

Developmental Pathways

MILL LEVY REPORT

Douglas & Arapahoe Counties

JULY 1, 2020 - JUNE 30, 2021

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Developmental Pathways

We are a hub of information and resources, propelled by a team of passionate staff dedicated to serving a community of diverse abilities.

Developmental Pathways (DP) serves more than 8,000 individuals with intellectual and/or developmental disabilities and delays (I/DD*) of all ages in Arapahoe, Douglas, and Elbert* counties, and the City of Aurora, which includes parts of Adams* County.

Much of our work focuses on care coordination for individuals and families in need of help navigating the complex world of disability services, but we also actively build, support, and partner with community resources to meet the needs of our community. We contract with multiple state and local partners and are an integral part of accessing I/DD services in our community.

At DP, we partner with people in their pursuit of a meaningful life through advocacy, education, connection, and support. We strive to be a central resource for individuals and families seeking additional help, and if we can't meet your need, we likely know someone in the community who can. Our programs are primarily funded by federal, state, and county dollars, as well as private philanthropy that supports the unmet needs of many connected to our organization.

Since 2001, Developmental Pathways has utilized local county Mill Levy funding to best meet the needs of the individuals with I/DDs and the families we serve while responding to the Referendum 4A* emphases through:

- Prioritizing assistance for those waiting for services and/or with unmet needs
- Raising service quality for people with I/DD
- Stabilizing service infrastructure, specifically by investing in staff training and retention
- Supporting the providers of last resort



This report summarizes the programs, quality of services, and infrastructure supported by \$18.71 million of direct Mill Levy funding for the past fiscal year 2021 (7/1/2020 - 6/30/2021).

Presented in a new format, this Mill Levy report aligns reporting with broad programming and its impact on our community. Additional information, such as demographics, definitions, history of Mill Levy, etc., can be found in the Appendix at the end of the report.

FY2021 INREVIEW

FY21 in Review
Direct Local Programming
Care Coordination
Fund Balance
Supplemental Financial Information

FY21 in Review

\$18.71 Million

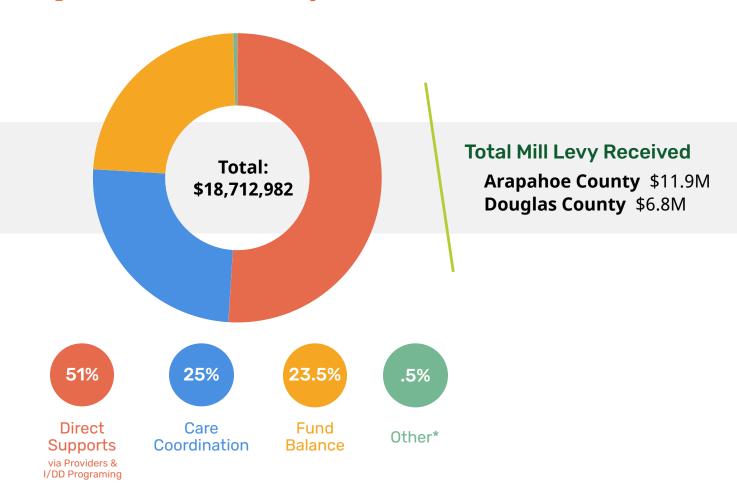
We prioritized our Mill Levy spending to support individuals and families, community supports, and I/DD systems work in two key ways:

- Direct monies to individuals, families, and providers (Direct Supports)
- Agency-level work to strengthen I/DD outcomes for our community (Care Coordination*)

The funds were intended to:

- Meet unmet and under-met needs directly, including developing and supporting direct service programming in the community.
- Develop and support case management and service coordination programming, both of which assist in creating more meaningful, integrated outcomes for individuals with I/DDs and their families.

Expenditure Summary



Direct Local Programming

\$9.5 Million (51%)

Direct local programming supports people with I/DD and helps build a more inclusive community while supporting and strengthening community agencies to help protect and assist individuals and their families in leading healthy, safe, person-centered, and integrated lives.

Programming includes

Monies given **to directly benefit a person with an I/DD** (and their family members) through programming like Individual Unmet Needs and Scholarships.

Monies given directly to benefit community-based providers such as Program Approved Service Agencies (PASAs), advocacy and education organizations, recreation and community centers, and other providers assisting individuals and their families with disability supports.

Local programming to support individuals waiting for state and federally funded services through Community Outreach Waitlist Services programming.

In action, this looks like



Service Stability (\$7.3M)

 The majority of funding supports individuals with the most complex needs in group homes along with those in three other supportive programs (450+ this year)



Community Outreach Waitlist Services (\$1.26M)

- Care coordination for 1,600+ people
- 7,500 people reached with bi-weekly eNewsletter



Individuals & Families (\$806K)

• 500 unmet needs requests fulfilled



Education & Events (\$27K)

- 500+ caregivers & early childhood providers trained
- 1,200+ scholarship & fair participants



I/DD Community Supports (\$19K)

- Awarded 65 scholarships & 44 provider grants*
- 100+ local busineses supported

Success

ResidentialThese adults have lived in their Douglas & Arapahoe Counties residential agencies for 15+ years and are greatly impacted by Mill Levy funding.

