

**Department of Developmental Services  
Annual Plan for Family Support  
State Fiscal Year 2010 (July 2009-June 2010)**

**A. Background**

The Department of Developmental Services (DDS), formerly known as the Department of Mental Retardation, has been providing flexible family support services since 1995. These services are provided to children and adults living at home with their families who are eligible for services from DDS. In July 2002, Chapter 171 of the Acts of 2002, "An Act Providing Support to Individuals with Disabilities and Their Families," was signed into law. This legislation specifies that all named state agencies, with substantial consultation from families and individuals with disabilities, need to prepare and submit on an annual basis an individual and family support plan that explains how the department intends to provide flexible supports to families and individuals. This is the seventh Annual Plan for Family Support to be submitted by the Department.

DDS is organized into four regions with Regional Directors and 23 Area Offices with Area Directors, all under the umbrella of Central Office. Each DDS region has a Director of Family Support, who works with the Assistant Commissioner for Policy, Planning and Children's Services, the Central Office Director of Family Supports, and the Project Managers for the DESE/DDS Program (formerly know as the DOE/DMR Project) and the Autism Division. In each Area Office there is a Children's Coordinator who generally works with children under the age of 18 years and their families, and a Transition Coordinator who works with individuals generally between the ages of 18 and 22. Individuals over the age of 22 who have met the adult eligibility criteria for DDS services are assigned a Service Coordinator and participate in an Individual Service Planning process.

**B. Overview of Family Support**

The Department provides an array of Family Supports designed to enable children and adults to live with their immediate family and be welcome, contributing members of their communities.

- The program offers a flexible array of supports and is administered based on the construct that families are experts regarding the strengths, competencies, capacities and needs of their family members with a disability, and are in the best position to know what will help them support their family member with a disability.
- The program is designed to support families to keep their family member at home and to avoid residential out-of-home placement.
- The services supplement generic and natural supports, and do not supplant other insurance or financial entitlements.

The primary goal of this array of family supports is intended to:

- Develop the family's natural capacity to meet the needs of family members
- Offer additional supports such as staff resources, goods and services, and financial assistance, and
- Enhance the capacity of communities to value and support people with disabilities and their families.

### **Administration of Family Supports**

The Department has historically had a network of about 72 provider agencies statewide with whom contracts have been established to provide family support services. *Family Support Guidelines and Procedures*, last issued in 2002, serve as the foundation for the delivery of these services. This document describes the goals and principles, the types of family support services available, and details the operational requirements. In particular, these *Guidelines* define the ways families are able to use their flexible funding allocations, which includes the categories of allowable expenses, prohibited expenditures, and purchases that require prior approval, such as a home modification for accessibility reasons. All Family Support provider Agencies are evaluated annually on Performance Outcome Measures designed around the key family support principles and core service elements.

In FY '09 the Family Support Appropriation Account in the state budget was funded at approximately \$55 million dollars. This account includes funding for both contracted family support services and other types of services supportive to families and individuals living in the community (such as clinical teams, assistive technology, translation services, etc.) totaling about \$45 million dollars, as well as other individual and residential supports for adults living in the community which makes up the difference. This appropriation included an additional \$950,000 of new funding for family support services.

Fiscal year '09 was challenging due to the serious downturn in the economy and revenue shortfalls that had a direct impact on the state budget. The Governor implemented 9C budget reductions in October 2008 which resulted in some service reductions and limits on the use of the new family support funding resources. Additionally, the continued fiscal challenges facing the state have had a significant impact on family support funding for FY '10. The final budget has partial funding for family support with a total of \$46.5 million in the appropriation account, with \$35-36 million of this for family support and the remainder for community support services. This amount is an overall reduction of about \$10 million dollars. This will result in the a) elimination of certain family support services; b) a reduction in the availability of some services; and c) a decrease in the type or frequency of service some families will be receiving.

