

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF NEW MEXICO**

WALTER STEVEN JACKSON, et al.,

Plaintiffs,

vs.

Case No. 87-CV-00839-JAP/KBM

LOS LUNAS CENTER, et al.,

Defendants,

and

THE ARC OF NEW MEXICO,

Intervenor,

and

MARY TERRAZAS, et al.,

Intervenor.

JACKSON QUARTERLY REPORT FOR October 18, 2017

COME NOW Defendants, by and through counsel, Jerry A. Walz, Esq., Walz and Associates, P.C. and hereby submit the Jackson Quarterly Report.

Respectfully Submitted,

/s/ Jerry A. Walz _____

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I HEREBY CERTIFY that on the 18th day of October 2017, I filed the foregoing pleading electronically through the CM/ECF system, which caused all counsel of record and interested parties be served by electronic means as more fully reflected in the Notice of Electronic Filing.

/s/Jerry A. Walz

Jerry A. Walz

<p>HEALTH PLAN</p>	
<p>GOAL 1: Consistent, informed and effective healthcare coordination.</p> <p>GOAL 2: Early identification of deteriorating health.</p> <p>GOAL 3: Competent and consistent care in line with recommendations and good practice.</p>	<p>Major Strategies:</p> <ol style="list-style-type: none"> 1. <u>Healthcare Coordination Improvement Initiative</u> - the goal of this initiative is to improve healthcare coordination throughout the DDW system to achieve safer and more effective care. 2. <u>Rewrite of DDW Standards:</u> DDS D is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director’s Releases and interim memos. 3. <u>Therap Audit Tool Initiative:</u> DDS D developed a process by which Provider Agency Nurses and Regional Office Nurses complete quality assurance reviews of the health record for Jackson Class Members. The expectation is that completion of the quality assurance reviews will result in health records that are individualized, accurate, and current for each Jackson Class Member. This process is referred to as the Therap Health Record Audit and is mandatory for each Provider agency serving a Jackson Class Member. This process was introduced in March 2017 to all Developmental Disabilities Waiver Provider Nurses and presentations of the process occurred during the month of April 2017. The Therap Health Record audit began in each Region on May 1, 2017 and has continued for each month thereafter with the exception of July 2017; for the month of July 2017, the completion of Therap Audits was placed temporarily on hold to allow time for the Regional Office Nurses and Provider Nurses to complete Therap Audits that remained open from May and June 2017. 4. <u>Training Development:</u> Subtle Signs and Symptoms curriculum and roll out.

Health Objective H1.1 Expectations for healthcare coordination are appropriate as evidenced by well-defined roles and responsibilities that are carried out and measured at the provider, region and state level.

Major Strategies:

1. DDW Standards Revision: DDS is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.
2. Healthcare Coordination Improvement Initiative - the goal of this initiative is to improve healthcare coordination throughout the DDW system to achieve safer more effective care.

<p>H1.1a The Department of Health (DOH) must define health care coordination roles and responsibilities at the provider, regional, and state levels in DOH policies, procedures, and standards.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 2/29/16 Date Ext 2: 6/30/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The HCC chapter in the DDW standards was drafted and was presented for feedback at stakeholder meeting on 8/16/17. Health care coordination roles and responsibilities are defined in this document. ● Medical Director and CSB Bureau Chief presented <i>HCC Roles and Responsibilities in the DDW System for Jackson Class Members</i> to a variety of participants statewide in this quarter. Meetings included: NE Provider meeting on 7/19/17; Community of Practice Nursing Call 7/26/17; Case Management Directors at Quarterly Meeting 7-27-17 SW Provider meeting on 8/24/17 and the SE Provider meeting on 8/29/17. Presentations for Metro, NW Provider meeting and Community of Practice call were completed in the prior quarter. ● Due to Provider concerns regarding use of the nurse as health care coordinator, two surveys were created this quarter to obtain additional feedback from nurses and provider agencies regarding that issue and other requirements. The survey was distributed on 8/23/17. Survey results were not available at the end of FY 18 Q1. <p>Supporting Documentation: DDW Case Management Director's Meeting Agenda_July_2017 rev, SW Regional Provider Meeting Agenda and Sign in Sheets, Flyer for Feedback Forums, DD Waiver Service Standards Project Milestones.</p>
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<p>H1.1b The DOH must disseminate the definitions referred to in H1.1a to all pertinent providers.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 2/29/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Drafted HCC Standards, including the definition of HCC - posted in early August 2017. ● A feedback forum was held on 8/16/17 to receive input from providers.
<p>H1.1c The definitions of healthcare coordination roles and responsibilities must contain measurable performance indicators so that the DOH can assess whether the assigned responsibilities are carried out at the provider, regional, and state levels.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 2/29/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See H1.1b
<p>H1.1d The DOH must annually evaluate the performance of healthcare coordination roles and responsibilities consistent with the measurable performance indicators through the use of the health field survey tool or other appropriate tools.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 12/31/17</p>	<p><i>CSB Bureau Chief</i></p>	<p>No data on the proposed roles at this time.</p>
<p>H1.1e The DOH must take prompt action to address healthcare coordination performance that does not meet the measurable performance indicators.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/17</p>	<p><i>CSB Bureau Chief</i></p>	<p>No data on proposed roles at this time.</p>

Health Objective H1.2 Nurses routinely monitor Jackson Class Members' individual health needs through (1) oversight, (2) communication with DSP (Direct Support Professionals), and (3) corrective actions in order to implement the Jackson Class Members' health plans, to ensure that the Jackson Class Members' health needs are being met, and to timely respond to changes in Jackson Class Members' health status.

Major Strategies:

1. Therap Audit Tool Initiative: DDS D developed a process by which Provider Agency Nurses and Regional Office Nurses complete quality assurance reviews of the health record for Jackson Class Members. The expectation is that completion of the quality assurance reviews will result in health records that are individualized, accurate, and current for each Jackson Class Member. This process is referred to as the Therap Health Record Audit and is mandatory for each Provider agency serving a Jackson Class Member. This process was introduced in March 2017 to all Developmental Disabilities Waiver Provider Nurses and presentations of the process occurred during the month of April 2017. The Therap Health Record audit began in each Region on May 1, 2017 and has continued for each month thereafter with the exception of July 2017; for the month of July 2017, the completion of Therap Audits was placed temporarily on hold to allow time for the Regional Office Nurses and Provider Nurses to complete Therap Audits that remained open from May and June 2017.
2. DDW Standards Revision: DDS D is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.

<p>H1.2a Defendants must ensure that each JCM’s healthcare needs, conditions, and risk factors are accurately documented in the JCM’s healthcare record.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● All five (5) Regions began implementing the Therap Health Records Audit process on May 1, 2017. <p>For this reporting period of July, August, and September 2017; the following Therap Health Record Audits were conducted:</p> <ul style="list-style-type: none"> ● <u>*July 2017:</u> <ul style="list-style-type: none"> ○ METRO: 0 ○ NWRO: 0 ○ NERO: 0 ○ SWRO: 0 ○ SERO: 1 <p>*Please see comment above in the narrative which explains why so few Therap Health Record Audits were conducted during the month of July 2017.</p> <ul style="list-style-type: none"> ● <u>August 2017:</u> <ul style="list-style-type: none"> ○ METRO: 3 ○ NWRO: 1 ○ NERO: 1 ○ SWRO: 1 ○ SERO: 1 ● <u>September 2017:</u> <ul style="list-style-type: none"> ○ METRO: 4 ○ NWRO: 0 ○ NERO: 0 ○ SWRO: 0 ○ SERO: 1
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			<p>During the quarter, July-September 2017, a total of thirteen (13) Therap Health Record Audits were conducted, five (5) of the thirteen (13) are complete for the quarter ending September 2017.</p> <p>Complete is defined as the following. The Provider Nurse completed the initial Therap Audit for the identified Jackson Class Member. The Regional Office Nurse then completed their review using the Therap Audit tool. The Regional Office Nurse determined if any necessary follow up or corrections were needed. If follow up or corrections were needed, the Regional Office Nurse sent the findings to the Provider Nurse. The Provider Nurse then made the corrections and finally; the Regional Office Nurse verified that all corrections were made in Therap.</p> <p>Based on the definition of complete; five (5) Therap Health Record Audits have been completed and eight (8) remain open for the quarter ending September 2017</p> <p><u>Metro</u>: 2 of 7 complete. <u>Northwest</u>: 1 of 1 complete. <u>Northeast</u>: 1 of 1 complete. <u>Southwest</u>: 0 of 1 complete. <u>Southeast</u>: 1 of 3 complete.</p> <p>Total for all Regions; 5 of 13 complete for the quarter ending September 2017.</p> <p>Supporting Documentation:</p>
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			Regional Therap Audit Tools.
H1.2b DSP and their supervisors must receive training by nurses in order to competently and correctly implement each JCM's healthcare plan.	Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD	<i>DHI / DDS D Deputies</i>	No data to report this quarter.
H1.2c Nurses must visit each JCM in accordance with DOH requirements.	Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD	<i>CSB Bureau Chief</i>	Nurses must visit each JCM based on acuity as determined by ECHAT Therap. No data to report.
H1.2d Nurses must meet with DSP's as needed based upon the JCM's ECHAT acuity level and any significant change in health status to monitor the individual.	Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD	<i>CSB Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> ● Please see H1.2a Supporting Documentation <ul style="list-style-type: none"> .

