

**Bryn Peterson (DSPD)** Presented the Utah Employment and Community Inclusion Survey Findings available in the slide deck.

## Discussion Questions: What does your provider staff training look like for employment and community learning?

## **Providers Discussion Summary:**

- Association of Community Rehabilitation Educators or ACRE training is invaluable, but a barrier to getting job coaches started without supervision.
- One day job coach training is beneficial. It was really hard before that was developed. VOcational Rehabilitation (VR) used to have a 3 month window to get training which helped. They can shadow a trained staff.
- Having to do frequent check-ins and directly supervised staff is hard.

Jeanine Zlockie (SELN) - How long does that take to get certified? Self paced or designated time?

- Training is offered in person and online depending on the month. ACRE is 40 hours and Workplace Supports is 8 hours. Both have training and self paced elements to complete the full training.
- An in person training was not helpful for those across the state.

Jeanine Zlockie - Ample options for training would help the training go smoother.

• After the initial amount of job shadowing, they can go on their own. Training is once a month, so when hiring it could be a month out before new staff can get trained.

**Bryn Peterson** - When staff training and resources are the barrier, how have you overcome it? Each provider implements differently, are there small things you are doing differently that help?

• Can we offer training ongoing instead of monthly? Colleges have all courses online.

**Jean Winsor (SELN)** - Yes, some states have done that. Could Utah be more open with who provides the training?

• That would be great. We have a Pre-ETS contract with VR and can't bill until staff are trained. It is a low hanging fruit that could be implemented.

**Bryn Peterson** - The time to participate in training is a barrier. Are there other barriers to finding and keeping jobs or community access too?

• A culture change is needed for employment. VR moving people into position quicker would help significantly and having other non Utah options for ACRE. We have tried to look at employment and community integration as a culture shift in training for staff. Training day service staff on community inclusion and not so much focus on the day program setting. Also looking at employment as an option everywhere they go. No more focus on an 18 hour residential and 6 hour day services, but looking more at the person for opportunities that fit that person. It is



really hard to do that with the 18 hour residential and 6 hour day service format in place as the funding structure, but we are moving in the right direction.

**Bryn Peterson** - What has been easy and difficult in training staff to make that culture change? Out of a building and into the community? I am okay with hard answers.

• Right now, having staff. We have larger group sizes which is more difficult. With both day and residential services it is easier to say, "I don't help with employment, day services should." We try to train programs and not by service codes. Seeing a shift from caretaking to encouraging independence and helping people to drive their own choices. Looking at what are their goals in day services instead of Monday you go here, Tuesday you go there, etc. We are looking at individuals and being more person centered.

**Jean Winsor** - Follow-up question, is the service plan set up in a way to help the staff navigate the balance of their relationship with them?

• Currently there are limits, but the new plan in process will be better. I cringe when people say things are going well, so let's not change anything. Being stagnant is not what we want.

Jean Winsor - It is hard to read between the lines as day service staff.

• It is hard to run employment out of a day service setting. Employment is its own animal. Hard to do it without other people to support.

Bryn Peterson - What indicates to you as a provider that your staff are doing quality work? You hinted at caretaker roles moving towards trying to develop interests and skills. From a provider level, what does that training look like and how do you know they are or are not providing quality services?

**Jeanine Zlockie** - When a person is out and about in town doing their thing with a provider, is there an expectation that staff are looking for opportunities if someone has an interest in volunteering or other things that could lead to employment? Do those match with work in the building, such as community mapping? This could lead to a changing circle of support and opportunities for new ideas from experience with the person to help them get on board. How do you all think about that in your work?

• We are community based, but could do better at connecting. We tour a new business once a week. Exposing people to other options opens the person's mind and then they tell their families. It also opens staff minds of what the person could do too. Businesses tend to be pretty open to this in their experience.

**Jeanine Zlockie** - Tour a business in your community. Some may live in the same or different place. Bringing people to connect with their community.