The Department understands and acknowledges the challenges these budget reductions pose to families due to the loss of needed and beneficial services, and the Department, in consultation with others, has had to make very difficult decisions about how to best prioritize and use the resources available. During this past year, families and providers have done a remarkable job sharing their experiences and informing legislators and

policy makers about the importance and benefits of family support services in helping them care for and support their family member with a disability at home.

### **C. Array of Family Support Services and Individuals and Families Receiving Services**

This section describes the major types of family support services and programs that are offered by the Department and the number of families and individuals who benefit from these services. In our current family support system approximately 11,500 adults and children and their families are receiving services in the DDS funded family support programs across the state. It is important to note that many individuals receive more than one service within Family Support. For example, a family might receive General Family Support and also use Planned Facility Based Respite to meet their needs.

Family Support Services fall into three major categories:

1. General Family Support including information and referral, case coordination, and flexible funding.
2. Enhanced Family Support including intensive flexible family support (an intensive case management program), and a program for those who are medically fragile, and
3. Specialty Family Support including planned facility based respite, after school programs, and social/recreational programs such as summer and vacation camps.

#### **General Family Support Services:**

This is the largest family support service offered and includes two major components: the delivery of **Core Services** such as information and referral, family support coordination, support groups and training, and administration of **Flexible Funding Allocations** for individual families. This past fiscal year approximately 4,500 adults and 5,500 children received these General Family Support Services. About 25% of the families currently receiving services are culturally diverse, with Latino/Hispanic families representing the largest group at 11%. In FY '10 approximately the same number of families will receive Family Support Coordination and other Core services, however, a smaller number of families, will receive flexible funding allocations due to the budget reductions. Allocations of flexible funding resources will be prioritized to meet the needs of families of adults and children who are assessed and determined to have the greatest needs.

**Family Support Coordination** provides individualized information, guidance and support to families to address their needs, connect them to potential resources, assist with problem-solving, and help them navigate the service system. **Flexible Funding allocations** are small individual budgets provided to families that enable them to choose and purchase the services which will be of most benefit to their family from a menu of allowable service options.

There are two options available to families to manage their flexible funding. The first is the stipend option, which provides families a specific allocation to directly purchase allowable goods and services. The second option, direct provider agency payments, allows the family to direct their allocation to the Family Support Provider agency to pay

for goods and services on their behalf. This can include providing or arranging for agency-paid staff and support workers to provide for respite or other in-home services, and assisting families to identify, and/or hire and train their own respite workers. Both options enable families to tailor their supports and purchases to best suit their needs within a set of guidelines established by the Department.

The most common uses of flexible funding are for:

- respite, usually in the family home, which provides short-term relief for caregivers;
- support for participation in integrated social and recreational activities in the community;
- purchase of adaptive equipment and materials not covered by other insurance programs;
- Individual skill building activities.

The Intensive Flexible Family Supports (IFFS) Programs are designed to help families who are experiencing severe stress which could lead to the child being at-risk of an out-of-home placement. The service consists of an intensive case management service designed to help families integrate the variety of available resources to support their family member in crisis, and flexible funding to purchase additional supports or goods. This past fiscal year about 475 children between the ages of 3-18 and their families received services through the 22 programs statewide. It is expected that in FY '10 approximately the same number of individuals will receive these services as the funding amount for this program is planned to remain the same.

The Medically Complex Programs support families who are caring for children with significant cognitive, physical, and complex health care needs who are living at home. It is a comprehensive wrap-around support which consists of an intensive medical wrap-around case management activity that helps families integrate the variety of resources and supports they are receiving and offers flexible funding to assist the family in the purchase of additional supports and goods not covered by health insurance. This program complements and is supplemental to other MassHealth, state plan and third party insurers. This program provides vital assistance to families who need help in coordinating all of the in-home care they receive, which helps to prevent pediatric nursing home placements. Last fiscal year about 225 children between the ages of 3 and 18 and their families received these services from the five programs geographically dispersed across the DDS regions. Additionally, these programs received some new funding mid-year to expand services to young adults from ages 18 to 25 going through the transition process from school to adult life. In FY '10 there is full funding for this expanded service that will serve approximately 100 young adults and their families, in addition to the 200-225 children who receive services through this program.

