



Developmental Pathways

MILL LEVY REPORT

Douglas & Arapahoe Counties

JULY 1, 2017 - JUNE 30, 2018

TABLE OF CONTENTS

WHO WE ARE 1

HISTORY OF THE MILL LEVY 2

DEVELOPMENTAL DISABILITIES & DELAYS 3

PROGRAMS 4

EXPENDITURE SUMMARY 5

WHO WE SERVE 7

EARLY INTERVENTION 13

COMMUNITY OUTREACH 15

CASE MANAGEMENT 19

STAFF DEVELOPMENT & ENGAGEMENT 27

CHALLENGES 29

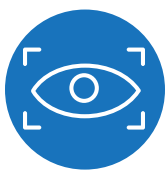
CONCLUSION 30



Developmental Pathways

Dedicated to Individuals with Disabilities

Developmental Pathways is the largest Community Centered Board (CCB) in Colorado, serving nearly 8,000 individuals with developmental disabilities/delays in Arapahoe County, Douglas County, and the City of Aurora annually. A Colorado statute authorized Community Centered Boards in 1964, and in 2014 Developmental Pathways celebrated its 50th anniversary of service. Currently, there are 20 CCBs that serve thousands of individuals across the state. As a CCB, Developmental Pathways determines eligibility and provides case management to programs for individuals with developmental disabilities/delays (such as autism and Down syndrome) in our service area. Our programs serve individuals of all ages, from infants to senior citizens. The programs are funded by state, federal, county, and private sources. We also actively seek funding for thousands of individuals who are waiting for resources due to a lack of state and federal resources.



VISION

Enriching Lives.
Strengthening Communities.



MISSION

To enrich the lives of people with developmental disabilities/delays by partnering to provide expertise, support, & advocacy in their pursuit of a meaningful life.



VALUES

Integrity
Innovation
Partnership
Stewardship

HISTORY OF THE MILL LEVY

In 2001, Developmental Pathways was experiencing a funding crisis due to rapid population growth and increased demand for services in Arapahoe and Douglas counties. The contract Developmental Pathways had with the State of Colorado, the primary source of revenue for developmental disability/delay services in our area, had fallen far behind the demand for services and our organization faced major fiscal cuts to services. This problem was compounded by the disproportionate distribution of funding from the state, resulting in the lowest per capita allocation of resources to Arapahoe and Douglas counties relative to any other area of Colorado. The only option available to stave off these cuts and meet at least part of the ongoing rush of service demands was through a mill levy election. This election fell within the conditions set by the Taxpayer's Bill of Rights (TABOR) in accordance with state statute (27-10.5 C.R.S.) and allows a one-mill county property tax exclusively for services for people with developmental disabilities/delays.

With the unanimous support of the Arapahoe and Douglas County Commissioners, Referendum 4A was placed on the 2001 ballot in both counties which proposed a one-mill dedicated property tax for services for people with developmental disabilities/delays.

Months of intensive campaigning, spearheaded by hundreds of volunteers, led to the referendum being passed in both counties. The efforts required for this success included meetings with community groups, public forums, distribution of voter education materials, grass-roots voter turnout efforts, and much more.

In 2001, voters approved a mill levy to support individuals with developmental disabilities/delays. Based on that bill, we developed the following three core priorities:

1) To provide services to individuals on the waiting list, 2) to raise the quality of services for all individuals with a developmental disability/delay, 3) to stabilize and improve the overall service infrastructure, with particular attention to recruitment, training, and retention of quality staff.

As a result of the successful campaign, service cuts were avoided and more than 1,600 new individuals with developmental disabilities/delays were served with mill levy funds in the first 2 years of implementation. However, service needs in our catchment area had grown to such high levels that, while mill levy funds reduced the waiting list, they still fell short of the amount needed to eliminate the waitlist altogether.

Since 2001, Developmental Pathways has utilized mill levy funding to best meet the needs of the individuals and families we serve while responding to the referendum emphases. This report provides a brief summary of the programs, quality of services, and infrastructure supported by mill levy funding.





DEVELOPMENTAL DISABILITIES & DELAYS

How are these terms defined & how does someone qualify for services?

DISABILITY

A developmental disability (DD) is defined by Colorado state statute 25.5-10-202: (26); (a) "Intellectual and developmental disability" means a disability that manifests before the person reaches twenty-two years of age, that constitutes a substantial disability to the affected person, and that is attributable to an intellectual and developmental disability or related conditions, including Prader-Willi syndrome, cerebral palsy, epilepsy, autism, or other neurological conditions when the condition or conditions result in impairment of general intellectual functioning or adaptive behavior similar to that of a person with an intellectual and developmental disability. Unless otherwise specifically stated, the federal definition of "developmental disability" found in 42 U.S.C. sec. 15001 et seq., does not apply.

(b) "Person with an intellectual and developmental disability" means a person determined by a community-centered board to have an intellectual and developmental disability and includes a child with a developmental delay. Often, developmental disabilities are identified at birth, but sometimes they are not identified until later. A person who meets the criteria above must have a medical diagnosis verifying their disability and undergo testing to be eligible for services. (25.5-10-202)

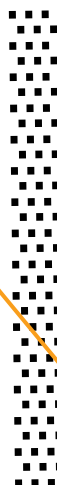
ACCESSING PROGRAMS

Programs for eligible adults and children with developmental disabilities/delays are funded through Medicaid, Medicaid Waivers, state funds, and private insurance for covered individuals. Services within each type of program are available based upon the identification and prioritization of individual needs. Services to address the identified needs are purchased, provided, and billed for directly by qualified providers such as Program Approved Service Agencies (PASAs) using program funds as authorized through the individual's plan.

DELAY

Colorado state statute also defines developmental delay: (c) "Child with a developmental delay" means: (I) A person less than five years of age with delayed development as defined by rule of the state board; or (II) A person less than five years of age who is at risk of having an intellectual and developmental disability as defined by rule of the state board. A delay is evaluated by failing to meet developmental milestones such as speech acquisition or coping behaviors. Other children exhibit factors that put them at a high risk of having a developmental disability or are born with a DD such as Down Syndrome or Fragile X. Both delays and disabilities in children under 5 years must be verified by Early Intervention criteria for a child to qualify for services. For a complete list of established conditions that qualify a child, please see the Early Intervention Colorado website:

<http://coloradoofficeofearlychildhood.force.com/eicolorado>.



DEVELOPMENTAL PATHWAYS PROGRAMS

We offer services spanning an individual's lifetime, including case management and coordination through our 3 core departments: Early Intervention, Case Management, & Community Outreach. The graphic below was created to help families understand how they can access services throughout their time with us. Greater detail for each program can be found on our website.



Early Intervention



Community Outreach Dept.



Case Management

Infant

[Birth up to 3yrs.]

Child

[3yrs. through 18 yrs.]

Adult

[18 yrs. & up]

INTAKE & ENROLLMENT

Each program has their own system of bringing new folks into services at DP - it's the universal first step for anyone seeking assistance.

EARLY INTERVENTION

provides a variety of services for children with a developmental disability or delay

No funding limit. Funding based on individual needs.

FSSP

Family Support Services Program assists families in caring for a loved one with a developmental disability or delay

Funds range from \$1,200/yr. - \$1,500/yr.

SLS WAIVER

Supported Living Services Waiver provides a variety of services for adults living on their own, with family, or in the community

Max funding per person: \$46,274/yr.

CES WAIVER

Max funding per person: \$37,944/yr.

Children's Extensive Services Waiver helps families with a child who needs 24/7 care



Determination of disability



Placed on waitlist for adult waivers

DD WAIVER

DD Waiver provides 24/7 care for individuals with high needs and has only a limited number of spots

No max funding per person, but potentially \$100,000/yr.

COMMUNITY OUTREACH PROGRAM

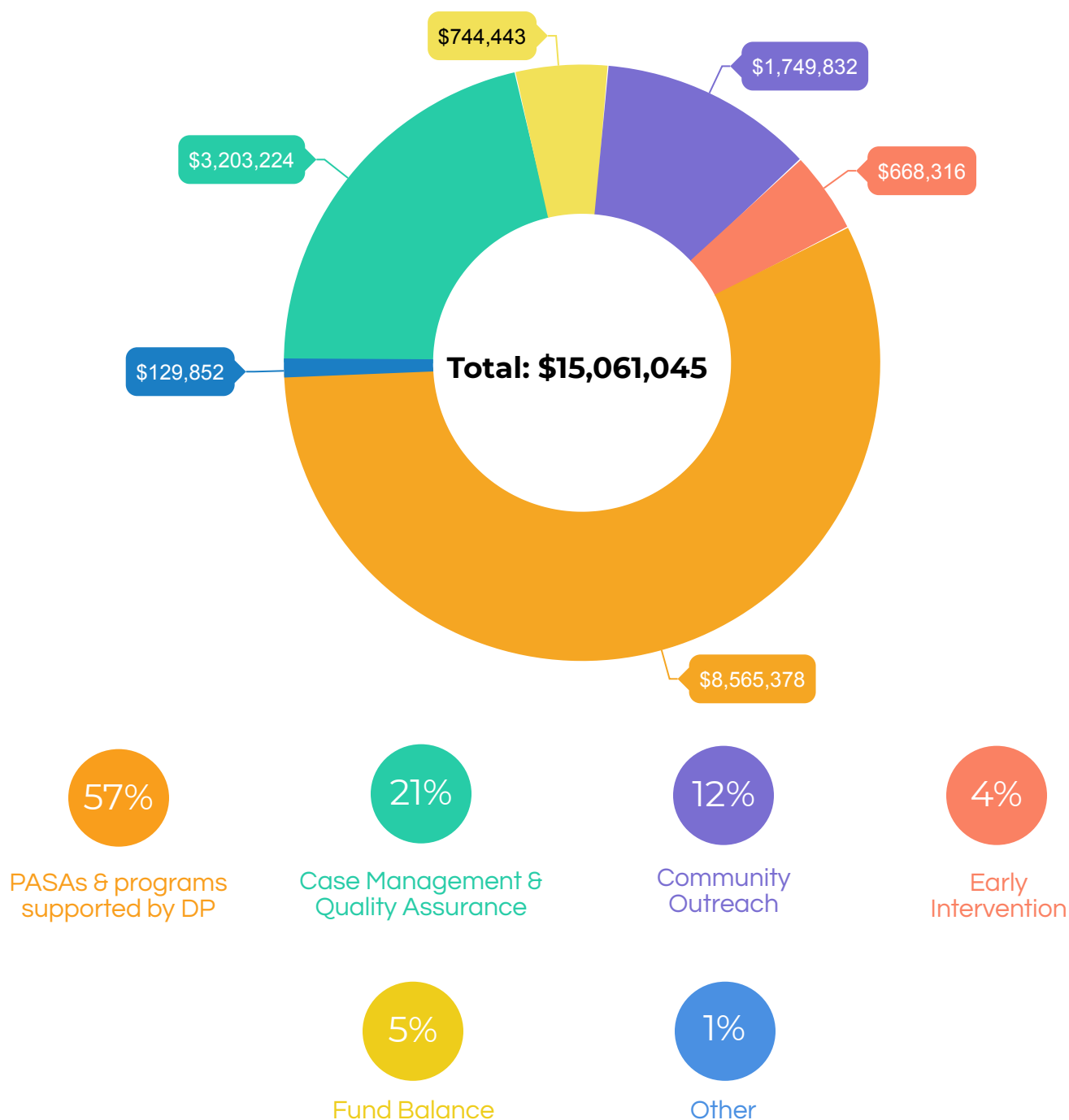
A unique DP program that helps those waiting for services or those with unmet needs who are active in State or Waiver programs.

