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Stakeholder Meeting 1: Discussion of Revised Work Plan and Assessment Tool Domains		
12.16.2014		In-person
Note taker	Andrew Cieslinski	
Attendees	Tim Cortez, Brittani Trujillo, Kelly Wilson, Chandra Matthews, Donna Zwierzynski, Charlene Willey, Carrie Schllinger, Heather Jones, Pat Cook, Erin Fisher, Dyann Walt, Sarah Haburn, Robin Bolduc, Kathy Martin, David Bolin, Abigail Walda, Danielle Dunaway, Barb W-C, Sam Murjillo, Carol Merideth, Gary Montrose, Jose Torres-Vega, Mary Jo, George O'Brian	

Overview
- Information already summarized in the presentation is not repeated in the notes. The notes primarily capture stakeholders' feedback and input.

Discussion of Updates to the Process Flow (Viewable on Page 4 of the Work Plan Presentation)
- Steven Lutzky presented the revised work plan that includes the following components:
  - A study to develop a new LOC criteria based on items from the CARE tool
  - The development and piloting of intake and eligibility (I&E) screen
  - The development (but not piloting) of IDD and non-IDD support planning assessments
  - The development (but not piloting) of employment, and self-direction modules
  - The development and piloting of a Person-centered module.
- The original scope anticipated the development of a single, simpler tool and one pilot. These funds are being stretched to support a more ambitious effort, however, these funds are not sufficient to pilot all of the tools. The IDD and non-IDD tools will be piloted under either the TEFT grant or using MMIS development funds.
- CMS has contracted with Truven to run pilots for the CARE items under the TEFT grant. The decision by Colorado to use CARE items within the MnCHOICES framework means that Truven may be used to pilot the support planning assessments. However, Truven's scope is uncertain at this time. If the Department cannot shape the scope in a manner to also support a true pilot of the support planning assessments, it will need to determine another route for doing so. The most likely alternative route would be to build it into the MMIS redevelopment effort which would allow the Department to obtain a 90/10 match.
  - All items in CARE will be tested as part of the TEFT pilot in order to establish reliability and validity. The Department is not under any obligation to use any of the CMS CARE items after the TEFT pilot.
- CMS will be putting out a new version of the CARE items, with a planned delivery date of mid-February. At this time, HCPF will evaluate the updated items and incorporate them into the assessment tools as appropriate to ensure that the tools remain current with federal recommendations and requirements.
- The LOC pilot will compare data using new items against determinations made using the ULTC 100.2. The goal will be to minimize changes in eligibility determinations.
- As part of the follow-up to the IDD and non-IDD support planning assessment TEFT pilots, HCPF plans to hold focus groups with SEPs, CCBs, and other providers to discuss what information may be more beneficial as part of a Personal Health Record for support planning and person-centeredness. There will also be focus groups with consumers about their experience with the assessment and support planning and how person-centeredness could be improved.
- With the Department's continued use of the SIS assessment for individuals with an I/DD there will be an IDD version of the new assessment tool that works in conjunction with SIS so that duplication of items is minimized. As a result, the IDD version will be developed separately from the non-IDD version so that there is a careful look at what the SIS includes, what information is needed for support planning and how the new tool and SIS should work together.
- Mary Jo had a concern about the conflict-free case management requirement of separating case management and service provision, as CCBs are currently conducting the SIS but are also service providers. She was concerned that moving forward with the work plan without addressing the conflict free case management requirements could require additional process changes for CCBs and related agencies in the future, which could decrease momentum and create confusion. Tim Cortez said that the modular approach of the work plan, with independent steps in development, will allow for the flexibility to adapt as these changes occur.
- Tim Cortez emphasized that the small and large scale pilots within this work plan will address the adult population. As the assessment process evolves in the future to incorporate children, there will be more pilots targeted to the new group. However, these are not planned under the current scope of work for the assessment project.
- Chandra Matthews suggested including direct staff in the work group role play that will occur as part of the tool development process. Steve Lutzky said that this could occur at an individual agency level prior to the stakeholder meetings where development issues will be discussed, and representatives for the agencies that conducted role play could attend the meeting and summarize staff feedback.
  - Pat Cook said that having a variety of geographic areas represented in these role plays will also be very important.