#### **Specialty Family Support Projects:**

The Autism Support Centers provide information and referral services to support families with a family member on the autism spectrum. The services are available to all DDS eligible families, although most of the users are families with children on the spectrum.

They can also assist families while they are going through the eligibility determination process. The Centers offer workshops, trainings, newsletters and sibling support groups to families. There are a total of seven Autism Support Centers statewide of different sizes with at least one in each DDS region, including two in the Central/West region and three in the Metro region. In FY '09 approximately 7,000 families had some contact with and received information from these Autism Support Centers. It is important to note that these Centers also receive funding from the Autism Division to provide additional services. Funding for the Autism Support Centers in FY '10 has been reduced by about 1/3<sup>rd</sup> which will have an impact on the scope of services provided and the number of families who will be able to receive services.

Planned Facility Based Respite offers planned out-of-home respite services for either children or adults to provide short-term temporary relief for families, and includes overnight, weekend, and/or vacation stays. These programs also provide individuals with a variety of recreational, social, cultural and/or educational activities during their stay. There are two planned facility based respite centers for children in two locations across the state and eighteen centers for adults. Last fiscal year about 400-450 adults and 180 children used these Planned Facility-Based Respite Services annually. Due to the budget reductions, in FY '10 there will no longer be any funding for the adult planned facility-based respite programs, and the funding for the two children's centers will be at about 60%, thus it is anticipated that approximately 110-120 children and their families will be able to utilize this service.

Camp Programs offer integrated summer day camping experiences primarily to children. Most of the camps also serve non-disabled youth and adults in the community. During last fiscal year about 1900 children participated in a summer camp program. In FY '10 no funding will be available for these programs within the current family support budget.

Social/Recreational Programs promote an individual's social and emotional functioning while providing respite to families who care for their family member at home. Social/recreational programs facilitate the development of interpersonal relationships, enhance daily living and interpersonal skills and provide greater community inclusion opportunities. On average about 300 adults and 225 children participate in these programs annually. In FY '10 no funding is available for these programs within the current family support budget.

After School Programs focus on integrating children with disabilities into community programs and activities for non-disabled children. Approximately 200 children participate in these programs annually. In FY '10 no funding is available for these programs within the current family support budget.

Family Leadership Development provides education, mentoring and support to families to enable them to care for their family member. A major focus is a comprehensive and intensive family leadership series which provides information and education about "best practices" for services for people with disabilities. A second goal is to help families gain knowledge about policy making at the local and state level to help them assume

leadership roles in their local community and the disability community. In FY '09 about 120 families participated in this comprehensive leadership series and more than 550 families participated in other types of family leadership activities. In FY '10 this program will be funded at approximately 60% of last year's level.

**The Autism Division** at DDS, established in 2005, oversees a small model Autism Waiver Program. In fiscal year '09, the Division received about \$4 million dollars, though the year started with \$6 million prior to the Governor's reductions that occurred in October 2008. Of this total budget, the Medicaid Home and Community-Based Services Autism Waiver Program received an allocation of \$2 million to provide intensive supports for up to 110 young children with autism who meet the established eligibility requirements. Over 120 children were enrolled in the Program over the course of the year. These children receive a comprehensive package of services to address their identified needs of up to \$25,000 per service year. Some children have left the program due to issues related to loss of Medicaid, or turning nine, the age cap for participation in the Program. There are also staffing costs covered by this allocation as each child works with an Autism Support Broker and Autism Clinical Manager.

