



For Review and Comment Purposes Only – Not for Implementation
DEVELOPMENTAL PROGRAMS BULLETIN
COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF PUBLIC WELFARE

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SUBJECT:

Individual Support Plan Process

BY:

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SCOPE:

Administrative Entity (AE) Administrators/Directors for Medicaid Waiver Participants
County Mental Health/Mental Retardation (MH/MR) Programs for Individuals receiving
Base-Funded Services or residing in an Intermediate Care Facility for the
Mentally Retarded (ICF/MR)
Supports Coordination Organizations
Providers of Mental Retardation Services

PURPOSE:

The purpose of this bulletin is to distribute the Office of Developmental Programs (ODP's) requirements for Individual Support Plans (ISPs). These policies identify the standardized processes for preparing, completing, documenting, implementing, and monitoring ISPs to ensure they are:

- Developed and implemented using the core values of *Everyday Lives*, and Positive Approaches and Practices to result in an enhanced quality of life for everyone who receives mental retardation services and supports in Pennsylvania;
- Developed according to the ODP standardized business process expectations; and
- Compliant with Centers for Medicare and Medicaid Services (CMS) plan assurances and requirements.

BACKGROUND:

The Mental Health and Mental Retardation Act of 1966 (MH/MR Act) provides the statutory basis for the development of community-based services for people with mental retardation. Section 301(d) of the MH/MR Act (50 P. S. § 4301(d)) requires County Mental Health and Mental Retardation Programs to provide access to base-funded services (up to the availability of State allocated funding). The County Mental Retardation Services regulations, 55 PA Code Chapter 6201, were issued under Section 201(2) of the MH/MR Act. The 6201 regulations require the assessment of individual and family needs, and the development of a life management plan for individuals and their families.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The Appropriate Developmental Programs Regional Office

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In 1991, ODP, formerly known as the Office of Mental Retardation, convened a planning retreat with members of its Planning Advisory Committee (PAC) for the purpose of developing an overall vision for Pennsylvania's mental retardation service system. The PAC, which was the first advisory body to ODP to include people with disabilities and families as full participating members, focused its work on what people with disabilities and families said was important to them and what kind of supports they needed. The result of the PAC's efforts was *Everyday Lives*, published by the Department of Public Welfare in 1991.

Everyday Lives was updated in 2002 (*Everyday Lives: Making It Happen*) and includes the core values of Choice, Control, Quality, Community Inclusion, Stability, Accountability, Safety, Individuality, Relationships, Freedom, Success, Contributing to the Community, Collaboration, and Mentoring. These values exemplify the attributes that everyone with or without disabilities should have in their lives.

Since its publication, the values and vision expressed in *Everyday Lives* have provided the framework for planning, policy development, service design and all related activities in the mental retardation service system. As the mental retardation system evolved with the *Everyday Lives* philosophy, concepts such as Person-Centered Planning, which focuses on the individual's strengths, choices, and preferences; and Positive Approaches, which defines the context in which we provide needed clinical and behavioral interventions to teach individuals the skills they need to make safe and appropriate choices; and Self Determination, which gives persons receiving services more control and responsibility in choosing how they want to live their lives, have emerged through the grassroots efforts of people receiving those services and their families, friends and advocates to enhance, and better define the planning process.

Individual Support Planning is based on those very same self-determination philosophies and concepts of *Everyday Lives*, Person-Centered Planning and Positive Approaches and captures the true meaning of working together to empower the individual to dream, plan and create a shared commitment for his or her future.

DISCUSSION:

The following are ODP requirements related to ISPs:

- ISPs must be based on assessed needs¹.
- **ISPs must be developed using a person-centered planning process to capture information including health and safety information and the individual's preferences and desires, all of which leads to ensure that appropriate services and supports are identified and implemented.**
- ISPs must list all unpaid natural supports and funded supports to meet assessed needs.

¹ Needs for Waiver participants must be identified using the ODP standardized needs assessment, the Supports Intensity Scale™ and Pennsylvania Plus, as per the rollout strategy established by ODP.

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- **ISPs must be completed using the standardized format and entered into the Home and Community Service Information System (HCSIS) for anyone who has been found eligible for Mental Retardation services and is receiving at least one funded service, including Supports Coordination (regardless of the funding stream). Note that Targeted Service Management (TSM) and Base-funded Case Management services are not required to be documented on ISPs at this time.**
- **An Abbreviated ISP Version may be completed for any individual receiving under \$2,000 in non-waiver services.**
- The standardized *ISP Planning Process Participants' Signature Page* will be utilized to validate participants' activities in ISP development.
- Approved ISPs must be distributed to all appropriate team participants.
- ISPs must be developed, approved, and services authorized prior to the receipt of mental retardation services.
- Supports Coordination Organizations must ensure that ISPs are accurate, prior to submission for approval and authorization.
- Counties/AEs must ensure that ISPs are appropriate to meet the person's needs.
- ISPs are updated, approved, and services authorized at least annually and/or when warranted by changes in the participant's needs. The AE or County is responsible for approval of ISPs and authorization of services. The ISP must be approved with all services, with the exception of TSM and Base-funded Case Management, authorized in HCSIS.

PROCEDURES:

The attached ISP Manual outlines the procedures for development of ISPs for individuals receiving mental retardation services, as well as the roles for individuals receiving services, family members, responsibilities of County Programs, Administrative Entities, Supports Coordination Organizations, Supports Coordinators, and other providers of service.

Licensed Programs:

For regulated services 55 Pa. Code Chapters 2380, 2390, 3800, 6400, 6500, the ISP will be the sole source document for regulations regarding assessment and planning. In addition, provider agencies are not obligated to develop their own separate Individual Program Plans (IPPs). However, providers are still responsible for completing assessments, evaluations and any information related to the individual that will impact the contents of the ISP and promote the ISP outcomes. This information must be submitted by the provider, in a timely fashion, to the Supports Coordination so it may be reflected in the ISP. It is the responsibility of all team members through a collaborative

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effort to ensure the ISP is responsive to any changes in needs and reflective of current information. Licensed provider questions regarding compliance with individual plans should be directed to the appropriate Regional Licensing Administrator.

If the ISP meets or exceeds the requirements outlined in regulations, then the provider has fulfilled the IPP regulatory requirements. If the ISP does not contain information required by regulations, then the provider must maintain documentary evidence that the information required by regulation was submitted to the Supports Coordinator as part of the ISP process.

Attachment

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