- **Sue** battled COVID-19 and returned home to her residential provider with higher support needs. Mill Levy funding supported Sue in various ways, including ensuring staffing and operational stability in her group home to help with her recovery needs.
- **Michael & Ari** are non-ambulatory and require full care with 24-hour awake staff. Mill Levy funds supported staffing and operational stability to meet their high medical needs and ensure high-level nursing care was constantly available.

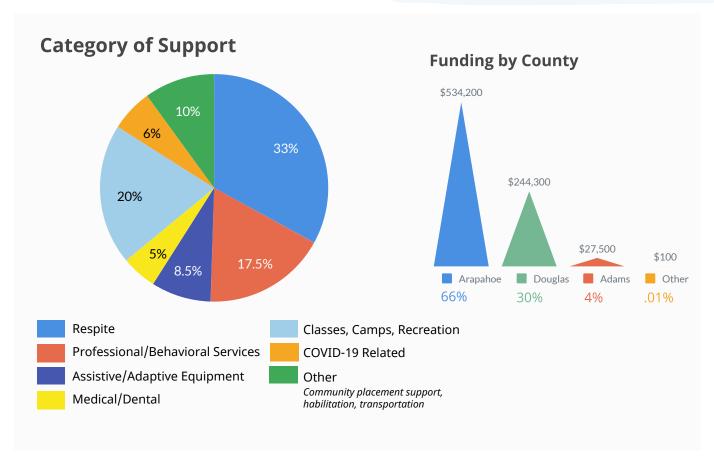
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Individual Unmet Needs

\$806K

Over \$1 million* in total funding supported individuals and families with unmet and under-met needs from all available funding sources.





Success

Meet Miguel

Miguel was about 14 years old when the global COVID-19 pandemic began. His parents worked in the medical field and were up against service limitations and waiver caps while trying to wrangle respite and youth day services. At the same time, they navigated the rough terrain of caring for a kiddo enrolled in the Children's Extensive Support waiver (CES) while working long hours to support their family and community. Individual Unmet Needs was able to step in to provide gap supports pending additional waiver services.

Note: name changed for privacy

Community Outreach Waitlist Services Programming

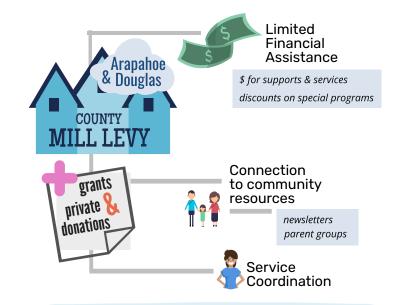
\$1.26 Million

Community Outreach is a waitlist services program designed to support individuals with disabilities who do not yet qualify for state or waiver-funded I/DD programming and are currently waitlisted.

This program also provides funding for specific unmet or under-met needs, connects people to other disability resources, and helps children who have recently exited the Early Intervention program with ongoing delay needs.

Through this service coordination, individuals have access to community resources such as free or discounted DP-specific programming (scholarships, partnerships, etc.), newsletters, and aid in accessing local programming.

Without Mill Levy, these families would have no way of accessing these supports.



An average of 1,100 people supported/month.

An average of 125 allocations/month.

Thank you for all you do to help get our children the support they need. These services are very expensive, and we couldn't pay for them on our own. Thank you for helping!

- Parent of child in services

We are very grateful for [our coordinator] with getting our child into swim lessons and hopefully other activities to aid her speech!

- Parent of child in services who requested activities for child to practice talking with peers

Impact of Waitlist Services Programming

A family in our Community Outreach Waitlist Services Program was in crisis and, at one point, homeless. Our team provided resources, made referrals, and helped organize funding through our Unmet Needs programming to cover respite care and personal hygiene supplies. Our supports helped the family along their path to stability.



Did You Know?

In FY21, DP augmented community supports using additional funds from our Fund Balance to address community needs through Provider Grants and other programming, **adding over \$1M to the \$9.5M**, **making the total annual investment in Direct Local Programming \$10.5M.** Funds were spent in the local economy and benefitted people with I/DDs across our catchment area.

Provider Grant Impact Story

Aurora Mental Health (AuMHC) received a provider grant to expand existing vocational services to better serve and support individuals with I/DDs through collaboration with their Intercept and Aurora Center for Life Skills (ACLS)

programs. They created an Employment Specialist position dedicated specifically to AuMHC clients with a dual I/DD diagnosis. They needed initial funds to start the program and will utilize existing funding streams to sustain it long-term. By creating this new position, AuMHC will be able to expand its vocational services to the I/DD population, reducing unemployment and expanding continuity of care. In turn, participants will experience improved mental health, more connectedness, and a higher sense of purpose.







Provider Grants

Over 7700+ individuals (and their families) across 44+ organizations benefitted from this \$1M this past year!

Grant Recipient Quote

The funding that Developmental Pathways provided has allowed us to open a cutting-edge Early Intervention ABA center in Aurora. Our center can provide intensive, full-time learning services to up to 30-40 children with Autism Spectrum Disorder and Developmental Delays at a time. Through evidence-based treatment and hard work by our staff and caregivers, we are already beginning to see these children accelerate their learning and development to be able to graduate and join their peers in preschool and school. Thanks to Developmental Pathways, the center will be fully open in mid-November of 2021, and the community is proud to have this resource available.

