

# Understanding the Assessment Informed Personal Supports Budget Framework

## **Guide for Service Providers & Agencies**

November 2018



**Community Living disABILITY Services** 



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## Manitoba http://www.gov.mb.ca/fs/pwd/building abilities.html

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#### Introduction

This guide is designed for Service Providers that work with individuals with intellectual disabilities receiving, or soon to receive, Community Living disABILITY Services (CLDS). This guide provides detailed information about the *building on abilities* project and the proposed change to an assessment informed supports planning model. Those receiving services, their families and service providers, will undoubtedly have questions about what they can expect from the *building on abilities* project. This guide is intended to assist service providers to understand the components of the new model, help planning teams make decisions within the new framework and provide accurate and relevant information to individuals and their family members or substitute decision makers (SDMs).

#### **Guiding Legislative Framework**

CLDS policies and practice are guided by the principles and requirements embedded in *The Vulnerable Persons Living with a Mental Disability Act.* In addition to authorizing CLDS to provide or arrange for support services for vulnerable persons, the act recognizes that individuals have a right to make their own decisions and receive advice, support and assistance when necessary. The act promotes those supports, which respect independence, privacy, and dignity. Supports to vulnerable adults are primarily provided on a discretionary basis and eligibility does not confer entitlement to funding or services.

#### Why building on abilities?

A primary intention of *building on abilities* is to strengthen opportunities for Manitobans with intellectual disabilities to achieve their fullest potential through inclusion in society, in economy and in the labor market. In doing so, CLDS also expects that individuals with Intellectual Disabilities have the opportunity to:

- Lead satisfying, productive lives in their communities;
- Make their own decisions and direct their own lives, with support if necessary;
- Take risks that they and their support network deem appropriate;
- Use services that are available to all members of society with adaptation and support where possible;
- Maintain family bonds and develop relationships that are a natural part of life; and

CLDS intend to strengthen opportunities for Manitobans with intellectual disabilities to achieve their fullest potential through inclusion in society in economy and in the labor market.

Learn more about the The Vulnerable Persons Act at <a href="http://www.gov.mb.ca/fs/pwd/vpact.html">http://www.gov.mb.ca/fs/pwd/vpact.html</a>

Live life in the most integrated context possible, commensurate with their support needs.

In addition, CLDS seeks to ensure that available resources are allocated fairly and efficiently across the province, and to position the system to accommodate growing demands for services.

To achieve these objectives, CLDS is completing a variety of tasks to adjust how the system is managed and delivers services. For instance, CLDS is:

- Sharpening the definitions of several services so that service delivery may be undertaken more purposively and more consistently;
- Considering expanding the available service array to improve opportunities for community inclusion, but also to improve on the supports offered to those living at home with their families;
- Exploring the reimbursements afforded providers for the services they deliver, seeking to assure that what providers are paid is fair yet sufficient;
- Systematically assessing the support needs of current and prospective service recipients to inform supports planning for each person, and to help establish associated personal "supports budgets" (See Below) that individuals may apply to meet their needs; and
- Improving on Person-Centred Planning to more effectively integrate sources of support into the plan other than paid services offered through CLDS funding.

## Families Mission Statement

To keep children,
individuals and families
safe and secure, while
supporting personal
development, self reliance,
well-being and social
inclusion

## Families Vision Statement

That all individuals served by the department are supported in their personal development, stability and independence

Overall, the *building on abilities* project will ensure that CLDS engages in fair, equitable, and transparent funding allocations provided to individuals according to their assessed need and type of residence (e.g., family home, agency care home). Since these allocations are built directly from the assessed needs of individuals with Intellectual Disabilities, services offered will better suit their needs and individuals will get the right amount of support.

## Understanding Personal Supports Budgets

The introduction of the Personal Supports Budget is the key change within the *building on abilities* project. So you might be wondering, what is a Personal Supports Budget?

A Personal Supports Budget is a targeted amount of money - or allocation - that is made available to individual service recipients to acquire the services they need and prefer.

Eventually, each individual receiving CLDS services will be allocated a Personal Supports Budget that they may use to secure needed supports. Information regarding how supports budgets are designed is explained later.

#### Important to Know Right Now

- CLDS is implementing the building on abilities initiative little by little, and not all at once. CLDS plans
  to select particular groups of individuals and implement planned changes one group at a time. Doing
  so will allow for a more deliberate transition process, allowing all to learn throughout the process
  and make associated improvements. The first group that began using Personal Supports Budgets
  was new entrants to CLDS living with family and transitioning from Children's disABILITY Services
  (CDS) that was phased-in beginning in January, 2016.
- CLDS has implemented the various phases of Personal Supports Budgets beginning with new
  entrants living with family, individuals in Supported Independent Living (SIL), individuals graduating
  from High School at age 21 and accessing Day Services for the first time and most recently Home
  Share (Adult Foster).
- Eventually all individuals will be phased into the *building on abilities* project.
- During this phased approach, certain segments of the CLDS population or "cohort groups" were prioritized for funding approval (for example, age of majority individuals from CDS or CFS or transitional youth graduating from the education system at age 21, etc.). The CLDS Prioritization Criteria will still apply to all other individuals based on the urgency of the situation and critical nature of the request. This may result in a situation where an individual and/or family have a preference for a move or change of living arrangement or program but their particular situation does not meet the CLDS prioritization criteria. In these situations, it is important to have an open and transparent conversation with the individual and family and to continue and monitor the situation for any changes with the individual's situation.
- Service Providers will need to be updated as each group is phased in to building on abilities. This
  guide will help prepare you to address concerns so that individuals can understand how the changes
  will affect them.
- This guide has been developed with the most current information available. Updates will be made to the guide as the project progresses. You will be informed of the updates through Departmental memo's, e-mails and updated website information.
- Please be on the lookout for upcoming meetings to discuss the *building on abilities* project and be for information added to the website: <a href="http://www.gov.mb.ca/fs/pwd/building\_abilities.html">http://www.gov.mb.ca/fs/pwd/building\_abilities.html</a>

If you need more information about this project, you can contact your local CLDS office and/or CSW.

### How can I use this guide?

This guide can be used to help you better understand the changes taking place through *building on abilities*. Specifically it covers:

- What the Personal Supports Budget is and how it is determined for each individual; and
- How to plan with a supports budget in mind.
- How to prepare for a meeting to introduce building on abilities to individuals and families.

## Your role in building on abilities

#### Has the Service Provider role changed?

As a service provider, you are responsible for the delivery of support services to adults with Intellectual Disabilities who meet eligibility criteria. You help to ensure that individuals:

- To provide a range of support services based on a person centred plan;
- Have actionable goals and current person-centred plans in place; and
- Have a voice in their planning and support outcomes.

Your traditional responsibilities remain the same. Generally, the expectations are that Service Providers:

- 1. To provide a safe, secure home in the community for residents.
- 2. To provide a welcoming atmosphere for families and visitors.

- The expected outcomes for each individual shall provide evidence of achieving the following five goals of person centred planning:
  - Community Participation
  - Community Presence
  - Choices / Rights
  - Respect
  - Competence
- 3. To assist adults with an intellectual disability realize their potential through the provision of a wide range of day service and employment activities.
- 4. To ensure that the services provided:
  - recognize individual choice;
  - recognize each individual's potentials and limitations; and
  - are responsive to the needs of the individual and community.
- 5. To ensure that all programming is professionally and ethically sound.
- 6. To establish and maintain effective communication among individuals, families, the Service Provider, Manitoba and the community.
- 7. To encourage opportunities for each individual to be as independent as possible by providing supports in the least restrictive, least intrusive manner.

Through *building on abilities* you will now have greater opportunity to help the individuals you support take charge of their lives, in part by managing their supports. You will help them develop Person-Centred Plans that that balance individual goals and needed supports and services, within a Personal Supports Budget. In addition to any natural supports in place, you will be tasked with helping the person choose the combination of paid supports that best meet their needs.

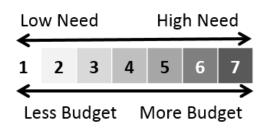
## **The Personal Supports Budget**

#### What is a Personal Supports Budget?

A supports budget is a targeted amount of money—or allocation—that is made available to individuals to acquire the CLDS services they need and prefer.

The amount made available in the budget is determined through a combination of an assessment of the extent of an individual's support needs, as well as the individual's residence type (e.g., agency care, living with family). In the event of extraordinary needs, an "exceptions review process" is used to assure that such needs are addressed.





Assessment with the SIS is a particularly important part of developing a supports budget, as it provides information about a person's support needs and is utilized to calculate the Support Budget Level for each individual. The criteria for each level has been determined, and the type and amount of CLDS services associated with each level will be determined prior to implementation for each cohort. CLDS has adopted a 7 Supports Budget Level framework, with Supports Budget

Level 1 representing lower support needs and Supports Budget Levels 6 and 7 representing higher support needs. As support needs increase, so does funding.

### Why is CLDS using the Supports Intensity Scale and what is it?

Using the SIS in an assessment informed approach, CLDS can be more responsive to the support needs of individuals receiving services. In this way individuals are provided a budget that directly corresponds to their needs.

CLDS identified the need for a new assessment process a number of years ago during a comprehensive review of the program. CLDS sought a tool that both supported person-centred planning and yielded reliable information for determining individual funding. While a number of assessment tools were considered, the SIS was chosen because it is:

- Reliable and valid;
- Standardized for individuals with Intellectual Disabilities;
- Designed for person-centred planning;
- A measure of the type, frequency, and intensity of an individual's support needs; and
- Successfully implemented in other jurisdictions.



CLDS introduced the SIS in 2013.

The SIS was created in 2004 by researchers working with the American Association on Intellectual and Developmental Disabilities (AAIDD). The SIS is a reliable and accurate measure of the supports needs of individuals with Intellectual Disabilities. In 2015 the Supports Intensity Scale—Adult Version (SIS-A) was released. The SIS and SIS-A are appropriate for individuals aged 16 and older. CLDS transitioned to the SIS-A in early summer. Much of the assessment will remain the same.

For example, the interview process will be the same, the items are scored in the same format, and the SIS-A will still be used to inform support level and budget

The SIS utilizes a strengths-based approach, seeking to assess what support an individual needs to complete various tasks or to accommodate behavioral or medical challenges. CLDS has a centralized team of SIS Facilitators who administer the SIS. The SIS assessment is conducted as an interview. The Facilitators are all trained and endorsed by AAIDD. The interview includes the individual receiving services, friends, family, and possibly other members of the support network or team who know the person well. Through discussion and consensus the Facilitator completes the SIS assessment form.

There are three sections.

**Support Needs Index:** This section documents the general support needs of individuals, in terms of frequency, time, and type of support. Six sub-sections address the major areas in which support is typically needed:

Part A: Home Living Activities Part D: Employment Activities

Part B: Community Living Activities Part E: Health and Safety Activities

Part C: Lifelong Learning Activities Part F: Social Activities

**Supplemental Protection and Advocacy Scale:** This section examines the types of activities the individual performs to protect and advocate for him or herself. Each activity is rated in terms of frequency, time, and type of support.

**Exceptional Medical and Behavioral Needs:** This section documents extra support needed to deal with particular medical and behavioral conditions, above and beyond the regular daily supports covered in Section 1. Two sub-sections included are Medical Supports Needed and Behavioral Supports Needed. These supplemental questions help identify individuals with severe medical risk, severe community safety risk (convicted and/or not convicted) and severe risk of injury to self.

After the assessment is complete, the results of the SIS are provided to the individual and other key members of their support networks, such as their family, SDM and/or service providers in a user friendly format.

More information on the SIS can be found here: <a href="http://aaidd.org/sis">http://aaidd.org/sis</a>, while information on the SIS-A can be found here: <a href="http://aaidd.org/sis/sis-a#.Vkpkt3arRph">http://aaidd.org/sis/sis-a#.Vkpkt3arRph</a>

#### Who should participate in a SIS interview?

Completing a SIS interview is a program requirement of CLDS. All eligible participants will eventually have a SIS interview. Participants are encouraged to attend all or part of the interview.

The SIS will be offered to:

- 1. All new referrals, including all youth who have reached the age of majority.
- 2. Individuals who will soon receive Personal Supports Budgets through the next phase implementation phase of *building on abilities*.
- 3. Transitional youth accessing CLDS day services for the first time.
- 4. Individuals transitioning from a Developmental Centre to community based services.
- 5. Individuals whose support needs have changed or increased (i.e., not temporarily due to say an injury or illness, but permanently due to trauma or some other life altering event).
- 6. All other individuals who are receiving funded CLDS services.

If you need to refer someone for a SIS assessment please talk to your CSW to fill out the "Referral for SIS Assessment" form. The referral form needs to include a complete listing of at least two respondents who know the individual well, contacts at the agency or school the individual attends.

Once a program participant is determined as eligible, the assigned CSW will ensure that a SIS Referral Form is completed and sent to the SIS Program Manager. The SIS Program Manager reviews the referral to ensure all needed information is provided and is then assigned to a SIS Facilitator/SIS Administrative Support to schedule the assessment.

