



Report to the Legislature

## **WORKGROUP RECOMMENDATIONS AND PLAN FOR A NEW APPROACH TO EMPLOYMENT AND DAY SERVICES**

SECOND ENGROSSED SUBSTITUTE HOUSE BILL 1087  
Chapter 50, Laws of 2011, Section 205(k)  
(Partial veto)  
62nd Legislature  
2011 1st Special Session

December 5, 2011

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# **WORKGROUP RECOMMENDATIONS AND PLAN FOR A NEW APPROACH TO EMPLOYMENT AND DAY SERVICES**

## **Report to the Legislature**

### **1.0 EXECUTIVE SUMMARY**

The Employment and Day Services Workgroup was charged by the 2011 Washington State Legislature to develop a proposal regarding a new approach to Employment and Day services. The recommendations proposed in this document do not constitute a unanimous recommendation from the Employment and Day Services Workgroup. The Workgroup did reach some agreement on a preferred option that is, unfortunately, challenging in today's fiscal environment. The two recommendations described below are supported by a majority of Workgroup members, but are opposed by other members.

While not achieving consensus members worked hard to understand different points of view. The Workgroup understands that revenue to the state is shrinking and that prudent recommendations are important.

#### **Recommendation A:**

The Employment and Day Services Workgroup recommends that the State maintain an Employment First policy; accept the recommendations of the Community Access Workgroup; and move Adult Day Health services back to the menu of state plan services they were previously funded under. This recommendation does not require the creation of a third, "community day option," for working age adults with developmental disabilities. After nine months of Employment services, clients would choose between continuing Employment services or transitioning to Community Access services.

#### **Recommendation B:**

If the Legislature seeks to create a third option, the Workgroup recommends that the State maintain an Employment First policy; accept the recommendations of the Community Access Workgroup; and that the Aging and Disability Services Administration create an option similar to Adult Day Health with fewer services that works within the budgetary constraints for a Day option. As a result of this alternative recommendation, individuals with developmental disabilities would be able to choose between Employment, Community Access, or a Day option after

nine months of Employment services, but only one of these options at a time.

The Workgroup acknowledges that Employment, Community Access, Adult Day Health, Day, and respite services used by individuals with developmental disabilities are distinct services that meet different individual and family needs.

The Workgroup did reach consensus on issues that would improve the overall functioning of the system serving working age adults with developmental disabilities and their families. One improvement that received particular support was working with the Division of Vocational Rehabilitation and school districts to improve transition services during and after high school and increasing the amount of respite available to meet the needs of individuals and families.

## **2.0 BACKGROUND AND CONTEXT**

### **Legislative Charge**

As part of the 2011 Legislative Session, the Washington State Legislature passed 2ESHB 1087.SL, which required the Department of Social and Health Services (DSHS) to “work with legislators and stakeholders to develop a new approach to Employment and Day services” to be submitted to the 2012 Legislature. The proposal needs to:

- Be constructed such that a client ultimately receives Employment, Community Access, or a “community day” option, but not more than one service at a time.
- Include options for program efficiencies within the current Employment and Day structure.
- Provide details on the plan to implement a consistent, statewide outcome-based vendor contract for Employment and Day services.

In response to the legislation, the Division of Developmental Disabilities (DDD) convened a Workgroup of stakeholders that met four times over the fall of 2011 to develop the policy proposal. For a list of participants, meeting dates, and meeting summaries, please see Attachment 1.

DSHS is developing options for programs efficiencies to meet the requirements of the Governor’s proposed budget. As directed by budget proviso, the County Services Outcomes Committee is developing a plan to implement a consistent, statewide outcome-based vendor contract for Employment and Day services that will be ready July 1, 2012.

The legislature also directed that DSHS convene another Workgroup to meet, develop and implement recommendations to strengthen and expand the Community Access program. The department will implement the recommendations to the extent possible.

