder engagement as context. Marijo asked for clarity on broader context of AC work. Sam clarified that CMS feedback was only isolated to the Sustainability Plan development. Ed mentioned he is a stakeholder and consumer that was involved and that SILC could be a possible vehicle for stakeholder engagement. Sam stated that he informed CMS that AC, department are committed to finding better ways to engage.
  - i. Sam asked for review of document. Those on phone were sent charter and minutes via email by Nicole Storm at the break.
  - ii. Marijo noted that language about CLAG should be removed. In the paragraph, **The Advisory Council Reports to**, “and other relevant state agencies” will be added to end of 1<sup>st</sup> sentence. The 2<sup>nd</sup> and 3<sup>rd</sup> will be deleted. The word governance will be corrected. The document needs to reflect alignment with a person-directed philosophy even with deletion of CLAG mention per Ian feedback. He was okay with changes



given that CO Olmstead plan is mentioned in final sentence. CLAG report and CO CLP can be referenced.

- iii. Anaya and Jennifer believe it was cleared, but it needs updating anyhow, i.e. logo, misspellings and language about CLAG. Jennifer confirmed AC will see edits prior to submission for clearance. Sam noted that SP due to CMS 8/30/15.

### 3. ADRC UPDATE

- a. Sam shared excitement that ADRC contracts were all executed either in first or second quarter. Acknowledged that the delay and SFY caused misunderstanding with deliverables and that there was some date variability. Department may address deliverable delays by extending due dates for Regional Outreach Plan and RTC Strategic Plan. Sam also mentioned report coordination with SUA.
- b. Sam shared that NF-DAL for administrators and staff involved in transition planning activities with reminder of resident's legal right to get information on community living, MDS requirement was sent out and should clear up referral process to ADRC and OC.
- c. Sam shared department's goal to better mine MDS data by pushing out list of names in need of OC in each Region for contact. Ed mentioned barriers created by lack of timely NF referrals. Sam acknowledged issues with skip pattern in MDS. Eden requested copy of DAL. This was also requested during the TA call 7/16/15. Sam to send. Eden also mentioned that department is supposed to be preparing MDS training. Heather cited contract SOW. Sam/Nicole to investigate further.
- d. TA call was productive and information ranged from contracts to training.

### 4. ISSUES LOG

- a. Sam explained the point of this topic is to get away from log fatigue. He also threw out the idea to meet monthly or bi-monthly in order to remain on the same page while working on the issues solutions.
- b. Sam also introduced a template draft to help organize the issues. Will offer a time line and strategies box for coming up with solutions. This will also show the work step by step, that goes into solving each issue. Issues that are brought up by council members will have an identifying symbol and will be fast tracked through the system. Final draft set for tentative August 30th.
- c. The goal is also to develop a communication process for all things CCT including cross department communication. The template should provide the following changes:
  - i. keeping items transparent
  - ii. prioritizing issues into 3 groups: 1) 1<sup>st</sup> priority 2) 2<sup>nd</sup> priority, not yet worked on 3) not possible due to time frame
- d. Another goal is to better communicate with the community how the process of the CCT program works and to come as close as possible to the goal of 400 plus clients.



## 5. SEED MONEY

- a. The seed money came from CMS to initiate 5 department budget rebalancing projects.
  - i. One of the projects include rebalancing TCA in addition to adding a DME loan program.
  - ii. More details to follow on the remaining 4 rebalancing projects

## 6. COMMUNITY ENGAGEMENT WORK GROUP (Jennifer led this portion of the meeting)

- a. Update on rapid results issue log activities to engage other communities
  - i. 100 day goal to survey the community members and nursing home facility staff
  - ii. Survey completed at the 1st of April
  - iii. Contact persons from survey and inquire about more feed back
- b. Recruiting other facilities and programs to build larger capacity is also a goal and the updates are as follows:
  - i. NURSING HOMES AND SOCIAL WORKERS – engaged  
RCCO – This group has been engaged  
CHCA – Sara Dent engaged  
CDPHE – Still in works to engage them due to their schedule  
STATE LONG TERM CARE – Need to revisit the standing terms  
ADRC – Need to revisit the standing terms
- c. CCT not working for various reasons
  - i. lack of understanding and knowledge of how CCT works
  - ii. bad communication between all the various work groups and facilities
  - iii. there was only 58 clients completed out the expected 100
- d. Support needed from senior leaders
  - i. to increase education for transition coordinators
  - ii. web access for CCT members, that increases the online presence with user-friendly interface

## 7. TRAINING

- a. In the ADRC contract there is a mandatory training for MDS
  - i. More communication needs to be associated with empowering HCPF employees as well as the nursing home staff to take these online training courses
  - ii. Other resources need to be made available for face to face training regarding MDS



iii. Sam stated he would follow up

8. OVERALL ISSUES OF CONCERN

- a. There is a lack of understanding of residents rights from family members and facility
- b. Time management in nursing homes for transitions
- c. Lack of knowledge for overall understanding of CCT to the point of confusing CCT with other programs
- d. CCT not being available in rural areas

9. HOUSING

- a. The goal of housing is to increase the amount of housing available and accommodating to CCT members. Along with in the future building more apartment living style homes to further meet the needs of the growing population with housing concerns. These homes will always dedicate at least 5% of their makeup to CCT members. Listed are some of housings main goals:
  - i. Engage the stakeholders housing issues in order to best serve their needs
  - ii. Providing list that show housing for CCT members that will be regularly updated
  - iii. Agreed to search for other resources in order to provide expanding resources
  - iv. Standardizing the application and evaluation process
  - v. Provide more monitoring