It is critical that this SIS referral process happen at the time of eligibility to ensure that it starts the *building on abilities* process prior to the individual's 18<sup>th</sup> birthday. The process aims to ensure a seamless transition between CDS, CFS and CLDS services and to become more efficient for CLDS staff in gathering information needed to schedule the assessment.

The SIS Referral Form should be filled out completely ensuring that all essential respondents for the SIS assessment are listed. This would include School Support Staff, Parents/Family Members and Assigned CSWs. Information on potential areas of concern or sensitivity can also be noted on the referral form, including recent parental separation, conflict between family and school and anxiety over transitioning from CDS to CLDS.

If you know that an assessment has been scheduled for an individual you support you can help them prepare for the assessment by letting them know what to expect.

The SIS is a face-to face interview with the person with an Intellectual Disability and two respondents who know them well. The interview will last between 2-3 hours. If there are questions that are difficult to ask within the interview, you may be contacted by the facilitator for more information. After the interview, a representative from *building on abilities* or the CSW will offer to review the SIS results with the individual and key members of the support team (family, SDM, support network, agency staff, etc.). A copy of user friendly SIS will be provided to the individual and/or family/SDM within about 14 days of the assessment.

#### When to cancel or request a SIS

A SIS assessment can only be canceled when:

- The SIS Facilitator has not been able to observe the individual in a familiar setting, and the individual with an Intellectual Disability is not able to attend the interview.
- The individual with Intellectual Disability is ill or in extreme distress.
- Inclement weather prevents traveling to the site.
- Family members or other key respondents plan to attend but are unable to do so for the same reasons.

CSWs are not able to cancel due to scheduling conflicts. In these situations, the SIS assessment will occur without the CSW if he or she is not able to attend due to other urgent priorities.

All cancellations should be made 48 hours in advance of the scheduled interview. On the third attempt, an interview will occur as long as respondents are available to provide needed information

#### When to ask for a new SIS?

If a SIS assessment has not been conducted according to standards, individuals can request a review of the assessment, which if warranted may result in a new SIS assessment. Requests for reviews are only allowable for the following reasons:

- The individuals wanted the SDM or family to participate, yet the SDM or family was not informed of the interview.
- The SDM or family stated that they wanted to attend, yet the assessment proceeded without them.
- There were not two respondents, who knew the individual well, present for the interview.
- The facilitator was not granted an exception to conduct the interview over the phone.
- The interview questions were not explained prior to being scored.
- The facilitator skipped questions that should have been asked.
- The individual was not present at the interview and was not met or observed by the facilitator prior to the interview.
- The person had significant changes in their support needs due to trauma or other life changing event that is considered permanent.

You may be asked to help the person request a review for the reasons listed above. Requests must be submitted within 30 business days of the SIS assessment and can be done by filling out a "Request for Review" form found in the policies and procedures manual. Once the request is submitted CLDS will review the request and will grant a new SIS assessment if the reasons noted warrant a new assessment.

#### What about extraordinary support needs?

During the SIS assessment, the SIS Facilitator asks a short series of additional questions, called Supplemental Questions. These questions focus on information particular to medical and/or behavioral support needs. The Supplemental Questions cover these four topics:

- 1. Severe medical risk;
- 2. Severe community safety risk for people with a related legal conviction;
- 3. Severe community safety risk for people with no related legal conviction;
- 4. Severe risk of harm to self.

Each supplemental question has five individual items, labeled A through E. "Yes" responses to a combination of these items trigger eligibility for individual records review or "verification" of extraordinary support needs that may qualify an individual to receive the highest levels of funding. The responses will be reviewed by CLDS Program Managers and Program Specialist.

The verification review process may include a review of the individual's case file and direct consult about the individual. Records that may need to be reviewed include:

- The SIS assessment
- The Person-Centred Plan
- The Individual Support Plan
- Current medical history and physical
- Case management case notes for the past vear
- Hospitalization records and medical reports
- Current health care plans
- Psychological reports
- Risk assessments
- Court ordered assessments
- Pre-sentence reports

- Current therapy evaluations and support plans
- Behavior support plans
- Residential service reports for the last year
- Nursing reports for the last 12 months
- Seizure tracking logs
- PRN protocol
- Medication list
- Diagnosis list
- And additional screening tools

After the review, the individual may or may not be assigned to Supports Budget Level 6 (for those with extraordinary medical needs) or Supports Budget Level 7 (for those with extraordinary behavioral needs). Individuals will be notified of their final Supports Budget Level calculations after verifications have been completed.

#### **How are Supports Budget Levels determined?**

The SIS allows for scale scores to be calculated related to various sections. The accompanying table shows the criteria used to calculate 7 different Supports Budget Levels. To determine assessment levels for individuals, the following information is used:

	Supports Budget Levels	Sum: Sections A,B & E	Section 3A Medical Support	Section 3 B: Behavioral
1	Least Support Needs	0 to 22	0 to 6	0 to 6
2	Mild or Moderate Support Needs	23 to 30	0 to 6	0 to 6
3	Mild to Moderate Support Needs & Moderate Behavioral <u>Challenges</u>	0 to 30	0 to 6	7 to 10
4	Moderate Support Needs & Mild to Moderate Behavioral Challenges	31 to 36	0 to 6	0 to 10
5	High Support Needs & Mild to Above Average Behavioral Challenges	37 to 52	0 to 6	0 to 10
6	Extraordinary Medical Challenges	Any	7 to 32 or Verified Extraordinary medical risk	0 to 10
7	Extraordinary Behavioral Challenges	Any	Апу	11 to 26 or Verified Danger to others or Extreme self- injury risk

- 1. Using the SIS, the sum of the standard, not "raw," scale scores in Parts A, B, and E in Section 1. These include scales on Home Living Activities, Community Living Activities and Health and Safety Activities. This score may range from 0 to 52, with lower scores reflecting less overall need for support in the areas indicated.
- 2. Scale scores associated with Exceptional Medical and Behavioral Needs Section Part A on Medical Needs (scored 0-32) and Part B on Behavioral Needs (scored 0-26). Again, lower scores indicate less overall need.
- 3. Responses to Supplemental Questions and verification committee determinations described above are used to assign individuals to Supports Budget Level 6 or 7.

#### What are the Supports Budget Level Descriptions?

Supports Budget Level Descriptions help to contextualize the types of support that individuals who utilize each Supports Budget Level might have regardless of living setting.

#### 7 Supports Budget Level Descriptions

Adults with support needs in this Supports Budget Level have minimal support needs, and may need some support for medical and behavioral challenges. They can manage many aspects of their lives independently or with little assistance.

Someone with support needs in this Supports Budget Level may need supports with clothing care, preparing meals, and dressing. Often support needed involves some monitoring or prompting instead of partial to full physical support. They may need intermittent help participating in leisure activities, gaining and maintaining employment, visiting family and friends, or assistance with shopping. They usually can ambulate or need minimal help moving about with the proper equipment, but need help with health practices, such as maintaining a nutritious diet and taking medications.

Individuals with support needs in this Supports Budget Level need more support than those in Supports Budget Level 1, but their support needs are mild to moderate in a number of life areas. Adults with this Supports Budget level have moderate support needs and may need some support for medical and behavioral challenges.

An individual with this Supports Budget Level may need some assistance preparing and eating meals. They might need monitoring or prompting with daily dressing, and daily assistance with housekeeping and laundry. They may need support getting from place to place, gaining and maintaining employment, accessing public services or interacting with community members. In this level, they most likely will need partial physical assistance taking medications, avoiding health and safety concerns, and maintaining a healthy diet.

Adults with support needs in this Supports Budget Level have minimal to moderate support needs and may need some medical support as in Supports Budget Levels 1 and 2. They also have an increased, though not extraordinary, support need due to behavioral challenges compared to Supports Budget Levels 1 and 2.

Individuals with support needs in this Supports Budget level would otherwise be situated in Supports Budget Levels 1 or 2, except for their moderate behavioral challenges. These individual's behavioral support needs lie outside of overall living activity supports. Though these needs are not extraordinary, they likely require increased monitoring or intervention to address behavioral challenges such as prevention of outbursts, self-harm and/or wandering.

Adults with support needs in this Supports Budget Level have moderate support needs and may need some medical support. They often need some physical assistance with life activities on a daily basis. They may have behavioral support needs, but these needs are not extraordinary.

Individuals with this Supports Budget Level will most likely need daily assistance preparing food, eating meals, dressing, and bathing. This will most likely include partial to full physical assistance for some supports including gaining and maintaining employment, accessing the community, visiting friends and family members, or participating in preferred community activities. They may also have behavioral support needs that lie outside of overall living activity supports. Though these needs are not extraordinary, they likely require increased monitoring or intervention to prevent or address behavioral challenges such as prevention of outbursts, self-harm and/or wandering. They will most likely need at least partial physical assistance obtaining health care.

Adults with support needs in this Supports Budget Level have high support needs. They need help with life activities requiring hands on support and oversight throughout the day. They may have behavioral support needs, but these needs are not extraordinary.

Support needs will likely include partial to full physical assistance with eating and preparation of meals, dressing, and all household activities. An individual in this level may have difficulty ambulating, and therefore needs full physical help accessing the community. To maintain health and safety, an individual with this Supports Budget Level will likely need full support in meal planning, maintaining physical health, and taking medications. Support for medical issues may also be required.

Adults with support needs in this Supports Budget Level have extraordinary need for medical support. Individuals with this Supports Budget Level may have behavioral support needs, but these needs are not extraordinary. Adults in this level need greatly enhanced 1:1 supports due to their medical needs.

Regardless of the support needed to complete life activities, individuals with this Supports Budget level have extraordinary support needs due to their medical conditions. This may involve assistance with respiration, feeding assistance, or other exceptional medical care. They likely need partial to full physical assistance with eating and preparation of meals, dressing, and all household activities. An individual with this Supports Budget Level may have difficulty ambulating, and therefore needs full physical help accessing the community. In order to maintain health and safety, an individual in this level will likely need full support in meal planning, maintaining physical health, and taking medications.

All adults with support needs in this Supports Budget Level have extraordinary behavioral challenges, regardless of their support need to complete daily activities or for medical conditions. Adults with this Supports Budget Level need greatly enhanced 1:1 supports due to their behavioral challenges.

Regardless of the support needed to complete life activities, an individual with this Supports Budget Level has behavioral support needs that are exceptional and require a great amount of assistance. They may have varying support needs in daily living activities but can require full physical assistance to prevent harm to themselves or others. Support needs in this domain include prevention of pica, sexually aggressive behavior, wandering and tantrums, or other forms of self-harm. Given the behavioral challenges experienced by people in this level, employment supports will need to be highly specialized.

## How is the budget allocated?



Once individuals have been assigned to a Supports Budget Level, their residence type is factored in to determine their supports budget amount. The following residence types are considered:

	Residence Types						
Independent Supported Living	Some individuals receiving CLDS services are able to live mostly independently, alone or with others, but need some support to continue to maintain their independence.						
Individuals Living with Family	Many individuals who receive CLDS services continue to live with their families. The supports provided may be directed to the individual or to the family, and helps the individual remain in the family home.						
Shift-Staffed	Many individuals seek out services from residential providers and live in group homes with other individuals who are also eligible for CLDS services. Agency care is provided to individuals for most of the day.						
Shift-Staffed 24 Hour	A small number of individuals are unable to attend day programming for one reason or another, and may receive services in agency group homes for 24 hours a day.						
Clustered Living	Some individuals who are able to live more independently might choose to live in a clustered living setting where they live close to other individuals who are also eligible for CLDS services, but in their own unit, and receive support when needed.						
Home Share	Some individuals live outside of their family in a Home Share living arrangement (formerly Adult Foster) with an individual or family who are expected to provide supports to them. In such cases, the individual or the family may receive additional supports.						
Home Share 24 Hour	A small number of individuals who live in a Home Share arrangement are unable to attend day programming, and the Home Share provider may either be providing support or require additional support during those hours.						

#### What services are included in the Personal Supports Budget?

The Personal Supports Budget only accounts for "Base Budget Services". There may be other services which individuals require that are not included in the budget, called "add-on services". For individuals who qualify for add-on services, those services do not need to be counted within the budget amount. The graphic below shows which services are base budget and which are add-on services.

Base Budget Services	Add-On Services
Residential Services	
<ul> <li>Day Services &amp; Summer Programming (when needed)</li> </ul>	<ul><li>Transportation</li><li>Clinical Services</li></ul>
In-Home Supports	Crisis Intervention
Respite Services	

There are essentially four different types of Base Budget Services available to individuals who are eligible for CLDS services. Depending on residence type and age, individuals may have access to some services and not others. For example, individuals living home with their families do not have access to residential services because they do not need them.



**Residential Services** are provided by an agency to help individuals be as independent in their homes as possible, while helping them exercise choice and access their communities. Individuals who receive residential services may live independently, Home Share, in a group home, clustered living, or may receive all of their services within their own homes.



**Day Services** are services provided by agencies intended to support individuals to increase their independence, productivity, and community integration through skill development. Day services may include employment development; supported employment; personal skills development and maintenance; and personal, social and recreational programming.



**In-Home Services** are those supports that help families to maintain strong relationships for individuals who continue to live at home. Services include a range of supports such as counselling, education/training, building support networks, person-centred planning, problem-solving, before and after school/day program care, socialization, and community inclusion activities.



