The Olmstead Strategic Planning Committee, established through 2001 legislation, meet for about nine months, during which it held a number of focus groups around the state to get feedback from consumers, family members, providers, and advocates. The committee published its first annual report on July 15, 2003, *Making Olmstead A Reality in Oklahoma*, noting that it was the first report in a five-year, ongoing process. The lead state agency has been the Oklahoma Developmental Disabilities Services Division of the Department of Human Services.

The Strategic Planning Committee organized its work through five subcommittees: Dollar Follows the Individual, Community Supports and Services, Quality Assurance, Diversion and Finance. Its report indicated that the Finance subcommittee would wait for the initial recommendations from the other four subcommittees so that it could review the available resources for financing those proposals.

The committee noted three principles underlying its efforts:

- **Consumer Driven:** The system respects the rights of each individual to make his or her own decisions.
- **Informed Choice:** Individuals and families are provided with the information needed to make informed decisions.
- **Integration:** Community living includes physical, social, political, educational, and economic integration.

Each subcommittee listed overall goals and "measurable objectives." The committee noted that it hoped to expand on those goals during the next year, and "determine how to make these goals a reality." For example, the goals set by the Dollar Follows the Individual subcommittee included allowing choices for individuals using consumer-directed personal assistance services and identifying funding sources for transition activities.

The Community Supports and Services subcommittee listed its objectives under the following categories: access to Medicaid services, employment, assistive technology, direct support services, transportation, education and housing. Its recommendations included increasing access to Medicaid services by using a less restrictive financial eligibility standard, increasing access to all types of durable medical equipment, providing a wage increase for direct care workers, and expanding transportation opportunities.

The Quality Assurance subcommittee called for the development of "guiding principles" for quality assurance systems across the state. The subcommittee said it had found that agencies that investigate complaints or monitor for quality "frequently have to turn the Investigation over to another agency for enforcement" that might be operating under different standards. There were no set standards for what a quality assurance system should be, the subcommittee noted.

The Diversion subcommittee proposed the development of a prototype for a single statewide service delivery model with a single point of entry. An addendum to the report noted that the report did not include all committee or subcommittee activities—such as a model "Life Empowerment Model" proposed by the Diversion subcommittee that had not yet been reviewed by the full committee—and grants that are being sought by Oklahoma agencies for various activities.

Next Steps
During the next year, the committee said, it would add two new committees that would look at finances, both current and potential, and marketing of concepts and programs.