### **State Obligation**

The State has an obligation to provide aid to individuals with developmental disabilities. This obligation is explicitly spelled out in RCW 71A.10.015, which states:

“The legislature recognizes the capacity of all persons, including those with developmental disabilities, to be personally and socially productive. The legislature further recognizes the state’s obligation to provide aid to persons with developmental disabilities through a uniform, coordinated system of services to enable them to achieve a greater measure of independence and fulfillment and to enjoy all rights and privileges under the Constitution and laws of the United States and the state of Washington.”

### **Current System Requirements**

A key feature of the current system of services available to adults with developmental disabilities is the Working Age Adult policy. The policy was implemented in 2006 and states that “all individuals of working age, regardless of the challenge of their disability, will be afforded an opportunity to pursue competitive employment.” Working age adults who receive home and community-based (HCBS) waiver services receive two types of Employment services:

- Supported employment
- Pre-vocational services

Clients on the DDD waiver have first have access to employment services for nine months. If services are unsuccessful after the nine month period, clients may choose to utilize Community Access services rather than Employment services. The state contracts with counties to provide Community Access services. Community Access services allow individuals to participate in activities that promote individualized skill development, independent living, and community integration.

A key feature of Community Access is that it supports individual participation in typical community activities. Work is done with the person

and family to discover what activities the person likes that will enable connections with other community members with and without disabilities.

Clients may choose to go back to receiving Employment services at any time; however, they may not receive both Employment and Community Access services at the same time.

### **Waiver Change**

Before October 2011, adults with developmental disabilities could receive Adult Day Health services through the 1915(i) State Plan option *and* receive Employment or Community Access services through the DDD waiver (Basic, Basic Plus, or Core Waiver). Language in the 2011-2013 budget removed the Adult Day Health Services from the 1915(i) State Plan option and added it to the COPES Waiver. The result is that working age adults with disabilities may no longer receive Adult Day Health services unless they are accepted into the COPES Waiver. About 715 adults with disabilities and their families had to choose between the COPES Waiver and the DDD Waivers. About 180 DDD Waiver participants moved to the COPES Waiver.

## **3.0 OBJECTIVES FOR POLICY PROPOSAL**

The legislative objective for the plan is to “ensure that adults with developmental disabilities have “optimum” choices and that Employment and Day offerings are “comprehensive enough to meet the needs of all clients currently served on a home and community based waiver.” The Workgroup used these objectives to evaluate different options. A description of each objective is included below.

### **“Optimum Choices”**

There is a distinction between true choice and options. Recognizing the limits of one choice at a time, Workgroup members believe that optimum choices means individuals and families have as many options as possible, that each option is designed to maximize the benefits to the recipient, and that choices may easily be changed as needed.

### **“Comprehensive Enough to Meet the Needs of All Clients”**

While DDD clients are the individuals with development disabilities, their families also benefit and rely on the services that clients receive. Individuals and families have many needs; some overlap and some are distinct.

The Workgroup members agreed that an individual's needs include:

- **Community inclusion.** Social interactions and relationships that are mutually beneficial and meaningful with a variety of people, in addition to paid staff.
- **Employment.** Services that provide skill development, training, and ongoing support for individuals to achieve and maintain paid work.
- **Avoid isolation.** Services and support that help individuals interact in the world outside of their residence.
- **Habilitation.** Services that improve health, welfare, and the realization of an individual's maximum physical, social, psychological, and vocational potential for useful and productive activities.
- **Health and safety.** Supports for obtaining therapy services, medication, emergency services, and health care providers, and maintaining a nutritious diet, physical health, and mental health/emotional wellbeing.
- **Independence.** Services that help individuals think and act for themselves and rely less on others for aid or support.
- **Socialization.** Supports that result in developing a wide variety of friendships with people with and without disabilities.
- **Skill building.** Services that support development of self-care, social, and career-related skills.
- **Self-worth/value.** Services and supports that grow and build individuals sense of their own value.

A family's needs include:

- **Good information.** Timely, accurate, consistent, and well-publicized information about what supports and services are available for themselves and their family member, and how to make the most of those supports and services.
- **Assistance helping their family member.** Services and supports that help families provide for the needs of their family member with developmental disabilities (see list above), targeting services that give the individual something of value to do during the day.
- **Respite.** A reasonable break from 24/7 caregiving for family members and the opportunity to continue to work and participate in activities common to most families.