**Respite Services** provide the individuals' caregiver with support to allow them to provide continuous care to the individual. Respite services maybe self-administered by families or provided by an agency to families for relief. Respite Services should also be designed to give an individual the opportunity to further develop potential skills and abilities that were outlined in the Person-Centred Planning Process. Furthermore,

Respite Services should involved activities that the person enjoys in environments that they are most likely to have positive experiences.

In the next section of this guide, information is provided to help apply the Personal Supports Budget. Using the last section, you can determine which specific services are available to individual based on their Personal Supports Budget. As mentioned previously, the guide will be updated as budgets are finalized for each group.

#### How will individuals be notified of their Personal Supports Budget?

After taking a SIS assessment, but prior to a Person-Centred Plan, individuals will be informed of the



overall process, will be informed of their Supports Budget Level and will know their Personal Supports Budget amounts. In the beginning of the implementation plan, CSW's will be meeting face-to-face with individuals to explain the process and provide the relevant information that is needed to apply the budget. As different groups are implemented, you may be asked to provide more information and personal contact to help individuals understand the building on abilities process.

#### How do the people I support experience this process?

There are 5 steps in which the people that you support will interact with this process. They are:

- 1. Participate in a SIS interview and answer supplemental questions to determine support needs.
- 2. Receive a Supports Budget Level, numbered 1 to 7 after verification has been completed.
- 3. Receive a Personal Supports Budget amount based on Supports Budget Level (1-7) and residence type, to acquire CLDS service. Receive notification of the Supports Budget before their planning meeting.
- 4. Plan for support.
- 5. Begin or continue receiving services.

## Planning with a budget in mind

#### How can I help individuals apply their budget?

To help individuals plan using their Personal Supports Budget you will need to know:

- The individual's current living arrangement. This includes an understanding of whether or not the individual meets the prioritization criteria for residential funding.
- What Supports Budget Level the individual is using.
- How the person answered questions on their SIS assessment (e.g. were any exceptional circumstances or key information identified?)
- How much money and estimated hours the person has available in their Personal Supports Budget.
- What supports the person already has in place and what supports the person is interested in obtaining from CLDS.
- What types of supports are available to the person in their area/region and who would be available (e.g. agency?) to assist in providing that support.

This section will continue to be developed as budgets are finalized for different groups. Individuals in different living settings, have access to different services. It is, therefore, important to consider the budget implications as they are detailed below.

#### **Living with Family**

Many individuals will remain in the family home upon reaching adulthood. In these situations, supports are directed to either the individual or the family. Table 1 shows the total budget to individuals living with families annually for each service type. Individuals who are 18-21 do not access day supports. They can however, request summer recreation and school in-service when it is necessary, and depending on need, the amount may or may not be within their respite/supports to families budget or accessed through additional supports within the model.

Table 1: Estimated Weekly Hours for new entrants living with family

Supports Budget Level	Respite	In-Home Supports	Total Estimated Weekly Hours (Excluding Summer)
1	3-5	N/A	3-5
2	4-6	N/A	4-6
3	7-10	8.5-10	15.5-20
4	7-10	8.5-10	15.5-20
5	8-12	10.5-12	18.5-24
6	13-18	26-30	39-48
7	13-18	26-30	39-48

Table 2: New Entrants Living with Family Supports Packages

Supports Budget Level	Respite + In-Home Total	Summer Programming Total (where applicable)	School In Service Total (where applicable)
1	Up to \$3,140	Up to \$2,030	Up to \$1,330
2	Up to \$3,930	Up to \$2,700	Up to \$2,660
3	Up to \$7,860	Up to \$3,480	Up to \$2,660
4	Up to \$7,860	Up to \$4,050	Up to \$2,660
5	Up to \$9,430	Up to \$5,400	Up to \$2,660
6	Up to \$23,580	Up to \$6,480	Up to \$2,660
7	Up to \$23,580	Up to \$6,480	Up to \$2,660

<sup>\*</sup>Applies to individuals living with family ages 18-21 years only

This information can help you to consider how to help the individual plan to use their services throughout the year. It is helpful at the outset of the planning year to determine when services will be needed, so that the individual uses only the amount of service available to them. Table 2 shows the estimated weekly hours of service available to individual by level. It is important to note that the costs associated with different service types vary. The hours provided are an approximation of how many hours the budget will purchase, and are not exact figures. Different providers may charge different rates, so it is important to help the individual determine how much service they can purchase within their Personal Supports Budget. As the hourly rate rises, the number of hours of service available within the budget will decrease. The exact cost of the proposed plan will need to be calculated.

As noted previously, individuals can choose to mix and match the hours, within the service category, to suit their needs. For example, within respite, the individual may choose how they wish to mix and match respite services to suit their specific needs, so long as they use only the budget allotted for respite. All plans must be approved by CLDS prior to service delivery. The amounts included in the table are the maximum approval amounts. Once funding is confirmed an individual can begin receiving services, and the individual and their family will be notified.

#### **Supported Independent Living (SIL)**

Some individuals are living independently in the community or will be transitioning into an independent living arrangement upon reaching adulthood if they meet prioritization criteria. In these situations, Supported Independent Living services provide the necessary supports for the individual to successfully live as independently as possible in the community. Services are provided by an agency service provider or through the Direct Service Provider (DSP) workforce with the Department of Families.

The Supported Independent Living (SIL) funding model is based on up to support hour amounts by supports budget levels. For example, individuals in supports budget level 1 are eligible for up to 12 hours of SIL supports per week. Individuals in Supports Budget level 2 are eligible for up to 20 hours per week of SIL supports. Individuals in support budget level 3 due to their additional behavioral support needs are eligible for up to 30 hours per week of SIL supports. Individuals in support budget levels 4, 5 and 6 have support needs that would generally exceed the limits of SIL services and will require a review of safety with CLDS Program Specialists prior to the approval of the placement. Individuals in this support

budget level category would be eligible for up to 35 hours per week of SIL services. Individuals in support budget level 7 are eligible for the maximum SIL supports up to 40 hours of SIL services per week.

Table 3: Supported Independent Living Funding Model

Supported Independent Living	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7
Support Hours (up to)	12	20	30	35	35	35	40
Winnipeg Brandon	\$16,306	\$27,177	\$40,298	\$47,014	\$47,014	\$47,014	\$53,419
Rural	\$17,382	\$28,971	\$42,451	\$49,526	\$49,526	\$49,526	\$55,930
North	\$18,252	\$30,420	\$44,573	\$52,002	\$52,002	\$52,002	\$58,727

The SIL Agency Funding Agreement Form was developed to replace the agency proposal process. The form serves as confirmation of funding for SIL services along with a brief description of the areas of support, goals as defined through the person-centred planning process. Agencies are expected to complete the form in lieu of a more detailed proposal. The SIL Agency Funding Agreement Form is to be submitted to the CSW and placed in the participant file. A copy of the form also goes to the Financial Approver (Program Manager/Centralized Services) for final approval and signature.

CLDS has built in a 20% variance formula into the SIL funding model to account for Program Enhancements within the organization delivering SIL Services. These program enhancements may include higher wage rates as well as providing an accommodation for enhanced programming offered by the agency. The allowable hours/week variation formula within the SIL funding model provides the flexibility to reduce the direct service hours up to 20% to support the enhanced programming offered by a particular service provider. For example, an individual with a supports budget level 1 is eligible for up to 12 hours of direct support per week but the amount of direct support can be reduced to 10 hours per week to account for enhanced programming.

Table 4: Supported Independent Living Allowable Hours/Week Variation

SUPPORTED INDEPENDENT LIVING FUNDING GUIDELINES Direct Service and Program Cost Travel Costs Total Total Allowable SIS Direct Program Total Annua Total Annual Shifts/ Wpg/Brand Hours/ Wpg/Brand Hours/Week Week Cost (North) Level Service Costs Cost Cost Week on Variation on \$1,344.9 \$1,133.52 \$147.36 \$1,280.88 \$312.00 \$670.80 \$704.34 \$1,592.88 \$1,951.68 \$670.80 \$704.34 \$2,267,04 \$294.72 \$2,561,76 \$2,689,84 \$312.00 \$2,873,76 \$3,232,56 \$3,394,18 \$3,400,56 \$442.07 \$3,842,64 \$4,034,73 \$312.00 \$670.80 \$704.34 \$4,154.64 \$4,513.44 \$4,739.1 \$5,379.69 \$5,435.51 \$5,794.31 \$4,534,08 \$589,43 \$5,123,51 \$312.00 \$670.80 \$704.34 \$6,084,03 \$5,667.60 \$736.79 \$6,404.39 \$6,724.61 \$624.00 \$1,341.60 \$1,408.68 \$7,028.39 \$7,745.99 \$8,133.29 \$6,801.12 \$884.15 \$7,685.27 \$8,069.53 \$624.00 \$1,341.60 \$1,408.68 \$8,309.27 \$9,026.87 \$9,478.23 \$7,934.65 \$1,031.50 \$8,966.15 \$9,414.46 \$624.00 \$1,341.60 \$1,408.68 \$9,590.15 \$10,307.75 \$10,823.14 \$10,759.38 \$9,068.17 \$1,178.86 \$10,247.03 \$624.00 \$1,341.60 \$1,408.68 \$10,871.03 \$11,588.63 \$12,168.0<del>6</del> \$10,201.69 \$1,326.22 \$11,527.91 \$12,104.30 \$936.00 \$2,012.40 \$2,113.02 10 \$11,335.21 \$12,808.78 \$13,449.22 \$936.00 \$2,012.40 \$2,113.02 \$13,744.78 \$14,821.18 \$15,562.24 \$1,473,58 11 \$12,468,73 \$1,620,93 \$14,794,15 \$936.00 \$2.012.40 \$2.113.02 \$15,025.66 \$16,102.06 \$16,907.17 \$14,089,66 3 12 \$13,602,25 \$1,768.29 \$15,370,54 \$16,139.07 \$936.00 \$2,012.40 \$2,113.02 \$16,306.54 \$17,382.94 \$18,252.09 10 13 \$14,735.77 \$1,915.65 \$16,651.42 \$17,483.99 \$1,248.00 \$2,683.20 \$2,817.36 \$17,899.42 \$19,334.62 \$20,301.35 10 \$15,869.29 \$2,063.01 \$17,932.30 \$18,828.91 \$1,248.00 \$2,683.20 \$2,817.36 \$19,180.30 \$20,615.50 \$21,646.2 11 15 \$17,002.81 \$20,461.18 \$21,896.38 \$22,991.20 12 13 14 \$2,210,37 \$19,213,18 \$20,173,84 \$1,248.00 \$2,683.20 \$2,817.36 \$18,136,33 16 \$2,357,72 \$20,494.06 \$21,518.76 \$1,248.00 \$2,683.20 \$2,817.36 \$21,742,06 \$23,177,26 \$24,336,1 \$2,505.08 17 \$19,269.85 \$21,774.93 \$22,863.68 \$1,560.00 \$3,354.00 \$3,521.70 \$23,334.93 \$25,128.93 \$26,385.38 14 18 \$20,403.37 \$2,652.44 \$23,055,81 \$24,208.60 \$1,560.00 \$3,354.00 \$3,521.70 \$24,615.81 \$26,409.81 \$27,730.3 19 \$21,536.89 \$2,799.80 \$24,336.69 \$25,553.53 \$1,560.00 \$3,354.00 \$3,521.70 \$25,896.69 \$27,690.69 \$29,075.23 \$1,560.00 \$3,354.00 \$27,177.57 \$28,971.57 \$30,420.1 \$28,338.02 \$32,021.96 \$1,872.00 \$4,024.80 \$4,226.04 \$33,893.96 \$36,046.76 \$37,849.10 \$3,683.94 \$33,623.06 20 \$34.005.62 \$4,420.73 \$38,426.35 \$40,347.67 \$1,872.00 \$4,024.80 \$4,226.04 \$40,298.35 \$42,451.15 \$44,573.71 24 30 \$45,340.83 \$5,894.31 \$51,235.14 \$53,796.90 \$2,184.00 \$4,695.60 \$4,930.38 \$53,419.14 \$55,930.74 \$58,727.28 32 40

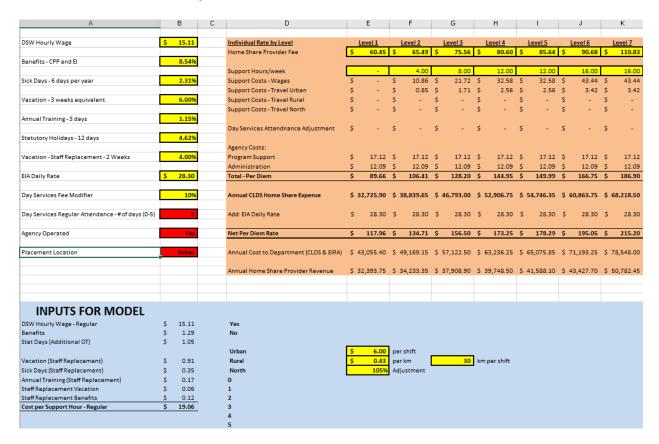
Table 5: Supported Independent Living Calculation Input

Variable	Rate	Notes		
Hours	40			
DSW Wage	\$15.11	Average Wage		
Supervisor Wage	\$20.15			
Benefits	8.54%	CPP and El		
Sick Days	2.31%	6 days per year		
Vactaion (replacement staff) days	6.00%	3 weeks equivalent		
Annual Training Budget	1.15%	3 days equivalent (for NVCI, foundations, CPR, First Aid, VPA)		
Stat Days	12	per year		
Program Support (%)	12.50%	% of Direct Service wages (1:8 staffing ratio)		
Administration (%)	10%	% of Direct Service Costs		
Program Activities (%)	3%	% of Direct Service Costs		
Travel (Wpg/Brandon)	\$6.00	Per shift		
Travel (Rural/North)	30	Km per shift		
Travel (Rural/North) rate	\$0.43	Per km		
North Cost Adjustment	5%			
Support Level		Allowable Hours		
1		0-12		
2		0-20		
3		0-30		
4,5&6*		0-35		
7		0-40		
* Will require a review of safety a	nd the pla	cement prior to approval.		