Meeting Minutes

Project Plan Discussion (Viewable on pages 7-22 of the Work Plan Presentation)
- The Project Plan provides a detailed overview of each of the tasks that will be performed throughout the Assessment Redesign process, including key objectives and deliverables, specific tasks to be performed, and proposed dates for each of tasks.
- Steve Lutzky requested that stakeholders review the site visit dates and provide feedback about any dates that present conflicts with other meetings. Dates can be found on page 9 of the Work Plan Presentation, which can be located on the blog.
- HCBS Strategies will be developing a document that outlines the dates, individuals/groups involved, stipends, and other information for each of the pilots.

Assessment Tool Domains Discussion
- This discussion centered on the crosswalk of the current MnCHOICES/CARE domains with those required under the Balancing Incentive Program (BIP). These include ADLs, IADLs, Health, Memory and Cognition, and Psychosocial/Behavioral. Additional domains within the MnCHOICES tool were also noted. The crosswalk can be found on the blog.
  - o BIP is a federal initiative that gives guidance about core domains that should be used within an HCBS assessment tool.
- The stakeholder group members said that they want to ensure that information in the assessment is collected in a person-centered way, in which individuals are comfortable performing and/or reporting on the tasks.
  - o Pat Cook asked if there would be anywhere to note whether assessment responses were gathered observationally or through self-report. Steve Lutzky said that this will be an important part of training, as observing during the assessment can reveal a number of potential ADL, IADL, health, and other issues, but documenting how the information is collected is not part of the planned tool.
- Tim Cortez said that the individual should have the ability to direct the conversation during the assessment, rather than the tool/questions driving the process.
  - o Charlene Willey asked how the participant would be able to direct the conversation. Tim Cortez said that the assessment area may start with a question such as, "What type of supports do you need" or "How can we help you". This will allow for a comfortable discussion with the individual that will reveal information about items in the assessment without requiring the individual to answer every question individually.
- Jose Torres-Vega and Mary Jo said that there needs to be a balance between knowing what the consumer diagnoses are and knowing what the consumer needs, as they are not always related. They said that the health information is important to know, but does not always imply functional need.
  - o Tim Cortez said that diagnoses information will be collected, but will not drive the determination. It could be used, however, to identify areas that may need to be further discussed (e.g., fall risks).
- David Bolin said that since the assessment process relies so heavily on well-trained assessors, HCPF needs to make sure that they are invested in the case manager's retention and ongoing training.
- Jose Torres-Vega had a concern that some of the items under the Psychosocial domain may be offensive or unnecessary to ask (e.g., physically aggressive towards others). Steve Lutzky said that alternative means can be applied to collect this information, such as interpreting the general conversation and talking to others providing support in the individual's life.
- The rationale for collecting the information about supporting caregivers in the Caregiver module is going to be further evaluated. Services currently provided by the Department do not include having the infrastructure in place to provide caregiver supports, so including this information may not be actionable.
- Gary Montrose said that he wants to make sure that the person-centered, self-advocacy, and other personally important domains are not pushed to the end, and are mixed in with the ADL, IADL, Health, and other domains. Steve Lutzky emphasized that the crosswalk used in the meeting does not provide any order for the assessment, and is organized by BIP domains only.
  - o ***Flag for discussion with the CM group:*** *What would be a good flow for the assessment tool, how could the person-centered information best be collected, etc.*
- Chandra Matthews said that she wanted to ensure that part of the person-centered approach includes not requiring all individuals to self-direct the planning process, but to be involved in leading the process to the extent that they desire. Steve Lutzky said that this will certainly be a component of the process.
- Pat Cook said that there needs to be a streamlined way of summarizing and displaying assessment information to providers and case managers. Tim Cortez said that "what do we share" will be an important question moving forward.

Suggested Additional Items for the Assessment
- Pat Cook said that there should be questions around literacy and comprehension, as a number of individuals may require additional assistance in completing paperwork or directing care.
- David Bolin said that in assessing housing needs there needs to be information collected on affordability of housing and accessibility needs.
- Gary Montrose suggested adding questions about the individual's ability to self-advocate.
- There was also a suggestion that the individual, rather than the assessor, decides whether to break up the assessment over multiple days.
- Pat Cook said that there will need to be a way to identify individuals who may have special support challenges. She gave the example of a woman who has been "kicked out" of a number of residences and facilities, which may make it more difficult to provide supports. Steve Lutzky said that whether this should be captured in the notes section or as formal questions will be looked at as part of the tool development process.
  - o Suggestion of calling this question "special advocacy needs".
- Steve Lutzky requested that stakeholders provide any additional domains that they wish to be included in the assessment within the next week. Suggestions may be forwarded to andrew@hcbs.info