• We have formulated intentional teams in scheduled outings that are tracked and measured to demonstrate community access. Personal profiles are all in one place with scheduling. This started 2-3 months ago. It shows integration is happening and we can monitor performance. It is



concrete and thought through. Teams discuss what happened last week, plan for next week, and anything else. Good infrastructure. We want to link that to billing and are willing to take that risk. Then marry it into strategic planning with board support. Intention to be what an HCBS should be.

**Jeanine Zlockie** - Intentionality that people are getting out and matching based on their preferences. Is another step in the journey to analyze the data to see who and how many move to employment?

• Employment Preparation Services (EPR) has separated employment and day services. Outreach for day services will be volunteer and if they find a job absolutely, but quite separate. Personal profile is a continual check in on choice and needs of people served.

**Jeanine Zlockie** - Separate services make sense, but how do you make connections with a person and remember when you did this and now there is a job in that area.

- We know our individuals and some people don't want to work due to age or medical or family preference, or many other things that play in. Honoring that is important too because HCBS allows for that. We offer a sheltered workshop and employment in the agency. Why can't I be an employer? We set up a system to truly measure performance based on a person's plan.
- Are you asking for day or employment services? Outcomes for people in employment services are clear and measurable, if someone is placed in a job. Days services are specifically for people not interested in employment and then referred to employment if interested.

**Jeanine Zlockie** - We only know what we know. A friend may pull me to a class and then I am interested and go back. There may be opportunities where people who don't want to work have an experience that changes their mind and they want to get paid for that.

- Employment services staff go to day services and talk about what a job is. They may not know. Informed choice is needed. What is a job, what does it take and then finding out.
- The Pre-ETS program is phenomenal. Upstream to engage in job exploration in high school and informed by customized employment. More difficult for those well into adulthood to reach informed choice. How do you interweave exposure and experiences in billing?

Jeanine Zlockie - What does that mean for billing?

• We have an antiquated billing system. Changes are embedding in the medicaid system that doesn't necessarily map to codes available to innovate. You are putting yourself at risk for not getting reimbursed. We are interested in figuring that out. Essentially, we are forced into a world very different from what we built in the beginning. Scary places for us to go because the sustainability of our business model is at risk, can we survive if we do this? Revenue doesn't match what we are being required to do. It is change. And want to share impact with funding agencies.

**Jean Winsor** - This is a progressive group. There are other providers more resistant. What would help to bring them along so all can benefit and move forward?



- Gathering of best practices to demonstrate that you won't hurt yourself if you fall. You can do these things and they will be supported. We are an old and large agency so we have some luxury to be more experimental and able to risk loss. Direct involvement or personal touch by the state to listen to concerns and address those would be beneficial. These are great communication sessions. We are not feeling threatened and we feel listened to.
- EPR information felt like a guiding light, but there is still confusion around that. We are not a sheltered workshop, but EPR is in the middle and not sure if it is applicable.

**Jeanine Zlockie** - Is it the service definition or unit structure? Let's go deeper on the billing issue that stops you from diverting support to the community or what you are doing. Is it an administrative burden with invoicing, is there enough service definitions to cover aspects, is a day rate tying you into a schedule?

- We can't bill medicaid twice in the same day. With that comes a lot of limitations. Huge barrier to mixing up what someone is doing throughout the day.
- As a support coordinator, it has to take a lot of work and time to make changes to budgets. They are not fluid, you get locked into service codes. I wish we could be more fluid, but understand why we can not. The system doesn't allow creativity and if you are creative it is likely you have to go back and correct.

Bryn Peterson - Thank you, this is a safe place and we will take back your concerns. What does your provider staff training look like for building natural supports? Coworkers, supervisors, or others outside of paid job coaches. How have you expanded networks in the community with local movers and shakers?

**Jeanine Zlockie** - There is a line between dignity of risk and being a caretaker. Are there ways that a person meets someone in a class and then could the person be dropped off or other natural ways for autonomy?