<p>H1.2e Defendants must ensure prompt revision of a JCM's healthcare plan if there is a change in the JCM's health status.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a
<p><i>Health Objective H1.3 Teams use accurate health records for Jackson Class Members.</i></p> <p>Major Strategies:</p> <p>1. <u>Therap Audit Tool Initiative</u>: DDSD developed a process by which Provider Agency Nurses and Regional Office Nurses complete quality assurance reviews of the health record for Jackson Class Members. The expectation is that completion of the quality assurance reviews will result in health records that are individualized, accurate, and current for each Jackson Class Member. This process is referred to as the Therap Health Record Audit and is mandatory for each Provider agency serving a Jackson Class Member. This process was introduced in March 2017 to all Developmental Disabilities Waiver Provider Nurses and presentations of the process occurred during the month of April 2017. The Therap Health Record audit began in each Region on May 1, 2017 and has continued for each month thereafter with the exception of July 2017; for the month of July 2017, the completion of Therap Audits was placed temporarily on hold to allow time for the Regional Office Nurses and Provider Nurses to complete Therap Audits that remained open from May and June 2017.</p>			
<p>H1.3a Defendants must monitor the accuracy of each JCM's health record, including the JCM's current healthcare plans.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a.

<p>H1.3b Each JCM’s “Therap eCHATS” (“Electronic Comprehensive Assessment Tool”) must be updated within 45 days before an IDT (Interdisciplinary Team) Meeting at which the JCM’s annual ISP (Individual Service Plan) is created.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: 10/31/16</p>	<p><i>BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Quarter 1 FY18 report is in draft form. Finalized report will be uploaded once complete. <p>Supporting Documentation:</p>
<p>Health Objective H1.4 Teams (including the individual) have information (education, consultant and technical assistance) needed to achieve goals stated in individual Healthcare Plans, MERPs [Medical Emergency Response Plans], CARMPs [Comprehensive Aspiration Risk Management Plans] and written direct support instructions as appropriate to the individual.</p>			
<p>H1.4a Upon request, DDS D will assist IDTs to identify professionals with specialized skills to provide needed information, consultation, and technical assistance. DDS D will inform IDTs of the availability of DDS D’s assistance.</p>	<p>Original Date: 7/31/15 Date Ext. 1: 7/31/16</p>	<p><i>DDS D Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Draft disengagement determination in process with guidance from the JCA. <p>CSB announced resources for accessing professionals with specialized skills at all HCC sessions and community of Practice Calls in July and August 2017.</p>
<p>H1.4b Each JCM must have access to healthcare professionals with specialized skills, as needed.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 7/31/16 Date Ext. 2: 12/31/16</p>	<p><i>DDS D Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H1.4a

Health Objective H1.5 Identified health needs for Jackson Class Members, including daily medical considerations, are addressed in individualized healthcare plans, MERPs, CARMPs, and written direct support instructions as appropriate to the Jackson Class Members. Healthcare plans are reviewed and promptly modified in response to changes in health status.

Major Strategies:

1. Therap Audit Tool Initiative: DDS has developed a process by which Provider Agency Nurses and Regional Office Nurses will complete quality assurance reviews of the health record for Jackson Class Members. The expectation is that completion of the quality assurance reviews will result in health records that are individualized, accurate, and current for each Jackson Class Member. This process is referred to as the Therap Health Record Audit and is mandatory for each Provider agency serving a Jackson Class Member. This process was introduced in March 2017 to all Developmental Disabilities Waiver Provider Nurses and presentations of the process occurred during the month of April 2017. The Therap Health Record audit is set to begin in each Region on May 1, 2017.

<p>H1.5a Defendants must prepare quarterly reports on a sample of the JCMs to monitor the accuracy of the JCMs' individual healthcare record.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a
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<p>H1.5b Defendants must take action to correct inaccuracies in the JCMs' individual healthcare record.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a
<p>Health Objective H1.6 Current and complete information is provided to the healthcare professionals treating or evaluating the individual.</p> <p>Major Strategies:</p> <p>1. <u>DDW Standards Revision:</u> DDSD is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.</p>			
<p>H1.6a Healthcare professionals, who treat or evaluate a JCM, must have a copy of the JCM's accurate "Health Passport."</p>	<p>Original Date: 12/31/15 Date Ext. 1: 6/30/16 Date Ext 2: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p>

<p>H1.6b DOH will revise and distribute the Health Passport policy and procedure clearly stating that it is the DDW provider's responsibility to provide, in all settings, the accurate and up to date Health Passport and Physicians Consultation form to treating health care professionals.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 6/30/16 Date Ext 2: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Requirements related to health passport and physician consultation form have been inserted into the healthcare coordination chapter of the DDW service standards update. <p>Supporting Documentation: See response to H1.1.a regarding DDW Service Standards update</p>
<p>H1.6c A JCM's provider must ensure a JCM's current healthcare information is provided to treating and evaluating health care professionals and the case manager must verify that through review of the Physician Consultation Form.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 6/30/16 Date Ext 2: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see responses to H1.6b <p>Supporting Documentation: See response to H1.1.a regarding DDW Service Standards update</p>

Health Objective H1.7 The team assures recommendations from healthcare professionals are reviewed with the individual and guardian in a manner that supports informed decision making and [are] either implemented, or documented in a Decision Consultation Form if recommendation is declined.

Major Strategies:

1. Therap Audit Tool Initiative: DDS D has developed a process by which Provider Agency Nurses and Regional Office Nurses will complete quality assurance reviews of the health record for Jackson Class Members. The expectation is that completion of the quality assurance reviews will result in health records that are individualized, accurate, and current for each Jackson Class Member. This process is referred to as the Therap Health Record Audit and is mandatory for each Provider agency serving a Jackson Class Member. This process was introduced in March 2017 to all Developmental Disabilities Waiver Provider Nurses and presentations of the process occurred during the month of April 2017. The Therap Health Record audit is set to begin in each Region on May 1, 2017.

<p>H1.7a A JCM's IDT must ensure that a healthcare professional's recommendations and assessments (1) are promptly communicated to the nurse, guardian, DSP, and entire healthcare team, as needed, and (2) are implemented, unless the individual or their healthcare decision maker declines the healthcare professional's recommendations by completing a Decision Consultation Form.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>DDSD Statewide CM Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a <p>Supporting Documentation</p>
<p>H1.7b A JCM's healthcare records must accurately identify and reflect any recommendations and assessments of the JCM's treating and evaluating healthcare professionals.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a

<p>H1.7c Defendants, through appropriate personnel, e.g., provider agencies and case managers, must ensure that a healthcare professional's recommendations are implemented within the prescribed timeframe.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a
<p>H1.7d The JCM's Case Manager must complete a Decision Consultation Form, as appropriate, for use by the JCM's healthcare professionals. The Decision Consultation Form must be kept in the JCM's healthcare records</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>DDSD Statewide CM Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see response to H 1.1C <p>Supporting Documentation DRAFT Chapter Provider Documentation and Client records DDW Service Standards Feedback Forums and Chapter postings (scroll down) http://actnewmexico.org/ddw-renewal.html</p>

<p>Health Objective H1.8 Each Jackson Class Member will receive the Jackson Class Member's medications (1) in the doses prescribed, (2) in the manner and frequency prescribed, and (3) at the times prescribed.</p>			
<p>H1.8a Defendants must monitor the accuracy of administration of prescription medications to each JCM.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • GER Requirements Issued on 9/15/17 with accompanying memo. • GER Requirements will be inserted into the Provider Reporting Requirements chapter of the DDW Standards. • Medication error tracking will be analyzed via Significant Events Reporting to DDSQI. <p>Supporting Documentation: GER Requirements, GER Requirements Memo</p>
<p>H1.8b Defendants must take prompt action to correct any failure to properly administer medications to a JCM in accordance with prescriptions.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.8a

Health Objective H2.1 Jackson Class Members receive age appropriate preventive/early detection screening/immunizations for health risk factors.