The workgroup identified additional objectives for evaluating options, including:

- **Enhancing quality of life for adults with developmental disabilities and their families.** The overarching goal of all services is to positively impact the lives of people being served. Whenever possible, programs must bend to meet the needs of the people being served.
- **Building value in community.** Policies supporting employment first and community inclusion have helped caused a significant change in expectations and value that families, employers, and the larger community see in individuals with developmental disabilities.
- **Consistent statewide.** Many services and options that exist in urban areas do not exist in rural ones. And counties have the authority to direct how options are implemented. The group considered whether or not an option was likely to be implemented consistently across the state.
- **Cost.** Recognizing that the State is experiencing challenging economic times, the group considered the relative expensive of different options.
- **Dynamic system.** Selection of particular options should not preclude a client from easily switching to a different option at any time. All options should have the same goal of best meeting the client needs listed above.

#### **4.0 PROGRAM EFFECTIVENESS**

A number of additional ideas were raised to improve the quality of services that individuals and their families receive as well as the whole system.

##### **Respite**

**Problem:** Under the current system, many families report that they are not receiving enough respite time.

**Solution:** Continue to encourage and promote the use of respite funds for Adult Day Health services, which would allow individuals to receive additional medical therapies and skill building services, while providing the family with respite from 24/7 care-giving. Develop a new, less expensive Day services option for individuals who don't need the occupational therapies and skilled nursing services provided in Adult Day Health, but who need more services than are included in Adult Day Care.

## Schools

**Problem:** Many schools in the state do not use promising or evidence-based practices to address the federal requirement of a post-school employment plan for each transition student.

**Solution:** Possible solutions include:

- Improve how schools deliver transition services after K-12. Improved services would employ promising or best practices that result in the student leaving school with a job or an adequate post-school employment plan that meets federal requirements.
- Work with the Division of Vocational Rehabilitation, school districts, and counties to implement promising practices identified in the King County School-to-Work program programs statewide.

## Provider Effectiveness

**Problem:** The Workgroup was tasked with solving a problem that occurs when adults live at home with their families and the needs of both the individual and their families must be met with increasingly limited resources. Some Workgroup members believe that the needs of some individuals with the most severe developmental disabilities are not met by either Employment or Community Access services. Aaron's Place and Tavon's Center were identified as places that successfully serve individuals with the most severe developmental disabilities without state/county Employment and Day program funding. Some Workgroup members believe that Adult Day Health Services meet their needs. Others focus on employment. Workgroup participants identified areas where research may be useful to help resolve the disagreement.

**Solution:** Possible solutions include:

- Collect and analyze the data available on the specific needs of individuals with severe developmental disabilities to determine if there are needs that cannot be met by either Employment or Community Access programs.
- Analyze what needs are met through services like Aaron's Place and Tavon's Center; the outcomes achieved for individuals; and how they are currently funded; for potential service models. The analysis must show how these services put participants on a path toward achieving the same outcomes as Community Access or Employment programs.
- Assess the impact that Employment, Community Access, and Day services have on the quality of life of individuals and their families.



## System Effectiveness

**Problem:** Families of individuals with very severe disabilities who were members of the Workgroup describe different experiences with services. Some families experienced employment services as a barrier to effectively serving their adult family member. Other families disagreed.

**Solution:** Possible solutions include:

- Work with Adult Day Health providers on how to become authorized County Community Access or prevocational service providers and respite providers, thereby increasing the number of Community Access providers in the State.
- Collaborate with individuals with developmental disabilities, their families, County staff, and DDD case managers on how to combine funds from DDD, DVR, and Medicaid Personal Care to fund services that meet their needs. Braiding would allow individuals and families to leverage these dollars to better achieve successful outcomes. Work with CMS to reduce restrictive regulations around Medicaid Personal Care to allow a more comprehensive and efficient use of these dollars.