- In a new job there is at least one person that seems more interested in the person. We bridge that, but can't depend on that as the coworker turnover is happening too. Used coworker support before, but the person doesn't work there forever.
- A pervasive part of the mission and culture is to permeate in how you talk about what you do. Our Autism program is for natural support building. Engaging community through universities, businesses, planned parenthood doing relationship classes, etc. It is intensive and expensive, supported through fundraising. It is compelling. We subsidize supported employment because funding doesn't cover what we want to do.

**Jeanine Zlockie** - Making friends and connecting, think about those terms. Services are engrained for years and years that certain things happen in that service, but what if someone wants to meet up with a friend from day services another time of the day? All those things need to come together, culture and structure shift, for real change to happen. Think broadly on this and on the issues you have.



**Bryn Peterson -** An area we want to think about is best practices and strategies on employment and inclusion.

**Jeanine Zlockie** - The last hour has been extremely beneficial. Thank you for being candid so we can talk and learn from each other. The ability to be fluid, rates, training, other things getting in the way causing resistance to change? Besides this is what we have been doing and know?

• We have spent a lot of years and care deeply about the people we serve and do everything we can to help them. We keep getting beat up that we aren't doing it right. Feels like a boxing match.

**Jean Winsor** - Is there a particular place you feel most whacked around by? Is there a specific place in the system that you are not being seen in the work that you do?

- We worked really hard to end sheltered workshops and separate work and day service, now we are being put into a role that doesn't fit with EPR. People don't want to be pushed to work and not have their choice honored. There is a lot of misinformation. How can we really allow a choice? People feel they have to get a job no matter what.
- I second that.

**Jeanine Zlockie** - On a positive note, where we are today with ARPA spending plans states are getting funding approved to address HCBS. Many states are addressing labor shortages and grants to help providers transition from subminimum wage. Employment is a right, people need experiences to make a decision. Federal funding could really make an impact in the years to come.

**Bryn Peterson** - There is room and resources that we aren't going to see every year that we have right now. We want to give you an update on what we are trying to do.

- → We are discussing transportation options and are included in UDDC efforts on transportation options.
- → We have provided resources for navigating Vocational Rehabilitation with the Employment Services Workflow.
- → We are creating resources to help a person develop natural support.
- → We are working with CMS to get American Rescue Plan Act (ARPA) funds approval and developing implementation strategies with Medicaid on our ARPA plan.
- → We are engaging with the State Employment Leadership Network (SELN), the National Center on Advancing Person-centered Practices and Systems (NCAPPS), and the National Association of State Directors of Developmental Disabilities Services (NASDDDS) on how else we can help you retain direct support professionals.

**Amy Huppi (DSPD)-** We want to support and collaborate with others working on the staffing crisis through connecting with other states. The concern has been elevated to the governor.



**Jean Windsor** - Some actionable items are overarching examples of best practices, not just at the individual level, but in the service plan and how it is billed for that endorses flexibility. This could help with solid direction in the field and examples of flexibility.

**Jeanine Zlockie** - Adding on, flexibility in training which could be a low hanging fruit. Informed choice through connecting with experience, billing codes, are some of the threads coming through today. We appreciate the dialogue and honesty to build a partnership.

**Bryn Peterson** - Additionally, what could be the focus of the next 30 days and what could be the focus of the Community of Practice? Others shared previously. We hope to help explore different avenues to get people in the community and Competitive Integrated Employment (CIE). We hope to accomplish getting people out there to work. We want to improve service delivery practices in a person-centered way and the ability to work with DSPD and others like VR. Any others?

• I would like to see where we are continuing to address those things and not just meeting and meeting. How are we addressing them?

**Bryn Peterson** - We want to see action and we can do that in the next month or so. So many things are going on right now, should we take a break for the next two months?

• Yes, it is hard to get to a meeting with all the direct care needs going on.

The Community of Practice will not meet in November or December. It will resume meeting in January 2022.