To learn more about how Unmet Needs funding is distributed, visit our website: <http://bit.ly/UnmetNeedsPolicy>



EXPENDITURE SUMMARY

Mill levy dollars not only aid the success of the programs provided by Developmental Pathways, but they also support our organization and the community in other ways. In addition to Pathways programs, funding is allocated to direct care programs designated through Medicaid Waivers, management and support programs, and community-driven initiatives. Below is a summarized chart of expenditures by percentage as well as a brief overview of the types of activities that are funded by each category of dollars. A detailed financial can be found in the addendum to this report.



Other includes: Family Support & Youth Housing services

Unrestricted Fund Balance

The unrestricted fund balance represents the number of months that Developmental Pathways could operate without further local, state, or federal dollars. These funds provide the individuals and families we support with financial security and peace of mind that Developmental Pathways could sustain itself under unforeseen financial challenges. These undesignated net assets are in line with industry best practice as it is recommended for nonprofits to have about 6 months of operating reserves. We are currently experiencing delays in payments for services provided due to the implementation of the new State Medicaid billing system. The reserve balance enables us to continue to provide needed services during these payment delays.

Undesignated
Net Assets

\$15,459,093

Annual
Expense

\$41,133,460

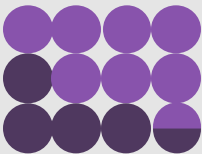
Monthly
Expense

\$3,427,788



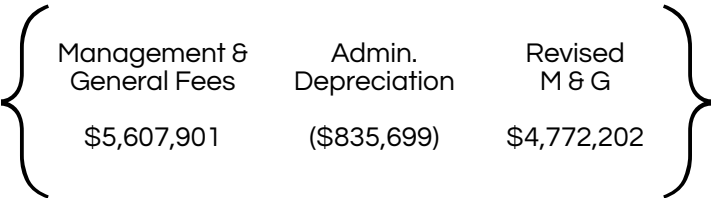
38% Fund
Balance

4.51 Months
of Operation

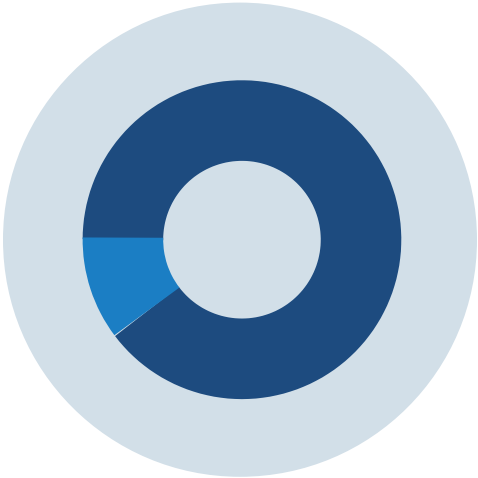


Management & General Fees

Total Revenue
\$40,845,153



=

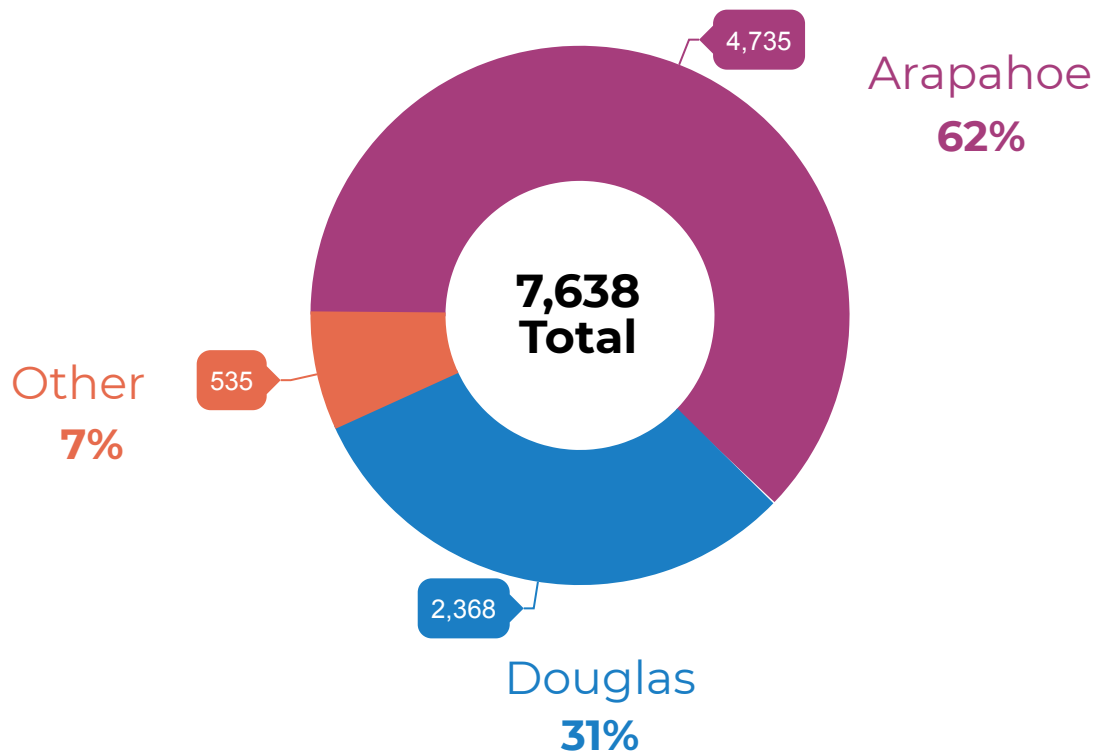


11.68%
Management & General



WHO WE SERVE | Overview

Among the 7,638 people we serve, a small percentage do not - or no longer- reside in our catchment area of Arapahoe County, Douglas County, and the City of Aurora. These people are represented in the "other" category which may include folks who initially lived in our area, but have moved away and kept receiving services from us, or those folks who reside in the portion of Aurora that is Adams County. The majority of the Other category is comprised of the latter group of folks living in northern Aurora. You can read more about our new partnership with Adams County to receive funds for the residents that we support.



How we serve Adams County

Over the years, the support we provide to the residents of Adams County with I/DD has grown. Developmental Pathways currently supports 17% of people who are connected to a CCB & receive I/DD services in Adams County. Beginning in April 2019, Adams County allocated mill levy funding directly to individuals and families supported by Developmental Pathways. We anticipate our involvement in this county will continue to grow and we will work closely with the Adams County commissioners to best serve people with I/DD in this area.



SERVING 7,638 PEOPLE

from birth to end of life



GENDER

64% Male
36% Female



AGE

70% 0-18 yrs. old
30% 18+ yrs.



ETHNICITY

69% White
13% Hispanic
9% Black
5% Asian
4% Other



PROGRAMS

47.7% Early Intervention
12.2% Community Outreach
11.4% SLS Waiver
9.9% FSSP
9.4% DD Waiver
8.2% CES Waiver
1% State SLS



MAJOR DIAGNOSES

24.8% Developmental Delay (EI)
17% Developmental Disability*
9.8% Autism
4.9% Seizure Disorder/Epilepsy
3.7% Down Syndrome
3.7% Cerebral Palsy
3.4% DD/Mental Illness

*formerly Mental Retardation

The Impact of Population Growth

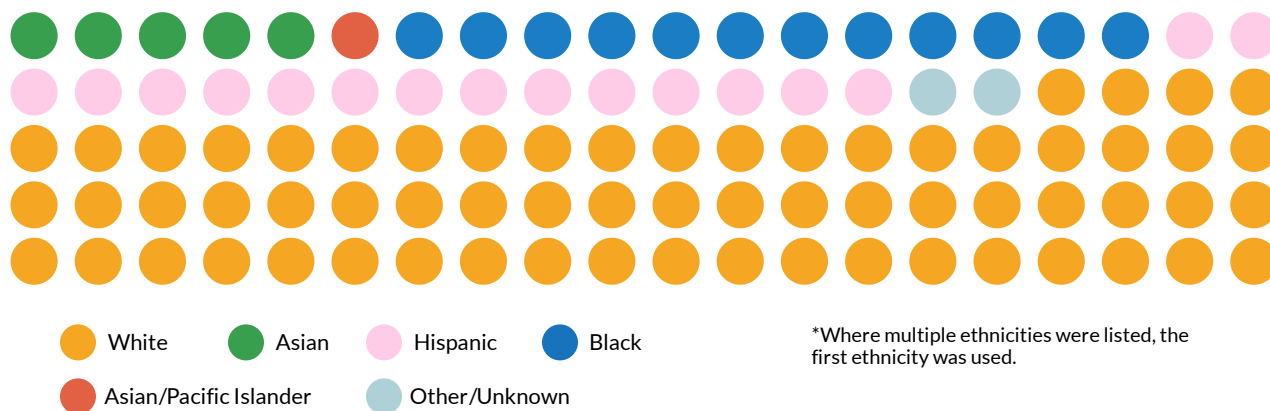
Over the past several years, Pathways has processed between 300-400 new intakes and enrollments per year. This is a significant jump from previous years when we were only enrolling 50-100 people annually. According to the Administration for Community Living (<https://acl.gov/>), it is estimated that between 7 and 8 million Americans of all ages (3% of the general population) have an intellectual disability. Therefore, our numbers increase when the general population increases. We expect that trend to continue for the next 1-5 years due to the increasingly high growth rate for Douglas (15%) and Arapahoe (11%) counties. <https://www.census.gov/quickfacts>



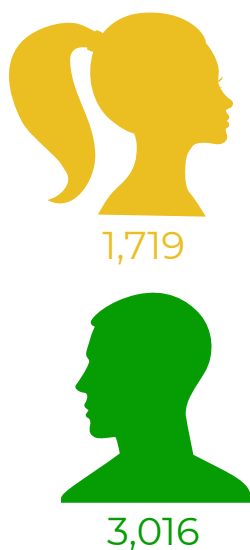
WHO WE SERVE | Arapahoe County

This data is an overview of the population we serve in Arapahoe County. For a more detailed breakdown, please see the addendum included with this report.