**Problem:** While it is important to craft solutions that meet the needs of individuals who are currently receiving services, it is important to acknowledge that thousands of individuals with developmental disabilities and their families receive no services from the current system.

**Solution:** Find ways to make those who aren't currently being served aware of the fact that services do exist and begin to get them participating in the system. Semi-annual regional workshops would be one way to reach families.

The system of programs and services for adults with developmental disabilities was built on an expectation of State and federal funding. While noting the thousands of individuals left out of the system, Workgroup members also observed that recent and expected budget cuts will further exclude individuals with developmental disabilities from receiving services from the State.

## 5.0 POLICY OPTIONS

The Employment/Day Services Workgroup considered several policy options to address the Legislative directive to construct a third, new "community day option" in addition to the Employment and Community

Access. This section presents several options discussed by the Employment/Day Services Workgroup. The Workgroup did not reach unanimous agreement on what should be presented in this Legislative Plan. Workgroup participants were also constrained by ongoing fiscal realities and limitations from federal guidelines around service provision. Within each option, the Employment/Day Services Workgroup recommends that the Legislature accept the recommendations from the Community Access Workgroup to make that program more robust. See Table in Attachment 2 for comparative summary of Options.

### **Option One**

Maintain an Employment First policy, and allow individuals to access all services simultaneously, not one at a time, as current policy requires. Allowing individuals with developmental disabilities to utilize all programs simultaneously would better empower them to meet their needs. The current one-program-at-a-time rule in place now actually curtails choice and makes the system less dynamic than it might otherwise be, according to several Workgroup members. Maintaining the Working Age Adult policy allows individuals to engage in the nine-month discovery phase, to develop an individualized plan based on their skill level, to learn what they want to do, and gives them opportunities to try various things.

Employment empowers individuals to achieve independence, employment, skill building, and self-worth. Community Access gives individuals the opportunity to build skills, have access to habilitation, socialization, and community inclusion. Adult Day Health allows individuals to meet their medical, habilitation, health, and safety needs, and get them out of their homes. While different and distinct, each of these services provides families with respite, and opportunities for socialization with individuals with developmental disabilities. All services would be provided at a level where individuals and families could experience autonomy.

**Tradeoff:** Cost.

**Benefit:** True choice and the ability for individuals and families to optimize across choices to best meet their needs.

### **Option 2**

Maintain an Employment First policy. This option would not create a third option; the reasoning is that an expanded Community Access program, as proposed by the concurrent Community Access Workgroup would satisfy

the needs of individuals that are currently not being met by Employment and the current Community Access program.

**Tradeoff:** Individuals who want to remain on the DDD Waiver and have access to Adult Day Health Services would not have that option.

**Benefit:** This option would preserve an Employment First policy, and the nationally-recognized, cost-effective Employment services program. Since Adult Day Health providers are qualified respite providers, families may use respite funding to pay for respite through Adult Day Health providers..

### Option 3

Maintain an Employment First policy and move Adult Day Health services into the DDD HCBS waiver, making Adult Day Health the third option. After the nine-month discovery period, individuals could access Employment, Community Access, or Adult Day Health, but only one at a time.

**Tradeoff:** Increased costs since eligible Waiver participants not currently using Day programs would have access to Adult Day Health services. The State must ensure statewide development of these services.

**Benefit:** This option would provide more choice and may better meet the needs of some individuals and their families.

### Option 4

Eliminate the Employment First policy and move Adult Day Health services into the DDD HCBS waiver. Allow individuals to access Employment, Community Access, or Adult Day Health, but only one at a time, and without first exploring employment first.

**Tradeoff:** This option would remove the expectation that everyone can work decreasing the expectation of work across the system (with individuals themselves, their families, DVR, and employers). It may lead to additional people using services. It may lead to some individuals choosing less cost effective options. DDD data show that on average employment support decreases when individuals have stable employment. The data show that as employment skills are mastered, and individuals become more independent, employment service costs per person decline and that funding may be used to support additional or other clients. Per person costs of Community Access and Adult Day Health services on average tend to stay constant.

