

2000 Recommendations

1. The state of MN needs to **reduce its reliance on the four-person SLS** as the primary residential support model for adults with MR/RC and move more toward individualized and consumer directed support options. This will require eliminating systemic barriers that perpetuate the use of this historical model (e.g., GRH funding limitation, dependency on shift staff models).
2. Given the pervasive, long-term and detrimental effects of the **direct support staffing** crisis on individuals, families and the ability of counties to develop new services, the state should make it a priority to **create a coordinated workforce development system** with resources to significantly increase direct support staff and frontline supervisor wages, reduce staff turnover, recruit new staff members, and support and train direct support staff members and their supervisors.
3. Access to individualized HCBS supports that meet the needs of citizens with MR/RC from ethnic and racial minority groups must keep pace with the numeric growth of these groups in the general population. The state should develop a **specific initiative to address this equity issue** and should provide information and technical assistance to counties on specific outreach and support methods designed to **increase information for and access to individuals and families from ethnic and racial minority groups**. This initiative should specifically investigate these issues as they relate to people from ethnic and racial minority groups who currently receive HCBS services as well as people from these groups who are not receiving HCBS services.
4. The **tracking system** developed by the state to provide counties feedback regarding **authorized and paid expenditures should be improved** so that more accurate and timely information is provided in a manner useful to counties. The state should increase the amount of DHS staff support and technical assistance provided to counties and should improve the system to coordinate and provide this support. The state should also explore the possibility of making this a Web based system.
5. The state should develop a system for **accurately identifying and tracking the amount, type and costs of service needed by and promised to** individuals and their families versus the **actual amount and costs of the services received**. The state should use the system to monitor and provide trend analyses regarding this important issue.
6. A mechanism is needed to adequately support **people whose needs change over time due to their age and/or disability**. This mechanism should not solely rely on counties to provide increased support to people with changing needs by giving people with lower support needs access to HCBS "slots" or by "forcing" people to move to a new provider in order to get an increase in services. A method should be developed to periodically re-determine the person's Waiver Allocation Profile and adjust the amount allowable to the counties based on this re-determination.
7. Minnesota's **maltreatment reporting system should be enhanced by improving communication between all key players who have unique roles in the system** (e.g., DHS Licensing, DHS investigations unit, Ombudsman Office, county Waiver units, county common entry points, county foster care licensing, providers, case managers, direct support staff, individuals who receive supports and their family members). The system should comprehensively and systematically respond to concerns voiced by stakeholders regarding the maltreatment reporting and follow up system. Additionally, a systematic statewide method for tracking and conducting trend analyses on all of the incidents that are reported but found not to involve maltreatment and are not investigated further by the investigations unit (e.g., incidents, accidents, consumer to consumer violence) needs to be developed and consistently implemented at the state and county levels.