- BehaviorSpan

Impact in Douglas & Arapahoe Counties

\$642,000

in community supports, including provider grants, scholarships, sponsorships, activities, and community programming

\$295,000

in outreach and engagement staffing

\$107,000

in general administration (software licensing, cell service, and other than personnel costs)

Care Coordination

\$4.7 Million (25%)

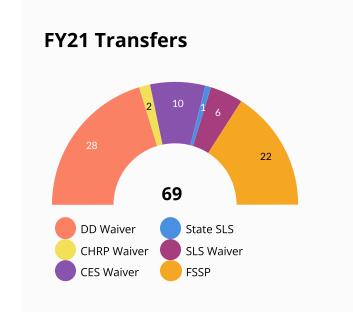
While our contracts with the State of Colorado covered much of the primary case management and service coordination functions required, Developmental Pathways invested nearly five million dollars (\$4,674,884) of Mill Levy funding in wrap-around care coordination.

This funding is key to building a solid foundation for a lifespan of supports for individuals and families. It is also critical to help case managers and service coordinators navigate issues peripheral to the core requirements outlined in state contracts but integral to quality long-term care supports. Staff members regularly assist individuals and families in accessing local Mill Levy-funded resources, including unmet needs, wrap-around services, scholarships, and other aids.

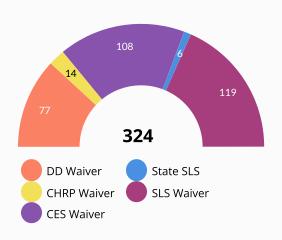
In action, this looks like intentionally staffing teams with people dedicated to helping our community traverse the complicated world of disability services. Our teams play a critical role in ensuring that people with I/DD and their families receive quality care in the most seamless way possible.



Transfers & Enrollments



FY21 Enrollments



"Developmental Pathways continues to exceed our expectations. They have a wealth of knowledge and resources that we never knew existed. They're understanding, empathetic and personable. Our lives have changed for the better and our son is thriving because of the love and passion that each individual within the DP community has given us."

- parent

"DP has given me the confidence in supporting Sullivan and his unique development path. Our providers have taught me how to help Sullivan in his exercises to get stronger. They have also helped Sullivan make wonderful progress!"

- Lauren (parent)
<u>Click here</u> to read more about Lauren & Sullivan's story

"Aileen, our case manager, is always quick to respond, be a kind and gentle ear when things are hard, and celebrates with us as our girl meets some pretty amazing milestones!"

- Brandy (parent)



Success

Meet Saul

Saul is a teenager with moderate supervision needs that increased significantly upon adolescence and family changes. Saul and his family came to DP's Intake team in late 2020. While our Crisis team worked to complete a rush enrollment into a waiver, we helped the family access Medicaid Buy-In to cover the expense of behavioral supports, and Saul enrolled in our Community Outreach Waitlist Services Program. Additionally, Saul accessed our Unmet Need Funds and scholarships to pay for attendance at specialized camps and inclusive activities. Our enhanced local programming ensured Saul immediately had the necessary therapies and resources that would have otherwise taken much longer to receive solely through the state disability system.

Note: name changed for privacy

Staff Development & Engagement

How we're investing in our workforce

One of our perennial emphases with Mill Levy funding is to train, develop, and retain staff to ensure high-quality outcomes for the people we serve. We coordinated employee supports to provide a safety net for staff, which, in turn, ensured continuity of service to our individuals and families. Below are the ways in which we've invested in staff in FY2021.



Redefining the Employee Experience

- Like the national 'great resignation' trend, we face turnover in critical positions, and therefore, clear communication and active succession planning remain key areas of focus
- · Reconfigured training courses to address needs identified via an organizational assessment
- Decided to sell the Inverness office building and pivot to a hybrid model with headquarters operating out of the Jewell office location. Our future planning includes a satellite office in Douglas County.

Staff indicated in a November 2021 survey:

- 93% are more if not equally productive working from home
- 90% of staff receive just enough or more than enough communication from leadership
- 98% of staff have regular 1:1s and team meetings

We will continue to survey staff regularly regarding internal communication, staff engagement, and hybrid working (remote & in-office) and adjust accordingly.

Turnover: 20.42%

Efforts to stabilize our workforce appear to be working, though the global pandemic leaves a lot of unanswered questions about the long-term impact on the workforce.

Last year, we worked hard to help teams balance work and home life:

- Administered governmental supports such as the CARES Act & FFCRA
- Provided PTO advances with a payback agreement, temporarily paid for medical insurance premiums for employees with reduced hours, & accommodated flexible work schedules
- Directed staff to mental health resources through the Employee Assistance Program and our health insurance provider

This coordinated staff support effort, in turn, ensured continuity of service to the individuals and families we serve.

- Over 46% of staff departures were related to people moving out of state (20%), returning to school (10%), or other personal and family-related reasons, including retirement (16%).
- No staff departures were related to the economic downturn triggered by COVID-19.

Staff Development & Engagement (continued)

Diversity, Equity, & Inclusion

As a notable investment in our workforce and community, our staff-led <u>Diversity</u>, <u>Equity</u>, <u>and Inclusion (DEI) Committee</u> worked with our consultant, The Equity Project, to create an Equity Blueprint. Just as a traditional blueprint guides the construction of a cohesive and functional building, our Equity Blueprint will guide the complex work of building an equitable and inclusive community and advancing a culture of shared purpose and belonging.



