

Wood County Board of Developmental Disabilities

PROCEDURE

Procedure #: 02-ALL-ALL-0379 (CR)
Effective Date: 8/29/97
Person Responsible: Director of Service and Support Administration

Subject: Individual Support Plan (ISP)
Last Revision: 12-12-17 Major Revisions

Approvals/Date: Scott Olson 12/19/17
Superintendent, WCBDD Date

Claudia R. Kelly 12/18/17
Department Director Date

The following definitions apply:

AAI - Acuity Assessment Instrument **SSA** - Service and Support Administration/Administrator

Advocate - Person identified by the individual to provide them with representation, advocacy, advice, and assistance related to the day-to-day coordination of services as identified in their ISP.

DDP - Ohio Developmental Disabilities Profile

Discovery Process - Process to assist the individual and family/guardian/advocate in identifying strengths and supports for services and supports. These supports will facilitate the outcomes identified in the ISP to help the individual meet their desired outcomes and increase their independence and community involvement. The focus is on what is important to the individual, what is important for the individual and any risks that need to be addressed.

Due Process - Appeal rights and Grievance/Due Process Procedure (2-ALL-ALL-0206 (CR)) for both the Wood County Board and Medicaid, if services are funded by Medicaid, are given and explained in a language/manner the individual understands.

ISP - Individual Support Plan

ISP One Page Profile - Individual Support Plan for service monitoring and advocacy services only through Service and Support Administration (SSA) Department.

Non-Waiver ISP - Individual Support Plan for services that are not funded by HSBS waiver dollars, including services provided under Local Funds as Last Resort (LFLR-02-ALL-ALL-0842 (SS)) as well as other unpaid/natural supports.

Outcome - The supports provided by a provider (paid or unpaid/natural) to assist the individual in achieving increased independence, community involvement and, if desired, a path to employment.

Service Monitoring - Review of services and supports identified in the ISP to ensure they are being provided as specified as well as the individual's satisfaction with the supports and desired outcomes.

Support Considerations - The description of "how best to support" the individual in specific and various environments

Team - Consists of SSA, providers of supports, family, friends and any other person the individual requests to participate in the development, implementation and monitoring of their ISP.

Waiver Services - Any service that is funded by Home and Community Based Service (HCBS) Waiver dollars. This includes Individual Options (IO), Level One (LV1) and Self-Empowered Life Enhancement (SELF) Waivers.

1. Any eligible individual, parents of a minor child or guardian may contact SSA/Intake and Eligibility regarding applying for services under Procedure 2-ALL-ALL-0454 (SS) Eligibility Determination and forward request for SSA services to the SSA Coordinator.

2. If the only services being requested are service monitoring and advocacy, an ISP Profile Page and Individual Support Plan Agreement form will be utilized in place of the Individual Support Plan format.

3. SSA Coordinator will assign a SSA and the Support Planning/Discovery process will begin.

4. When making initial contact, the SSA shall inquire about who the individual wishes to include in the Discovery Process and ISP process. They will be offered the opportunity to designate a person who can act as an advocate for them. This will be noted in the ISP.

5. Three to four weeks prior to the Outcomes meeting, a notification letter will be sent to the person receiving services and their guardian/family when applicable.

6. One week prior to the ISP meeting, the SSA will have completed the Discovery process to the point where a plan can be developed and Medication Assessments if applicable.

7. Five (5) days prior to the ISP Meeting, the SSA will share draft Discovery Results with the individual and their team to develop outcomes.

8. During the Outcomes meeting, the Service Coordinator will use the Individual Support Plan to document pertinent information/minutes to the meeting. Prior to the end of the meeting, the Service Coordinator will review what was discussed during the meeting and poll each person present to obtain their agreement or disagreement with the recommendations of the team. The person receiving services and/or their guardian will then sign and date the Individual Support Plan Agreement, indicating they agree with the plan and acknowledging the explanation of and receipt of the Grievance Due Process and Medicaid Due Process Rights. If the guardian was not able to be present at the annual ISP meeting, the SSA will send them a copy of the ISP and the Guardian ISP Approval/Consent for Services Form for their approval.

9. If risks are identified that require Behavioral Strategies be included in the Risks section and if needed Human Rights approval is received for any restrictive measures.