The remainder of the Division's funding provides some community based programs by supporting staff positions at the seven DDS funded Autism Support Centers, supports teacher training programs by autism specialty schools, and provides other social/recreational autism programs. These social/recreational programs have reached more than 1200 families. Community programming to train first responders through the Autism and Law Enforcement Education Coalition (ALEC), has been a very successful initiative and reached over 1800 individuals this past fiscal year, and will continue in the upcoming year. There has been a consistent budget since the inception of the Autism Division which reflects positively on the acknowledged need for services of this growing population of children with an autism spectrum diagnosis. In FY 10, the Autism Division's budget is approximately \$4 million. This budget allows the Autism Waiver Program to provide services and staffing supports to at least 120 children. The remaining budget helps to support infrastructure and community based programs at the seven state funded Autism Support Centers.

**The Department of Elementary and Secondary Education & Department of Developmental Services Community Residential Education Project (previously known as the DOE/DMR Project and now the DESE/DDS Program)** continues to be a successful collaborative initiative. This Program provides an increased level of support services to families to assist them in supporting their child's return from a residential school placement, or to provide additional supports to children who have been deemed as "at risk" for escalated service needs and a more restrictive educational placement. The intent of the Program is to increase family capacity to support their child in the home and community, as well as to provide an individualized plan of supports that promotes skill building, independence, and social integration across the spectrum of the child's home, school, and community.

At the beginning of the fiscal year '09 this Program was funded at \$10 million dollars, a 2 million dollar increase from the previous year. This increase in funding allowed the Program to begin to provide services to 110 new families who had been on the waiting list. However, due to the Governor's 9C budget reductions that occurred in October 2008, funding for the DESE/DDS Program was reduced by \$3.5 million dollars to \$6.5 million. As a result, all of the families who had been participating in the Program prior to July 1<sup>st</sup> had their annual service allocation reduced by 20%, and the newly funded families (110) remained at their initial funding amount of \$5,000. These budget and service reductions presented challenges to families and providers and DDS staff worked closely with families to assist them in making these changes.

During fiscal year 2009, 429 children participated in this program, including the 110 new participants who received partial funding. The Program data for FY 09 is based on the 319 fully funded participants. In total, 19 of the participants were assisted to return from residential school placements to their home communities, and 300 students utilized Program resources to obtain a variety of supports as an alternative to an initial residential special education school placement. There continues to be a high demand for participation in the Program with over 200 children on the waiting list. Participating families continue to provide very positive feedback about the services they can access through this Program and how beneficial these resources have been to more effectively support their children at home and to be meaningfully included in their communities and schools. The budget for the DESE/DDS Program in FY '10 has been reduced to \$5.65 million dollars from \$6.5 million which will result in some reduction in services to about 270 participants currently enrolled in the program who receive funding allocations of \$7,600.00 or higher.

#### **D. Process for obtaining substantial input from families on current family support services:**

The Department has developed and continues to evolve different approaches to seek input from families and individuals with intellectual disabilities in order to help assess the Department's current system of family support services and to get input on policy development and future directions which assist in informing the development of this Annual Plan for Family Support. Below are listed some of the key ways the Department obtained feedback and input this past year.

The Department's Statewide Family Support Council is one of the central ways ongoing input and consultation on services, practices, policies and needs is obtained. This Council, established in 2004 and comprised of parents from across the state who have children and adult family members with disabilities, advises the Department on issues that affect the well-being of families who have family members with disabilities living at home. Council members advise the Department on family support policies, services, and supports. The Council meets quarterly with the Commissioner and other departmental leadership staff. This past year the Council was also involved in numerous conference calls and provided important consultation when budget decisions needed to be made, both in relationship to the 9C reductions of \$3.5 million dollars to the DESE/DDS Program, and in FY '10 budget planning activities. Council members were provided information

about these budget situations and given different scenarios to respond to and provided consultation and recommendation about different courses of action. When the initial proposed budget for FY '10 was going to result in an almost complete elimination of family support services, the Council offered important input about what they viewed as the essential elements of an “infra-structure” of family support that needed to be maintained. Their guidance helped shape the plans that were developed to maintain a foundation of family support provider agencies to offer general family support coordination services with an emphasis on ensuring that some outreach and service capacity was maintained in diverse communities, as well as to fund several enhanced programs to meet certain specialized needs of individuals and their families. Council members also offered input and guidance on communication approaches with families. During the past five years the Council has evolved into an important vehicle for communicating the perspectives of families as policy and service decisions are being made.