Fund Balance

\$4.4 Million (23.5%)

The unrestricted fund balance represents the number of months that Developmental Pathways could operate without further local, state, or federal dollars.

Nonprofit organizations assess appropriate reserve balances based on their risk exposure and unique financial circumstances. Reserves are utilized to maintain financial solvency and mitigate risks that may adversely impact the organization's bottom line; funds may also be used for new strategic opportunities which improve outcomes supporting the vision and mission of the organization. These funds provide the people we support with financial security and peace of mind that our company could sustain itself under unforeseen economic challenges.

These undesignated net assets align with industry best practice which recommends nonprofits maintain 3-6 months of operating reserves. Our Board of Directors approved a recommendation to target a reserve amount covering around five months of operations, averaging approximately \$3.4M/month. Therefore, our target balance is about \$17M.

The Community Engagement department is developing a long-term strategy to utilize our funding to best support the needs of individuals with disabilities and provider agencies and keep our reserves at the recommended balance.

Annual Expense

\$41,250,934

Monthly Expense

\$3,437,578

Total Undesignated Net Assets

\$26,229,602

7.63 Months of Operation



Board of Directors Mill Levy/Fund Balance Committee

At the end of FY21, our Board of Directors created a subcommittee, which includes a County Commissioner from each of Douglas and Arapahoe Counties dedicated to providing targeted leadership for the future of Mill Levy and the best ways to utilize fund balance.

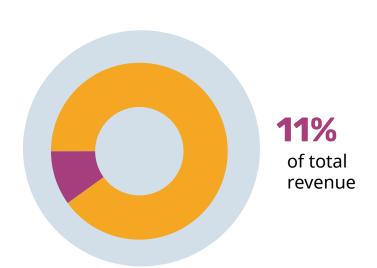
The work of this committee and the Community Engagement department is to create and maintain programming that is supportive of the community while being excellent stewards of local funding.



- To supplement and not supplant other funding sources
- Meet the broad needs of a diverse community

Supplemental Financial Information

Management & General Expenses



M&G Expenses

\$5,265,008

Total Expenses

\$41,250,934

Total Revenue

\$47,590,146

LOOKING AHEAD

Challenges
Future of Mill Levy
Conclusion

Challenges

Every year presents a myriad of challenges in supporting and serving the needs of individuals with I/DD and their families, both in our area and statewide. We've navigated these challenges through strong community partnerships as well as engagement at local, state, and federal levels.

Responding to COVID-19

We are still dealing with the far-reaching impacts of the pandemic.

- Leadership continues to address COVID-related issues for the individuals and families we serve and our staff.
- Staff implemented an impressive number of operational and policy memos and adeptly navigated a changing regulatory landscape of mandates, rules, safety protocols, and an overwhelming desire for community.
- The Community Engagement team worked with service providers and community partners to support virtual programming, including yoga, storytimes, etc., to support family caregivers.

System Capacity

DP continued to work with the community on systems capacity.

- Through the Colorado Legislature funding, additional HCBS-DD Waiver slots were added. As a result, DP expects to enroll about 200 individuals off the DD waitlist.
- Through our collaborative and cross-systems work, we try to ensure access to emergency placements when a family is in crisis.
- Health Care Policy and Financing (HCPF) also expanded SLS capacity through a budget request to support individuals who live at home with family caregivers, increasing respite and other interventions to minimize crisis enrollments and better assist and stabilize individuals and families with additional funds.

Recruiting & Retaining Staff

In the pandemic, staffing continues to be an issue across industries.

- We continue to see acute challenges for case management and direct services. There remains a growing divide between the rising annual cost of living, inflation, and the state-approved rate increases, which continue to challenge our ability to hire and retain qualified staff.
- We continue to partner with Health Care Policy and Financing (HCPF), through their work with the Direct Workforce Collaborative, and advocate with elected officials on these issues. Workforce shortages in the direct care space also exacerbate the invisible waitlist where individuals may be enrolled in a waiver program, but there are no providers to deliver services.



Funding for Core Services, Case Management, & Service Coordination

At the end of FY21, significant contract changes around eligibility and rates impacted EI service coordination and I/DD waiver/state general fund programming. We're working to understand the long-term impact of these changes.



Long Term Services & Supports (LTSS) System Redesign

HCPF is overhauling how long-term services are delivered in CO, with a target implementation date of July 2024. Myriad changes to statute, regulations, provider requirements, and systems infrastructure are intended to improve outcomes for individuals and families supported by the long-term care system. DP regularly takes part in crucial conversations on operationalizing these changes to help ensure limited disruptions to families.



Conflict Free Case Management

As a component of the overall LTSS redesign, the state is moving toward total separation of direct services and case management functions for Waiver and other Medicaid-funded supports. For metro CCBs, complete separation must occur by July 2024.

Future of Mill Levy

Made Possible by You

Mill Levy funding was put in motion with the unanimous support of the Arapahoe and Douglas County Commissioners and made possible through the caring and dedicated voters who supported the 2001 referendum.

This calendar year marks the 20th anniversary of these vital financial supports. We want to thank our commissioners for their ongoing support and advocacy of the I/DD community and our providers, community organizations, and of course, the taxpayers of Arapahoe and Douglas Counties for helping us improve services along the way.