<p>H2.1a The DOH must publish and promote routine preventive and early detection healthcare screening standards guidelines that are consistent with national standards and adjustable for the age and the specific condition of each JCM.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 2/29/16 Date Ext 2: 6/30/16 Date Ext 3: 10/31/16</p>	<p><i>Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Completed a draft “charter” for a clinical consortium between DDS, HSD and the MCOs to improve clinical care, including preventive services. ● Completed a (revised) procedure by which individuals or their direct care staff could print a current set of national preventive service recommendations that they could take to their annual medical evaluation. ● Completed a draft “Dear Doctor” letter that encourages the PCP to consider the above recommendations for the individual patient. ● Draft disengagement motion in process with feedback from the JCA <p>Supporting Documentation: Dear Doctor Preventive services letter 20171013; Developmental Disability Clinical Care Consortium - Charter -DRAFT 20171013; Procedure for Preparing Prevention Recommendations</p>
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<p>H2.1b Each JCM must receive routine preventive screening and immunizations consistent with the national standards unless the JCM, in conjunction with the JCM’s guardian and primary healthcare provider, makes an informed choice to reject the recommended screening and immunization standards.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 10/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H2.1a <p>Supporting Documentation:</p>
<p><i>Health Objective H3.1 Jackson Class Members receive increased intensity of services during acute episodes or illnesses.</i></p>			
<p>H3.1a A nurse’s monitoring, including nursing assessments and oversight, must increase during a JCM’s acute episodes or illnesses.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • No data to report at this time. <p>Supporting Documentation:</p>

<p>H3.1b Prompt face to face visits by a Nurse must occur upon a JCM's significant change of condition unless the Nurse directs and the JCM receives care from a Healthcare Practitioner, from urgent care or from emergency services. This visit will include a nursing assessment, monitoring and management of JCMs acute illness or episodes. If the JCM receives care from a Healthcare Practitioner, from urgent care or from emergency services the nurse will promptly assess the JCM at the conclusion of the care.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • No data to report at this time. <p>Supporting Documentation:</p>
<p>H3.1c In each individual case where a Nurse fails to comply with DOH requirements regarding significant health status change, the provider will report the failure to IMB. IMB will investigate and take appropriate action and DOH will review patterns and trends via the health field tool and identify nurse performance issues, and will take corrective action.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • No data to report at this time. <p>Supporting Documentation:</p>

Health Objective H3.2 Direct Service Personnel/supervisors are able to identify subtle signs of change/acute symptoms.			
<p>H3.2a The DOH must issue healthcare guidelines for use by healthcare provider staff about the timely identification of and response to changes in the health status of a JCM so that a JCM does not experience unnecessary pain, loss of optimal function, or regression. The DOH may develop “fact sheets” that define a specific health condition, related signs and symptoms, and recommended actions, or the DOH may develop other pertinent policies and procedures that provide the required guidance.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 7/31/16</p>	<p><i>Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Fact sheets completed-see previous Jackson quarterly reports. <p>Supporting Documentation:</p>
<p>H3.2b Each JCM’s healthcare plans and MERP’s must contain individual specific information on how provider agency staff can identify subtle signs of change or acute symptoms.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Please see H1.2a.

<p>H3.2c DSP and supervisors must receive and must complete appropriate training on how to timely identify signs of change or acute symptoms in a JCM.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>Medical Director and DDSD Deputy</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Agreement made with JCA regarding purchasing of HRST and confirmation that this evaluative component would be satisfied by the purchasing and implementation of HRST. <p>Supporting Documentation: See letters from JCA documenting agreement</p>
<p>H3.2d DSP and supervisors must promptly notify the nurse and document any acute symptoms and any signs of change in a JCM's health status.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H3.2c <p>Supporting Documentation:</p>

Health Objective H3.3 When informed of signs of change in health status (including chronic and acute pain) agency nurses take immediate action.			
H3.3a The pertinent DDW agency nurse must implement pain management strategies for addressing a JCM's chronic and acute pain.	Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD	<i>CSB Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> ● No data to report at this time. Supporting Documentation:
H3.3b The DOH or pertinent agency must communicate these effective pain management strategies to the JCM's treating healthcare professionals.	Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD	<i>CSB Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> ● No data to report at this time. Supporting Documentation: .
H3.3c: The DDW Agency Nurse will evaluate the effectiveness of pain management strategies and record the effectiveness in nursing notes or on the MAR. If needed, the JCM's healthcare record will be promptly updated.	Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD	<i>CSB Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> ● No data to report at this time. Supporting Documentation:

<p>H3.3d Nurses must identify and must respond to signs of a JCM's chronic and acute pain and must take prompt action to reduce or to eliminate the JCM's pain.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext 3: TBD</p>	<p><i>CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • No data to report at this time. <p>Supporting Documentation:</p>
<p>Health Objective H3.4 When an individual is receiving healthcare in an out of home setting, critical health and functional information will be provided and the individual's existing adaptive equipment that can be used in that setting will be offered.</p> <p>Major Strategies:</p> <p>1. <u>Rewrite of DDW Standards:</u> DDSD is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.</p>			
<p>H3.4a The DOH must develop and must implement a procedure to ensure communication of a JCM's need for existing AT, adaptive equipment and supports to an out-of-home provider.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See weekly Out of Home Placement Reports for tracking of AT and adaptive equipment offered.

<p>H3.4b The out-of-home provider must receive a JCM's Health Passport, along with information concerning the JCM's mobility, comfort, safety, and sensory items within 24 hours of the JCM's placement with an out-of-home provider.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H3.4a
<p>H3.4c The necessary adaptive supports already used by a JCM must be offered to the out-of-home provider within 24 hours of the JCM's placement with an out-of-home provider.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H3.4a

Health Objective H3.5 When a JCM is receiving healthcare in an out-of-home setting, the IDT will plan for a smooth transition back to the JCM's home as soon as medically feasible.

Major Strategies:

1. Rewrite of DDW Standards: DDS is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.

<p>H3.5a The JCM's case managers, Agency Nurses and pertinent Regional Office staff will meet promptly to plan for a JCM's safe discharge.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See weekly out of home placement reports regarding discharge planning.
<p>H3.5b The JCM's e-CHAT and other healthcare records must be promptly updated by appropriate healthcare providers to indicate healthcare and adaptive supports that the JCM received from the out-of-home provider in order to ensure a safe and smooth transition back to the JCM's home.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 4/30/16 Date Ext 2: 6/30/16 Date Ext 3: 12/31/16</p>	<p><i>Litigation Management Nurse</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H3.5a

Health Objective H4.1 Competent personnel (nurses, DSP, front line supervisors, ancillary providers, and case managers), who have received and passed competency based training related to prevention and early identification, provide services to Jackson Class Members. (Ashton #6, 7, 8)

Major Strategies:

1. Training Development: Subtle Signs and Symptoms curriculum and roll-out.

<p>H4.1a The parties and the JCA must develop a mandatory competency based training program.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 3/31/16 Date Ext. 2: Pending further discussion with the JCA.</p>	<p><i>DDSD Training Unit and CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Meeting held with JCA regarding purchasing of HRST and agreements made between DDSD and the JCA confirming HRST would satisfy this evaluative component. <p>Supporting Documentation: See S3.2a for document outlining our agreements.</p>
<p>H4.1b Nurses, DSP, front-line supervisors, ancillary providers, and case managers must satisfactorily complete the mandatory competency based training program.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 9/30/16 Date Ext. 2: Pending further discussion with the JCA.</p>	<p><i>DDSD Training Unit and CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter: See H4.1a</p>

<p>H4.1c The DOH must independently measure compliance by nurses, DSP, front-line supervisors, ancillary providers, and case managers with mandatory competency based training.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 9/30/16 Date Ext. 2: Pending further discussion with the JCA.</p>	<p><i>DDSD Training Unit and CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Training will be entered into CDD database to track compliance as is currently the practice with all other DDSD Core Competencies. BSI confirmed HRST training can be tracked via the CDD database.
<p>H4.1d The DOH must take prompt remedial action for nurses, DSP, frontline supervisors, ancillary providers, and case managers who are found deficient in the mandatory competency based training.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 9/30/16 Date Ext. 2: Pending further discussion with the JCA.</p>	<p><i>DDSD Training Unit and CSB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H4.1a
<p>H4.1e Nurses, DSP, front-line supervisors, ancillary providers, and case managers must receive information specific to Ashton #6, 7, and 8, as outlined in the Health Communications Matrix.</p>	<p>Original Date: 10/31/15 Moot per letter of 1/28/16 from JCA.</p>	<p><i>DDSD Training Unit and CSB Bureau Chief</i></p>	<p>Moot per letter of 1/28/16 from JCA.</p>

Health Objective H4.2 IDTs provide for the changing health supports class members need as they age including advanced care planning and have access to palliative care consistent with their individual needs.			
H4.2a Case managers and agency nurses must provide up-to-date information and resources to JCMs and their guardians about advanced care planning and palliative or end-of-life care so that the JCMs and their guardians can make informed choices.	Original Date: 10/31/15 Date Ext. 1: 12/31/16	<i>Medical Director/Community Programs Bureau Chief</i>	Milestones Achieved in the Quarter: • No data to report at this time.
H4.2b The DOH must identify, and must document on an annual basis in the pertinent healthcare records, those JCMs who want advanced care planning, including palliative care, and those JCMs who decline advanced care planning.	Original Date: 10/31/15 Date Ext. 1: 12/31/16	<i>Medical Director</i>	Milestones Achieved in the Quarter: • No data to report at this time.
H4.2c The DOH must provide advanced care planning and palliative care to those JCMs who choose to have advanced care planning and palliative care.	Original Date: 10/31/15 Date Ext. 1: 12/31/16	<i>Medical Director</i>	Milestones Achieved in the Quarter: • No data to report at this time.