#### **Home Share**

Some individuals live outside of their family in a Home Share living arrangement (formerly Adult Foster) with an individual or family who are expected to provide supports to them. In such cases, the individual or the family may receive additional supports. Home Share arrangements provide a living situation in which an adult who is eligible for CLDS shares a home with a support provider contracted to provide support and assistance. The home is owned, rented or leased by the provider. Home Share providers can be Private operators or supported through a non-profit agency service provider (Agency Supported Home Share). A Home Share Regular model is available for individuals who attend school during the day or who attend a day service program or is employed during the day. In the 24 hour model, the CLDS participant is not able to attend a daytime activity such as school, employment or day service and requires 24 hour a day support and supervision.

Table 6: Home Share – Funding Model



#### Staff Shifted Residential Services

CLDS is currently engaged in a process to update the funding model for staff shifted services.

Some individuals require more structured and staff intensive supports in the community.

Community based staff shifted residential consists of ongoing services and supports designed to assist individuals to acquire, maintain, or improve the skills necessary to live as independently as possible in the community. This residential option is available to individuals who need daily staff

intervention with care, supervision and skills training in activities of daily living, home management and community integration and live in an approved or licensed home with 24 hour staffing.

These residential services include a range of individually tailored supports to assist with the acquisition, retention, or improvement of community living skills including: assistance with activities of daily living such as meal preparation, eating, bathing, dressing, personal hygiene, medication management, community inclusion, transportation, social and leisure skills, and adaptive skill development to assist the individual to reside in the setting most appropriate to his/her needs.

#### **Day Services**

Day Services include a range of supports and training to help individuals to participate in the community through one or more of the following activities:

- Supported employment and follow-up services support individuals in competitive paid employment in the community.
- Vocationally focussed services help develop, maintain and enhance vocational and social skills. These services may be provided in a facility based day service model or in the community.
- Personal development services develop, maintain and enhance an individual's personal care and social skills, emotional growth, physical development, and community skills.

The goal of day services is to support individuals to increase their independence, productivity, and community integration by developing skills that will lead to competitive employment and greater independent living. Day services promote the development and maintenance of functional, community-referenced skills that are appropriate to the individual's age and disability which assist the individual in participating more fully in the day-to-day activities of their community. Individual areas of emphasis and the type of day services provided are based on the individual's employment and personal skill development goals established through the individual planning process.

The day services funding guidelines allow for an adjustment to the number of hours the day service is open and available to serve participants.

Therefore, if a day service program only operates a 7 hour day, then the per diem will be adjusted to reflect a 7 hour programming day. In situations where a day service program is available for 8 hours a day, but due to transportation time the individual is attending less than 7 hours a day, the day service WILL NOT be penalized for issues outside of their control and the full 8 hours will be funded where appropriate.

Since 2017, the Day
Services Funding
Model has been
introduced with
Individuals graduating
from school at age 21,
New individuals to Day
Services over the age
of 21, and Existing
individuals with
changing needs.

## Facility Based & Community Based Models

The new funding guidelines reflect the different costs to deliver services in an agency-owned and operated facility, versus in the community.

\*Facility-Based: more than 60% of a participant's time in an average week is spent at an agency owned or operated facility

\*Community-Based: 40% or more of a participant's time in an average week is spent outside of an agency-operated facility (in the community)

Table 7: Day Services Funding Guidelines

Day Service Funding	Wage	Hours	Days	Total	% of Total
Direct Service	\$15.11	8/day	261	\$31,549.68	
Program Support	\$20.15	208/year		\$4,191.20	
Staff Replacement (15 Vacation, 6 Sick Leave, 3 Training)	\$15.11	8/day	24	\$2,901.12	
Total				\$38,642.00	
Mandatory Benefits (CPP, EI, WC - 8.54%)				\$3,300.02	
Total Staffing and Benefits				\$41,942.02	83.3%
Administration and Miscellaneous Program Related Costs (20% of Staffing and Benefits)				\$8,388.40	16.7%
Total Full Year Costs Associated with a Day Services Direct Service Worker				\$49,330.42	

For Day Services, the program proposes not to prescribe specifically what is included in Administration and Other Costs but rather limiting this to 20% of staffing and benefits or 16.7% of total costs.

Table 8: Day Service Funding Guidelines – Day Services Personal Supports Budgets (Facility-Based Stream)

Supports Budget Level	Per Diem Equivalent	Per Diem Equivalent (Northern Rate)	Shared Support Participant to Staff Ratio	Full Year Budget (261 days 8 hours/day)	Full Year Budget (261 days 8 hours/day Northern Rate)
1	\$32.14	\$33.75	6:1	\$8,388.41	\$8,807.83
2	\$38.57	\$40.50	5:1	\$10,066.09	\$10,569.39
2	\$48.21	\$50.62	4:1	\$12,582.61	\$13,211.74
3	\$55.10	\$57.85	7:2	\$14,380.12	\$15,099.13
3	\$64.28	\$67.49	3:1	\$16,776.81	\$17,615.65
4	\$77.13	\$80.99	5:2	\$20,132.17	\$21,138.78
4	\$82.64	\$86.78	7:3	\$21,570.19	\$22,648.69
4	\$96.42	\$101.24	2:1	\$25,165.22	\$26,423.48
5	\$115.70	\$121.49	5:3	\$30,198.26	\$31,708.17
5	\$128.56	\$135.00	3:2	\$33,553.62	\$35,231.30
6/7	\$137.74	\$144.63	7:5	\$35,950.31	\$37,747.82
6/7	\$144.63	\$151.86	4:3	\$37,747.82	\$39,635.22
6/7	\$154.27	\$161.98	5:4	\$40,264.35	\$42,277.56
Exceptions Review	\$192.84	\$202.48	1:1	\$50,330.43	\$52,846.95

Table 9: Day Service Funding Guidelines – Day Services Personal Supports Budgets (Community-Based Stream

Supports Budget Level	Per Diem Equivalent	Per Diem Equivalent (Northern Rate)	Shared Support Participant to Staff Ratio	Full Year Budget (261 days 8 hours/day)	Full Year Budget (261 days 8 hours/day Northern Rate)
1	\$32.14	\$33.75	6:1	\$8,388.41	\$8,807.83
1	\$38.57	\$40.50	5:1	\$10,066.09	\$10,569.39
1	\$48.21	\$50.62	4:1	\$12,582.61	\$13,211.74
2	\$55.10	\$57.85	7:2	\$14,380.12	\$15,099.13
2	\$64.28	\$67.49	3:1	\$16,776.81	\$17,615.65
3	\$77.13	\$80.99	5:2	\$20,132.17	\$21,138.78
3	\$82.64	\$86.78	7:3	\$21,570.19	\$22,648.69
4	\$77.13	\$80.99	5:2	\$20,132.17	\$21,138.78
4	\$82.64	\$86.78	7:3	\$21,570.19	\$22,648.69
4	\$96.42	\$101.24	2:1	\$25,165.22	\$26,423.48
5	\$115.70	\$121.49	5:3	\$30,198.26	\$31,708.17
5	\$128.56	\$135.00	3:2	\$33,553.62	\$35,231.30
6/7	\$137.74	\$144.63	7:5	\$35,950.31	\$37,747.82
6/7	\$144.63	\$151.86	4:3	\$37,747.82	\$39,635.22
6/7	\$154.27	\$161.98	5:4	\$40,264.35	\$42,277.56
Exceptions Review	\$192.84	\$202.48	1:1	\$50,330.43	\$52,846.95

Table 10: Day Services Supports Budget – (Individualized Support Option)

#### Southern Rate

Individualized Support Option <sup>1</sup> (no shared staffing)	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7
Support Hours per Week (up to)	10	13	17	20	27	32	32
Per Diem Rate (up to)	\$48.21	\$64.28	\$82.64	\$96.42	\$128.56	\$154.27	\$154.27
Full year Budget (261 days)	\$12,583	\$16,777	\$21,570	\$25,165	\$33,554	\$40,264	\$40,264

This model is most effective when services are used to develop and maintain natural supports in the community.

Table 3B: Day Services Supports Budget – (Individualized Support Option) Northern Rate

Individualized Support Option¹ (no shared staffing)	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7
Support Hours per Week (up to)	10	13	17	20	27	32	32
Per Diem Rate (up to)	\$50.62	\$67.49	\$86.78	\$101.24	\$135.00	\$161.98	\$161.98
Full year Budget (261 days)	\$13,212	\$17,616	\$22,649	\$26,423	\$35,231	\$42,278	\$42,278

<sup>&</sup>lt;sup>1</sup> This model is most effective when services are used to develop and maintain natural supports in the community.

Table 11: Personal Supports Budget Per Diem Rates by Hours per Day

#### **Southern Rates**

Supports Budget Level		8 hours/day	7.5	7 hours/day	6.5	6 hours/day	5.5
Facility	Community		hours/day		hours/day		hours/day
1	1	\$32.14	\$30.13	\$28.12	\$26.11	\$24.10	\$22.10
2	1	\$38.57	\$36.16	\$33.75	\$31.34	\$28.93	\$26.52
2	1	\$48.21	\$45.20	\$42.18	\$39.17	\$36.16	\$33.14
3	2	\$55.10	\$51.65	\$48.21	\$44.77	\$41.32	\$37.88
3	2	\$64.28	\$60.26	\$56.24	\$52.23	\$48.21	\$44.19
4	3 and 4	\$77.13	\$72.31	\$67.49	\$62.67	\$57.85	\$53.03
4	3 and 4	\$82.64	\$77.48	\$72.31	\$67.15	\$61.98	\$56.82
4		\$96.42	\$90.39	\$84.37	\$78.34	\$72.31	\$66.29
5		\$115.70	\$108.47	\$101.24	\$94.01	\$86.78	\$79.55
5		\$128.56	\$120.52	\$112.49	\$104.45	\$96.42	\$88.38
6 and 7		\$137.74	\$129.13	\$120.52	\$111.91	\$103.31	\$94.70
6 and 7		\$144.63	\$135.59	\$126.55	\$117.51	\$108.47	\$99.43
6 and 7		\$154.27	\$144.63	\$134.99	\$125.34	\$115.70	\$106.06

Table 4B: Personal Supports Budget Per Diem Rates by Hours per Day Northern Rates

Supports Budget Level		8 hours/day	7.5	7 hours/day	6.5	6 hours/day	5.5
Facility	Community		hours/day		hours/day		hours/day
1	1	\$33.75	\$31.64	\$29.53	\$27.42	\$25.31	\$23.20
2	1	\$40.50	\$37.97	\$35.44	\$32.91	\$30.38	\$27.84
2	1	\$50.62	\$47.46	\$44.29	\$41.13	\$37.97	\$34.80
3	2	\$57.85	\$54.23	\$50.62	\$47.00	\$43.39	\$39.77
3	2	\$67.49	\$63.27	\$59.05	\$54.84	\$50.62	\$46.40
4	3 and 4	\$80.99	\$75.93	\$70.87	\$65.80	\$60.74	\$55.68
4	3 and 4	\$86.78	\$81.36	\$75.93	\$70.51	\$65.09	\$59.66
4		\$101.24	\$94.91	\$88.59	\$82.26	\$75.93	\$69.60
5		\$121.49	\$113.90	\$106.30	\$98.71	\$91.12	\$83.52
5		\$135.00	\$126.56	\$118.13	\$109.69	\$101.25	\$92.81
6 and 7		\$144.63	\$135.59	\$126.55	\$117.51	\$108.47	\$99.43
6 and 7		\$151.86	\$142.37	\$132.88	\$123.39	\$113.90	\$104.40
6 and 7		\$161.98	\$151.86	\$141.73	\$131.61	\$121.49	\$111.36

Table 12: How per diem rates are "built" until a single per diem rate can be implemented

Personal Supports Budget Per Diem		Regular Rate Per Diem		Administrative Support Rate Per Diem		Special Rate Per Diem	
Urban / Rural Rate	Northern Rate	Urban / Rural Rate	Northern Rate	Urban / Rural Rate	Northern Rate	Urban / Rural Rate	Northern Rate
\$32.14	\$33.75 <sup>1</sup>	\$27.61	\$31.20	\$2.31	\$2.55	\$2.22	\$0
\$38.57	\$40.50	\$27.61	\$35.92	\$2.31	\$2.55	\$8.65	\$2.03
\$48.21	\$50.62	\$27.61	\$35.92	\$2.31	\$2.55	\$18.29	\$12.15
\$55.10	\$57.85	\$27.61	\$35.92	\$2.31	\$2.55	\$25.18	\$19.38
\$64.28	\$67.49	\$27.61	\$35.92	\$2.31	\$2.55	\$34.36	\$29.02
\$77.13	\$80.99	\$27.61	\$35.92	\$2.31	\$2.55	\$47.21	\$42.52
\$82.64	\$86.78	\$27.61	\$35.92	\$2.31	\$2.55	\$52.72	\$48.31
\$96.42	\$101.24	\$27.61	\$35.92	\$2.31	\$2.55	\$66.50	\$62.77
\$115.70	\$121.49	\$27.61	\$35.92	\$2.31	\$2.55	\$85.78	\$83.02
\$128.56	\$135.00	\$27.61	\$35.92	\$2.31	\$2.55	\$98.64	\$96.53
\$137.74	\$144.63	\$27.61	\$35.92	\$2.31	\$2.55	\$107.82	\$106.16
\$144.63	\$151.86	\$27.61	\$35.92	\$2.31	\$2.55	\$114.71	\$113.39
\$154.27	\$161.98	\$27.61	\$35.92	\$2.31	\$2.55	\$124.35	\$123.51

#### **Drop-In Programs**

*Drop-In Programs* are an alternative service option for individuals who may not wish to participate in more structured Day Services. Individuals who typically access Drop-In Programs often have support needs pertaining to justice involvement, addictions, trauma, previous CFS involvement or housing issues. The majority of these participants do not want formal day program services and they do not want their time in the Drop-In Program to be scheduled in the way traditional day services or schools structure time. Individuals appreciate the autonomy to access a Drop-In when they want and need services, including the ability to come and go as they so choose.