The future of Mill Levy and I/DD services is possible because of you! Thank you!

A New Way Forward

Since the initial discussions of Conflict Free Case Management (CFCM) and Case Management Redesign (CMRD) began, we've recognized a need to reevaluate how we provide services to people with I/DD, including how we use local funding.

Our goals are to

- safeguard the programming that works
- refine programming to better meet the needs of our individuals and families in services, our community partners, and government agencies
- innovate with our community partners to fill system gaps

Our vision is to continue to enrich lives and strengthen communities.



Our Approach

Full-time financial analyst who oversees Mill Levy spending and better accounts for each county's contributions (along with other funders).

Staff dedicated to exploring and operationalizing program options to develop more agile, person-centered approaches to distributing funds to individuals and families.

Dedicated Mill Levy/ Fund Balance Committee

Staff dedicated to refining **community grants programming** to increase and diversify funding to add capacity and options for people with I/DD.

Staff dedicated to ongoing **education** and **resource development** and community **partnerships**.

We are committed to the disability community and are excited about the future.

Conclusion

Developmental Pathways is committed to acting in strong partnership with our county funders by meeting the core requirements outlined under Mill Levy funding and ensuring innovation in our approaches.

In fiscal year 2021, we continued to:

- Protect and assist individuals with I/DD in ways that help keep families together.
- Help prevent the costly price of out-of-home placements through strong system relationships, crisis management, quality case management/service coordination, and unmet needs funding.
- Support individuals with disabilities in leading their most integrated and meaningful lives.
- Support infants with developmental delays and their families.
- Help adults with disabilities acquire employment and job training.
- Work in partnership with our state partners to continue reducing programmatic waitlists for children and adults who need services while also working with direct service providers to reduce waitlists driven by provider capacity.
- Coordinate with the community to assess needs and connect our individuals to new resources.
- Support community providers in building and maintaining quality supports and resources to serve our clients and families.
- Identify unmet needs in the community and develop long-term solutions to meet those needs or challenges.
- Rally behind individuals in service, their families, and our staff during an unprecedented modern-day pandemic.
- Participate in statewide strategic planning around the future of long-term care services.

















For more information about Developmental Pathways,

check out our website and connect with us on social media.











Appendix

History of Mill Levy **Demographics** Impact of Population Growth Services by County **Arapahoe County Recap Douglas County Recap Adams County Recap** I/DD Services Care Coordination **County Liaisons** Developmental Disabilities & Delays **FAQs**

History of 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. Our organization faced significant 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. A Mill Levy election was the only option available to stave off these cuts and meet at least part of the ongoing rush of service demands. This election fell within the conditions set by the Taxpayer's Bill of Rights (TABOR) in accordance with state statute (25.5-10-206(6) 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.

After months of intensive campaigning spearheaded by hundreds of volunteers, both counties passed the referendum. The efforts required for this success included meetings with community groups, public forums, distribution of voter education materials, grassroots voter turnout efforts, and much more.

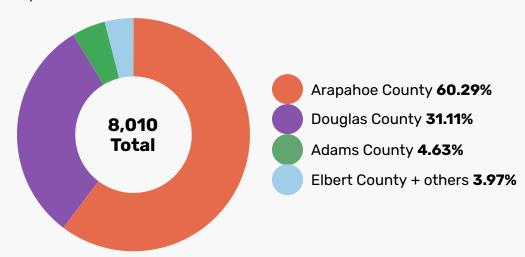
In 2001, voters approved a Mill Levy to support individuals with developmental disabilities/delays. As a result of the successful campaign, service cuts were avoided; and more than 1,600 new individuals with developmental disabilities/delays were served with Mill Levy funds through local and state programming in the first two years of implementation.

The priorities of Referendum 4A included:

- Protect and assist people with I/DD
- Avoid out-of-home placements
- Help to find employment
- Provide daycare and services for seniors
- Work with children to minimize long-term impacts of developmental delays
- Reduce waitlists for services
- Achieve these ends without expanding government

Demographics

Population Served





Arapahoe County

Douglas County

36.6% Female

37% Female

63.4% Male

63% Male



Arapahoe County

Douglas County

68.8% 0-18 yrs. old

80.37% 0-18 yrs. old

31.2% 18+ yrs.

19.63% 18+ yrs.

Demographics



Arapahoe County

4.2% Asian**13.8%** Black**3.8%** Other

13.2% Hispanic 1.7% Unknown

Douglas County

80% White **5.1%** Asian

3.4% Black **4.1%** Other

5.5% Hispanic 1.8% Unknown



Arapahoe County

39.98% EI
15.53% DD
17.74% CO
11.42% SLS
9.22% CES
0.9% State SLS
0.4% CHRP
4.81% FSSP

Douglas County

46.85% EI
5.8% DD
19.42% CO
10.51% SLS
11.01% CES
0.2% State SLS
0.3% CHRP
5.91% FSSP



Arapahoe County

20% Chromosomal Abnormality

15.2% Developmental Disability

10.7% Autism

9.2% Developmental Delay (EI)

Douglas County

26.4% Chromosomal Abnormality

10.3% Developmental Disability

11.3% Autism

11.5% Developmental Delay (EI)

Remaining percentages spread over various diagnoses

Impact of Population Growth

Over the past several years, DP has processed between 300-400 new intakes and enrollments each year.