Health Objective H4.3 Quality Assurance information is used to improve health outcomes.

<p>H4.3a. The DOH must use existing quality assurance information and tools – including the measurements found in the CPR (Community Practice Review), Out-of-Home Placement, Emergency Services Utilization, ANE (Abuse, Neglect, and Exploitation) Reporting, and Provider QA (Quality Assurance) Reports to identify gaps in the healthcare services to JCMs and to improve healthcare outcomes to JCMs.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA</p>	<p><i>DDSD Deputy Director and BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● DDSQI meeting held on 10/5/17. Re-reviewed DDSQI policy and procedure after meeting with the JCA for her feedback on 9/19/17. ● Draft DDSQI calendar created and shared with DDSQI committee members for review and finalizing. ● DDSQI members were asked to meet with their respective Bureaus and create a reporting template for their regularly reporting to DDSQI so data reported is consistent and efficient to aggregate. ● Met with the JCA and her consultants on 9/19/17 regarding feedback on the DHI-DDSD monthly Quality Management meeting policy and procedure. Revised the policy and procedure as well as the agenda template to include revisions from the JCA. Revisions sent to OGC for their review. <p>Supporting Documentation: Draft DDSQI calendar</p>
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SAFETY PLAN

GOAL 1: The recommendations from the JCA's report on the incident management system prepared by Eva Kutas are implemented. Incidents of abuse, neglect and exploitation are timely reported, professionally investigated, and needed corrective actions are promptly implemented and sustained.

GOAL 2: Deaths are reviewed in a timeframe consistent with DOH policy by a team of qualified, independent healthcare professionals and relevant administrative personnel. Detailed findings and recommendations, as appropriate are issued and recommendations from the MRC and corrective actions are implemented. Deaths are reviewed as a learning opportunity to improve quality at the individual, program and systems level. Incidents, deaths and significant events are documented and analyzed, root causes are identified and deficiencies are adequately remediated.

Major Strategies

1. ANE Training-development of refresher training.
2. Quality Assurance Tool finalizing-improving the quality of IMB investigations.
3. Mortality Review policy and procedure revision and restructuring of attendees/participants.
4. CPR to IQR transition
5. QMB Work Plan (revising tools, core competencies, drafting policies and procedures and training).
6. IRC – Policy Revision
7. DDS Contract Management
8. Quality Assurance/Quality Indicator plan requirement restructuring.
9. Rewrite of DDW Standards: DDS is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.
10. Case Management Quality Practice Indicators: DDS is in process of identifying key case management quality practice areas and indicators to align with current best practices.
11. Qualified Provider Project for Case Management: DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
12. Competency and Performance Based Training for Case Managers: DDS is in the process of developing an overall training vision that will entail a review of existing trainings, training needs, frequency of training, and ongoing quality and fidelity of training. Case Management requirements will be reviewed and developed during this process.

GOAL 3: The quality of services, settings, and supports provided by community agencies are evaluated at least annually through the Community Practice Review and at other intervals as appropriate, through provider reviews; any deficiencies are identified, corrective actions are taken and sustained on an individual, program and regional basis.

GOAL 4: Prompt and effective action is taken with respect to provider agencies where serious incidents, deaths, patterns of incidents or of significant events or serious programmatic deficiencies have been identified, in order to protect class members, to reduce the risk of future harm and to ensure that quality services and supports are provided.

GOAL 5: Establish measurable indicators of quality and develop an integrated data collection system that collects, analyzes, and employs information from multiple sources to ensure that these quality indicators are met, the safety of Jackson Class Members is protected, and quality

services are provided for Jackson Class Members.			
Safety Objective S1.1.1 Define “Abuse, Neglect and Exploitation” (ANE) consistent with New Mexico Statutory Adult Protective Services (APS) definitions. Disengaged on February 11, 2016. See Doc 2095			
S1.1a The DOH must promulgate revised regulations that define ANE consistent with APS definitions.	7/2/14 Complete and sustained	<i>IMB Chief</i>	Disengaged
Safety Objective S1.1.2 Provide educational information about how to detect ANE.			
S1.2a The DOH must develop and must provide annually educational information to providers, physicians, clinicians, families, guardians, and law enforcement about detecting ANE.	Original Date: 7/1/15 Date Ext. 1: 9/30/16 Date Ext. 2: 10/31/16	<i>IMB Chief</i>	Milestones Achieved in the Quarter: * IMB Objective S1.1.2 was submitted to Dr. Gant for disengagement on 9/1/17. We are currently working to resolve one issue regarding providing educational material to JCM Guardians. We have been unable to set a resolution meeting at this time; however, we believe we’ll have this issue resolved prior to the Jackson Quarterly.

Safety Objective S1.1.3 The individuals listed in POA [Plan of Action] CIMS B [Community Incident Management System] [regional coordinators, agency coordinators, direct contact staff, DD[S] D staff, case managers, agency executive staff, IMB investigators, agency IMCs, agency direct service staff] will receive the training described in the Eva Kutas Recommendations #7 and #8 and will pass a formal test of the individuals' knowledge and understanding of IMB provider policy requirements.

<p>S1.3a All current and new staff as listed in POA CIMS B and the DDS D staff (Regional Directors, Assistant Regional Office Bureau Chief, and the DDS D Training Unit) must successfully complete DHI's competency based training on ANE from a DHI Trainer or a DHI approved trainer that incorporates the principles of adult learning as described in Kutas Recommendations # 7 and #8 before working alone with JCMs and their guardians.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 12/31/16</p>	<p><i>ANE Trainer</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Work continues on the development of ANE Online Refresher course. Provided the Intro and Abuse modules to the JCA and her consultants for their review and feedback. • Draft Competency assessment created and under DDS D management review. • Draft online evaluation created and under DDS D management review. • Revisions to the face to face training are underway based upon provider and internal feedback. Revisions will be shared with the JCA and her consultants following senior management review and approval. • Community programs trainer position was transferred from DHI to DDS D <p>Supporting Documentation: Draft modules are being shared with JCA as they are completed and can be made available to other parties upon request.</p>
<p>S1.3b. All current and new staff in POA CIMS B and the DDS D staff must demonstrate a knowledge and understanding of the training received in S1.3a and S1.3b by passing a formal test.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 12/31/16</p>	<p><i>ANE Trainer</i></p>	
<p>S1.3c. All current and new staff listed in POA CIMS B and the DDS D staff must receive refresher competency based training on an annual basis.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 12/31/16</p>	<p><i>ANE Trainer</i></p>	

Safety Objective S1.1.4 ANE is reported immediately. Disengaged. See Doc. 2140 dated 2/16/17.			
S1.4a The DOH must maintain a toll-free 24 hour, 7 days a week, telephone number to receive reports of ANE.	Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 7/31/16 Date Ext. 3: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged
S1.4b The DOH must communicate to its staff and the providers who have contact with JCMs that ANE of JCMs must be reported immediately.	Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 7/31/16 Date Ext. 3: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged
S1.4c IMB must formally document reports of ANE of JCMs and must take corrective action when ANE is not reported immediately.	Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 7/31/16 Date Ext. 3: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged

Safety Objective S1.1.5. Providers will take immediate action to develop a safety plan after an allegation of ANE to protect the alleged victim(s) during the course of an investigation. Disengaged. See Doc. 2141 dated 2/16/17.

<p>S1.5a Providers for JCMs must immediately develop, with IMB approval and monitoring, an Immediate Action and Safety Plan (IASP) in all cases of reported ANE.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 4/30/16 Date Ext. 2: 7/31/16 Date Ext. 3: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Disengaged</p>
<p>S1.5b The DOH must monitor providers for compliance with IASPs and must take corrective action as needed.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 4/30/16 Date Ext. 2: 7/31/16 Date Ext. 3: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Disengaged</p>

Safety Objective S1.1.6 Severity of the alleged ANE dictates the investigation response. JCA Disengagement Determination Received on 3/1/17.			
S1.6a The DOH must establish a priority of investigation responses consistent with the applicable policy and severity guidelines which requires investigative responses be three hours or less for emergencies, 24 hours or less for Priority 1 incidents, and 5 days or less for Priority 2 incidents.	4/7/14 Date Ext. 1: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged
Safety Objective S [Kutas] 1.2.1 Competent ANE Investigators conduct professionally adequate investigations.			
S2.1a ANE Investigators must pass Core Competency and Field Training before conducting investigations of ANE.	Original Date: 7/2/14 Date Ext. 1: 10/1/16 Date Ext. 2: 12/31/16	<i>IMB Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none">An IMB Core Competency class was held Oct. 2 - 5, 2017. There was a total of five students and each is now expected complete the New Investigator Field Training Tool within designated time frames. Supporting Documentation: Certificates of Completion are available upon request.