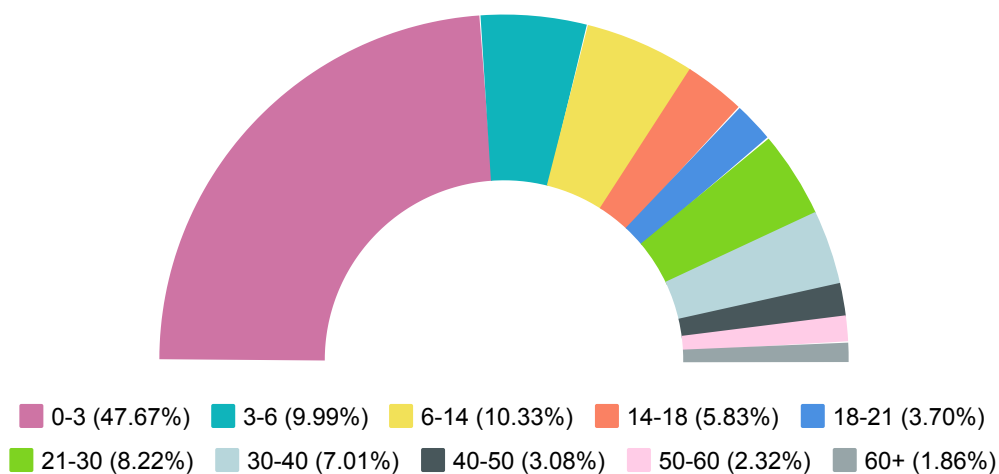
ETHNICITY



GENDER

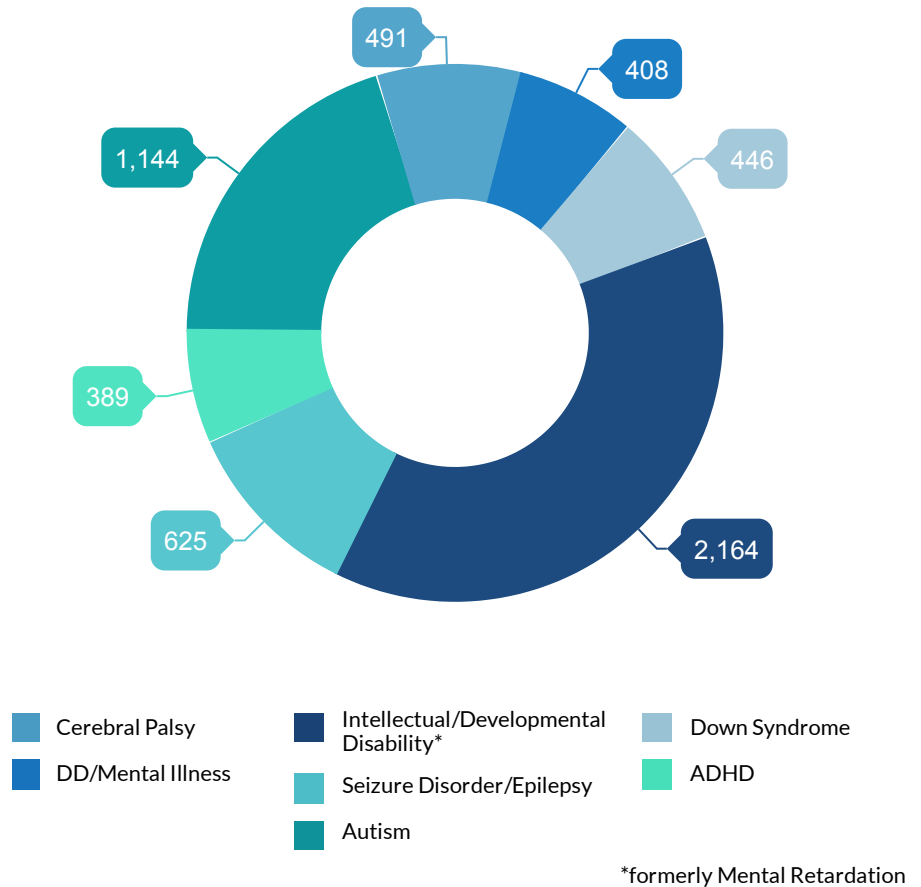


AGE

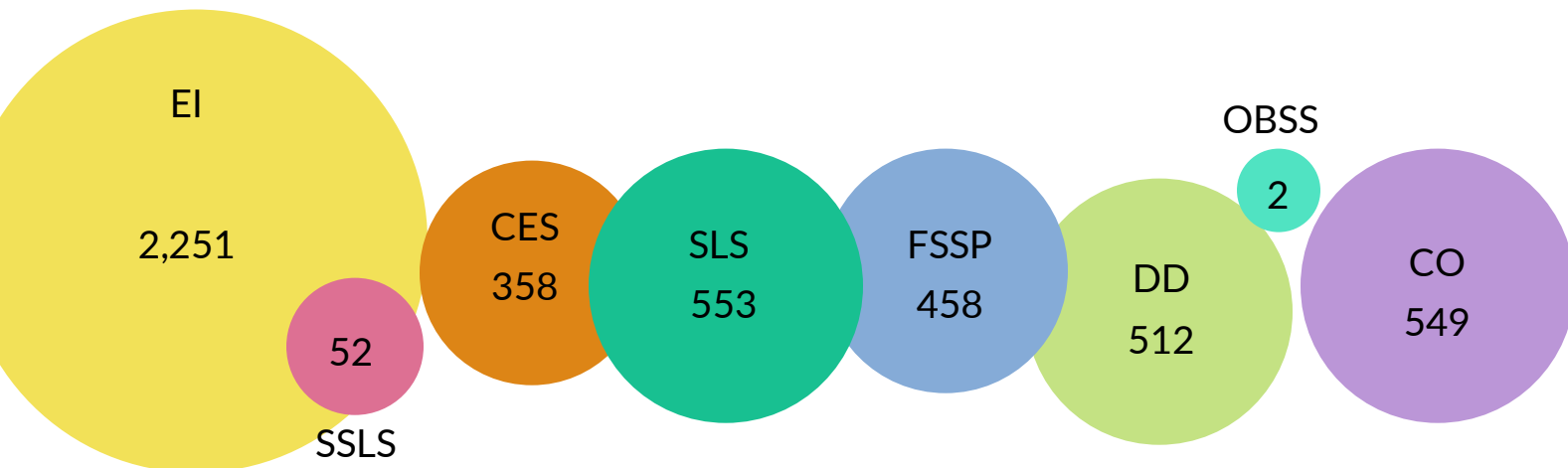


DIAGNOSIS

The term Developmental Disability (DD) encompasses many diagnoses, all of which begin at birth and last for the duration of a person's life. Some children may experience developmental delays that resolve with intervention. The chart at right shows the most common adult DD diagnoses for the population we serve. In addition, Early Intervention serves 2,786 children with developmental delays in Arapahoe County. In 2018, Colorado state legislature passed Senate bill 18-096 which eliminates the outdated "Mental Retardation" term and replaces it with "Intellectual or Developmental Disability." Our data reflects that change as well.



PROGRAM



KEY

CES- Children's Extensive Waiver
CO- Community Outreach Program

DD- Developmental Disability Waiver
EI- Early Intervention

FSSP- Family Support Services Program
OBSS- Omnibus Budget Reconciliation Act
Specialized Services

SLS- Supported Living Services Waiver
SLSS- State SLS

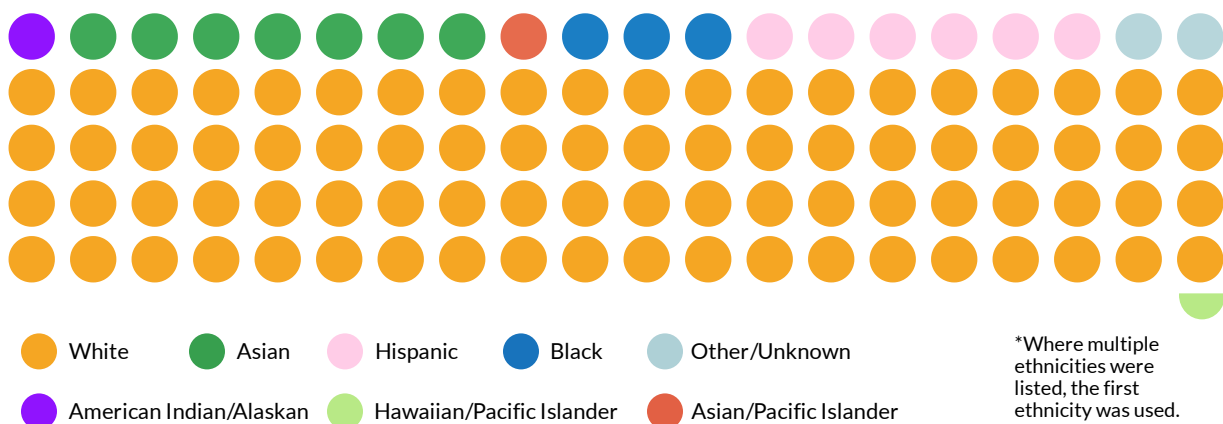
- Due to the high and continually changing number of qualifying diagnoses for children in EI, all EI children are grouped into one diagnosis category
- Individuals may have more than one diagnosis. Diagnoses for adults are limited to the options currently available in the Community Contracts Management System (CCMS) by the Division for Intellectual and Developmental Disabilities.



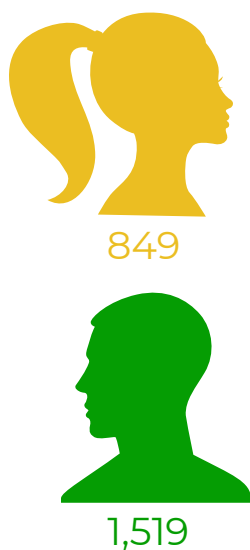
WHO WE SERVE | Douglas County

This data is an overview of the population we serve in Douglas County. For a more detailed breakdown, please see the addendum included with this report.