This is a significant jump from previous years when we only enrolled 50-100 people annually.

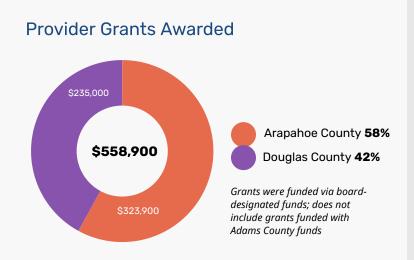
According to the Administration for Community Living, it is estimated that between 7 and 8 million Americans of all ages (3% of the general population) have an intellectual disability. Therefore, our numbers increase when the general population increases. We expect that trend to continue due to the increasingly high growth rates for Douglas and Arapahoe counties, 23% and 15%, respectively, over the past 10 years.

For more information, please visit

- Census Quick Facts: https://www.census.gov/quickfacts
- Adminstration for Community Living: https://acl.gov/



FY21 Services by County

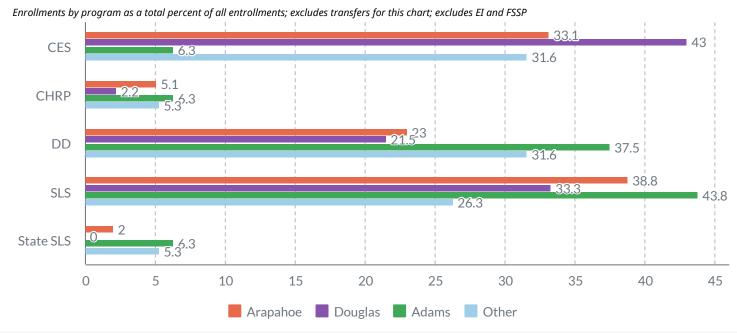


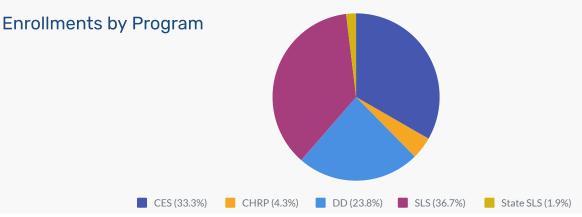
Care Coordination Expenses

Arapahoe County \$2,978,749.40 **Douglas County** \$1,696,134.65

Total \$4,674,884.05

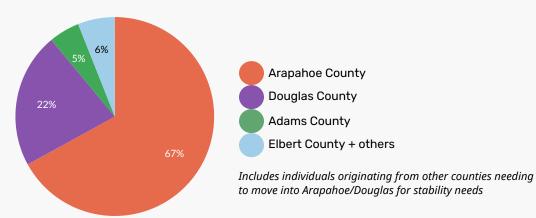
Enrollments by County





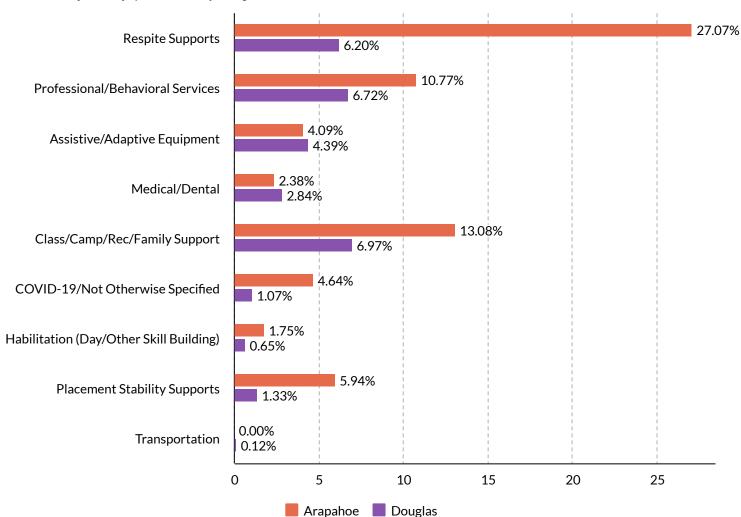
FY21 Services by County

Crisis by County



Unmet Needs by County

Includes only Mill Levy spend (no other funding sources)



Arapahoe County

Investment in I/DD Services

Total Individuals Served: 4,829



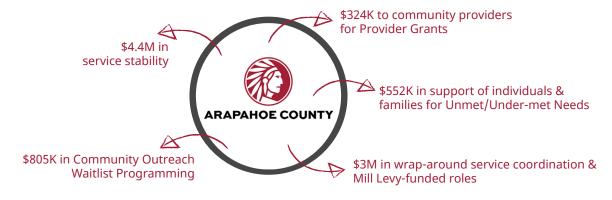
About \$2,500 per individual*

*Per Capita 1: based on amount invested/total served

Top 3 Programs Accessed: Early Intervention 40%

Community Outreach Waitlist **18%** HCBS-DD (Residential) **15.5%**

Community Investment Highlights



Top 4 Areas of Unmet/Under-met Needs (numbers as % per request by county)