<p>S2.1b The JCM Supervisory Review Tool must be used to assess an ANE investigation in every case of ANE.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 10/1/16 Date Ext. 2: 12/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> The Supervisor Review tool is used on all IMB investigations and the completed tool is made a part of every case file.
<p>S2.1c ANE investigations must not be closed until they meet the standards of the Supervisory Review Tool, which verifies whether the investigation meets the standard for professionally adequate investigations.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 10/1/16 Date Ext. 2: 12/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> The Supervisory Review Tool (SRT) is used on every case. Cases are not closed until they meet the standards of the tool. On Aug. 23rd, all IMB Supervisors attended a one-day training session with the JCA Consultants on the proper use and documentation of the SRT.
<p>S2.1d The DOH must review ANE intake and investigation quality, consistent with the Kutas quality indicators, on a quarterly basis.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 10/1/16 Date Ext. 2: 12/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> IMB and the Jackson consultants finalized the IMB investigation Quality Assurance tool. The tool has been sent to Dr. Gant for approval. IMB will receive the final tool after it's been approved. The FY18 1st Quarter investigation QA will be conducted the week of Oct. 23rd, using the new QA tool. <p>Supporting Documentation: Quarterly Investigative QA tool</p>

Safety Objective S [Kutas] 1.3.1 Consistent with the IGA (Inter-Governmental Agreement), IMB will be the primary authority for ANE investigations. Disengaged. See Doc. 2141 dated 2/16/17.			
S3.1a The DOH must promulgate administrative rules that delineate the IMB's responsibilities as they relate to the IMB's primary authority to conduct ANE investigations.	Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged
S3.1b The DOH must monitor the provider's compliance with these administrative rules on a quarterly basis and must promptly correct any deficiencies.	Original Date: 10/1/14 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16	<i>IMB Bureau Chief</i>	Disengaged
Safety Objective S [Kutas] 1.4.1 Provide information regarding ANE reports/investigations to designated stakeholders. Disengaged. See Doc. 2147 dated 6/29/17.			
S4.1a The DOH must provide timely information regarding ANE reports, investigations, and findings to JCMs, stakeholders (families, guardians, providers, case managers), and other individuals or staff who need that information to ensure the safety of JCMs.	Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16	<i>IMB Bureau Chief</i>	Disengaged

<p>S4.1b The reporter of ANE must receive information from the DOH about the status of the ANE report and any findings.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Disengaged</p>
<p>S4.1c Notification of substantiation of ANE reports must comply with New Mexico Administrative Code 7.1.14.12 (Notification of Investigation Results).</p>	<p>Original Date: 7/2/14 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Disengaged</p>
<p>Safety Objective S [Kutas] 1.5.1 Risk of ANE is reduced when individual/systems issues are identified and preventive] and remedial measures are taken.</p>			
<p>S5.1a When there is substantiated ANE, Defendants must take immediate preventive and remedial action at the individual and provider levels and if indicated at the systems level.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 7/1/16 Date Ext. 2: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Completed. .

<p>S5.1b When there is substantiated ANE, the case manager must ensure that identified health and safety risks for a JCM are addressed and remediated.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 7/1/16 Date Ext. 2: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • IMB and DDS D met on 10/5/2017 to discuss publication of the FAQ onto the DHI website and an update given by IMB Bureau Chief to CM Directors at Quarterly Meeting 10-26-17. <p>Supporting Documentation: See H1.1a DDW Case Management Director's Meeting Agenda_Oct_2017_draft</p>
<p>S5.1c Providers and regional office staff must review ANE investigations and findings to determine if responses to substantiated ANE are timely, effective, and sustained.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 7/1/16 Date Ext. 2: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • IMB and DDS D continue to have discussions regarding the “timely, effective and sustainability” of the corrective and preventive action in all substantiated JCM cases. Action Plans are developed and reviewed at every monthly regional meeting to ensure follow up occurs. • Met with the JCA on 9/19/17 regarding feedback on the DHI-DDSD Regional Quality Management Policy, Procedure and Agenda template. Revised drafts sent to OGC on 10/5/17 for approval.

<p>S5.1d When there is substantiated ANE, the JCM's IDT must meet as required by NMAC and pertinent information about the ANE investigation and the ANE report must be properly documented, including in the IDT meeting minutes for purposes of reducing and preventing ANE.</p>	<p>Original Date: 7/2/14 Date Ext. 1: 7/1/16 Date Ext. 2: 8/31/16</p>	<p><i>IMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • MB and DDS D are working collaboratively to develop training for Case Managers and met on 10/5/2017. • DDS D met with DOH training unit on 10/12/2017 to discuss incorporation into annual and refresher ANE training <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • See H1.1a DDW Case Management Director's Meeting Agenda_Oct_2017_draft
<p>Safety Objective S [Kutas] 1.6.1 Use ANE information to improve health/safety.</p>			
<p>S6.1a The DOH must implement the IMB database to identify patterns concerning ANE at the individual, program, and systems levels.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>IMB Bureau Chief and DDS D Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • The Regional Offices continue to review Out of Home Placement reports, Jackson Class Member Emergency Service General Event Reports (now produced by the Bureau of Systems Improvement), and monitor Regional Performance Improvement Plans. All reports are reviewed at the monthly Quality Management meetings. • The FY17 Annual Report is currently under development and will use data from the IMB database to identify patterns of ANE the individual, program and systems level. The data will also be presented to the DDSQI.

<p>S6.1b Quarterly, the DHI and DDS D must examine IMB data and must identify patterns of ANE, indicated, for example, by multiple reports of ANE by providers or JCMs, by substantiated cases of ANE, by use of emergency services in response to ANE, and by out-of-home placements resulting from ANE.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>IMB Bureau Chief and DDS D Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● DHI and DDS D have developed a draft procedure for the Monthly Regional Quality meetings, with IMB and DDS D sharing responsibility for facilitating the meetings. A discussion of JCM Most at Risk and Reports of Deaths have been added to the meeting agenda. * The information discussed at the Monthly Regional meetings will roll up quarterly to the DDSQI. See H4.3 for draft DDSQI calendar. DDSQI policy and procedure in final stages of revision. Feedback received from the JCA on 9/19/17. * See above updates regarding the DHI-DDS D Monthly Quality Management Meeting. <p>Supporting Documentation: Regional Jackson Class Member Emergency Services Tracking Grids uploaded monthly via FileZilla.</p>
<p>S6.1c The DOH must disseminate at least annually, to providers and stakeholders, information about ANE, including patterns of ANE, identified “systems” issues concerning ANE, and identified causes and contributing factors of ANE.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 12/31/16</p>	<p><i>IMB Bureau Chief and DDS D Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The FY18 ANE Reporting Guide is complete and is currently being reviewed by the DOH Communications Office. ● The FY17 IMB Annual Report is under development. It may be completed prior to the Jackson Quarterly.

Safety Objective S2.1 All deaths are reviewed and a root cause analysis is done of preventable deaths. The findings from the root cause analysis will be used to strategically reduce the likelihood of preventable deaths.

<p>S2.1a Qualified independent healthcare professionals must timely review and report to the Mortality Review Committee (MRC) on all JCM deaths. Relevant administrative personnel must timely report to the MRC and review all JCM deaths.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Both independent and DDSD mortality reviews are continuing.
<p>S2.1b The DOH must provide autopsy reports and independent healthcare professionals' reports of JCMs' deaths to the Mortality Review Committee (MRC), promptly after their receipt that then reviews and analyzes all JCM deaths, and makes findings and recommendations.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Independent review and autopsy results, when available, continue to be reviewed and analyzed in order to make findings and recommendations.
<p>S2.1c The DOH must identify and take appropriate actions in response to the MRC's findings and recommendations.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • DDSQI Policy and Procedures prepared to include regular reporting from MRC. See H4.3 for draft DDSQI calendar.