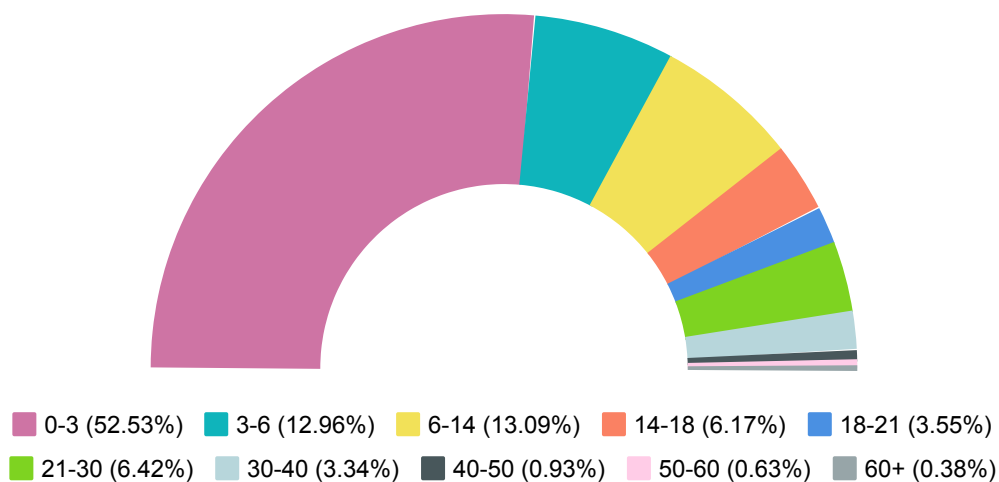
ETHNICITY



GENDER

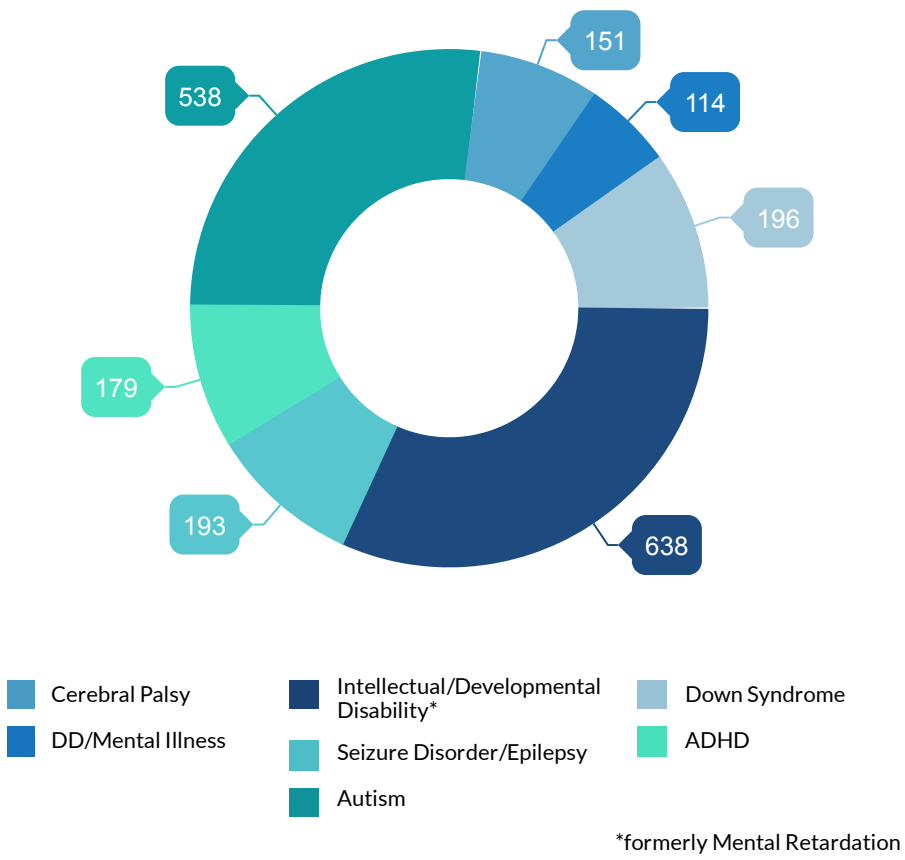


AGE

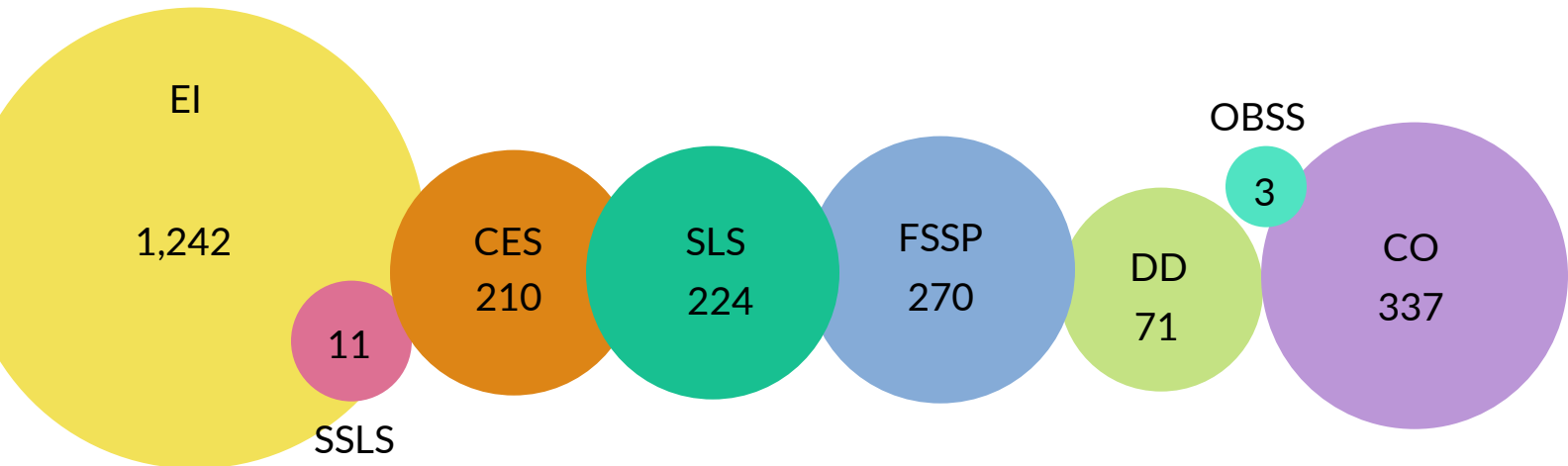


DIAGNOSIS

The term Developmental Disability (DD) encompasses many diagnoses, all of which begin at birth and last for the duration of a person's life. Some children may experience developmental delays that resolve with intervention. The chart at right shows the most common adult DD diagnoses for the population we serve. In addition, Early Intervention serves 1,714 children with developmental delays in Douglas County. In 2018, Colorado state legislature passed Senate bill 18-096 which eliminates the outdated "Mental Retardation" term and replaces it with "Intellectual or Developmental Disability." Our data reflects that change as well.



PROGRAM



- KEY**
- | | | | |
|----------------------------------|---------------------------------------|---------------------------------------|--|
| CES- Children's Extensive Waiver | DD- Developmental Disability Waiver | EI- Early Intervention | OBSS- Omnibus Budget Reconciliation Act Specialized Services |
| CO- Community Outreach Program | FSSP- Family Support Services Program | SLS- Supported Living Services Waiver | |
| | | SSLS- State SLS | |

• Due to the high and continually changing number of qualifying diagnoses for children in EI, all EI children are grouped into one diagnosis category

• Individuals may have more than one diagnosis. Diagnoses for adults are limited to the options currently available in the Community Contracts Management System (CCMS) by the Division for Intellectual and Developmental Disabilities.

EARLY INTERVENTION

Who We Are

95 staff members

How We Use Mill Levy Funds

Mill Levy funds enhance Early Intervention's focus on strengthening community and family education, school partnerships, and staff development efforts in the following ways:

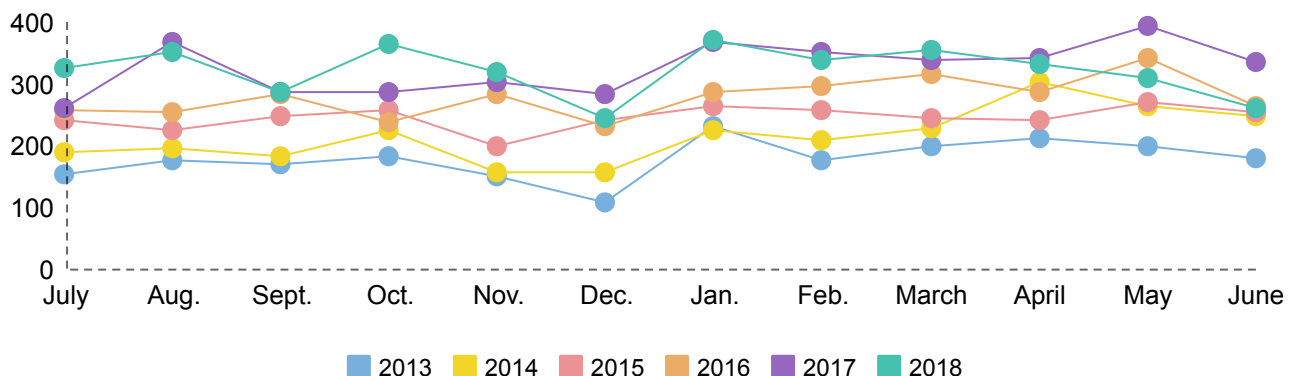
- Funding ongoing training & professional development opportunities to promote employee retention & increase family satisfaction
- Hiring additional service coordinators to lower caseload & enable staff to provide better care coordination and resource development for children and families
- Supporting school partnerships to ensure successful transitions for children & families from program to program
- Educating schools, families, & community organizations on eligibility, referral and the long term benefit of EI

What We Do

The Early Intervention (EI) program (Part C) provides services and supports for families who have a child up to age 3 with a 25% delay in one or more areas of development or have a child with a qualifying diagnosis. The EI team is composed of service coordinators, therapists, intake & referral specialists who partner with families to:

- Help families learn ways promote their child's development within their everyday routines & activities
- Deliver services in a family centered way focusing on children's learning in their natural environment
- Support systems navigation & assure family priorities are met
- Provide direct services to support families in their child's development
- Partner with school districts for eligibility determinations both into Early Intervention and other schools at age 3 as appropriate

Referrals



Successes



Successfully implemented GO4IT system designed to **promote high quality service delivery.**

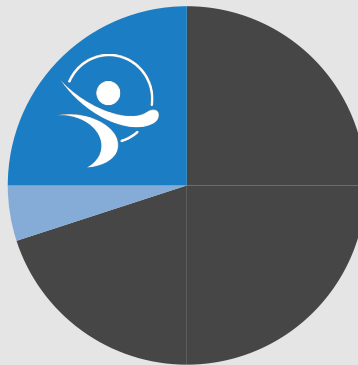


Created culture of collaboration among staff by **improving communication strategies & creating shared learning opportunities.**



Participated in statewide Teaming Workgroup **to develop, train, & enhance capacity of EI staff.**

Served
3,215
children & their
families



which equates to
25-30%
of Colorado's EI
population

Meet Declan

"Developmental Pathways has become a big part of our lives since our son, Declan, was born with Down Syndrome. They came into our home when Declan was about a month old to perform an evaluation. Everyone was so lovely and made it such a happy, positive experience! We are so blessed to have his service coordinator in our lives; she worked so hard pairing us with Declan's therapists and making sure everything went well. Declan started with weekly physical therapy when he was just 3 months old and now he's crawling, pulling up to stand, & walking along the couch! We have also been working with a speech therapist weekly for a couple months and Declan can now sign several words. Early intervention and Developmental Pathways has been a huge part of our lives for the past year and a half and we are thankful every day for all that they do! There is no doubt in my mind that Declan is destined for greatness in his life and that Developmental Pathways and his amazing therapists have been a big part in paving that path for him!"