*Drop-In Programs* offer a safe place of belonging for individuals, reduce risk and provide access to culturally appropriate services, clinical supports, and social and community-based activities and resources. *Drop-In Programs* provide opportunities to promote and support personal skill development, including advocacy skills, service coordination, system navigation and support network development.

Table 13: Drop-In Programs – Funding Model

#### **Drop In Service Guidelines**

REF:		Wage	hours	Total
1	Direct Service	\$15.11	11,680	\$176,484.80
	Replacement			
	Vacation (15 days)	\$15.11	673.85	\$10,181.82
	Satutory Holidays (12 days)	\$15.11	539.08	\$8,145.45
	Sick Leave (6 days)	\$15.11	269.54	\$4,072.73
	Training (3 days)	\$15.11	134.77	\$2,036.36
2	Program Support	\$20.15	2,080	\$41,912.00
	Replacement			
	Vacation (15 days)	\$20.15	120.00	\$2,418.00
	Satutory Holidays (12 days)	\$20.15	96.00	\$1,934.40
	Sick Leave (6 days)	\$20.15	48.00	\$967.20
	Training (3 days)	\$20.15	24.00	\$483.60
	Total Salaries			\$248,636.36
3	Mandatory benefits (CPP, EI, WC)			8.54% \$21,233.54
	Total Staffing and Benefits Cost			\$269,869.90
4	Other Costs Occupancy, Program Related and Adr	ministrative Costs		20% \$53,973.98
	Total Staff and Operating			\$323,843.88
5	Daily Per Diem (261 days) Per Diem Participant (Assumes 60 Pa	rticipants)		\$1,240.78 \$20.68

#### REF:

- 1 Direct Service Worker (DSW) wage consistent with other BOA related funding guidelines and assumes 4 DSW's on site
- 2 Program Support wage consistent with other funding guidelines and includes one full-time supervisor
- 3 Standard contribution percentage for mandatory benefits (eligible for SSI-Pension and Benefit reimbursement per guidelines)
- 4 For Drop-In Services, Other Costs will be based on 20% of staffing and benefits similar to Day Services
- 5 Total staff and operating divided by 261 days (Note: service can be provided 365 days a year)

#### **Employment First**

Employment is key to the CLDS vision of inclusion and full citizenship for all.

Employment is the preferred outcome for adult Manitobans with intellectual disabilities and is an important experience for working age youth and adults.

The benefits of employment for individuals include: Improved financial security, self-direction and independence; Expanded friendships, social relationships, and integration within community; Increased happiness, self-confidence, and sense of belonging; and Expanded skills and abilities.



CLDS promotes and supports the expansion of employment opportunities for individuals receiving supports, based on the following principles:

- All individuals with an intellectual disability should have the opportunity to pursue employment.
- All Individuals with an intellectual disability want to work.
- Everyone has important qualities and talents to contribute.
- Employment contributes to economic and social inclusion, and to safety within community.
- Everyone can be successfully employed in the right job if they have the right support.
- There is a need to balance disability-related support needs with employment supports.

Additional information about the Department of Families Employment First Framework and Strategy will be provided in the near future.

#### **Enhanced Program Support**

In October 1, 2018, CLDS introduced a new service definition and funding model for all new entrants to CLDS who require Enhanced Program Support services.

Enhanced Program Support may be approved for agencies with demonstrated Enhanced Program Support (Case Management) expertise. Service provider agencies funded for Enhanced Program Support will lead all day-to-day case management responsibilities. The CSW case management function will be focused on monitoring and accountability of the services, collaborative planning and referrals for additional services (e.g. Day Services with another agency) with CLDS funding implications. The CSW will also maintain responsibility for Protection Services, supporting Residential Care Licensing functions and Incident Report review and follow up.

Enhanced Program Support will only be considered and approved for individuals who receive Supported Independent Living, cluster apartment, or home share services from an agency.

Enhanced Program Support is reserved for difficult to serve participants with high/complex support needs (typically individuals with a Supports Budget Level of 3, 6 or 7) and/or individuals with lower assessed needs but who require intensive system and case coordination involvement (this may include unstable housing, frequent court dates, justice involvement, meetings with probation services, etc.). New individuals transitioning from Child and Family Services (CFS) whom the CSW has assessed as requiring Enhanced Program Support Services will be prioritized for this service.

Table 14: Enhanced Program Support – Funding Model

		Annual Cost	
Hourly Wage - Annual Salary	\$ 28.85	\$ 60,000.00	
Benefits (8.54%)	\$ 2.46	\$ 5,124.00	
Program Costs - 10%	\$ 3.13	\$ 6,512.40	
Administration - 12%	\$ 3.76	\$ 7,814.88	
Total Hourly Enhanced Program Support Cost	\$ 38.20	\$ 79,451.28	
Per Diem	\$ 12.80	\$ 4,673.60	

An Enhanced Program Support Case Coordinator is expected to manage an average caseload of 17 participants.

### What is Person-Centred Planning?

Person-Centred Planning is a planning methodology designed to assure a fundamental focus on the life vision and preferences of the individual. In essence, Person-Centred Planning places maximum emphasis

on the person directing their own service planning.

In general, Person-Centred Planning is:

A planning process directed by the person for whom the plan is for, resulting in a summary of the individual's dreams, aspirations, goals, and support needs as well as a description of the services and supports that will be delivered in response.

While by definition the process centres on the person, it also commonly involves members of the person's support network or team who consider the individual's dreams, objectives, and day-to-day support needs, as well as their connections with family and community. This discovery and In Person-Centred Planning you will consider:

- Individual strengths and abilities
- What is important "to" the individual
- What is important "for" the individual
- Focus on what is working in their life and what can be improved.
- Vision for the future
- Specific support strategies
- Actionable goals and measurable objectives
- People and agencies responsible for supporting the plan
- Follow-up

discussion process leads to a plan to reach identified life goals accounting for the support needed. The plan takes into account what is important "to" the person, and also "for" the individual to live a healthy and safe life.

Person-Centred Planning comprises a process that is driven by the individual and which results in a plan that is unique to them. Through discussion with the individual and others close to him or her, the plan may identify:

- Dream Goals to reflect longer term intentions, such as to get married or to visit a sibling, or more immediate goals that fall outside a typical week routine
- Learning or skill building objectives to specify particular skills that the person decides to learn.
- Community participation activities to indicate regular activities that the individual joins in.

• Day-to-day support needs to specify the supports a person needs daily.

You may be asked to facilitate the Person-Centered Planning process. To get ready for planning you will get to know the individual and their needs. You will spend time discussing their desired outcomes. You will help to identify those supports that are already in place, and will refer the individual to other programs and services that they may need.

## How is a supports budget integrated into a Person-Centred Planning Process?

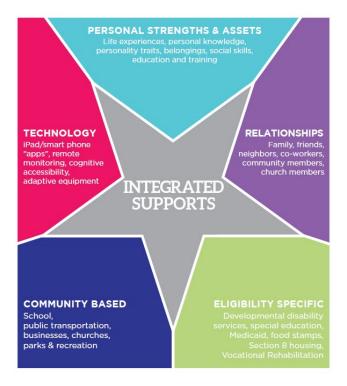
Supports Budgets create a truly Person-Centred process by assuming that people with Intellectual Disabilities can and should take an active role in every part of service planning.

will involve the person of focus and their support team.

In the past people with Intellectual Disabilities were given minor roles in planning for their supports. In a Personal Supports Budget model, individuals are informed of their budgets and use such information to make decisions in their Person-Centred Planning, to the extent possible, about the services that best meet their needs. As a result, people with Intellectual Disabilities gain authority over their services, and subsequently can be more in charge of their own lives. Personal Supports Budgets create a truly Person-Centred process by assuming that people with Intellectual Disabilities can and should take an active role in every part of their service planning process.

A focus of the meeting is to determine which CLDS supports can complement natural supports already in place. The Person-Centred and Supports Budgeting philosophies are driven by a common value that a full

Each person who will being using a Personal Supports Budget will be made aware of this budget in advance of the planning meeting. As a service provider you are tasked with ensuring that the person has a voice through their Person-Centred Planning process, which



life involves many kinds of support including paid disability specific services, generic services, community supports, and natural supports. Other types of supports, like those in the Integrated Support Star from the LifeCourse Toolkit, should also be identified and planned for in order to create the most truly Person-Centred, integrated plan possible. The LifeCourse toolkit is free and accessible here: <a href="http://supportstofamilies.org/resources/lifecourse-toolkit/">http://supportstofamilies.org/resources/lifecourse-toolkit/</a>

The plans developed in these meetings can be documented in the "Person-Centred Planning Tool" then submitted for review by CLDS. An exceptions review, discussed previously, may be called for if additional resources are thought to be required. After such plans are developed they should be shared with the individual, the SDM, the family, and the support network as necessary.

## What CLDS tools exist to assist with the Person-Centred Planning Process?

#### **Person-Centred Planning Tool**

The "Person-Centred Planning Tool" was developed by CLDS as a tool that CSWs/Service Providers can utilize to assist people they support with the planning and service selection process. The tool was created as a way to ensure that key Person-Centred values are identified and opportunities are created where individuals can communicate their dreams, preferences, goals and support needs during a planning meeting.

An individual, Service Providers and their CSW can also evaluate other appropriate tools to assist and document the Person-Centred Planning Process (e.g. PATHS, MAPS, etc).

Refer to Appendix A - building on abilities – Person-Centred Planning Tool

#### My SIS Review

"My SIS Review" was developed for CLDS participants, staff and support teams, to assist with reviewing information within the Supports Intensity Scale (SIS) assessment in a structured and efficient manner. The SIS assessment contains detailed and valuable information about a participant's supports needs that can be used to inform all aspects of case management.

**The** template is designed to assist Support Teams to prepare for conversations with participants, their families and service providers, within processes such as Supports Budget Planning sessions, person centred planning meetings or general requests to review the results of the SIS assessment.

Refer to Appendix B – building on abilities – My SIS Review – Template and Guide

Please talk to the Community Service Worker about accessing any CLDS tools.

### What if an individual needs additional supports or services?

The supports budget model matches as closely as possible, support need to services. It is expected that a small number of individuals will have needs that exceed what is provided for within their supports budget. At these times, individuals may request additional supports. It is important to know that only the plan is appealable. Individuals are not allowed to appeal the level that they are assigned. If requests are approved individuals will receive a temporary increase in their supports budget.

Individuals and their families, or SDMs and Service Providers can request a review. A request for review process can be initiated by completing the "Request for Review Based on Extraordinary Support Need" form. Once completed, you can submit the form and required documentation to the assigned CSW who will submit the form to Adult Disability Services (ADS) with CLDS. After you submit the information it will be reviewed by the CLDS Review Committee. During the review, the committee will determine whether the request can be managed through other processes (e.g. Request for Review of the SIS, Complex Case Review) or alternative measures (e.g. other Departments, generic services, natural supports). The program manager may be asked to present the request to the committee. You and the individual will be notified after a decision is made. All decisions made by the committee are final.