The Commissioner and other Central Office leadership staff meet regularly with representatives of family and individual advocacy organizations to seek input and obtain feedback on services and future directions. This includes representation from the Arc, Massachusetts Families Organizing for Change (MFOFC), Advocates for Autism in Massachusetts (AFAM), the statewide self-advocacy organization, MASS, and the Developmental Disabilities Council. Monthly meetings are also held with the leadership of ADDP, the Association of Developmental Disability Providers.

*The Task Force on Young Adults in Need of Intensive Community Based Supports*, convened in 2007, continued to meet regularly this past fiscal year and completed a final report with recommendations that was shared with a broader advisory group to the Task Force and the Commissioner in May 2009. This Task Force, which focused on the needs of young adults who are medically complex and have intensive support needs, had strong family member presence and involvement with one of the co-chairs a parent and nurse educator and six parents who were very active members. This group was a great example of a collaborative partnership with families, Department staff and other state agency representatives. The final report will be shared with leadership staff at EOHHS and a plan to work on implementation of the recommendations is being developed. The work of this Task Force was highlighted in a presentation at a Commissioner’s meeting in June 2009 with about 100 of the Department’s managers, and two family members played a lead role in this presentation.

There is regular information-sharing and discussion with and input from the Department’s Statewide Advisory Council (SAC) and the regional and area offices’ Citizen Advisory Boards (CABs). During this past year there has been a strengthening of communication and closer partnership developed between the SAC and CAB’s which has been beneficial to both the members of these groups and the effectiveness of their work with the Department locally and statewide on behalf of individuals and families receiving services. These groups play an important role in helping to inform and educate the public and other decision-makers about the needs of individuals and families and the importance of and benefits of services and supports that are provided.

The Department has been engaged in planning for the development of three new Medicaid Home and Community Based Waiver Programs for Adults. Several meetings

were held with key stakeholder representatives (Arc, MASS, MFOFC, ADDP) to obtain their input on the array of services to be included in these applications, the options for participant- direction of services, as well as other implementation considerations. Some of this feedback was instrumental in the re-shaping of some of the services and addition of other services that were identified by stakeholders as important for inclusion.

The Department's Human Rights Office hosted five town meetings with the Commissioner in the spring of 2009 with over 600 participants in attendance in total. This forum provided the opportunity for a good exchange of ideas, concerns and information. Some of the key themes that emerged reflected the need for ongoing training on human rights for both provider staff and individuals with intellectual disabilities, concerns about guardianship and individuals seeking more meaningful opportunities for participation in their local communities.

Strategies and efforts will continue to evolve, through both organized and informal mechanisms, to gather ongoing feedback about the Department's array of family support services and the implementation and effectiveness of this Plan.

#### **E. Focus Areas: Review of Activities & Accomplishments for FY '09 and Proposed Goals/Initiatives for FY '10**

**I. Family Empowerment:** Opportunities for families and individuals to be involved in the development of agency policies and procedures, program development, and evaluation of services.

##### **Activities/Accomplishments:**

- Active role of the Statewide Family Support Council and representatives of family organizations in providing input and consultation to the Department to help establish priorities in the budget planning process and when decisions needed to be made about how to implement necessary budget reductions.
- The successful work of the *Task Force on Young Adults in Need of Intensive Community-Based Supports* including the development of a final report and recommendations. This Task Force had strong family involvement in leadership roles as co-chairs and members.
- Family member and self-advocacy input was obtained on the development of services and models of service in the new applications for the Home and Community Based Services Program for Adults the Department will be submitting to the Centers for Medicaid and Medicare for approval.
- In response to legislation passed in FY '09 to promote the development of self-determination in the Department, a cross-stakeholder advisory group was convened to complete a review of the Department's current practices and develop a report with recommendations on ways to expand models and options for self-determination for funding services and supports for individuals receiving services from the Department.
- Implementation of quality assurance activities for participant in the Autism Waiver Program for children including in-depth interviews with a sample of family members.

