

# **The Year of Elimination of Unnecessary 1:1 Staffing**

**Office of Developmental  
Programs**

**Southeast Region**

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**March and April 2011**

**This is an exploration!**



# The Current Landscape



- Everyday Lives Values
- Economy
- Governor's Budget
- New Business Practices
- Competition for Resources

# External Influences

- State Budget
- Service Definitions
- Waiver Renewal
- Regulations

# Statewide Data



- 10,179 Consolidated Waiver individuals in community homes statewide
  - 473 [or 4.6%] reside in single person homes



## Regional Data

- 3,095 Consolidated Waiver individuals in community homes in the southeast region
  - 181 [or 6%] reside in single person homes

# Statewide Data



- 7,866 waiver [PFDS and Consolidated] participants in Adult Day Programs statewide
  - 815 or 10% have 1:1 or *higher* staffing



## Regional Data

- 1,971 Waiver [PFDS and Consolidated] participants in Adult Day Programs
  - 233 or 12% have 1:1 or *higher* staffing

## Additional Individual Staffing [AIS] and Supplemental Habilitation Requests [SH]

As of 3/10/2010, the regional office has received 384 AIS and SH requests for 233 unique individuals.

Of the 384:

- 292 are initial requests
- 92 are resubmissions

## AIS and SH

Of the 384 requests, we have authorized 126 SH 1:1 requests for 94 unique individuals.

Of these:

- 48 were immediate need [14 day limit]
- 31 were for behavioral reasons
- 47 were for medical reasons

## AIS and SH

Of the 394 requests, we have authorized  
5 SH 2:1 requests for 5 unique individuals.

Of these:

- 4 were immediate need;
- 1 was for medical reasons.

## AIS and SH

Of the 384, we have authorized 116 AIS  
1:1 for 103 unique individuals.

Of these:

- 43 were for medical reasons;
- 27 were for behavioral reasons;
- 46 were for retirement reasons.

## AIS and SH

Of the 384 requests, we have authorized 5 AIS 2:1 for 5 unique individuals.

Of these:

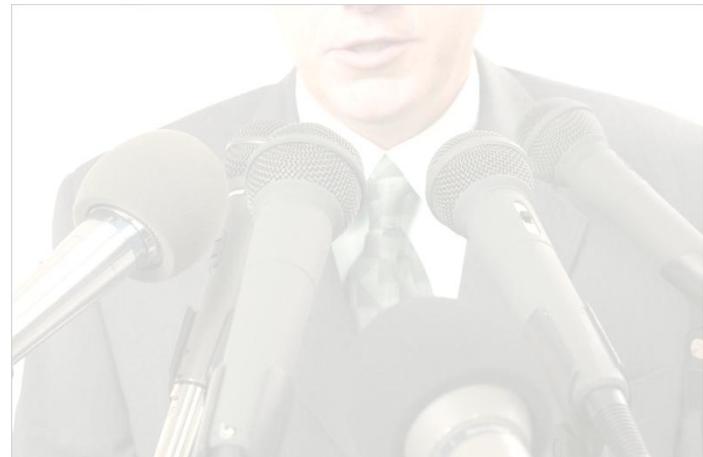
- 5 were for behavioral reasons. [Each of these were partial authorizations for less units than were requested].

# What does *Unnecessary* mean?

- When we provide more than what people really need
- When intensive staffing does not work
- When a person's needs have changed over time, changing the need for intensive staffing
- When something else could be just as effective or even more effective

# What the Governor is Saying

- We are not eliminating government, we are eliminating unnecessary government.



# What People are Saying



- “Please take away my 2:1. Maybe with just one staff, they would talk to me instead of each other.”
- “Please don’t take his 1:1 away. He deserves it after what he has been through.”
- “Her 1:1 saved her life.”
- “I don’t know who my 1:1 is. My staff is the short one, the tall one and the young one.”

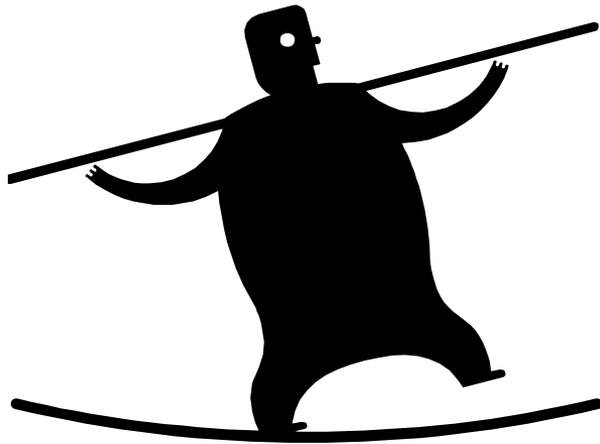
# Unintended Outcomes

- Incidents of Neglect
  - While a person had 2:1 staffing, she eloped from her home for a period over an hour and was not discovered missing until the police returned her to their home.
  - While a person had 1:1, he was able to steal the agency vehicle and crash into the neighbor's home.

# Unintended Outcomes

- An Unnatural Life
  - Lack of freedom
  - Lack of privacy
  - Stigma in the community
  - Paid friends
  - Social isolation

# Dignity of Risk vs Protection



# Predictable Challenges

- Lack of team agreement with the need for 1:1
- Fear of behaviors returning
- Lack of access to qualified crisis services
- Impact on budgets
- Regulations
- Liability

# Story Themes

- What themes can we identify about intensive staffing through the stories of these people?
  - What are the common characteristics of these people?
  - What are the common historical factors?
  - What are the commonly expressed perceptions of staff about the person and their life?

# Story Themes

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What more do you need to know to better understand the need for 1:1 intensive staffing?

# Break Time



# Q & A



# Technology Alternatives



# For More Information

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- [www.healthsense.com](http://www.healthsense.com)
- [www.CourtlandHT.com](http://www.CourtlandHT.com)

# Overall Strategies

Here is the picture as we know it, here are our opportunities, here are our challenges – what should we be planning?

- What training or tools are needed to eliminate unnecessary 1:1?
- How do we manage risks?
- How do we spread the word, share the information?
- Are there alternative models to be considered?

# Next Steps

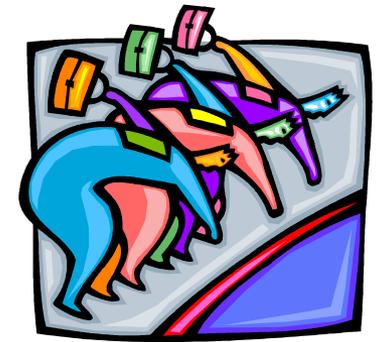


- Work groups
  - Alternative Models to Intensive Staffing
  - Training and Tools
  - Managing Risk and Liability

# Next Steps



- Recommendations from workgroups to the Deputy Secretary on policy and operational considerations
- Mentoring Teams
- Resources are available



# Getting Started

How can you use what we talked about today to begin to make this your own initiative?

- Identify people receiving 1:1 staffing
- Gather team to find out why, how and when the shift happened to 1:1
- Talk with one individual team about eliminating unnecessary 1:1 staffing
- Identify barriers – change is scary
- Reach out for help and resources



## In One Year From Now

- Fewer people are requesting 1:1 staffing
- For people receiving 1:1 staffing, the team has asked the question – is this necessary?
- Discovered and implemented new alternatives
- Identified and eliminated unnecessary 1:1 staffing

# Final Thoughts & Comments

- Your closing thoughts?
- Please hand in the Feedback and Workgroup Selection Forms

**Thank You!**