COMMUNITY OUTREACH

Who We Are

25 staff members

How We Use Mill Levy Funds

Our department was created by Mill Levy funding in 2012 to serve people waiting for state & federally funded programs. With the exception of FSSP, EFMP, & HCV, Mill Levy funding supplements all of our activities to support folks in Douglas & Arapahoe counties with unmet needs. We do this by:

- Directly funding needs that meet specific criteria
- Partnering with organizations to provide discounted services
- Coordinating the care of people waiting for services
- Spearheading community initiatives
- Offering training & support to community partners
- Funding parent & sibling support groups

What We Do

The Community Outreach department is a Pathways-specific program designed to assist folks whose needs are not fully met by other programs. Often, support comes in the form of monetary resources and connection to other community organizations. The many functions of this team include:

- Service coordination
- Community partnerships
- Provider of resources
- Fund unmet needs
- Lead Initiatives
- Administer Programs:
 - Community Outreach Program (CO)
 - Exceptional Family Member Program (EFMP)
 - Family Support Services Program (FSSP)
 - Housing Choice Voucher (HCV)

Summer Camp Success

"So amazing!!! None of our family can imagine what our summer would be like if John didn't have this activity 4 days a week. He is so entertainment intensive that it would be a huge burden on all of us every day to keep him happy, and I can't imagine that we would really be able to keep him happy with just our resources. But with Glo camp, the wonderful staff there, the well-matched peers and the perfect balance of fun, active outings, he is so content and easy to manage the rest of the time. The only negative feeling I get when thinking about Glo camp is a slight panicky feeling about what if they didn't exist, then what? So thank you to the Community Outreach Program very, very much from myself, my husband and our other 4 kids, for providing this for John!!"



Partnerships

We partner with many community organizations to provide discounted or free services for people enrolled in the Community Outreach program. Below are just a few of the organizations we've partnered with in the last fiscal year.

ART THERAPY | Healing with Hearts

20 kids and their siblings participated in art therapy over 4 sessions provided by Healing with Heart and "Art for All" activities lead by Cherokee Trail HS volunteers

RESPIRE CAMP | Easter Seals

30 kids and their siblings participated in a respite weekend camp hosted by Easter Seals Rocky Mountain Village

HIPPOTHERAPY | Carynne for Kids

15-20 kids participated in a 4-session "Intro to Hippotherapy"

RESPIRE & LEARNING PROGRAMS |

Goldstar Learning Options (GLO)

GLO serves many DP folks on waivers with high medical/high behavioral needs. DP provides scholarships for people without waiver funding to benefit from GLO's respite care, day programs, & other services.



Successes

2,429

Individuals served



153

Organizations supported



\$44,301

In-kind donations received



535

Volunteer hours served



6,000+

recipients of resource newsletter



824

Community contacts made



145

People served through Housing Choice Voucher Program



97

New relationships built





Board Designated Funding

For the past three years, our Board of Directors designated funds to address critical areas of need. These critical areas were determined by extensive community outreach assessments. In response to community input, the Board dedicated these funds solely to initiatives that aligned with the mission of Developmental Pathways: Transportation, Respite, 3+, and two new initiatives- Family Engagement & Housing Exploration. Our Community Outreach Department is uniquely positioned to execute these initiatives and monitor how best to serve our local communities. For more details on each initiative, please visit our website: dpcolo.org.



TRANSPORTATION

Increase & support convenient, affordable, & efficient transportation

ACTIVITIES

- 21 adults in DRMAC volunteer driver database
- 166 free rides provided since Jan. 2018
- Distributed \$81,500 in grants
- Developed educational video series



RESPITE

Educate caregivers about benefits of respite & increase provider options

ACTIVITIES

- Started Easter Seals respite partnership
- Hosted Respitality weekend respite event
- Awarded \$15,060 in grants
- Continued respite newsletter
- Started Emergency Respite fund



3+

Connect families with children aging out of EI to funding & resources

ACTIVITIES

- Provided 19 I/DD specific trainings
- Awarded \$107,407 in grants
- Developed training on Community Outreach enrollment & supports for EI coordinators & providers

Reflections on Respitality

"Our experience with the respitality event was wonderful. Check in at both places was easy and the staff immediately made us feel comfortable leaving our children for the night. My husband and I went downtown for drinks and dinner, came back to the hotel for my massage and then watched a movie. Cameron enjoyed every minute of the event. His favorite part of the event was having a sleepover in a hotel with his brothers and the face painting. Our favorite part of the event was being able to spend an evening together, knowing the kids were being well taken care of. We would absolutely recommend this event to other families."



FAMILY ENGAGEMENT INITIATIVE



INTENT

To proactively develop and strengthen relationships with people who have developmental disabilities and their families so that we become exceptional support partners, set apart from typical I/DD service providers.

INTENDED OUTCOMES

- Connections between caregivers & parents
- People with I/DD connect with DP on a personal level
- Establishment of an advocacy policy plan
- People with developmental disabilities and their caregivers/ parents are advocates for DP
- Individuals in services and caregivers/parents collaborate with DP on events & changes to service provision

HOUSING EXPLORATION INITIATIVE



INTENT

To explore and support the expansion of residential options for adults with I/DD, taking into consideration their interests, preferences, & needs.

ACTIVITIES

- \$100,000 budget
- Committee of 12 Individuals representing current and future projects or related services in a variety of early stages. All are family members of a person with I/DD and/or are very active in the I/DD community.
- Beginning February 2019, a nationally known Subject Matter Expert is providing informational presentations to families, potential residents, professionals and providers, educating all on potential housing models, assessing interests and needs, and sharing viable solutions to help people in services live a meaningful life.



CASE MANAGEMENT & QUALITY ASSURANCE

Who We Are

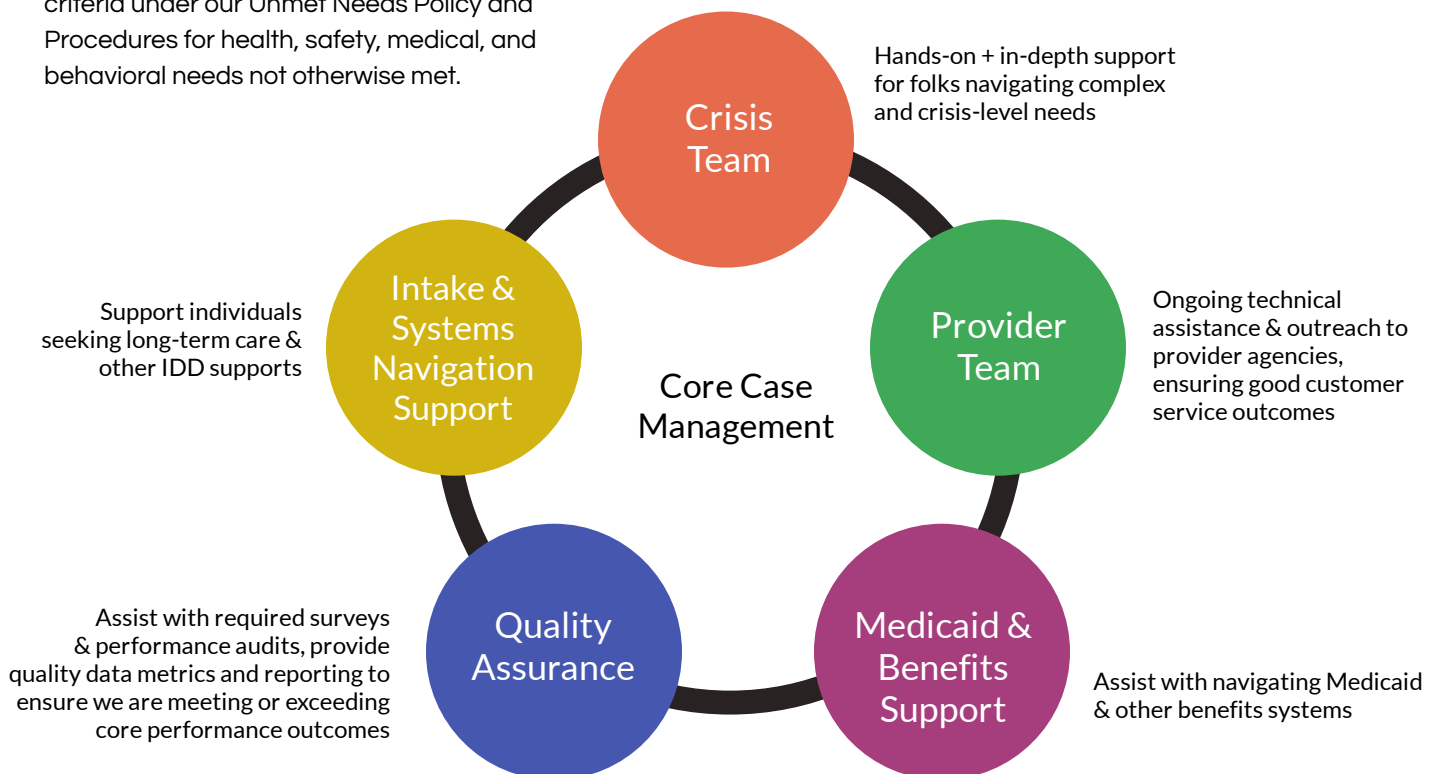
150 staff members across multiple cost centers

How We Use Mill Levy Funds

Mill Levy funds supplement the following support teams: Crisis, Intake and Systems Navigation, Provider Liaison, Quality Assurance, and Benefits/Medicaid. Each of these teams plays an ancillary role in ensuring that people with I/DD and their families receive quality care in the most seamless way possible. We also use Mill Levy to directly fund needs that meet specific criteria under our Unmet Needs Policy and Procedures for health, safety, medical, and behavioral needs not otherwise met.

What We Do

The case management & quality assurance team assists folks with I/DD who are enrolled in a state or federally funded program including: State SLS, SLS waiver, DD waiver, or the CES waiver. State and federal Medicaid pays for 4 core functions of case management: Assessments, Service Planning, Referrals to external service providers, & Monitoring visits. These functions are detailed on the following page. However, many more functions are necessary to fully meet an individual's needs. Because of that, we've developed supporting teams that receive Mill Levy funding to ensure there are no service gaps for any of our folks. Together, our teams support people through each step of their process to receive care.



Quality Assurance

We have developed extensive program quality procedures to ensure that we provide high quality services and are compliant with state rules and regulations. Quality Assurance has many components carried out by many different teams to keep a pulse on health and safety outcomes and overall program quality for individuals in service.