<p>10. Service Coordinators will ensure the following documents are completed at the Outcomes meeting:</p> <ul style="list-style-type: none"> A. Bill of Rights B. Medication log/Self Med Assessment (if indicated) C. Consumer Satisfaction Survey D. Free Choice of Provider E. Release(s) of Information F. Freedom of Choice (DoDD) form for Waiver Services G. Review of DDP and AAI as needed H. Consent to Request/Release Information Form (as needed) I. Team Meeting Sign-In
<p>11. Outcomes meetings will be scheduled at least sixty (60) days prior to ISP implementation date.</p>
<p>12. At the Outcomes meeting, the team will define the outcomes and support considerations to accomplish the outcomes and complete a cost sheet related to all support considerations that are paid supports.</p>
<p>13. Within five (5) days of the meeting the SSA writes draft outcomes and support considerations and distributes to the team for feedback along with the upper part of the Action Plan(s).</p>
<p>14. Within five (5) days of the Outcomes meeting, the provider(s) will return the Action Plan(s) for inclusion in the ISP.</p>
<p>15. Within five (5) days, costs are finalized and a Cost Info Sheet is submitted to Medicaid Services for LOFL and HCBS services</p>
<p>16. Within forty (40) calendar days of the Outcomes meeting, the SSA will submit the completed ISP and all of the corresponding paperwork to the Service and Support Administration Coordinator for review and approval.</p>
<p>17. Within three (3) calendar days, the Service and Support Administration Coordinator will review the ISP and return it to the SSA for revisions if needed.</p>
<p>18. Within two (2) calendar days, the SSA will make any revisions if needed and submit the ISP to the Service and Support Administration Coordinator for signature.</p>
<p>19. The SSA will then submit the completed and signed ISP to the Service and Support Administration Secretary for copying and distribution to the person receiving services and/or their legal guardian and all providers of service. All providers will receive verification that the person receiving services and/or their legal representative received a copy of the ISP (copy of the cover letter). All providers will receive the completed ISP no later than fifteen days prior to implementation.</p>
<p>20. The Qualified Intellectual Disability Professional (QDIP) will be responsible for the coordination of the service planning process and for the development of the ISP for individuals residing in an Intermediate Care Facility for Persons with Developmental Disabilities (ICF/DD).</p>
<p>21. All providers of service must track and document services provided in the ISP on the appropriate form. The SSA will review the Learning Logs to ensure that services are being delivered as stated in the ISP, that progress is occurring, and that the action plans/support considerations are still applicable.</p>
<p>22. The ISP will be reviewed as deemed appropriate at the outcome meeting or more frequently in a crisis situation and can be amended at anytime based upon a documented need or request. A special team meeting will occur and the ISP will be amended any time there is a significant change in the condition/circumstances of the person receiving services. The person receiving services and/or their guardian, or any team member may request that the Service Coordinator hold a special team meeting at anytime. If an amendment to the ISP is needed, the Service Coordinator will ensure that the provider has the amendment five (5) calendar days prior to implementation.</p>
<p>23. One process shall be used to develop the ISP (one person/one plan) and the ISP shall be based on assessment of needs and interests identified by the person receiving services. Discovery Tools shall include Essential Health, Day to Day Living and Employment and may include any other Discovery Tool that is relevant to the individual.</p>
<p>24. When services are funded through Medicaid, appropriate approvals shall be obtained.</p>
<p>25. As required by funding source, budgets for services will be established based on the individual's assessed needs and preferred way of meeting those needs.</p>
<p>26. Persons receiving services will be assisted by the SSA to make provider selections.</p>
<p>27. The SSA shall ensure that all services are effectively coordinated and provided by the appropriate providers.</p>
<p>28. Any changes to the ISP will not be implemented prior to obtaining consent from the person receiving services and/or their legal guardian. All changes must be received by the Service Coordinator for inclusion in the ISP prior to implementation. If the revisions change the content of the ISP, the SSA must amend the ISP prior to the implementation.</p>
<p>29. The SSA shall document all service coordination activities in the individual record with a case note utilizing the Targeted Case Management documentation system immediately upon service provision. Each entry shall be dated and signed by the SSA. Electronic signatures shall follow procedure 02-ALL-ALL-0580 (CP)</p>

Reference: OAC 5123:2-2-01
OAC 5123:2-1-11
OAC 5123:2-9-19
ORC 5123.62

Procedures: 02-ALL-ALL-0580 (CP)
02-ALL-ALL-0456 (SS)

Forms: 03-ALL-ALL-0294, 03-ALL-ALL-0371, 03-ALL-ALL-0405, 03-ALL-ALL-0412, 03-ALL-ALL-0534, 03-ALL-ALL-0535,
03-ALL-ALL-0536, 03-ALL-ALL-0540, 03-ALL-ALL-0824, 03-ALL-ALL-0976, 03-ALL-ALL-0977, 03-ALL-ALL-0978,
03-ALL-ALL-0979, 03-ALL-ALL-0980, 03-ALL-ALL-0981, 03-ALL-ALL-0982, 03-ALL-ALL-0983

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