**Proposed New Activities/Initiatives:**

- Family Support services need to go out to bid in FY '10 for implementation in FY '11 and the Department will work with the Statewide Family Support Council and other stakeholders to obtain input in the re-design of these family support services to develop a framework for procuring these services. Part of this planning process needs to focus on the development of a long-range plan for a system of family supports in order to have the array of resources needed to assist families with both adult family members living at home as well as supporting families of children, particularly as the number of families caring for family members at home continues to increase.
- Continued development of the partnership between the Department and the Statewide Family Support Council to obtain input and guidance on policy development and the support needs of families. New Council members will be recruited to fill vacancies and the addition of sub-committees to pursue more focused work will be explored, such as a committee to work on implementation of the recommendations developed by the *Task Force on Young Adults in Need of Intensive Community-Based Supports*.
- There will be increased opportunities for participant-direction of services for individuals and families through the adult Home and Community-Based Waiver Programs. The children's Autism Waiver Program has been designed and implemented using a participant model of service delivery that provides families with the options of budget and employer authority. Participant-direction allows families and individuals to design and tailor services to best meet their identified needs and to have more control over how funding resources made available to them can be used within program parameters.

**II. Family Leadership****Activities/Accomplishments:**

- More than 100 families participated in an intensive and comprehensive leadership training series sponsored by Massachusetts Families Organizing for Change and funded by the Department.
- The Department with Massachusetts Advocates Standing Strong (MASS) and other family advocacy organizations celebrated the name change of the Department from the Department of Mental Retardation to the Department of Developmental Services.
- Family members and self-advocates are active members of the Department's Statewide Quality Council.
- Family members and self-advocates played a significant role in educating the public, legislators and other decision-makers both locally and at the state level about the importance and benefits of services and supports.

**Proposed New Goals/Initiatives:**

- Continue to provide funding for leadership training and development opportunities for families and to explore different approaches and venues, including advanced leadership training opportunities.
- The Department will explore options to partner with other state agencies and organizations to make different leadership training opportunities available.
- The Department will ensure self-advocates and family members are active participants in different planning activities initiated around service planning and design.

**III. Family Support Resources and Funding****Activities/Accomplishments:**

- Full implementation of the Children's Autism Waiver Program. Capacity for this program increased to 110 participants this past year. This program provides a comprehensive array of supports for children under the age of 9 using a participant-directed model of service delivery.
- Funding for social skills, recreation programs and vacation programs was provided to the seven DDS funded Autism Support Centers which reached approximately 1200 children and adolescents.
- One- time funding (approximately \$300,000) was made available to Family Support Provider Agencies to offer vacation programs for children during the February and April school vacation weeks and during the last weeks in June following the end of the school year. These programs served over 1,000 children and their families statewide.
- New funding was made available to the Medically Complex Programs mid-year to begin expand services to young adults in transition from school to adult life up to age 25 and their families. This was a need identified by the Task Force and a recommendation of this group. This will be further expanded in FY '10.

**Proposed New Goals/Initiatives:**

- In light of budget reductions there was a need to re-configure and reorganize some of the ways general family support services are delivered as well as some of the other specialty programs that were partially funded. Clarification of expectations and responsibilities for family support coordination has been developed, revisions made to Family Support Plan formats, and guidance tools developed to assist Area Office staff in making determinations for flexible funding allocations. The Department will be collecting information on the number of families who receive services and the nature of services provided, the impact of these changes, and the effectiveness or drawbacks to some of these changes in practice. This information will be important in planning for service procurement in the upcoming year.
- Planning for the re-design and re-procurement of family support services will be the central activity in the upcoming year.
- The Department's Family Support Guidelines and Procedures will be updated.