## Overview: What a building on abilities meeting might look like

General information about CLDS and redevelopment (SIS, Introduction using a Supports Budget). Offer to review SIS using My SIS Review. Talk about goals, SIS Review interests, relationships and support needs. Support Budget Talk about Support Budget Level and Personal Budget Level Allocation. Review Service Options that are available. Talk about Service Options differences in services and types. Complete a Person-Centred Plan to assist with items like goal Person-Centred development, service selection and exploring strengths (any Plan planning tool/method can be utilized). Service selections can be made and plan can be put in-place to Service Selection begin services. Service Selection can also occur after meeting. Exceptions Review Process will occur if needed Follow Up Plan to be monitored to ensure goals are met and positive experiences are occurring.

### **System Principles**

Fairness
Consistency
Equity
Transparency

Empower Individuals with Intellectual Disabilities to be in charge of their lives as much as possible.

Promote Opportunities to use resources in ways that enhance their lives and help them participate in their communities.

Acknowledge the contribution that people with Intellectual Disabilities and their families may make.

Create a shared responsibility for the wise use of public dollars.

Ensure that the system is managed in a way that is efficient and fair to everyone.

#### **Definitions**

- American Association on Intellectual and Developmental Disabilities (AAIDD): AAIDD is responsible for the creation, development, implementation and ongoing monitoring of the SIS assessments.
- building on abilities: building on abilities is an initiative to improve supports and services for Manitobans with intellectual disabilities. It builds on the work of Community Living disABILITY Services (CLDS), by helping people with intellectual disabilities live in the community with a good quality of life.
- building on abilities Intake and Planning Meeting: Refers to a meeting where CLDS and/or a
  member of the building on abilities team meets with the CLDS participant, family, support network,
  service provider(s) and any other individuals in his/her life to review the results of the SIS
  assessment, talk about the individual's Personal Supports Budget, discuss service options and offer
  the opportunity for Person-Centred planning.
- CLDS: the Community Living disABILITY Services program of the Government of Manitoba.
- **CLDS Referral, Eligibility and Intake process:** Refers to the referral and intake process to determine program eligibility for CLDS.
- **Community Inclusion:** Enables participants to become active citizens in their communities based on interests that promote building relationships in everyday, ordinary places.
- Eligible: Individuals with an intellectual disability and who have met the eligibility criteria for CLDS.
- Exceptions Review: A safeguard to ensure that CLDS participants who have received a supports level budget level through the building on abilities intake and planning process receive services necessary to meet their needs. For some individuals, the services available within their assigned service packages may not meet their extraordinary or unique needs. In these cases, individuals can request an Exceptions Review. The Exceptions Review Committee is an interdisciplinary team of CLDS professionals who review and make decisions on a case-by-case basis. The CLDS Review Committee cannot change an individual's assigned level. However, the Committee is able to approve or deny additional specific services that an individual may require.
- **Individual Plan:** means a plan for a vulnerable person under section 11of the <u>Vulnerable Persons</u> <u>living with a Mental Disability Act</u>.
- Major Life Change: In situations where an individual has experienced significant change(s) to
  support needs (i.e.: medical or health condition, etc.), a request for an updated SIS assessment can
  be made outside of the request for review process. The assigned CSW will review the circumstances
  surrounding the change in support needs and determine whether a new SIS assessment is required.
- Natural Supports: Natural supports include unpaid relationships with family members, friends, coworkers, neighbors, and acquaintances and are of a reciprocal nature. Such supports promote valued roles within one's community and maximize opportunities for independence and selfsufficiency.
- Person-Centred Planning: A process, directed by the individual served and their support network, intended to identify the strengths, capacities, preferences, needs, and desired outcomes of the individual.
- Personal Supports Budget: A Personal Supports Budget is a targeted amount of money or allocation - that is made available to individual service recipients to acquire the services they need and prefer.

- **Personal Support Budget Level:** refers to the support needs level system. SIS assessment results are used to assign CLDS participants to one of seven levels, labelled 1 through 7, related to their assessed support needs.
- **Prioritization Criteria** and process refers to the funding approval criteria and process established by the CLDS Program and Funding Review Committee.
- Qualified SIS Facilitator: CLDS staff who has been trained and endorsed by AAIDD to conduct SIS
  assessments.
- Request for Review: In some cases an Individual may feel that the CLDS Supports Intensity Scale
  policy and procedures were not adhered to and may make a request to the Executive Director for
  review of the SIS interview process and compliance with policy to make a decision about completing
  another SIS assessment.
- **Service Array:** Refers to the range of services available with a personal supports budget, the array of services available for an individual living with family could include, respite services (self administered respite, agency delivered respite, out of home respite, etc.) and supports to families.
- **Service Packages:** Refers to the service use by assessment level based on living arrangement. For example, the service package for individuals living at home would include respite and supports to family services and may also include access to day services and transportation as base services within the service package.
- **Service Purchase Agreement (SPA):** The formal contractual agreement between the Department of Family Services and the service provider.
- Severe Community Safety (Convicted and/or Not Convicted): A Supplemental Question. Verification for Supplemental Questions 2 and 3 are similarly focused on the extent that the person presents a severe community safety risk. The only difference between the questions is the distinction between a person that has been convicted of a crime related to these risks and one that has not. For Supplemental Question 2, documentation in the person's record is expected to indicate that he or she has been convicted of a crime related to the risk behavior in the past year, or that restrictions are still required in the support plan for convictions that happened longer than a year ago. Documentation should reflect a need for 1:1 staffing requirements for significant portions of the day.

Please note, if documentation for Supplemental Question 2 does not confirm that a person meets the definition of conviction, but documentation indicates the person meets the criteria for the severe community safety risk, it is appropriate to confirm if the person needs additional funding using the analysis for Supplemental Question 3.

- Severe Medical Risk: A Supplemental Question. The Supplemental Question asks if the person is
  receiving 24 hours of direct, professional care. However, documentation of 8 hours or more of
  RN/LPN support (delegated or direct) is the threshold used to indicate the need for extensive
  support due to medical risks.
  - The verification process for this question seeks to confirm that the person requires frequent and extensive 1:1 support to address his or her significant medical needs.
- Severe Risk of Injury to Self: A Supplemental Question. Verification for this supplemental question is similar to the review process for Supplemental Questions 2 and 3. The difference is that the reviewer is looking for documentation demonstrating that the person presents a serious risk to his or her own self. Documents should reflect the need for extensive 1:1 support for significant portions

- of the day to prevent the person from harming her/himself. A threshold of at least 8 hours per day of 1:1 exclusive support is used to verify SQ4.
- **Substitute Decision Maker (SDM):** An appointed person who makes decisions for an individual with an Intellectual Disability regarding the individual's personal care or property in accordance with *The Vulnerable Persons Living with a Mental Disability Act*.
- **Supplemental Questions:** A series of questions within the SIS related to extraordinary medical and behavioral support needs experienced by some CLDS individuals. The supplemental questions help identify individuals with severe medical risk, severe community safety risk (convicted and/or not convicted) and severe risk of injury to self.
- Supplemental Question Verification Process: This process is a safeguard to ensure that people
  are assigned to a supports level that best meets their needs. Participants who need to be verified
  are identified based on their responses to certain supplemental questions. Each case is then
  reviewed by supervisors and program managers. This process is used to verify the risk of
  extraordinary medical and/or behavioral needs based on a review of a member's case record. The
  information from the review is then used to assign a member a supports level.
- Supports Intensity Scale (SIS-A): A reliable, valid, standardized assessment designed to measure the pattern and intensity of supports required for persons with an intellectual disability to be successful in community settings. The SIS was developed by the American Association on Intellectual and developmental Disabilities (AAIDD) between 1998 and 2003 and was released for use in 2004. Both formal and informal supports are considered when completing the SIS and are relied upon as respondents to complete the assessment.
- Support Network: Family, friends, and/or community members who provide personal support, advocacy, and/or help with monitoring services and who have reciprocal relationships with individuals.
- **Support Team:** A group of people including paid supports and natural supports who have a vested interest in supporting people with Intellectual Disabilities to achieve their aspirations and to be safe and healthy.



#### **Frequently Asked Questions**

### building on abilities, the SIS and Assessment Informed Personal Supports Budget Framework

Community Living disABILITY Services (CLDS) adopted the Supports Intensity Scale (SIS-A) as a standardized method of assessing the support needs of individuals across the province who receive support from the CLDS Program. The SIS is a detailed, thorough, interview conducted by a certified SIS assessor that is meant to be completed by the person receiving services and individuals (family, support staff, etc.) who know them well.

#### What is the SIS?

The SIS is a valid and reliable assessment tool, specifically designed to measure the type, frequency and intensity of support an individual needs to participate in community life.

The SIS was developed over a five-year period by a team of experts from the American Association on Intellectual and Developmental Disabilities. This team included self-advocates, family members and professionals in the field of developmental disabilities.

The SIS measures support needs in the areas of home living, community living, lifelong learning, employment, health, and safety and social activities. It also looks at how an individual protects and advocates for themselves, and extra support needed to deal with exceptional medical and behavioral needs.

#### Will the SIS affect my eligibility for CLDS services?

No. Your eligibility status for the program will not be affected. The SIS does not provide a diagnosis or determination of CLDS program eligibility.

### To date, how many CLDS participants have received a SIS interview?

Approximately 5,300 CLDS participants have been assessed. There are approximately 6,700 CLDS participants across the province.

#### What are the 7 levels all about?

Assessment results are used to calculate one of seven Supports Budget levels, labeled 1 through 7, related to an individual's support needs. These levels are not associated with AAIDD or the SIS developers, but were developed by the Human Services Research

CLDS is seeking to improve the range of services available to individuals with an Intellectual Disability

CLDS expects people with intellectual disabilities will have greater control over their services and also get the supports they need to live in and be part of their communities

Institute (HSRI) and adopted by CLDS. Level 1 represents those with the lowest support needs while Supports Budget Levels 6 and 7 represent individuals with the highest need for support.

- **Supports Budget Level 1:** Adults with support needs in this Supports Budget Level have minimal support needs, and may need some support for medical and behavioral challenges. They can manage many aspects of their lives independently or with little assistance.
  - Someone with this Supports Budget Level may need supports with clothing care, preparing meals, and dressing. Often support needed involves some monitoring or prompting instead of partial to full physical support. They may need intermittent help participating in leisure activities, gaining and maintaining employment, visiting family and friends, or assistance with shopping. They usually can ambulate or need minimal help moving about with the proper equipment, but need help with health practices, such as maintaining a nutritious diet and taking medications.
- Supports Budget Level 2: Individuals with support needs in this Supports Budget Level need more support than those in Supports Budget Level 1, but their support needs are mild to moderate in a number of life areas. Adults with this Supports Budget Level have moderate support needs and may need some support for medical and behavioral challenges.
  - An individual with this Supports Budget Level may need some assistance preparing and eating meals. They might need monitoring or prompting with daily dressing, and daily assistance with housekeeping and laundry. They may need support getting from place to place, gaining and maintaining employment, accessing public services or interacting with community members. In this level, they most likely will need partial physical assistance taking medications, avoiding health and safety concerns, and maintaining a healthy diet.
- Supports Budget Level 3: Adults with support needs in this Supports Budget Level have minimal to
  moderate support needs and may need some medical support as in Supports Budget Levels 1 and 2.
   They also have an increased, though not extraordinary, support need due to behavioral challenges
  compared to Supports Budget Levels 1 and 2.
  - Individuals with this Supports Budget Level would otherwise be situated in Supports Budget Levels 1 or 2, except for their moderate behavioral challenges. These individual's behavioral support needs lie outside of overall living activity supports. Though these needs are not extraordinary, they likely require increased monitoring or intervention to address behavioral challenges such as prevention of outbursts, self-harm and/or wandering.
- **Supports Budget Level 4:** Adults with support needs in this Supports Budget Level have moderate support needs and may need some medical support. They often need some physical assistance with life activities on a daily basis. They may have behavioral support needs, but these needs are not extraordinary.
  - In this Supports Budget Level, an individual will most likely need daily assistance preparing food, eating meals, dressing, and bathing. This will most likely include partial to full physical assistance for some supports including gaining and maintaining employment, accessing the community, visiting friends and family members, or participating in preferred community activities. They may also have behavioral support needs that lie outside of overall living activity supports. Though these needs are not extraordinary, they likely require increased monitoring or intervention to prevent or address behavioral challenges such as prevention of outbursts, self-harm and/or wandering. They will most likely need at least partial physical assistance obtaining health care.
- **Supports Budget Level 5:** Adults with support needs in this Supports Budget Level have high support needs. They need help with life activities requiring hands on support and oversight throughout the day. They may have behavioral support needs, but these needs are not extraordinary.

Support needs will likely include partial to full physical assistance with eating and preparation of meals, dressing, and all household activities. An individual in this level may have difficulty ambulating, and therefore needs full physical help accessing the community. To maintain health and safety, an individual in this level will likely need full support in meal planning, maintaining physical health, and taking medications. Support for medical issues may also be required.

• **Supports Budget Level 6:** Adults with support needs in this Supports Budget Level have extraordinary need for medical support. Individuals in this Supports Budget Level may have behavioral support needs, but these needs are not extraordinary. Adults in this level need greatly enhanced 1:1 supports due to their medical needs.