Community Wins

- 196 enrollments into HCBS Waiver + State SLS programming: 52 Children / 144 Adults
- About 76 unstable and crisis situations supported by our Crisis team
- 189 individuals and families received benefits team supports to ensure continuity of long-term care benefits*
- Real Life Colorado Grant Funding (temporary funding to support educational gaps through COVID-19)

^{*}Due to the Public Health Emergency & the guarantee of ongoing long-term care Medicaid throughout the year, benefit issues dropped in FY21

Douglas County

Investment in I/DD Services

Total Individuals Served: 2,495



About \$2,700 per individual*

*Per Capita 2: based on amount invested/total served

Top 3 Programs Accessed: Early Intervention 47%

Community Outreach Waitlist 19%

HCBS-SLS 11%

Community Investment Highlights



Top 4 Areas of Unmet/Under-met Needs (numbers as % per request by county)

27%

Professional Services

17%

Independence/Recreation

19%

Medical/Dental

16%

Respite

Community Wins

- 93 enrollments into HCBS Waiver programming: 39 Children / 54 Adults
- About 25 unstable and crisis situations supported by our Crisis team
- 70 individuals and families received benefits team supports to ensure continuity of long-term care benefits*
- Wellspring Expansion Grant Funding
- Promise Ranch Supported Employment Grant Funding

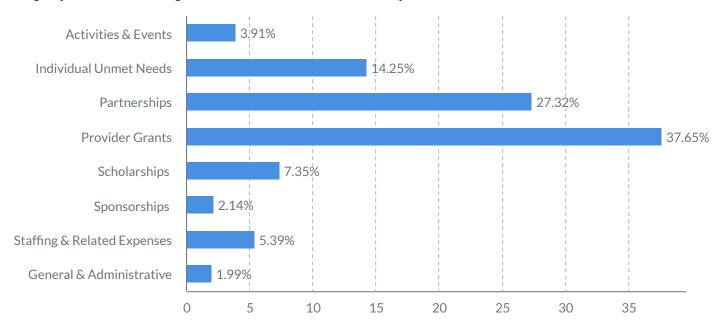
^{*}Due to the Public Health Emergency & the guarantee of ongoing long-term care Medicaid throughout the year, benefit issues dropped in FY21

Adams County

Adams County residents account for five percent of the total number of people served by DP. Over the years, the support we provide to the people with I/DD residing in the portion of Aurora within Adams County has grown. In 2019, DP received direct local funds from Adams County to support these individuals. Arapahoe and Douglas County Mill Levy funds are not used to support Adams County residents.

Local Funds Used For

- Direct monies to individuals, families, and providers [Direct Supports in the community]
- Agency-level work to strengthen I/DD outcomes for our community [Care Coordination]

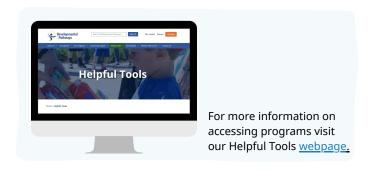


Adams County Impact

- 36 Providers received a total of \$102,000 in grant funds for Adams County residents
- 13 Unmet Needs requests approved for \$38,600

I/DD Services

Programs for eligible adults and children with developmental disabilities/delays are funded through Medicaid, Medicaid Waivers, state funds, Federal Part C of IDEA, and private insurance for covered individuals. Services within each type of program are available based on identifying and prioritizing 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.



Our Programs

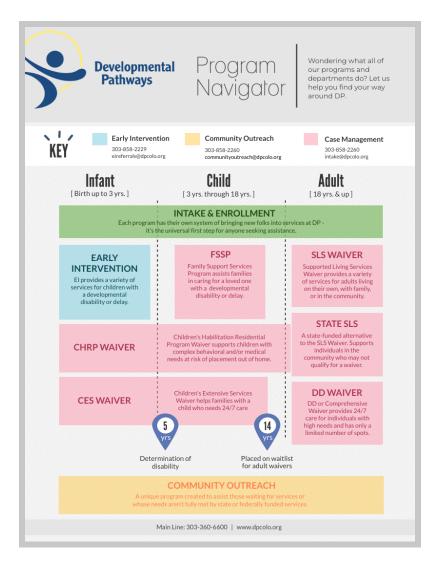
We offer services spanning an individual's lifetime.

The Case Management & Program Quality department assist people with I/DD enrolled in a state or federally funded program, including State SLS, Family Support Services, SLS waiver, DD waiver, CES waiver, and CHRP waiver. State and federal Medicaid pays for four core functions of case management: Assessments, Service Planning, Referrals to external service providers, and Monitoring Visits.

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 anyone served by us. Together, our teams help people receive care through each step of their process.