#### **IV. Accessing Services and Supports**

##### **Activities/Accomplishments:**

- The Autism Division has developed a *Massachusetts Family Guide to Autism* that will be available for distribution by the fall of 2009 through the seven funded DDS Autism Support Centers and through the DDS regional eligibility teams.
- The Autism Division made funding available to the Asperger's Association of New England to print and distribute copies of a publication in both English and Spanish for families with children and adolescents with Asperger's Syndrome.
- In April 2009 the Department in partnership with state and community providers in central MA held a Family Support Resource Fair in Worcester. One hundred exhibitors participated and over 300 people attended to learn about services and resources for individuals with disabilities and their families.
- Many of the Area Offices hosted transition forums for families and young adults to share information about the process as well as information about services and providers.
- The Department in partnership with EOHHS has continued to expand use of the website to post and share information that will be helpful to individuals and families.
- A resource guide on participant directed services and a guide on hiring your own staff was developed.

##### **Proposed New Goals/Initiatives:**

- A Guide for families on the Massachusetts Medicaid Home and Community based Waiver Program will be printed and distributed. The guide provides information on choice and portability of services.
- Family Support Resource Guides for each DDS region will be available in the fall of 2009.
- Training and support will be provided to Family Support Provider Agencies and DDS staff to share knowledge and practices that help to build and strengthen Information & Referral services and access to generic resources.

#### **V. Culturally Competent Outreach and Support**

##### **Activities/Accomplishments:**

- All of the regions and central office have active Diversity Councils that offer a variety of opportunities for education, training and information-sharing to promote increased understanding of different cultural groups and the delivery of culturally competent services.
- The Department has continued to make progress in making available translated informational materials and letters in multiple languages based on the needs of families in local communities.
- Successful completion of the fifth year of a five year federal grant in Springfield, MA that has created "one stop family services" for unserved and underserved families of diverse cultural, ethnic and linguistic backgrounds to help them navigate the service system. This project has been part of a national model.

**Proposed New Goals/Initiatives:**

- In budget planning processes there has been a strong commitment to preserving some of the projects and resources dedicated to outreach and services in culturally diverse communities.
- The Department will continue to expand and refine the use of interpretation and translation services.

**VI. Interagency Collaboration****Activities/Accomplishments:**

- The Department has been working collaboratively with EOHHS and other human service agencies in the development and implementation of the Children's Behavioral Health initiative as well as in implementation of the Children's Mental Health Bill.
- The Department's Area and Regional Office staff members participate in many different local inter-agency planning teams to promote more effective communication, coordination and collaboration in service delivery.
- Collaboration and partnership with the Office of Medicaid, autism specialty providers, and advocacy groups in the full implementation of the children's Autism Waiver Program.

**Proposed New Goals/Initiatives:**

- In partnership with the other involved state agencies, the Department will continue to work on implementation of the Children's Behavioral Health Initiative (CHBI) which will include training for providers and Department staff about the requirements and services of this initiative.
- Department staff will work cooperatively with EOHHS on implementation of Chapter 257 to work on the development of standard rates for relevant family support services. Chapter 257 of the Acts of 2008 places authority for determination of reimbursement rates for human and social services with the Secretary of EOHHS. The EOHHS Purchase of Service Policy Office, together with the Division of Health Care Finance and Policy and all EOHHS purchasing departments are working diligently to implement rate regulation as specified in the statute.
- The Department will continue to collaborate and work in partnership with the Office of Medicaid in the development and implementation of new Home and Community Based Waiver Programs for Adults
- The Department will work collaboratively with EOHHS and the other designated human service agencies named in the Chapter 171 legislation to coordinate activities and efforts to promote flexible support services for individuals and families.