Regardless of the support needed to complete life activities, individuals with this Supports Budget Level have extraordinary support needs due to their medical conditions. This may involve assistance with respiration, feeding assistance, or other exceptional medical care. They likely need partial to full physical assistance with eating and preparation of meals, dressing, and all household activities. An individual with this Supports Budget Level may have difficulty ambulating, and therefore needs full physical help accessing the community. In order to maintain health and safety, an individual in this level will likely need full support in meal planning, maintaining physical health, and taking medications.

Supports Budget Level 7: All adults with support needs in this Supports Budget Level have
extraordinary behavioral challenges, regardless of their support need to complete daily activities or
for medical conditions. Adults in this level need greatly enhanced 1:1 supports due to their
behavioral challenges.

Regardless of the support needed to complete life activities, an individual with this Supports Budget Level has behavioral support needs that are exceptional and require a great amount of assistance. They may have varying support needs in daily living activities but can require full physical assistance to prevent harm to themselves or others. Support needs in this domain include prevention of pica, sexually aggressive behavior, wandering and tantrums, or other forms of self-harm. Given the behavioral challenges experienced by people in this level, employment supports will need to be highly specialized.

### Does the SIS interview and assessment process replace person-centered planning?

The SIS acknowledges the important role that natural supports and person-centered planning plays and incorporates these processes and information into the level of support a person will require to be successful in the community. It is a natural complement to the person-centered planning process, as it assists in addressing "what is important to" the individual, as well as what is "important for" the individual. As a result, the person-centered planning process, which identifies the individual's goals and desires, will continue to be highly valued along with other factors such as the person's, existing "natural" supports, such as family, friends, resources available in their community and other relevant assessment information.

Building on abilities aims to enhance person-centered approaches that maximize opportunity for self-direction and community inclusion

#### Does CLDS plan to assess everyone in the Program?

The goal is to have the SIS administered to all CLDS participants over the next two years with a planned reassessment cycle every 3 to 5 years.

#### Who will be prioritized for an assessment?

All new entrants into CLDS will be scheduled to have a SIS assessment completed shortly after program eligibility has been determined.

Existing CLDS participants with changing or increasing support needs and individuals receiving funded residential and/or day services will be prioritized for a SIS assessment as well as new transitional youth entering CLDS Day Services for the first time after graduating from High School.

In addition, individuals transitioning to the community from a Developmental Centre will be scheduled to receive a SIS assessment.

#### What is the anticipated benefit to CLDS?

SIS, along with other areas of redevelopment work that the Program has been undertaking, will help create a more fair and equitable system. SIS will assist in ensuring that individuals are funded at an appropriate level that is directly linked to their unique support needs. This will result in greater transparency and increased confidence in how service and funding decisions are made.

### How do individuals receive their SIS results?

CLDS staff will review the SIS results with the individual and key members of the support team (family, support network, agency staff, etc.) and provide a copy of the assessment.

Individuals, families and services providers can visit the building on abilities website for more information and to submit your questions or comments https://www.gov.mb.ca/fs/pwd/building abilities.html

## I am concerned about individuals just being labeled as a number. Is this just about reducing costs?

CLDS recognizes that everybody is unique. The supports level budgeting process may account for most people. Yet some people will have exceptional needs and must be considered on a case by case basis. An exceptions review process has been established to assure that individuals with unique and exceptional needs have their needs met.

Building on abilities is trying to right the system by being more fair, consistent, equitable and transparent. We want to ensure that there are opportunities for individuals and pathways to greater independence and living good lives in the community. The initiative embraces Person-Centred practices by empowering individuals and families to have more information about a personal supports budget and as a result greater say and control in terms of the services and resources that they or their loved ones receive.

We understand that community is concerned with categorizing individuals with an intellectual disability. That is why we are committed to a Person-Centred Planning process to ensure the support plans that are developed are much broader than just funded supports to help people with intellectual disabilities live good lives in welcoming communities.

#### Why are only certain parts of the SIS used to inform funding decisions?

The SIS is a valuable assessment that supports person-centred planning. While all of the section of the SIS hold important information, we focus on specific areas of the SIS (Home Living, Community Living and Health & Safety Sections) along with the Medical and Behavioral Sections to help inform funding. We do this as these areas are more in tune to activities of daily living and more easily answered without speculation (for example Employment and Advocacy Sections).

# My daughter is graduating from high school this summer and she will be transitioning into a CLDS day service program. How will these changes impact her transition? She was receiving 1 to 1 support in school, will this level of support continue?

CLDS continues to be committed to ensuring that employment and day service programming is available for individuals graduating from the education system at age 21 and that transition planning is as seamless as possible. In fact, most individuals and families will not notice any significant changes to the transition process. Individuals and their families will continue to explore community based program options and choose an option that best meets their service and support needs. One thing that has changed, services will be available based on assessed needs and through a person-centred planning process, employment and day service programming will be tailored to each individuals support needs within their available supports budget.

In terms of 1 to 1 support that some individuals experience or have available to them in a classroom or education setting, this level of support is not a mainstream support option in CLDS. In fact, many individuals who transition into CLDS day services with the expectation that this level of support is required quickly realize that the available staffing ratios provide the necessary support for individuals to feel safe and be successful in their day time activities and programming.

### In the new funding guidelines, there are different per diems for facility-based and community-based services. How do I determine which per diem to use?

The new funding guidelines reflect the different costs to deliver services in a facility versus in the community.

A Day Services service plan would be considered "community based" if 40% or more of a participant's time in an average week is spent outside of an agency-operated facility (in the community).

A Day Service service plan is considered "facility based" if more than 60% of a participant's time in an average week is spent at an agency owned or operated facility. This would include workshops, social enterprises run by the agency, or other activities delivered by the agency on site.

Although the amount of time an individual spends at a facility or in the community may change weekly, the intent is to average the amount of time spent in either setting over the course of a year. Workers will not be expected to change the funding on a weekly or a monthly basis to

reflect where a day service is being delivered. This will be reviewed annually, unless the worker becomes aware that an individual is not receiving services in the expected setting as per their service plan.

### What about people who are already receiving services? What does this mean for them?

CLDS will work with individuals, their families and service providers to phase individuals in existing services into the *building on abilities* project. This transition has already begun with existing individuals living with family and will continue over the next three years when all individuals living with their family will have an opportunity to engage in the Personal Supports Budget Planning process. Again, eventually all individuals receiving existing services (Day Services, Supported Independent Living, Homes Share, etc.) will have had an opportunity to follow the steps outlined earlier.

### What if an agency says they are unable to support an individual within the rate identified in the funding guidelines?

CLDS has put thought and effort into establishing reasonable rates to service providers that will meet the needs of individuals to ensure that they have access to quality services in the community. *building on abilities* is trying to right the system by being more fair, consistent, equitable and transparent.

CLDS recognizes that everybody is unique. The supports level budgeting process will account for most people. Yet some people will have exceptional needs that must be considered on a case by case basis. An exceptions review process has been established to ensure that individuals with unique and exceptional support needs have their needs met.

In some situations, an agency may not agree to provide services under the new rate structure. In these cases, other service options will need to be explored. This includes approaching another service provider to deliver the service within the new funding guidelines. Agencies should work with the assigned CSW or regional CLDS program manager.

### What if the participant, agency, family/support network or the CSW does not think the SIS results accurately reflect the individual's support needs?

The SIS assessment is conducted as an interview. The Facilitators are all trained and endorsed by AAIDD (the makers of the SIS). The interview includes the individual receiving services, friends, family, and possibly other members of the support network or team who know the person well. It is important that CSW's attend the SIS interview as well, particularly if they have known the individual well. However, this is not always possible and where the CSW is not available to attend a SIS it is important that any key, relevant information and history about the individual is shared ahead of time with the SIS Facilitator.

In situations where there are questions about the results of the SIS and/or Supports Budget Level assignment (level 1-7), the CSW should contact the SIS Facilitator to discuss the assessment and whether

any key information was missed in the interview (maybe a respondent didn't have all of the necessary information or didn't feel comfortable sharing more sensitive information).

CLDS wants to ensure that the assessment results and corresponding supports budget level are an accurate reflection of the individuals support needs. As a result, if any relevant and important information was missed during the assessment, we want to ensure that the assessment captures this information. The SIS facilitator will use their training and professional judgment in reviewing the assessment and determine whether any additional information needs to be incorporated into the assessment.

#### How is funding be prioritized? What about urgent or critical need?

CLDS remains committed to ensure that services are available during key transition periods such as age of majority transitions at age 18 and transitional youth planning for Day Services upon graduation from High School at age 21.

CLDS understands that crisis situations and unexpected situations will happen. It is important that the service system remain flexible and responsive to ensure the safety and wellbeing of individuals. CLDS remains committed to this.

During this phased approach, certain segments of the CLDS population or "cohort groups" will be prioritized for funding approval (for example, age of majority individuals from CDS or CFS or transitional youth graduating from the education system at age 21, etc.). The CLDS Prioritization Criteria will still apply to all other individuals based on the urgency of the situation and critical nature of the request.

This may result in a situation where an individual and/or family have a preference for a move or change of living arrangement or program but their particular situation does not meet the CLDS prioritization criteria. In these situations, it will continue to be important for individuals, their families and/or support networks to discuss any changes to an individual's situation with their Community Service Worker (CSW) to ensure that individual support needs are met within their current living environment. It should be noted that supporting and maintaining a vision of residential planning should continue to occur and can be completed over time through planning. If individuals meet the critical criteria, the CSW will explore available vacancies within CLDS as a first option.

### CLDS reviews and prioritizes funding requests for residential services as follows:

- Crisis/Immediate This includes protection and emergencies, situations involving risk to self or others and measures to preserve a placement from breaking down.
- Critical This includes situations involving placement breakdowns, risk of being homeless & Age of Majority individuals from CFS.

For more information you can talk to your CSW

### I am worried about the quality of residential and day services. What is CLDS doing about this?

Community Living disABILITY Services (CLDS) is committed to providing high quality, safe, appropriate and person-centred services to people with an intellectual disability. These changes to CLDS will enable the program to be better positioned to support the needs of future generations of vulnerable adults in Manitoba. The department values disability support work and is committed to supporting this sector so that skilled and dedicated employees view this as a long-term career option. CLDS has undertaken a number of actions to support the recruitment and retention of this valuable workforce, including the Wage Enhancement Fund and increasing funding for Direct Service wages.

The Department has also collaborated with Abilities Manitoba in the development of a quality assurance framework supporting the measurement of service quality, service outcomes and the level of satisfaction among individuals receiving Community Living disABILITY Services (CLDS) services. We are excited about this important work moving forward.

#### How does CLDS plan to evaluate whether these changes are working?

In the spirit of continual improvement, CLDS is regularly reviewing and refining processes, including evaluating the impact the changes to CLDS are having on participants and families. In addition, CLDS in partnership with Abilities Manitoba is developing a Quality Assurance framework, where the focus is defining quality of life indicators and whether the services provided by CLDS are supporting individuals to achieve the goals identified in their person centred plans. CLDS has also prioritized person-centred thinking training and is working with stakeholders to offer this training on a regular basis to both CLDS and agency staff across the province, with the intent of improving service planning and outcomes for participants.

#### building on abilities - Person-Centred Planning Tool

#### **Person-Centred Planning Tool**

Person-Centred Plan Date:

Date Updated or Re-visited:

	·
Name:	Age:
Region/Community Area:	CSW:
SIS Date:	Support Budget Level:
Type of Living Arrangement:	Family Home Independent
	Community Residence Home
	Share/Foster Placement Other
	if applicable, which agency?
Type of Day Activity:	School Day Program Employed
	Independent Individualized If
	applicable, which agency?
PCP meeting location:	
PCP meeting participants:	
and healthy that were discussed during support needs that are essential for positive li	s that are required for the Person to remain safe s SIS assessment. Think of any information or fe experiences to occur on a consistent basis; e.g. ne help the Person navigate their Community or
<del></del>	
2.	
3.	
values to have positive life experience	s or other individuals/groups that the Person s. Think of the elements or relationships in life stent, fulfilled and happy; e.g. desires to go to the lue in people that surround/support them or
۷.	
3.	

	what is appreciated about the ted in SIS assessment; e.g. be		
kind, a good friend, etc.)	, 0	, ,	
1.			
2.			
3.			
occurring and progress supported by those around the	ify areas of the Person's life is being made; e.g. respite snem, has a great job, or is en	hifts are going well,	Person feels
1.			
2.			
3.			
	red (Identify areas of the Person on work placement or current	feels that they are r	
2.			
	at identify where the Person ne life; e.g. living on their own hieve the goal, who will assis	n, going on a trip, et	c.) Identify the
GOAL	STEPS	WHO	WHEN

Learning and Skill Building Goals (Person identifies areas where they would like to develop additional skills to have more positive experiences in their life/Community; e.g. develop independent living skills, enroll in a employment training course, or learning how to budget.) Make sure to include who is responsible for assisting the individual with the goal and expected timeframe for achieving the goal.

GOAL	STEPS	WHO	WHEN

Daily Support Goals (Person can advise of any goals they have in the area of their day-to-day life with regards to their support; e.g. Person would like to receive additional support to feel healthy, or to increase their participation in community and leisure activities. You may be able to refer to "What can be improved" question). Make sure to include who is responsible for assisting the individual with the goal and expected timeframe for achieving the goal

GOAL	STEPS	WHO	WHEN

#### **Additional Goals**

STEPS	WHO	WHEN
	STEPS	STEPS WHO

#### building on abilities - My SIS Review Guide

**"My SIS Review"** is a template that can be used to guide a review of the information captured within the Supports Intensity Scale (SIS) interview for participants of the Community Living disABILITY Services (CLDS) program.