**Benefit:** This option provides the most choice for individuals with developmental disabilities and their families.

## **6.0 POLICY RECOMMENDATION**

Because of the sensitive nature of the issues being considered and the passionate beliefs of Workgroup participants, consensus was not achieved around one recommendation regarding a third, “community day” option for working age adults with developmental disabilities. The most agreement, although not unanimous, was reached around maintaining the Working Age Adult policy and that there is a need for Adult Day Health services for some individuals with developmental disabilities and their families. More workgroup members supported Recommendation A. However, that recommendation does not meet the Legislative charge of identifying a third option. Recommendation B received less support, however was the most agreed upon recommendation that included a third option.

### **Recommendation A:**

Maintain an Employment First policy. Implement the Community Access Workgroup recommendations, and reinstate Adult Day Health services as one of the State Medicaid plan services. After the nine-month employment discovery period, individuals could continue with Employment services or transition to Community Access services. Adult Day Health would be a State plan service available to those who meet eligibility requirements.

### **Recommendation B:**

Maintain an Employment First policy. Implement the Community Access Workgroup recommendations, and instruct the Aging and Disability Services Administration to work to create an option similar to Adult Day Health services with fewer services that works within the budgetary constraints for a Day option. As a result, individuals with developmental disabilities would be able to choose between Employment, Community Access, or a Day option, but only one of these options at a time.

## **7.0 WORKGROUP MEMBER PERSONAL PERSPECTIVES**

Because the Workgroup did not achieve consensus around the policy recommendations in this Legislative Plan, participants were encouraged to contribute their own perspective on the issues at hand, the recommendations put forward, and the overall process. These statements are solely the work of the participants and have not been edited by the

Department. Statements were also accepted and published from people who did not participate in the Workgroup, but have comments on the issue.

**David Budd, Full Life Care**

“As an Adult Day Health provider, I would like to work with Employment services providers to find ways to support and encourage individuals who aspire to find employment. I would like Adult Day Health to be a part of the journey to employment.”

**Ellafair and Bill Keyes, Parents**

“I appreciate the workgroup's efforts in drafting a report to the Washington State Legislature regarding Employment and Day Services for individuals with developmental disabilities. As I read the proposed report, I thought about Option 4. And I quote, ‘This option would remove the expectation that everyone can **work**, or would benefit from a period where they utilize Employment services, thus decreasing the expectation across the system (with individuals ‘themselves, their families, DVR, and employers).’ When I researched several definitions of work, the one that I believe expresses the definition more accurately as it applies to my 23-year old son and other young adults with developmental disabilities is the following: ‘Physical or mental effort or activity directed toward the production or accomplishment of something.’ For example, if the working age adult has learned how to operate a switch or to shake hands, then, this is work or a sense of accomplishment for them. Therefore, I believe that everyone produces work. By the way, I really like Option 3 whereby the Adult Day Care is included in the DDD Waiver. I do agree with some of the participants who were of the opinion that neither the Adult Day Care nor the Employment services adequately addresses my young man's needs.

Secondly, my husband Bill mentioned something that is not talked about much. He said that we (society) do not think about the jobs that are created when caring for someone with a developmental disability. My husband said that caring for our loved one has provided gainful employment for doctors and nurses, health care agencies and care providers, teachers, and a host of other workers. Consequently, our working age adult family member with developmental disabilities is a vital contributor towards the economy in society.”

**Ron Ralph, Parent**

“Remove one size fits all language that ‘everyone is capable of work’ where it exists and replace with language that promotes work and recognizes the reality that, for some, work doesn’t work.

Establish equality in allocation of funds. Currently Employment/pathway money allocated to an individual exceeds the amount allocated if one were in Community Access. While it may be argued that those provided services in the “employment process” have a higher skill level than a Community Access service provider, it can also be argued that those engaged in the Employment process are higher functioning than those involved in Community Access who have higher support needs. The “work vision” has been deemed of higher value, thus it captures more dollars, thus diminishing the value and recognition of the needs of the person who is more severely involved.