<p>S2.1.d The DOH mortality review process must be consistent with the components in the General Accounting Office Mortality Review Report, GAO-08-529, as tailored for New Mexico's population and demographics.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16 Date Ext. 2: 9/30/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>
<p>S2.1e In response to analysis of JCMs' deaths and the mortality review process, in the case of preventable deaths the DOH must identify root causes of the JCM deaths and must remediate identified deficiencies so as to reduce the likelihood of preventable deaths.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Medical Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • The Mortality Review Committee continues to identify root causes of JCM deaths.
<p>Safety Objective S3.1 Establish and use indicators to measure quality of DD [Developmentally Disabled] Services in New Mexico.</p>			
<p>S3.1a The DOH must establish "DD key indicators" at the individual, program, and systems levels that guide programs and services for JCMs.</p>	<p>Original Date: 11/30/15</p>	<p><i>BSI Bureau Chief and DDSD Deputy Director</i></p>	<p>Milestones achieved toward completed:</p> <ul style="list-style-type: none"> • Draft QA/QI chapter completed and will be presented at 10/18/17 feedback forum.. <p>See response to H1.1a regarding DDW Service Standards Update</p>

<p>S3.1b The DOH must ensure that the DD key indicators are present in the DDW provider agreements, DDW (Developmentally Disabled Waiver) standards, and the QMB (Quality Management Bureau) review tool.</p>	<p>Original Date: 12/31/15</p>	<p><i>BSI Bureau Chief and DDSD Deputy Director</i></p>	<p>Milestones achieved toward completion:</p> <ul style="list-style-type: none"> • When requirements are finalized all pertinent documents will be updated and consistent (standards, provider agreement and provider application). <p>See response to H1.1a regarding DDW Service Standards Updat</p>
<p>S3.1c Through the use of the CPR, QMB and other JCM data, the DOH will identify and document whether the JCM's preferences and needs, with respect to gaining skills, increasing independence, and participating in integrated community activities are met.</p>	<p>Original Date: 3/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA</p>	<p><i>BSI Bureau Chief and DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter: No data to report.</p>
<p>S3.1d The DOH and providers must respect a JCM's informed choices for program development and services to meet the JCM's preferences and needs.</p>	<p>Original Date: 3/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA</p>	<p><i>BSI Bureau Chief and DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Internal Workgroup regularly meeting with a work plan to modify Secondary Freedom of Choice process to make choice of providers and services a more meaningful process • Drafts of DDW Service Standards Chapters on Person Centered Planning, Individual Service Plan and Human Rights which includes a section on Secondary Freedom of Choice Posting planned for 8/9/2017 ; Feedback forum planned for 8/16/17 <p>Supporting Documentation http://actnewmexico.org/ddw-renewal.html (scroll down to events for public feedback)</p>

<p>S3.1e Providers must use information from the DD key indicators, the CPR, and the JCM to promptly correct deficiencies in programs and services and to improve practice.</p>	<p>Original Date: 3/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA</p>	<p><i>BSI Bureau Chief and DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • DDSQI policy and procedure feedback received from the JCA on 9/19/17. Policy under revision to include JCA suggestions. <p>Supporting Documentation See H4.3a for DDSQI draft calendar</p>
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***Safety Objective S3.2* Community Practice Reviews are provided by competent personnel as evidenced by reviewers who have passed competency based training.**

<p>S3.2a Community Practice Reviewers must satisfactorily complete mandatory competency-based training as identified by the Community Monitor before independently participating in the CPR.</p>	<p>Completed as per Community Monitor</p>	<p><i>Community Monitor and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The Reviewers and Case Judges who have been actively participating in the 2017 IQR Reviews, all participated in a 2-day classroom training in April 2017 as well as individualized technical training on the IQR protocol tool. ● The Community Monitor brought back one Reviewer for the upcoming Metro 2 IQR. This Reviewer had taken part in the previous years of training and was an active participant in the initial creation of the IQR tool. ● The Community Monitor brought on one new Reviewer who is receiving individualized training from the Community Monitor’s Reviewers. ● DHI has one Healthcare Surveyor in place who is actively participating in DDSD and DHI required online and classroom trainings. She is also receiving individualized training from Community Monitor’s Reviewers. ● The reviewers and case judges who were initially identified for the 2017 Metro 1 IQR, participated in teleconference training of the IQR protocol tool. ● As of August, the Community Monitor and DHI are piloting an Individual IQR Training to expedite training. <p>Supporting Documentation: SCOMM 8.25.17 RE Training, 2017 IQR Reviewer’s Guide 4.7.17 Draft, Metro 2 Sample 9.12.17</p>
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<p>S3.2b The Community Monitor must approve Community Practice Reviewers and Case Judges.</p>	<p>Completed as per Community Monitor</p>	<p><i>Community Monitor and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The Community Monitor selected and assigned the IQR Reviewers and Case Judges for the 2017 NW, NE and Metro 2 Individual Quality Reviews. ● DHI hired one Healthcare Surveyor who will be a Reviewer and one Clerk. These employees have been in place for several months. The Community Monitor had been consulted prior to their hire. ● DHI is anticipating the start of the IQR Manager and one more Healthcare Surveyor within the next month. DHI is in the process of hiring two more identified candidates for Healthcare Surveyor positions. <p>Supporting Documentation: NW Sample 7.26.17, NE 2017 Sample 8.28.17, Metro 2 Sample 9.12.17</p>
<p>S3.2c The Community Monitor must determine the CPR sampling methodology, protocol instrument, reviewers' guidelines, scoring, and evidence used to assess compliance with the elements of the CPR, consistent with related requirements in the JSD (Joint Stipulation on Disengagement)</p>	<p>Completed as per Community Monitor</p>	<p><i>Community Monitor and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The Community Monitor provided the NW, NE and Metro 2 Sample selections. ● The Community Monitor provided the draft IQR Tools on website www.jacksoncommunityreview.org with the most recent update of July 17, 2017. ● The Community Monitor provided a draft 2017 IQR Reviewers Guide. Updated Guidance was provided on July 14, 2017. <p>Supporting Documentation: 7.17.17 IQR Protocol Template, 2017 IQR Reviewer's Guide 4.7.17 Draft, Updated Guidance 7.14.17</p>

Safety Objective S3.3 Implement the CPR.			
<p>S3.3a The DOH must annually conduct the CPR consistent with the Community Monitor's existing sampling methodology, protocol instrument, reviewers' guidelines, scoring, and evidence.</p>	<p>Complete and contract will be established for FY16.</p>	<p><i>DDSD CPR Lead and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The NW IQR is in the final stages. ● The NE IQR is taking place presently. ● The Metro 2 IQR is in the process of data collection in preparation for the upcoming IQR. ● These IQR cycles are all per the 2017 IQR Calendar. <p>Supporting Documentation: Draft IQR Calendar 3.13</p>
<p>S3.3b The Community Monitor must issue individual, regional, and statewide reports that contain the Community Monitor's findings and recommendations.</p>	<p>Complete and contract will be established for FY16.</p>	<p><i>DDSD CPR Lead and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● For the SW, the Community Monitor provided the Final individual reports for the Jackson Class Members in the SW Sample. ● For the SE, the Community Monitor provided the 1st, 2nd and Final individual reports for the Jackson Class Members in the SE Sample. ● For the NW, the Community Monitor provided the 1st and 2nd draft individual reports for the Jackson Class Members in the NW Sample. ● The Community Monitor provided the final regional reports for Metro 1 and SW. <p>Supporting Documentation: Metro 1 Final Report 8.25.17, SW Region Final PP 9.19.17</p>

<p>S3.3c The DOH must continue to provide adequate resources to support the implementation of the CPR for purposes of demonstrating sustainability.</p>	<p>Complete and contract will be established for FY16.</p>	<p><i>DDSD CPR Lead and JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Two of the seven DHI IQR positions have been filled (one IQR Reviewer + the IQR Clerk) ● DHI is anticipating the start of the IQR Manager and one more Healthcare Surveyor within the next month. DHI is in the process of hiring two more identified candidates for Healthcare Surveyor positions. <p>Supporting Documentation: www.spo.state.nm.us</p>
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Safety Objective S3.4 Use the findings from the CPR to improve services for class members and to improve the system of services for Jackson class members.

Major Strategies:

1. Quality Assurance/Quality Indicator plan requirement restructuring.
2. DDW Standards Reissue: DDS is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.
3. Individual Service Plan (ISP) Redesign: DDS is in the process of redesigning the template of the ISP used in the DDW system to better meet the needs of all users of the ISP, demonstrate CMS requirements, and support person centered planning practices.