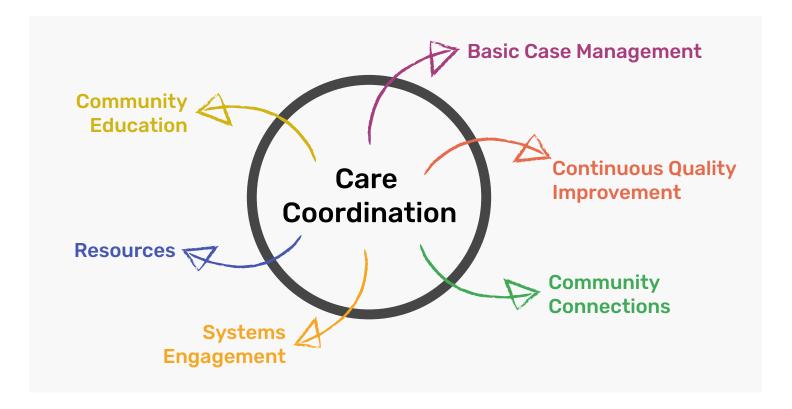
The Early Intervention (EI) program (Part C) provides services and supports for families who have a child up to age 3 with a 33% delay in one or more areas of development or have a child with a qualifying diagnosis. The EI team is composed of service coordinators, intake and referral specialists, therapists, and data and billing specialists who partner with families to:

- Support each family's success and capacity to promote the development of their child
- Deliver services and supports in a familycentered way by identifying a family's concerns and priorities
- Deliver services and supports through a parent/family coaching model within a child's natural environment through everyday activities and routines



The <u>Program Navigator</u> graphic 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.

Care Coordination



Our contracts with our state partners define core case management and service coordination work, including

- Basic intake/referral
- Needs assessment
- Service planning
- Service monitoring and evaluation

The additional care coordination pieces available because of local funds include

The development and maintenance of

- Appropriate community connections, including partnerships with integral disability partners
- · System information and resources for staff members, community members, and individuals /families served

And the establishment and management of

- · Community education and outreach resources for staff members, community members, and individuals/families served
- Continuous systems redesign, systems engagement, and quality improvement across all programs

County Liaisons

DP collaborates with Arapahoe and Douglas County Social Services by staffing and supervising two full-time Case Manager positions funded by local funds through Developmental Pathways. These positions help both agencies through interagency collaboration and coordination for children and youth, as well as parents with disabilities. While these positions help enroll and determine eligibility for services and supports, they also attend many interdisciplinary team and creative solutions meetings to brainstorm and implement solutions to help children and their families.

In addition to focusing on supporting teams with specific children in need of support, these liaisons regularly connect with DHS teams and community partners to provide training, education, and resources. They have presented to community partners such as school district employees and Children and Youth Mental Health Treatment Act providers. Our liaisons are dedicated to helping teams manage and integrate treatment, supports, and resources to benefit children and families in need of help across a span of multi-agency services.

Arapahoe County Impact

- 20 intake applications submitted
- · 3 foster care to DD enrollments
- 20 CHRP enrollments
- 5 CES enrollments
- 25+ active cases supported (mostly CHRP, but a few CES)

Douglas County Impact

- 33 Disability determinations completed
- 4 CHRP enrollments
- 1 prioritized DD enrollment
- 2 youth transitions
- 9 active cases supported (including CHRP, CES and Care Compact cases)

Success

- As a result of the liaison positions, six individuals were able to return home from out-of-state placements, with five of these individuals doing well in their placements or at home with the supports and services made available to them through the Children's Habilitation Residential Program (CHRP) waiver.
- Our liaisons have increased referrals to our intake team, which leads to more children and adults getting the services they need.
- They have led discussions at an agency and a State level regarding CHRP reunification practices, ensuring that children in out-of-home placement with CHRP are engaged in team discussions around a return-to-home plan.

Developmental Disabilities & Delays Definitions

An Introduction

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)

Delay

Colorado State Statute (CCR 2509-10 7.901) 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.

Please see the Early Intervention Colorado <u>website</u> for a complete list of established conditions that qualify a child.

FAQs

Which revenue and expenses are reported in this report?

The report content includes expenses and matching Mill Levy revenue and limited Board-designated spending from fund balances. There is additional reporting of Adams County revenue and the related expenses within the Appendix.

What is meant by "Total Numbers Served"?

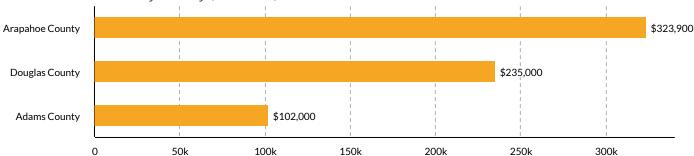
- We report unique individuals served each year, defined as those enrolled in a program with Developmental Pathways through our
 main programming branches (EI, HCBS I/DD Medicaid Waivers, State Funded programming, and our locally funded CO WL
 Program). Individuals enrolled in I/DD programming who migrate from one I/DD program to another (such as CES to DD) are
 counted once.
- This number fluctuates from year to year.
- During this past year, we saw enrollment numbers drop a little due to multiple factors:
 - Changes with Early Intervention eligibility criteria
 - The impact of the COVID-19 pandemic and people pursuing new programming
 - The impact of remote learning on overall referral numbers
 - Changes to our CO Waitlist Services programming; as we ended FY21, people were moving out of CO WL into FSSP at a rate faster than were being enrolled into the WL services program

What are provider grants?

- Developmental Pathways utilized Board designated funds to make provider grants available in FY21. Total funds available for Arapahoe and Douglas counties from July 1, 2020 – June 30, 2021, were \$600,000. Additional funds specific to Adams County supports were also available. Agencies could request funds for programs that support people with I/DDs.
- Grant applications were received from PASAs and Community Organizations (including for-profits and non-profits).

44 grants (41 agencies) were approved or partially approved.





Summary of Funding Areas

While grants may support multiple areas, this graph shows the breakdown of primary approved funding areas for grants awarded.