You may find it useful to make notes in this template while reading the SIS interview for the first time or Community Service Workers (CSWs) may find it helpful to reference "**My SIS Review**" while summarizing the results of the SIS interview with a participant and their support network.

This optional tool that can also be used to make note of valuable information from the SIS interview and then use that information to inform all types of planning (e.g., Person-Centred Planning, Supports Budget Planning, Support Plans, etc.).

Consider this guide when completing the "My SIS Review".

**PART A:** By completing this section, specific demographic information regarding the individual (e.g., name, age, residential setting, SIS interview date, etc.) is identified.

**TIP:** A CLDS participant or any person who is supporting a CLDS participant can complete the tool (e.g., family members, Community Service Workers, agency supports, etc.).

**PART B:** Within "Part B", "key support needs and abilities" that were noted throughout the SIS interview in various life domains can be listed. Such supports and strengths are found within the Home Living, Community Living, Lifelong Learning, Employment, Health and Safety and Social sections of the SIS interview.

**TIP:** The SIS interview document ranks each "**Item**" from those requiring the most support to be successful at the top and those requiring the least amount of support to be successful at the bottom. The "content" in these sections can help an individual to identify skill building or support activities that they could develop at a day program or at school (e.g., developing additional skill in the "Home Living" section to live independently or to develop specific employment-related skills in a current job setting).

**PART C:** The Protection and Advocacy sections contain important information that will speak to the nature of existing support or talks about the help that an individual would need in areas that include, but are not limited to, advocacy, managing personal finances, protecting self from exploitation or making decisions. This section of the SIS interview would also speak to skills, abilities and strengths that an individual has with regard to making decisions.

**TIP:** Information in the Protection and Advocacy sections can be valuable in identifying and creating opportunities to support an individual's ability to keep themselves safe. In addition, supporting the creation of strong community connections can reduce overall risk related to protection and advocacy concerns. This section can also be referenced

while supporting an individual through the Substitute Decision Making application process or to develop individual Safety Plans in various settings (e.g., Home or Community).

**PART D**: "Part D" is where you can list significant support needs that were captured in the Sections 1A and 1B (Medical and Behavioural) of the SIS Interview.

**TIP:** Sections 1A and 1B often contain valuable information that will dictate support need considerations across all areas of life (e.g., "Seizure Management" will be present at home and in the community and will require support to mitigate harm to at all times). Also, while supporting an individual to achieve their medical or behavioural goals, it is important to identify the current supports in place and how they are provided.

<u>PART E</u>: Key strengths, abilities and goals could be identified throughout sections of the SIS interview.

**TIP:** Support team members may be aware of the strengths, abilities or goals of an individual and that information may not be listed within the SIS interview. This information can be documented in different types of plans (e.g., PATHs, Individual Education Plans and Support Plans, etc.).

**PART F:** Important "To" and "For" are sections that are listed following the review of all the SIS interview questions due to their importance for planning. Important "To" / "For" information may also be listed within the SIS interview document by the facilitator.

**TIP:** A general understanding of what may be Important "To" could include preferences, interests, personality traits that they value, times of day that work better for them, etc. The areas that are important "For" the individual may include key items that are required by the individual to be safe, happy and healthy, like having specific support while eating meals or accepting help to schedule medical appointments. This information may be identified following a complete review of the SIS interview.

**PART G**: After reviewing the SIS interview and completing this template, consistent support needs or strengths may have been identified (e.g., an individual may require direct supports to complete most activities of daily living successfully or an individual may enjoy the company of people, rather than participating in activities independently).

Also, this section offers an opportunity to identify and map "Networks" or groups that an individual may belong to.

**TIP:** In "Part G" there is an opportunity to document identified support needs and trends within the SIS. Furthermore, identifying "Networks" or groups is a helpful exercise to identify resources that could help in achieving goals.

#### building on abilities - My SIS Review Template

#### PART A:

Date Reviewed: October-16-18	Reviewed By:
Name:	Age:
Residential Setting:	SIS Interview Date: March-16-18

#### **PART B:**

Home Living (key su	upport needs and/or	r abilities that are	e highlighted ir	າ the Home
Living section of SIS	):			

- 1.
- 2.
- 3.

**Community Living** (key support needs and/or abilities that are highlighted in the Community Living section of SIS):

- 1.
- 2.
- 3.

**Lifelong Learning** (key support needs and/or abilities that are highlighted in the Lifelong Learning section of SIS):

- 1.
- 2.

3.

**Employment** (key support needs and/or abilities that are highlighted in the Employment section of SIS):

- 1.
- 2.
- 3.

**Health and Safety** (key support needs and/or abilities that are highlighted in the Health and Safety section of SIS):

- 1.
- 2.
- 3.

**Social** (key support needs and/or abilities that are highlighted in the Social section of SIS):

- 1.
- 2.
- 3.

#### PART C:

**Protection and Advocacy** (key support needs and/or abilities that were identified in the Protection and Advocacy section of SIS):

1.

- 2.
- 3.

#### **PART D:**

**Exceptional Medical** (note any support needs that were identified in "Section 1A" of the SIS and confirm how those needs are currently being supported):

NEED	HOW SUPPORTED
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

**Exceptional Behaviour** (note any support needs that were identified in "Section 1B" of the SIS and confirm how those needs are currently being supported):

NEED	HOW SUPPORTED
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

#### PART E:

**Strengths and Abilities** (skills and/or abilities that are identified throughout all sections of SIS):

<b>Goals</b> (dreams, skill building or support goa sections of SIS):	ls that were identified throughout all
1.	
2.	
3.	
PART F:	
Important "To" (values, things to help feel content, things that are enjoyed, valued personality traits, etc.):	Important "For" (important items that are needed to be safe, happy and healthy, etc.):
	1.
4.	1. 2.
4. 5.	2.
	2. 3.
5.	2.

#### PART G:

1.

2.

3.

**Dominant Support Needs or Themes** (consistent support trends or abilities that were noted throughout the SIS that would be important "To"/"For"):

·
1.
2.
3.
<b>Networks</b> (identify groups or activities that meet or occur on a regular basis (e.g family, friends, school, Special Olympics, advocacy/interest groups, etc.):
1.
2.
3.
<b>Next Steps</b> (potential plan of action that could be developed (e.g., schedule a planning meeting, complete a referral to support current need, contact the Community Service Worker, check out an activity in the community, etc.):
1.
2.
3.

#### **About the SIS Assessment**

#### Introduction

The Supports Intensity Scale® (SIS-A) is an assessment tool that measures the type and amount of support a person with intellectual and developmental disabilities need to fully participate in daily life activities. All individuals receiving services through Community Living disABILITY Services (CLDS) will receive a SIS assessment.

#### The Supports Intensity Scale

#### SIS Sections

Part A: Home Living

Part B: Community

Living

Part C: Lifelong

Learning

Part D: Employment

Part E: Health &

The SIS was developed over a five-year period by a team of experts from the American Association on Intellectual and Developmental Disabilities (AAIDD). This team included people with intellectual and developmental disabilities, family members, and professionals in the field of developmental disabilities.

The SIS focuses on what supports people with intellectual and developmental disabilities need to live as independently as possible in the community.

The SIS measures

support needs in the areas of home living, community living, lifelong learning, employment, health and safety, and social activities. The assessment is done by a facilitator, who has been trained and endorsed by AAIDD. The person receiving services and others who know the person well also participate in the assessment.

For each item on the SIS, the assessor will ask:

- How often is support needed?
- How much support is needed?
- What type of support is needed?

The assessment is designed to be a conversation about how the individual can live their daily life the way they want. During the assessment, respondents may be asked to imagine the person doing things he or she may not have done before. This is a chance to consider how the person can be in charge of their lives as much as possible, as well as consider their goals and the support they need to achieve them.

#### Who should attend?

There should be at least two respondents who can provide information about the individual's support needs, who have known the person for at least three months and understand their support needs well. Respondents may include:

- The individual receiving support.
- Parents, SDM/Committee, spouse or other family member.
- Staff from the individual's residential support, community support, or employment/work support.
- Community Services Workers may attend the SIS assessment, but may not always be a respondent.

It is important that the person receiving supports attend, even if only part of the time. If the individual cannot attend, the facilitator will

#### Before the Assessment

A representative from the SIS team will contact the individual/Substitute Decision Maker (SDM), family and/or service provider to schedule a date, time, and location that works best.

The scheduler will also ask if there are others who the service recipient would like to invite to the assessment, called *Respondents*.

Respondents should be prepared to talk about the types of supports the individual needs to be successful. Respondents must attend for the duration of the assessment, which can take two to three hours. The assessment can only be cancelled when the individual is in extreme distress or for inclement weather that prevents traveling. Cancelations should be made as soon as possible. After two unsuccessful attempts the assessment will take place without identified respondents, as long as there are enough respondents available to provide needed information.

How long will the assessment take?

We value everyone's time, but people should plan for the SIS to take 2-3 hours. To protect the person's private information, no outside electronics, such as cell phones, laptops, or recording devices are allowed during the assessment.



### There are no right or wrong answers

#### At the Assessment

When all of the respondents have gathered, the SIS facilitator will explain the process to everyone. There are no right or wrong answers. It is very important that questions are answered honestly so the individual will get the right supports.

The facilitator's job is to ensure that people feel comfortable to answer the interview questions as accurately and honestly as possible. Respondents can ask the facilitator any questions that they have about the SIS assessment before or during the interview.

The SIS facilitator can request that a SIS assessment be completed at another time if:

- The support needs reported by respondents are inconsistent with skills or support needs of the individual observed prior and/or during the assessment, or
- Respondents consistently disagree on the individual's support needs. This decision will be

made in conjunction with the facilitator's supervisor and the SIS Manager.

Some topics can be sensitive and may trigger different emotions, the individual and/or (Substitute Decision Maker/Legal Guardian) should feel free to openly discuss topics in front of all respondents in attendance.

Accommodations can be made to talk privately about specific sensitive matters. Talk to the facilitator or your CSW ahead of time to see what options are available and

Examples of potentially sensitive topic areas on the SIS include:

Loving & Intimate Relationships

Personal Hygiene

Prevention from Stealing & Wandering

Protection from exploitation

Asking these questions is important to help build a plan that meets a person's service needs and identifies actions and supports to

The SIS facilitator will attempt to have the respondents reach consensus about scoring but may need to use their clinical judgement to reach an appropriate answer. The SIS facilitator may need to contact respondents after the meeting for follow-up questions.

During the SIS assessment, respondents will also be asked a series of supplemental questions. These are questions about extraordinary behavioral or medical needs that help to determine specific additional supports needed in these areas.

#### After the Assessment

CLDS service recipients will:

- 1. Receive their SIS results by mail.
- Meet with case managers and support teams to get ready for their Person Centered Planning meetings.
- 3. Have their Person Centered Planning meetings and plan for the life they want with the supports they need.

#### Major Life Change

A service recipient, guardian and/or SDM may request a SIS reassessment before three years if the individual experiences a <u>Major Life Change</u>. This includes:

- A Change in living situation including the loss of a caregiver.
- Significant change in medical or behavioral health needs, which may be accompanied by a new diagnosis,

The person receiving services and/or his or her SDM/Committee may request a reassessment if they feel their SIS assessment was not conducted according to the protocol. In such cases individuals can contact their Community Service Worker for information about requesting a review. After the first SIS assessment, individuals will receive a new assessment approximately every three years.

#### How will the SIS results inform funding decisions?

CLDS is beginning to use the SIS results to inform a personal supports budget. Eventually, each individual receiving CLDS services will be allocated a personal supports budget that they may use to secure the needed supports.

This approach will help ensure that CLDS engages in fair, equitable, and transparent funding allocations tied to individuals according to their assessed need. Since these allocations are built directly from the assessed needs of individuals, services will better suit their needs and individuals will get the right amount of support.

#### Why the SIS is important

Prior to the SIS, a variety of assessment approaches were used (often these tools were outdated or originally designed for other purposes). In many instances the assessment would go on behind the scenes with or without the individual and/or family present. Professionals of some kind (psychologists, case manager, etc.) would fill out a form, complete reports, and place them in a file.

The SIS takes a much different approach, now individuals are asked about their support needs (family, support network etc.) are present to help answer the questions. CLDS thinks that this is a very positive step and empowers the individual and his/her family in ways that did not always happen before the introduction of the SIS.

The SIS is a standardized assessment tool, which means the questions need to be asked in a consistent manner. Some of the questions may be sensitive and of a personal nature, but asking these questions is instrumental to informing wider discussion within a planning process later. Not asking some of these questions may excuse people from thinking about these issues later (relationships as an example).

The SIS also focuses on "what is important to" and "what is important for" the individual. This is information will help drive the person-centred planning process later on.

For more information about SIS-A, visit AAIDD at: http://aaidd.org/sis/sis-a#.Vkpkt3arRph