<p>S3.4a DDSD must work with service providers and case management agencies that have “repeat findings” of deficiencies or problems to improve and sustain improvement with respect to the identified deficiencies or problems.</p>	<p>Original Date: 10/31/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>JCO and Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The Regional Office Bureau Chief and Litigation Management Bureau Chief continue to review and close all repeat findings and recommendations. Many of the repeat issues are identified and a decision is rendered on the appropriate interventions, which is tailored to the identified deficiency. An intervention may include stepped up monitoring from the regional office or a performance Improvement Plan implemented by the agency. See 30-60-90 day reports, which detail these interventions. ● CPB outlined existing and additional initiatives responsive to Recommendations #10-13 ● Met with Dr. Gant and team on August 30 to review draft reports on systemic recommendations #10 and 12. ● Completed targeted Case Management Agency visits between 7/17 and 8/17. Members of the CPB met with each CM agency director and agency QA staff, corresponding regional office directors and regional office case management leads to review CPR findings. ● DDSD Statewide Case Management Coordinator collected and reviewed all CM agency QA/QI plans. ● Draft of Case Management Coordinator Roles and Responsibilities presented to Dr. Gant on August 30. ● Completed Advocate Focus Group Meeting 6/7/2017. ● Draft of ppt for ISP redesign focus groups.
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			<ul style="list-style-type: none"> ● Continued research on historic and current barriers to the implementation of and enforce their ISP Standards through: <ol style="list-style-type: none"> 1. survey responses from case management coordinators 2. ISP stakeholder meetings 3. information gathered from the Know Your Rights town halls and stakeholder meetings <p>Supporting Documents: CPB response to recommendation #12; CPB response to recommendation #10; Draft Regional Office Case Management Coordinator Roles and Responsibilities document</p>
<p>S3.4b The DDSD and providers must use the 2013–2015 CPR findings and recommendations.</p>	<p>Original Date: 10/31/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>JCO and Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See response to S3.4a

<p>S3.4c DDSD must meet with providers that have high health risk-related findings and providers that have the highest number or 2013–2015 CPR findings of deficiencies to improve those providers’ services to JCMs.</p>	<p>Original Date: 10/31/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>JCO and Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>
<p>S3.4d Defendants must identify actions taken in response to the 2013–2015 CPR findings and ensure that deficiencies are remedied.</p>	<p>Original Date: 10/31/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>JCO and Regional Office Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>
<p>Safety Objective S3.5 Competency based training is provided based in part on analysis of identified deficiencies from the CPR through the DDSD required trainings and to specific entities as appropriate.</p>			
<p>S3.5a DDSD must evaluate CPR findings to identify deficiencies in its required competency-based training.</p>	<p>Original Date: 3/27/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>DDSD Training Unit Manager</i></p>	<p>Milestones Achieved in the Quarter: No new data to report</p>

<p>S3.5b Using its evaluation of CPR findings, the DDS D must modify existing competency-based training or must provide additional competency-based training to address identified deficiencies.</p>	<p>Original Date: 4/29/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>DDS D Training Unit Manager</i></p>	<p>Milestones Achieved in the Quarter: No new data to report</p>
<p>S3.5c When training is needed to address identified deficiencies, competency based training must be provided to address deficiencies.</p>	<p>Original Date: 12/31/15 Date Ext. 1: Pending further discussion with the JCA</p>	<p><i>DDS D Training Unit Manager</i></p>	<p>Milestones Achieved in the Quarter: No new data to report</p>
<p>Safety Objective S3.6 Use information from the CPR in an integrated manner to inform program development and management for class members.</p>			
<p>S3.6a DOH must develop, modify, and manage the service system for JCMs based on identified correlations in the CPR information and other JCM data.</p>	<p>Original Date 1/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA.</p>	<p><i>JCO</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See H1.8 and H4.3

<p>S3.6b DDS must file semi-annual reports identifying program development and implementation.</p>	<p>Original Date 1/31/16 Date Ext. 1: 6/30/16 Date Ext. 2: Pending further discussion with the JCA</p>	<p><i>JCO</i></p>	<p>Milestones Achieved in the Quarter: No Data to report.</p>
<p>Safety Objective S3.7 Regulatory program reviews are completed by staff who have received and passed competency based training specific to their QMB roles and responsibilities.</p>			
<p>S3.7a DHI/QMB staff must receive competency-based training for evaluating programs that serve JCMs.</p>	<p>Original Date: 7/1/15 Date Ext. 1: 7/31/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Based on Training meeting with DDS to revise QMB has begun to develop survey process training modules based on QMB core competencies. Two module drafts have been completed and are under review. Script is in process to being added to modules 3 and 4. ● QMB conducted a refresher training during the week of Oct 2nd for Community Based HCS and intro training for new surveyors. <p>Supporting Documentation: QMB process training sign-in sheets dated 10/2/17; QMB Core competency Guide; QMB Surveyor Training Modules 1 and 2;</p>

<p>S3.7b DHI/QMB staff must satisfactorily complete competency-based training before evaluating programs and providers that serve JCMs.</p>	<p>Original Date: 7/1/15 Date Ext. 1: 7/31/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Three QMB Community Program Healthcare Surveyors (HCS) have been hired during the 1st Quarter. One new HCS has all the required DDSD training and two other Healthcare Surveyors are in the process of completing trainings. • 1st IQR surveyor who started on June 5, 2017 and has completed 8 of the 11 required DDSD training. The IQR surveyor is completing 1:1 training with a IQR contractor, who was assigned by the Community Monitor. <p>Supporting Documentation: QMB DDSD training compliance</p>
<p>Safety Objective S3.8 Regulatory review of CM [case management] agencies by the QMB, will include a review of essential services as determined by professional assessments and IDT decisions of individual needs and preferences.</p>			

<p>S3.8a QMB must identify and must review the essential services that should be provided to JCMs, consistent with IDT decisions and determinations by medical professionals, therapists, and nutritional experts.</p>	<p>Original Date: 11/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Per JCA may wait until 2017 DDW standard are completed to begin this task, however because QMB will have to review 2012 DDW Standards until all individuals transition to new standards, then committee is working to incorporate changes for the 2012 and 2017 standards. ● Steering Committee was created on 4/7/2017. During the last quarter the committee met on 5/2/2017; 5/25/2017 and 6/26/2017. During this quarter the committee has met on 7/21, 8/8, 8/18, 9/5 and 9/18, 2017. The committee continues to work together to identify essential services and revise the items to be reviewed. Based on recommendation, survey tools are in revision process and will be placed into effect in Jan 2018. <p>Supporting Documentation: See QMB Steering Committee Agendas.</p>
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<p>S3.8b QMB must modify its CM data to reflect the identified essential services for JCMs.</p>	<p>Original Date: 4/15/16 Date Ext. 1: 7/31/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Per JCA may wait until 2017 DDW standard are completed to begin this task, however because QMB will have to review 2012 DDW Standards until all individuals transition to new standards, then committee is working to incorporate changes for the 2012 and 2017 standards. ● Steering Committee was created on 4/7/2017. During the last quarter the committee met on 5/2/2017; 5/25/2017 and 6/26/2017. During this quarter the committee has met on 7/21, 8/8, 8/18, 9/5 and 9/18, 2017. The committee continues to work together to identify essential services and revise the items to be reviewed. Based on recommendation, survey tools are in revision process and will be placed into effect in Jan 2018. <p>Supporting Documentation: See QMB Steering Committee Agendas.</p>
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<p>S3.8c QMB must review CM agencies on an annual basis, using quality indicators consistent with the DDS 2006 Case Management Manual Resource Guide and DDS Service Standards, to ensure essential services are being provided to JCMs.</p>	<p>Original Date: 11/30/15 Date Ext. 1: 7/31/16 Date Ext. 2: 8/31/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • QMB has begun to survey Case Management agencies on survey tools, which were revised on 6/2017. During the 1st quarter of FY 2018 6 Case Management agencies were reviewed (<i>Unidas Case Management Metro & NE; Unidas Case Management SW; Unique Opportunities Metro; J&J SE; Sun Country Case Management SW and Advocates of NM Metro</i>). Case Mgt Survey reports are not yet available on DHI website, as not all distributed or plan of correction has yet to be closed; • Steering Committee was created on 4/7/2017. During the last quarter the committee met on 5/2/2017; 5/25/2017 and 6/26/2017. During this quarter the committee has met on 7/21, 8/8, 8/18, 9/5 and 9/18, 2017. The committee continues to work together to identify essential services and revise the items to be reviewed. Based on recommendation, survey tools are in revision process and will be placed into effect in Jan 2018. <p>Supporting Documentation: Case Mgt survey tools; See agendas 3.8a).</p>
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<p>Safety Objective S4.1 Examine current Quality Assurance and Quality Improvement processes and activities intended to safeguard Jackson Class Members and to improve the quality of provider performance in relation to Jackson Class Members. Take steps to increase transparency, accountability, and effective remediation. Establish measurable indicators that are consistent with the pertinent standards that address the quality of provider performance.</p>			
<p>S4.1a Using stakeholder input, DDS will analyze its quality assurance and quality improvement systems and will modify these systems accordingly to improve the quality of services and of provider performance for JCMs.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16</p>	<p><i>BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Draft QA/QI chapter to be presented at stakeholder feedback forum on 10/18/17. <p>Supporting Documentation: See H1.1 for DDW Standards update information.</p>
<p>S4.1b The DOH must annually evaluate the quality of providers' services and must promptly issue "provider report cards" that use measurable indicators to identify strengths, deficiencies, and remediation plans of the providers.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16 Date Ext. 2: 7/31/17</p>	<p><i>BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Third quarter's worth of provider data summary data was uploaded to the ACT NM Website. ● Continued work on case management provider data summary.
<p>S4.1c The DOH must allow public access to the provider report cards</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16 Date Ext. 2: 7/31/17</p>	<p><i>BSI Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Provider Data Summary Completed and uploaded to the ACT New Mexico Website. <p>Supporting Documentation:</p>