MONITORING

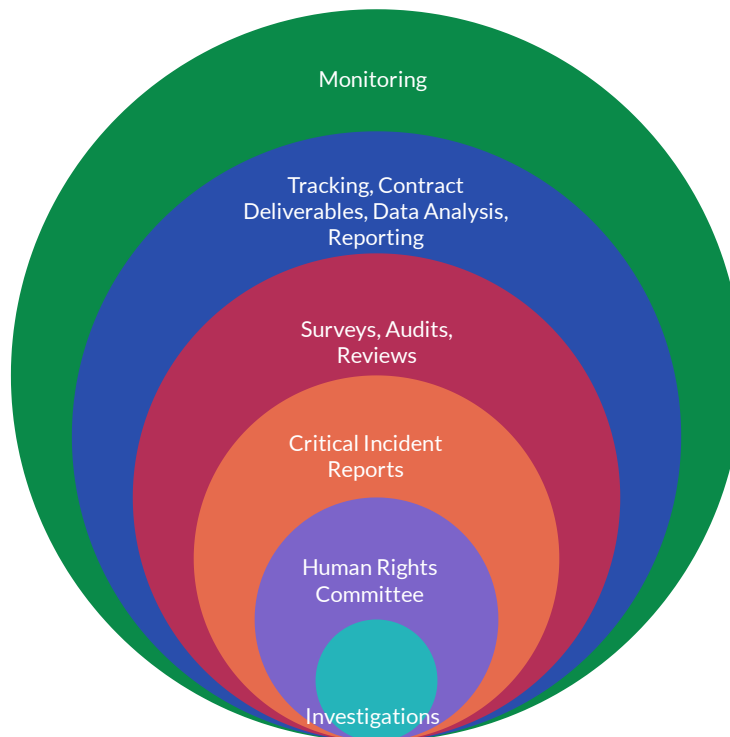
is a regulatory requirement of all case management agencies for all Medicaid Waiver recipients. In monitoring visits, case managers check on the health and safety of individuals receiving services and to ensure services are appropriate and being utilized in accordance with an individual's Service Plan.

6,367 monitorings completed

HUMAN RIGHTS COMMITTEE (HRC)

Under regulation, all Community Centered Boards are required to have an HRC, a third-party mechanism designed to help safeguard the legal rights of persons receiving services. HRCs also review investigations of allegations of mistreatment. DP runs 3 HRCs.

739 HRC reviews performed



INVESTIGATIONS

Case management agencies & other community resources (law enforcement and Adult Protective Services/Child Protective Services) are required to investigate all alleged incidents of mistreatment.

123 investigations performed

SURVEYS, AUDITS + DATA, & REPORTING

We have an internal quality assurance team that helps us stay on target with all required survey and contract deliverable reporting. This team is crucial to ensure we are meeting the requirements outlined under the various authorities governing our work. This team also helps support the advancement of more sophisticated tracking and reporting tools.

CRITICAL INCIDENT REPORT

an actual or alleged event that creates the risk of serious harm to the health or welfare of a client and may endanger or negatively impact the mental and/or physical well-being of an individual in service. Must be reported to HCPF in 1 business day.

500 CIRs reported & resolved

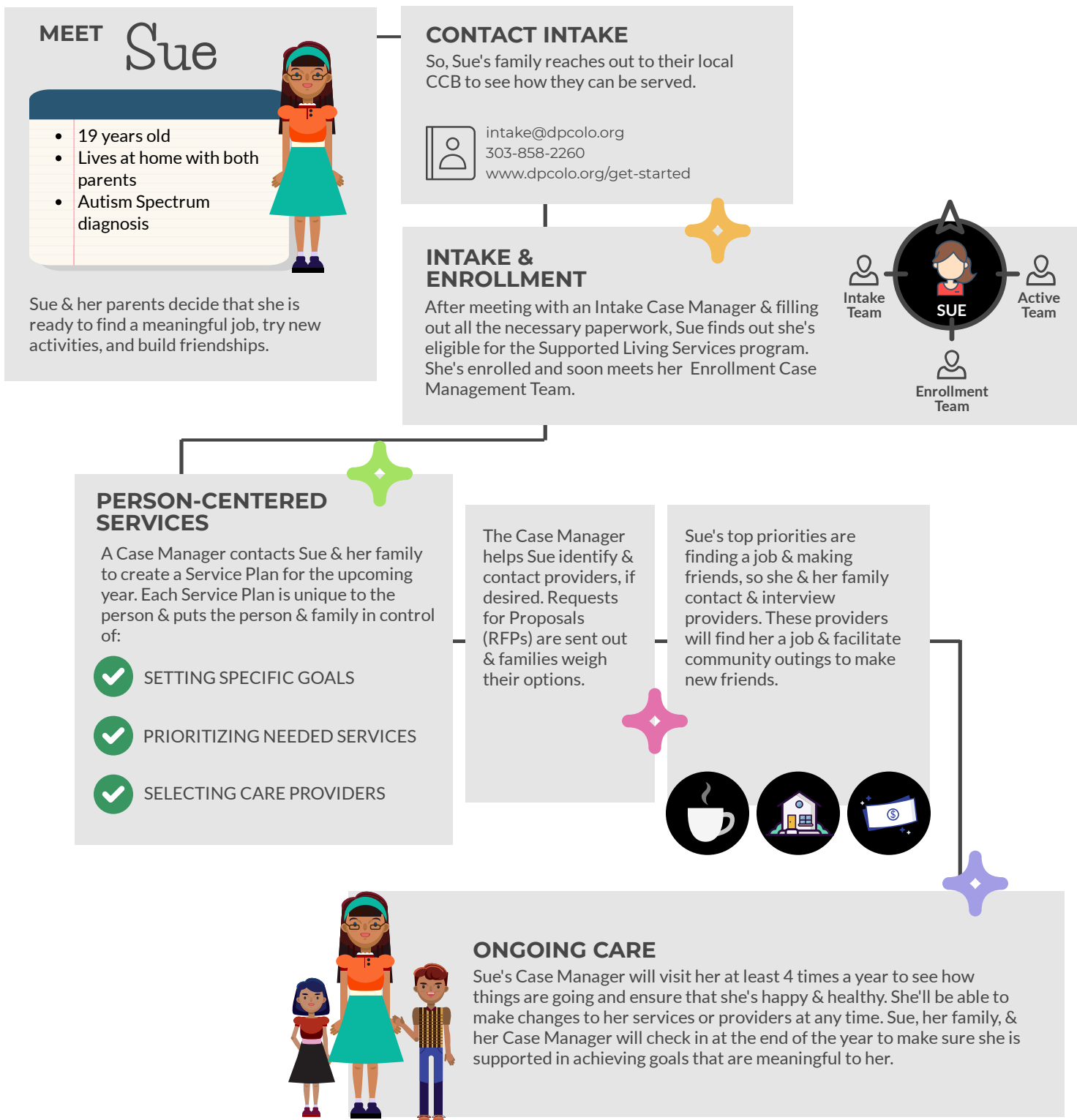
A note about Conflict-Free Case Management

Developmental Pathways actively demonstrates Conflict Free Case Management through our placement procedures. When an individual needs supports through the Case Management Department, a non-identifying Request for Proposal (RFP) is sent to all service agencies in our area. On occasion, an individual/family will know which provider they prefer at the outset and an RFP will not be sent. The individual/family will provide Developmental Pathways with the information on their selection and an Interdisciplinary Team (IDT) meeting will be held to construct the Service Plan (SP). An IDT is a support team for the person in service which could include case managers, family members, caregivers, and/or therapists. Developmental Pathways also sends out a weekly newsletter to inform families of community resources available to them.



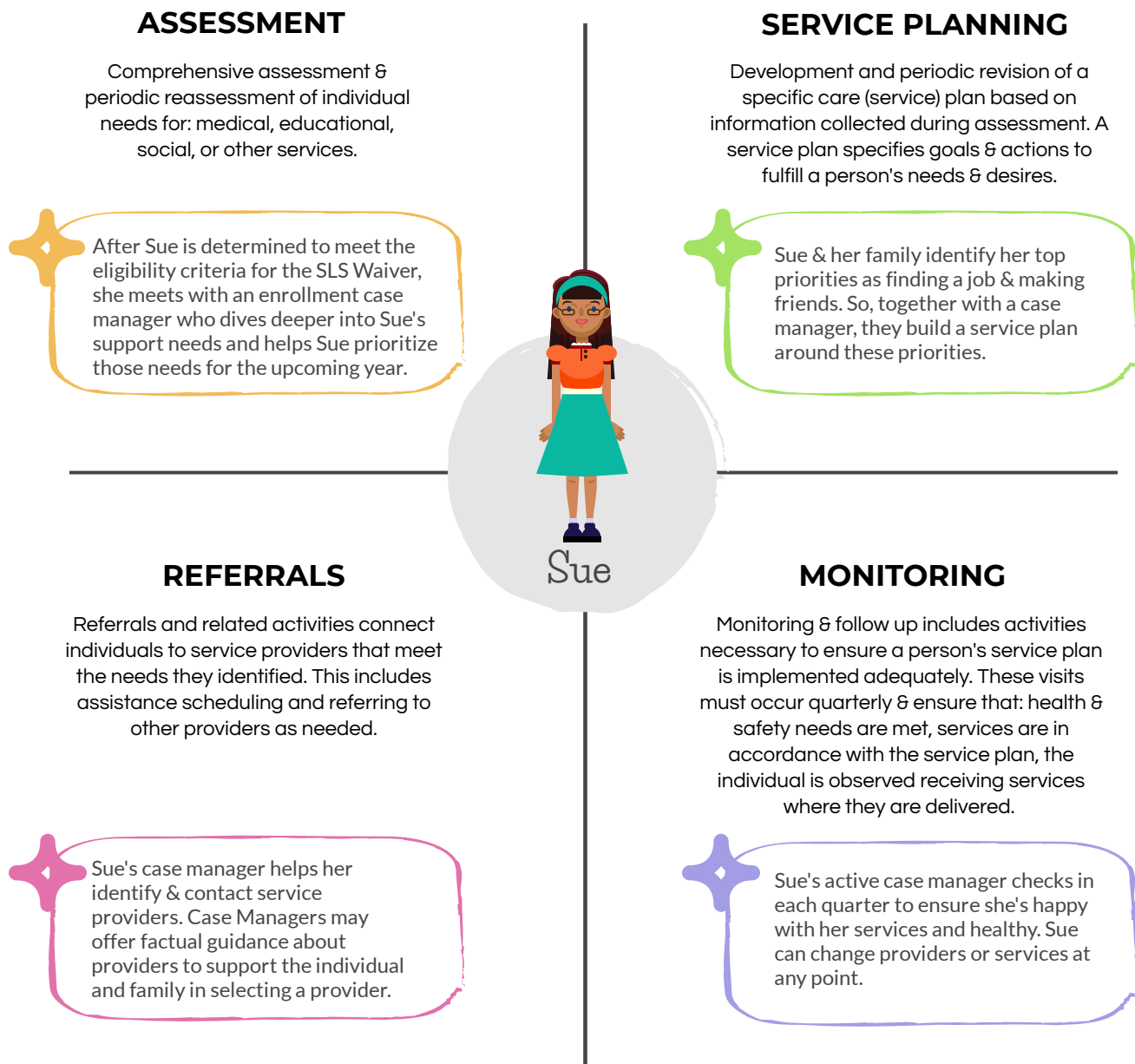
Roadmap to Care

Follow along with our fictional character, Sue, as she and her family initiate contact with Developmental Pathways and seek the services that are right for her through the Case Management Department.



