**Update and Recommendations from the**

**Employment First Work Group to SRS and CDDOs.**

**The work group supports a system that…**

* Promotes integration in the community
* Increases self-reliance and expectations
* Results in individualized outcomes
* Encourages employment (as previously defined by the work group)
* Values informing families and students at a young age of the available services and resources
* Promotes a culture of work
* Encourages individual contributions
* Creates incentives for employment at the individual level
* Creates incentives for employment at the provider level
* Recognizes the need for a creative and diverse group of stakeholders
* Recognizes that education and training of all stakeholders is a critical component for success
* Where persons can achieve a greater level of wealth and prosperity
* Respects individuals’ preferences
* Promotes a smooth transition for persons from the education system to the adult-service system
* Has no unintended consequences
* Provides the necessary HCBS employment supports for persons who are employed and have reached stabilization through services provided by Vocational Rehabilitation (VR) Services.
* Encourages persons to seek out all available services/supports beyond those traditionally provided by the current IDD system, one of which is VR
* Acknowledges a need to facilitate cultural changes in employer business and providers.
* That understands that sometimes there are barriers to employment that we don’t recognize (ex. transportation)
* Believes people with the most significant disabilities can be competitively employed in an integrated setting.

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| **The current system supports…** | **Our vision would support a system…** |
| A funding structure that is based on a perceived level of support needs based on the results of an assessment | That is structured in a manner that funds the implementation of the Employment First policy and is flexible and individualized for each person. |
| The value of a person being out of the home 25 hours a week for the provider to be reimbursed a full tiered amount | In which all persons of a working age have a desired level of employment |
| Encourages supports being provided in group settings | In which persons can receive supports in individualized settings |
| Encourages long-term dependence on the system | That promotes personal independence, an ability to build assets and provides the supports a person needs and not one support more |
| An on-going effort to assure the persons’ health and welfare | That encourages personal growth and experiences and the notion of “dignity of risk” |
| An extraordinary level of financial support for persons with an extraordinary level of support needs | That continues to acknowledge that some persons have an extraordinary level of need that requires an extraordinary level of support and that extraordinary supports may also be necessary in employment settings |
| A trained work force of direct support professionals. | Of differently well-trained direct support professionals with specialized training in the area of employment for persons with disabilities |
| Focuses primarily on HCBS services for resources | That in addition to HCBS services, uses all State and community partners/resources to achieve employment outcomes |
| A life time of preparation and placing in jobs. | A more strategic way of linking job seekers to employers/the business community and still emphasizes the person receiving supports |

**Work Group Recommendations Related Specifically to Employment**

The current HCBS MR/DD Supported Employment service should be revised to achieve the following recommendations;

* The reimbursement should be based on the number of hours the person works vs. number of hours of supports that are provided.
* There should be an incentivized rate for providers who achieve some level of employment-related certification or accreditation (both at the individual and organizational levels**). List out those acceptable certifications or accreditations**

**Also, the group recommends;**

* That the system offer bonuses to providers for successful placement of persons in competitive jobs in integrated settings (could be based on a percentage of person’s served v. employed)
* That the system offer bonuses to providers for successful retention of persons in competitive jobs in integrated settings
* An HCBS reimbursement model in which payment is based on outcomes rather than level of disability (i.e. a higher reimbursement for persons in competitive employment services vs. those who are not)
* An HCBS reimbursement model that incentivizes providers who achieve some level of employment-related certification or accreditation (both at the individual and organizational levels)
* The development of a consistent data-based way of publicly recognizing providers who are successfully moving persons from non-work to work to independence (Ticket to Work database is a good example).
* That SRS explore the development of an “i” waiver that could support employment services for those who are not currently eligible for the “c” waiver.
* That funding and resources are designed to support quality and the “best practices” related to employment. In the future, the group will define specific recommendations for assessment, job support, job development, and on-going training.
* That all licensed MR/DD Targeted Case Managers participate in at least 10 hours of training per year related to current State and Federal law related to employment of persons with IDD.
* That staff of Managed Care Organizations participate in at least 10 hours of training per year related to current State and Federal law related to employment of persons with IDD.
* That an employment services rate study / audit be done to determine costs of successful programs/providers.