I pick Option 2 with the proviso that the monthly dollars allocated to an individual for the Community Access choice is no less than if that individual participated in Community Access versus Employment/pathways. Adult Day Health providers can choose to create within their current programs a “community access” option.

Whether Employment or Community Access, an individual should have a meaningful daily life experience outside of the home of no less than 20 hours a week. The State should encourage and help nourish partnerships with the private sector to grow community access in every community to reflect the vision of the Life Long Learning Act.

Not so sure about the notion of more studies. Data from annual assessments can provide a handle on the size of the population with high needs. There are a few examples of programs successfully meeting the needs of those individuals number of individuals. Those involved, participants, parents, staff, etc., are a terrific resource regarding the ‘how to’ meet the needs. A study, perhaps, but preferably gather those people together in partnership with the State to make Community Access work for those where Employment doesn’t work.

**John Mahaney, Parent**

The committee’s representation consisted of a majority of Employment providers from the West side of the State where considerably more options are available. Employment providers were unwilling to compromise, even the slightest, on their stance of employment first.

My son is 28 years old, and has been involved in pre-vocational or employment programs since the age of 14. He has yet to develop skills toward beneficial employment. My son's health has been outstanding over the past couple years due to his participation in Adult Day Health. Our children will face discrimination and inequality when a non-employment option is their choice.

Trish Borden, Trillium; Chris Brandt, At Work Washington; Tamera Cardwell, Douglas County Developmental Disabilities; Mike Hatch, Developmental Disabilities Council; Darla Helt, Parent and Arc of Western Washington; Carrier Morehouse, Parent and Work Opportunities; Joanne O'Neil, Parent and King County Parent Coalition; Senator Linda Evans Parlette, Washington State Senate; Emily Rogers, Self-Advocate and Arc of Washington; Margaret-Lee Thompson, Parent; and Doug Washburn, King County Developmental Disabilities

"The majority of the workgroup reached consensus on the following:

- That the state's obligation as spelled out in the RCW could be met by current employment services and by providing for more choice under a more robust Community Access program.
- That people should not have to choose between employment/community inclusion and meeting their health care needs. This is simply an unacceptable situation. This forced choice does not help people to meet the state's obligation to achieve a "greater measure of independence and fulfillment and to enjoy all the rights and privileges under the Constitution and laws of the United States and the state of Washington."
- That creating a "new" facility-based day option where individuals are congregated, with the assumption that the program will be able to meet individualized needs or prepare adults for integrated, independent community activity is supported neither by research or 50 years of experience. Unmet respite needs are very real as families struggle to stretch resources in a system that has not invested in the low-cost community supports (such as Family Support) which most families prefer and need.

There were some anecdotal references in the workgroup to a couple of small privately-funded centers. Access to these centers and Adult Day Health centers is already achieved in our current system without shifting dollars currently allocated to employment and community access. Using respite dollars (currently allowed) or re-instating Adult Day Health services under the state plan would achieve this "third option" without having to create new infrastructure, particularly in a budget crisis.

The workgroup as a whole reached a much higher level of understanding of the needs of people with developmental disabilities and their families through these meetings. The problem that led to the creation of the workgroup rests with the lack of funding for current community choices or options as evidenced by:

- Families as the primary residential provider receive little monetary or other support.
- Uncertain and unstable funding for family support or respite.
- Growing numbers of persons graduating from school programs with no funding.
- Approximately, one third of the eligible DDD clients have no paid services. Nearly all of these people live with their families.
- Lack of services and jobs in rural areas--no community recreation programs, no Adult Day Health, high unemployment.
- The state's over-reliance on the Adult Family Home system in lieu of professional residential service for people with developmental disabilities.
- Lack of individualized support for families to navigate the increasingly complex service system and find resources in their communities to help their sons or daughters lead meaningful lives.

Additionally, the creation of a third option during a state budget crisis is an inefficient use of state resources. Employment of people with disabilities generates over 40 million in annual wages in Washington State. Between 2004 and 2008, the DDD prioritization of employment added 1115 people to employment. That is a 24% increase in the number of people working and earning a wage. This added \$10.7 million in wages to people with disabilities – a 37% increase.