Targeted Case Management

Developmental Pathways is contracted with the Office of Community Living (OCL) under the Colorado Department of Health Care Policy and Financing (HCPF) to provide case management supports to individuals enrolled in both State-only-funded programs and individuals enrolled in Home and Community Based Services Medicaid (HCBS) waivers (CES, DD, SLS). The Code of Colorado Regulations (CCR) stipulates 4 specific categories that comprise Targeted Case Management (TCM). If an action falls outside of these defined categories, it is not considered TCM and cannot be reimbursed as TCM.





Understanding Referrals & Enrollments

Enrollments into HCBS Medicaid Waiver programs leveled off in FY18 after reaching a peak in FY15 as a result of the state eliminating waitlists for the CES and SLS programs. At the tail end of FY18, the state authorized 465 new DD resources statewide of which Pathways will ultimately receive slightly more than 100 slots. The CES program for behaviorally challenged children continues to grow at a fast pace driven by the growing populations of Arapahoe and Douglas counties. It is expected overall enrollments into the HCBS programs will continue at a pace of 300 individuals per year.

1

REFERRAL

A referral or resource call is simply someone looking for human services in the community. Of the nearly 2,000 referral calls fielded in FY2018, most were seeking support other than I/DD-related resources.

2

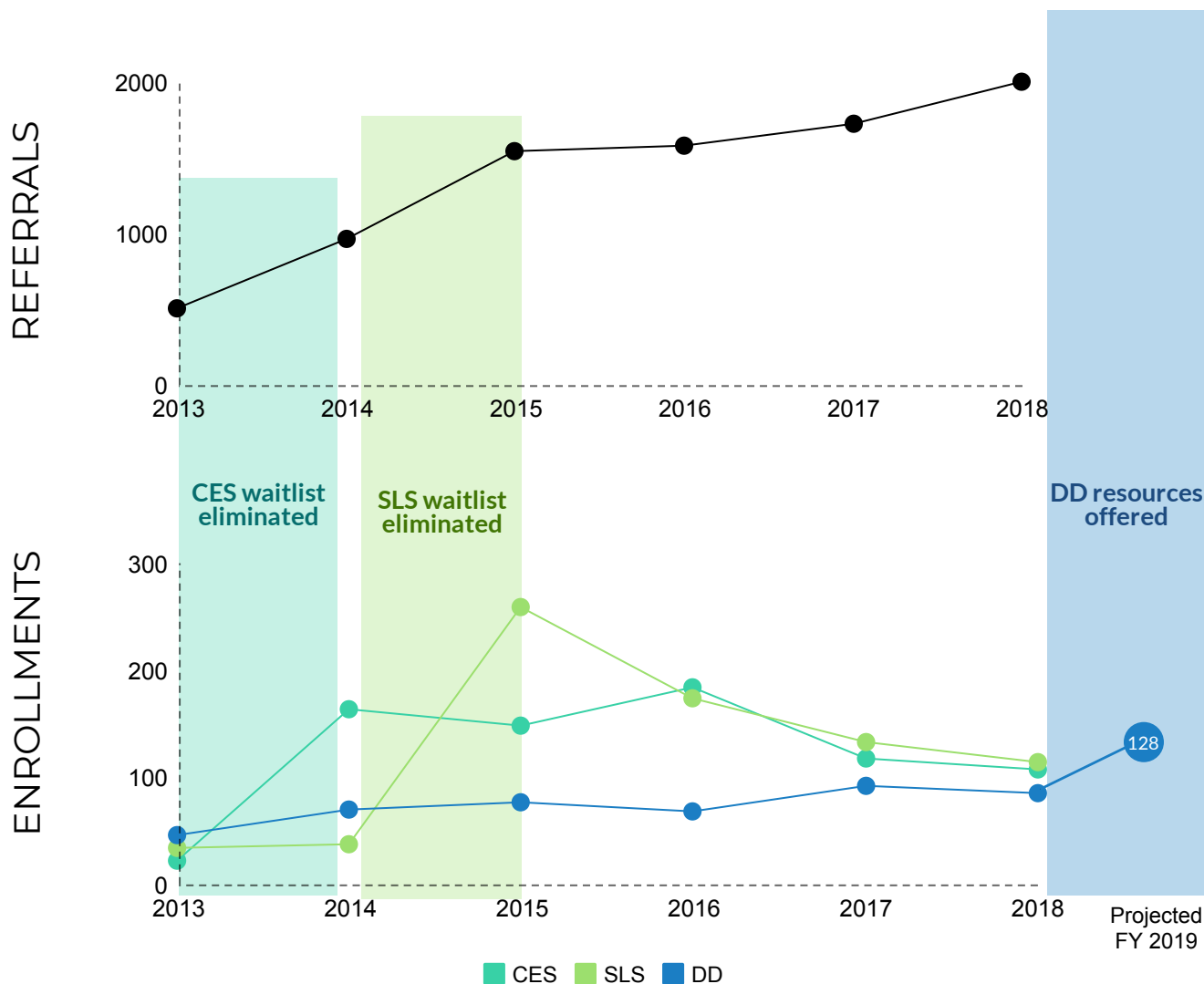
DD DETERMINATION

People who may meet I/DD criteria complete the Intake process with us and apply for a Developmental Disability (DD) Determination.

3

ENROLLMENT

Enrollment is defined as the start of services for one of the following programs: HCBS waivers (CES, DD, SLS), State SLS, and/or OBRA. These enrollment numbers do not include EI or FSSP.



Understanding Waitlists

What is a Waitlist?

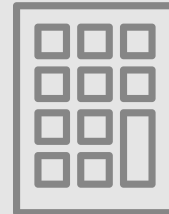
A backlog of people waiting to enroll in a program because a) the government ran out of spots or b) the General Fund ran out of money for additional spots, or a combination of the two.

How many waitlists are there?

It depends on the aforementioned factors. Currently, there are 3 I/DD programs with waitlists: HCBS-DD waiver, FSSP, & State SLS. Waitlists were eliminated for HCBS CES & SLS Medicaid waivers.

Let's Talk Timelines

A timeline is a marker of a person's needs and preferences regarding the program they're waiting for. There are 3 main timelines that describe a person's level of need.



Why Waitlist Numbers are Tricky

It's possible for one person to wait for multiple programs at the same time.

EX: someone waiting as "See Date" for both the SLS and DD waivers because they're not yet 18 yrs. old and unsure of which program they will be able to enroll in.

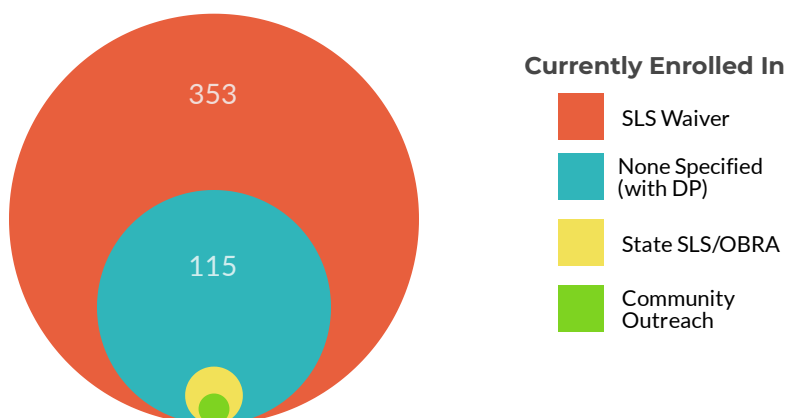
It's also possible for a person to be enrolled in a program & on the waitlist for another.

EX: A child who is currently enrolled in CES (no waitlist) and waiting for the DD waiver as "See Date", meaning they will be eligible to enroll once they turn 18.

SO WHAT'S THE TAKEAWAY?

It's probably most helpful to focus on folks waiting with a timeline of ASAA because they are expressing desire for a different level of support than they're currently receiving. Take the DD Waiver as an example, which has historically had quite a long waitlist. There were 477 people waiting "ASAA" for the DD waiver in FY2018. Of those people, 362 were receiving services in another I/DD program.

Individuals waiting "ASAA" for DD Waiver



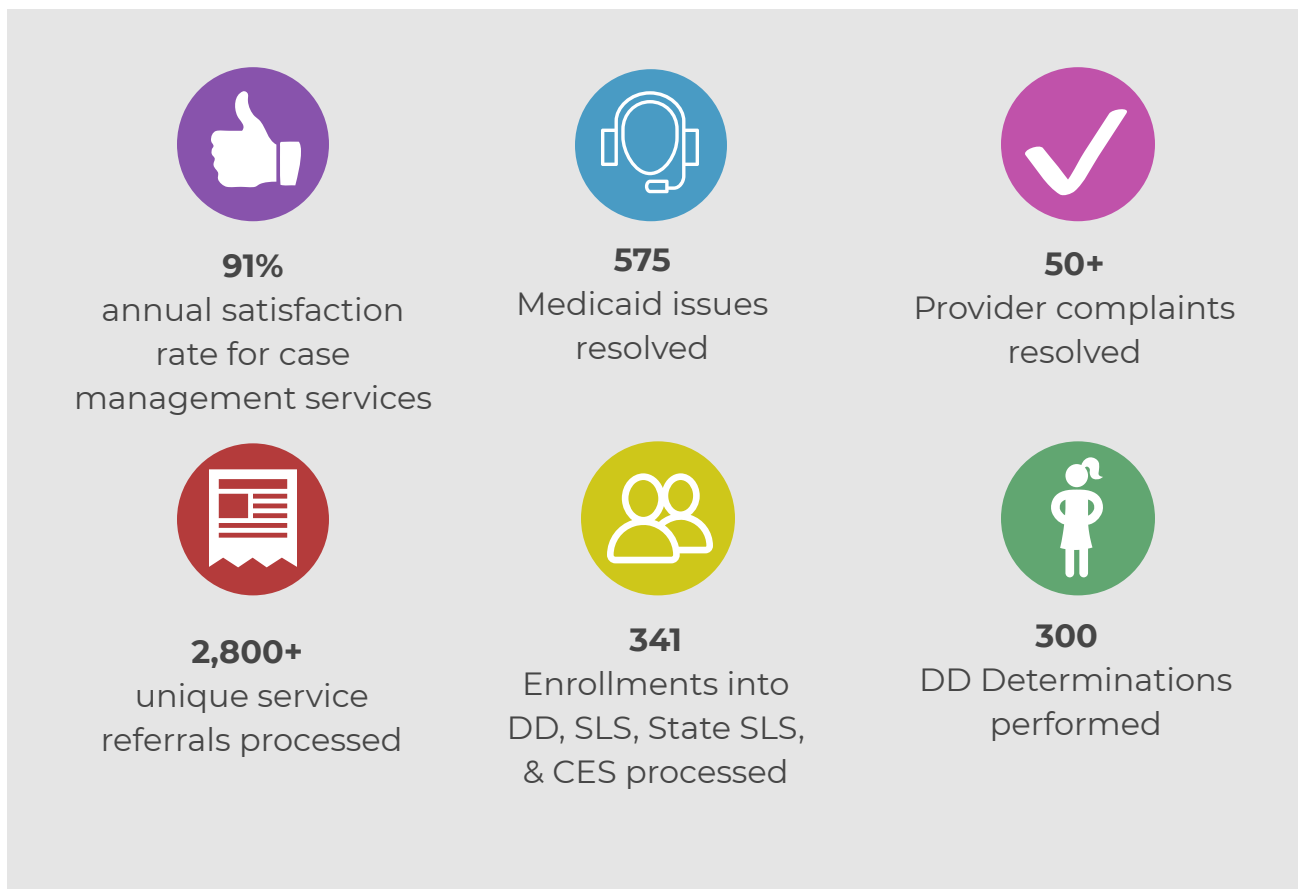
You may be asking, "Why is the DD Waiver so hard to get onto?"