The National Survey of Day and Employment Programs for People with Developmental Disabilities showed that Washington State produces some of the best employment outcomes for people with disabilities; and one of the highest returns on investment in the nation.

The survey is a longitudinal study commissioned by the Administration on Developmental Disabilities to analyze community-based day and employment service trends between FY1988 and FY2009 for individuals with intellectual and developmental disabilities and closely related conditions. Between 1988 and 2004 the survey was administered on a semi-annual basis, however beginning with 2007 information is collected on an annual basis. The most recent version of the survey is focused on state ID/DD agency data for fiscal year 2009.



Some Workgroup members stated that segregation in day care is no longer acceptable.”

### **Jeff Bradt, Elder and Adult Day Services**

As resources grow increasingly scarce, we need to make sure that families can leverage those resources effectively. Whenever possible, programs must bend to meet the needs of the people being served.

- DSHS’ evaluation of the Employment services program appears to be largely limited to aggregate analyses that obscure the correlation between level of disability and employment success. In aggregate, the program is clearly a success. But, if program results are broken out by the recipients’ level of disability in even a rudimentary way (mild, moderate, and severe), the beneficial impacts for recipients in the severe category are 75% less than for those in the mild category. If the impacts for recipients in the severe category were divided further, the data would show that—for the most severely involved clients—the benefits approach zero.
- **The Working Age Adult policy should be modified so it no longer forces individuals and families to participate in programming that, while well-intentioned, has little chance of success and blocks families from accessing more beneficial services.** Individuals who are likely to benefit from the program, based on the success rate with similar individuals, should still be required to participate in the program for nine months. Individuals who are unlikely to benefit, should be given the opportunity to participate but should not be required to.
- Administrative procedures should be designed to allow families to move easily between programs as their needs change.
- There is a need for a day services program positioned between adult day care and adult day health. This program would provide a less expensive service option for individuals who don’t need the occupational therapies and skilled nursing services provided in adult day health but who need more services than are included in adult day care.

**WORKGROUP RECOMMENDATIONS AND PLAN FOR A NEW  
APPROACH TO EMPLOYMENT AND DAY SERVICES  
ATTACHMENT 1**

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**EMPLOYMENT/DAY  
WORKGROUP PARTICIPANTS**

David Budd  
Jeff Bradt  
Chris Brandt  
Trish Borden  
Tamara Burns  
Sally Coomer  
Representative Mary Lou Dickerson  
Bill Gillespie  
Mike Hatch  
Darla Helt  
Kristi Hunziker  
John Mahaney  
Carrie Morehouse  
Joanne O'Neill  
Senator Linda Evans Parlette  
Sue Pederson  
Ron Ralph  
Rogers, Emily  
Marcie Taylor  
Margaret Lee Thompson  
Representative Maureen Walsh  
Doug Washburn  
Kathy Watson

**WORKGROUP RECOMMENDATIONS AND PLAN FOR A NEW  
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ATTACHMENT 2**

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**5.0 Policy Options**

**COMPARATIVE SUMMARY**

<b>OPTIONS</b>	<b>EMPLOYMENT FIRST</b>	<b>WAIVER CHOICES</b>	<b>TRADE OFF</b>	<b>BENEFIT</b>
1	N/A Choice not limited	Employment Community Access (CA) Adult Day Health (ADH)	Additional cost for more than one service	Full choice  Offers most service
2	Nine month requirement	Limited to either Employment or Community Access	Access to ADH only through Respite	Supports expectation of employment but affirms choice after 9 months
3	Nine month requirement	Move ADH to DD Waiver  Limit choice to one of three (Employment, CA, or ADH)	Additional cost of making a new service available to people who do not currently use a day service	Supports expectation of employment  Provides additional option with limit of one service at a time
4	Remove	Move ADH to DD Waiver  Limit choice to one of three (Employment, CA, or ADH)	Additional cost of making a new service available to people who do not currently use a day service  Lower expectation	Full choice among three (3) options