Great question. The HCBS-DD waiver provides access to 24-hour care for folks with very high needs. Because of this, people enrolled in this waiver have access to as much funding as needed. So, the short answer is because the funding required is substantial and no state legislature has yet to commit to providing it. 468 new DD waiver spots were opened in Colorado in calendar year 2018 because of House Bill 18-1407 and other waitlist management efforts. DP received authorization to enroll 100+ out of the total resources opened. This was the largest increase we've had in a very long time.





Successes

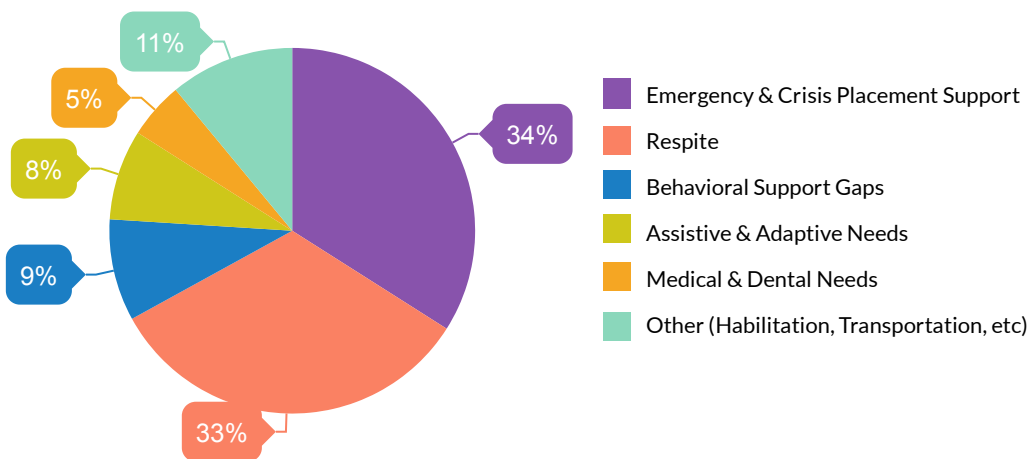


Unmet Needs Funding

Unmet Needs Funding supports people experiencing an emergency and/or who have an identified need that cannot be met by any other means related to: Health, medical, and/or safety needs OR health, medical, safety, and/or behavioral concerns which put current or future placement at risk.

Managed about **125** requests for about **85** individuals

Allocated \$230,000+
(1/3 to Douglas County & 2/3 to Arapahoe County)





Family Kudos

"I thank you! My daughter thanks you. Her brothers and sisters thank you. Her Granny thanks you. Her dog Toby thanks you..."

"You folks are so easy to deal with and you make everything so much easier to understand. It's nice to know that I have such reliable and responsive folks on my team when [my daughter] and I have a problem or a concern. THANK YOU."

Provider Kudos

"I really think you all do a great job communicating issues, concerns, progress, etc. [at PASA meetings]. I also commend the way you all handle customer service. Just want you to know that it's noticed."

"Developmental Pathways consistently exceeds standards for PASA relations...Thank you for being so prompt...and for committing to resolving my concern so quickly. It showed that you made my issue a priority. Working with you and Alliance has been excellent and I admire your knowledge, poise, & expertise as a peer in the IDD world"



STAFF DEVELOPMENT & ENGAGEMENT

One of our core emphases with Mill Levy funding is staff development and retention. Investing in our staff improves our culture and ensures high quality outcomes for the people we serve. Each of our departments takes a unique approach to staff engagement & professional development with the support of our in-house training team.



HIGH POTENTIAL LEARNING PATH (HIPO)

The HiPo learning path is a professional development program for individual contributors. Participants apply to be in a cross-department learning cohort that meets for 7 months. Once accepted, they are immersed in topics such as Emotional Intelligence, Communication, Conflict Management, Time Management, Project Management through instructor-led and online trainings. The program culminates in a group project identifying an area of improvement at the organization and proposing a feasible intervention. Several of these projects have resulted in system changes in the past year. 27 staff members across Pathways' three departments graduated from the HiPo learning path in 2019.

EARLY INTERVENTION

Early Intervention's most recent group of 3 HiPo participants developed a solution-based proposal for the improvement of their data system and storage infrastructure called the SharePoint Project which was implemented in January 2018 and allows improved ease of data access and a streamlined workflow.

CASE MANAGEMENT

Just under 20 Case Management & Quality Assurance staff members recently graduated from HiPo. Participants worked in teams of 4 to propose solutions to address department pressure points including: supporting new hires navigating our mobile work environment, team collaboration in various arenas, & resource centralization. Both the work completed and the skills obtained through HiPo will help buttress continued growth and succession planning.

COMMUNITY OUTREACH

Community Outreach had 4 staff members participate in HiPo and worked on developing presentations to increase knowledge about their programs for both staff and families. These presentations have been used for family orientation meetings as well as presentations at local schools. Participants also implemented a warm handoff procedure from the Early Intervention program to the Community Outreach program. This project promoted open communication decreased stress for families transitioning out of one program and into another.

EARLY INTERVENTION

Supported a Culture of Growth & Collaboration

- Developed EI Team Newsletter for increased communication and connection
- Implemented video & online trainings to support improved service delivery and systems understanding
- Delivered a Professional Development survey to identify & inform staff about future In-service days and professional development opportunities.

"People don't often see or understand the glue; that's what our team is. We're the glue that holds all of the pieces of Early Intervention support together for families."

Restructured Teams

Reorganized regional teams which has allowed us to effectively cover our large geographical area and has facilitated an equitable distribution of children per coordinator caseload. Average service coordinator caseload is 45 children.



CASE MANAGEMENT & QUALITY ASSURANCE

Improved Hiring & Onboarding Experience

Implemented new conversational interview structure & improved prompts and processes to identify candidates that are the best match. The comprehensive onboarding process centers around connection and culture.

Revamped Training Program

Redesigned the training program into a 4-week intensive focusing on knowledge building, resourcefulness, & implementation of soft skills. Developed 2 paths tailored to role-specific skills.

Promoted Opportunities for Feedback & Collaboration

Facilitated a Staff Advisory Council composed of individual contributors that share ideas, express concerns, provide feedback, & ask questions of the department director. We also keep an Open Door Policy for all staff to meet with leadership for feedback, support, and check-ins.

"It was the interview, the chemistry the panel had with each other, the energy in the room, and how comfortable I felt chatting with y'all, that sold me (on accepting this position)."

-Feedback from a New Hire

COMMUNITY OUTREACH

The Community Outreach staff members enjoy connecting with families and community organizations through partnerships and events. Staff are encouraged to be creative with how they support families and they appreciate being able to offer an idea and watch it become a partnership or event. There is a real team atmosphere in our department where everyone's voice matters and is heard. We put value in original thinking and creativity when approaching our work.

"[We have] such an amazing team spirit! My coworkers are so willing to share resources & problem-solve with me!"

"We have a great management team and truly feel supported by them."



CHALLENGES

There are many challenges to serving the needs of people with I/DD in our area. We are actively addressing many of these challenges through the initiatives supported by Board Designated Funds.



Respite

The highest need identified by families. Providers are difficult to find. Rates and regulations limit provider capacity.



Provider Capacity

Existing rate structures make it difficult to find quality providers, especially for those with high needs.



Behavioral Health

Behavioral specialists are needed for all ages, including many requests for support in childcare settings.



Transportation

Affordable & accessible solutions are needed, especially in Douglas county & more rural areas.



Youth Housing Shortage

There are few housing options for children with a dual diagnosis (I/DD & mental illness) who often need out of home placement beyond the foster care system.



Emergency Situations

Care is needed for individuals in crisis, unstable family environments, & those without adequate mental health supports.



Spanish-Speaking Providers

It continues to be difficult to find enough Spanish-speaking providers to meet our needs.



Unfunded Needs

Individuals & families needing more support than what is currently available under state & federally funded programs, especially for children aged 3-5.

Meet Abi

Abi arrived from India weighing less than 4 pounds and ill with meningitis.

Yet, her Indian given name, Anupama is a tribute to who she is today: "Unparalleled." Developmental Pathways came into our lives while Abi was in high school. Getting her enrolled in the SLS Waiver opened up doors never thought imaginable. DP was instrumental in introducing us to various programs available to our Abi. Their kindness, their knowledge and their willingness to go beyond to help made a huge difference in navigating the very arduous process. The wonderful team at DP has invested in our family and Abi is changed because of those who have given to her. We are changed because we know people care and are willing to go beyond to help. One program Abi was introduced to is called Wellspring Community. Her participation with Pathways made this program available, and it has been life-changing. She is able to do hands-on training within their Best Buddies Café and take a variety of classes. She now has friends and is able to manage things that may rattle her. She can also communicate her needs and is making a difference to those around her. Her life is so much more enriched because of the doors Developmental Pathways has opened.



CONCLUSION

Developmental Pathways meets the agreement requirements of the mill levy funding by:

- Protecting & assisting individuals with intellectual/developmental disabilities in ways that help keep families together.
- Preventing the costly price of out-of-home placements.
- Supporting adults with developmental disabilities.
- Supporting infants with developmental delays.
- Helping adults with developmental disabilities acquire employment & job training.
- Providing day programs & other services to seniors with developmental disabilities so working families can care for them at home.
- Actively reducing the long waitlists of children & adults who need services.
- Reaching out to the community to assess needs & connecting our individuals to new resources.
- Achieving these ends through existing county-authorized agencies.
- Identifying unmet needs in the community & developing long-term solutions to meet those needs or challenges.

Looking for more great stories? Find them here:

**Check out
our website**



**Watch us on
Youtube**



**Like us on social
media**



Follow our blog





**Developmental
Pathways**

325 Inverness Dr. South
Englewood, CO 80112
info@dpcolo.org | 303-360-6600