S4.1d Clear, current and specific information about available provider services will be available to the public as part of the Provider Selection Guide.	Original Date: 11/30/15	<i>BSI Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> • Provider Selection guide complete, updated regularly as appropriate and available on the ACT NM website
S4.1e The DOH must review a provider more frequently in cases where there is evidence that the provider has an increased number of deficiencies or increasingly serious deficiencies.	Complete and sustained.	<i>BSI Bureau Chief</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> • QMB has a Focused Survey process in place to address this type of review. DDS has a performance improvement plan process in place as well as other contract management methods to address provider performance issues. If contract management efforts are unsuccessful, an issue may be referred to the IRC for higher level sanctions.
Safety Objective S4.2 DOH response is proportionate to the seriousness of the contractor's alleged substandard performance when corrective action is not effectively implemented.			
S4.2a Defendants must identify a provider's deficiencies in cases where the contractor failed to effectively implement corrective action.	Original Date: 7/31/15 Date Ext. 1: 5/31/16 Date Ext. 2: 7/31/16 Date Ext. 3: 9/30/16	<i>IRC Chair</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> • The IRC continues to meet monthly • An IRC comprehensive report 8/1/17 thru 10/18/17 provided to parties on 10/18/17.

<p>S4.2b Defendants must take remedial action proportional to the seriousness of the substandard performance by a provider that fails to effectively implement an identified corrective action.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16 Date Ext. 2: 9/30/16</p>		<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See S4.2a
<p>Safety Objective S5.1 Providers will use the identified performance indicators as part of their agency quality assurance system to improve quality.</p>			
<p>S5.1a The DOH must establish measurable quality indicators, including (1) implementation of a QA/QI (Quality Assurance/Quality Improvement) Plan, (2) implementation of ISPs, (3) analysis of General Events Reports data, (4) compliance with Caregivers Criminal History Screening requirements, (5) compliance with Employee Abuse Registry requirements, (6) compliance with DDSD training requirements, (7) patterns of reporting incidents, and (8) results of improvement actions taken in Quarters, at the individual, program, and systems levels.</p>	<p>Original Date: 11/30/15</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • New requirements for provider QA/QI plans are being written into the 2017 DDW standards. • QMB continues to provide DDSQI key performance indicators tracked by QMB. Key performance indicator tracking in process for FY 18 1st quarter. <p>Supporting Documentation: KPI FY17 Q4</p>

<p>S5.1b The DOH must communicate these required measurable quality indicators to providers.</p>	<p>Original Date: 12/31/15</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> Any revisions to DDS key performance indicators will be communicated and consistently updated in all DOH documents (QMB survey tools, provider agreements, Standards, etc.). Steering Committee was created on 4/7/2017. During the last quarter the committee met on 5/2/2017; 5/25/2017 and 6/26/2017. During this quarter the committee has met on 7/21, 8/8, 8/18, 9/5 and 9/18, 2017. DDS and DHI continue to work together to identify new quality indicators once 2017 standards are complete and will determine how this will be communicated. Steering committee to work on and revise QMB work plan, as needed. <p>Supporting Documentation: See 3.8a</p>
<p>S5.1c Providers must use the required measurable quality indicators to improve the quality of their services to JCMs.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/16 Date Ext. 2: 9/30/16 Date Ext. 3: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> In FY 2018 1st quarter 7/1/2017 - 9/30/2017 QMB has completed 18 compliance surveys. All surveys completed by QMB require a Plan of correction, which requires the provider to identify how they will correct the specific deficiency noted as well as what their ongoing quality assurance / quality improvement process. <p>Supporting Documentation: See DHI website for survey reports.</p>

<p>S5.1d The DOH must determine providers' compliance in using the measurable quality indicators through the use of QMB surveys.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>QMB Bureau Chief</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● In FY 2018 1st quarter 7/1/2017 - 9/30//2017 QMB has completed 18 compliance surveys. All surveys completed by QMB require a Plan of Correction for all deficient practices identified. ● Since the establishment of the QMB Steering committee in April 2017, the committee has met 8 times. During this time the QMB Steering Committee has met to review the current Tags (standards reviewed) as well as, discuss and develop a new scoring and weighting process to determine compliance. The committee has worked through several proposals and the latest is attached (Proposal 4) <p>Supporting Documentation: WORKING DOC - Scoring Weighting of QMB Findings - 9-18-2017 Proposal 4</p>
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<p>Safety Objective S5.2 Use significant events reported through GER (General Events Reporting) -- including use of emergency services, falls, medication errors, and law enforcement incidents -- to support DD system management, that includes responses to significant events.</p>			
<p>S5.2a Defendants must use the GER information to identify the JCMs most at risk, to inform providers and regional staff of JCMs most at risk, and to request the development and implementation of prevention plans specific to a JCM's identified risks.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • At Risk Committee meeting held October 11, 2017. Process created, drafted and currently under review by DDSD Senior Management.
<p>S5.2b Defendants must provide DDSQI with significant event information found in electronic reporting through Therap GER for use by members of the joint DDSD and DHI Significant Events Committee in program development and improvement.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • BSI provides Significant Events information to DDSQI for consideration in program development and division action plans. • See H4.3 for update regarding DDSQI calendar.
<p>S5.2c The DOH must (1) analyze significant event information, (2) identify trends in provider performance, (3) intervene, and evaluate the effectiveness of the intervention.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See S5.2a and H4.3

Safety Objective S5.3 Implement a responsive and effective case management system as evidenced by the provision of needed supports and services

Major Strategies:

1. Rewrite of DDW Standards: DDS is in process of rewriting DD Waiver Service Standards in conjunction with the DDW Renewal cycle. Standards will incorporate provider requirements that have traditionally been communicated through policy, procedure, Director's Releases and interim memos.
2. Case Management Quality Practice Indicators: DDS is in process of identifying key case management quality practice areas and indicators to align with current best practices.
3. Qualified Provider Project for Case Management: DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
4. Competency and Performance Based Training for Case Managers: DDS is in the process of developing an overall training vision that will entail a review of existing trainings, training needs, frequency of training, and ongoing quality and fidelity of training. Case Management requirements will be reviewed and developed during this process.
5. Individual Service Plan (ISP) Redesign: DDS is in the process of redesigning the template of the ISP used in the DDW system to better meet the needs of all users of the ISP, demonstrate CMS requirements, and support person centered planning practices.

S5.3a Case managers must demonstrate that they know the current strengths, needs, preferences, and medical conditions of each JCM they serve and the JCM's ISP must address these factors.	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/17</p>	<p><i>QMB Bureau Chief and DDS CM Lead</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>
S5.3b Case Managers must ensure that each JCM's ISP is properly implemented.	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/17</p>	<p><i>QMB Bureau Chief and DDS CM Lead</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>

<p>S5.3c Case Managers must identify significant risks, needed supports, and unmet needs for each JCM; must convene the IDT promptly whenever a JCM is at risk or a JCM's needs are not being fully addressed; must ensure DOH if the IDT is unable to adequately meet a JCM's needs.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/17</p>	<p><i>QMB Bureau Chief and DDS D CM Lead-</i></p>	<p>Milestones Achieved in the Quarter: No data to report</p>
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<p>S5.3d The DOH must monitor and evaluate the performance of each case management agency on an annual basis and must use its evaluation to determine whether the case management agency should be enrolled as a DD Waiver provider.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 7/31/17</p>	<p><i>QMB Bureau Chief and DDS D CM Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Case Management agencies on survey tools, which were revised on 6/2017. During Q1 of FY18 six case management agencies were reviewed (<i>Unidas Case Management Metro & NE; Unidas Case Management SW; Unique Opportunities Metro; J&J SE; Sun Country Case Management SW and Advocates of NM Metro</i>). Case Mgt. Survey reports are not yet available on DHI website, as not all distributed or plan of correction has yet to be closed; ● Steering Committee was created on 4/7/2017. During the last quarter the committee met on 5/2/2017; 5/25/2017 and 6/26/2017. During this quarter the committee has met on 7/21, 8/8, 8/18, 9/5 and 9/18, 2017. The committee continues to work together to identify essential services and revise the items to be reviewed. Based on recommendation, survey tools are in revision process and will be placed into effect in Jan 2018. ● Formed DDS D Core Project Team (RO Bureau Chief, DDW Manager, Statewide CM Coordinator, Community Services Bureau Chief, and Provider Enrollment Unit Manager) ● Core Project Team at DDS D provided preliminary information about DD Waiver case management to JCA contractor Linda Rolfe on 7/28/2017 to set stage for project . ● On 8/17/2017 DDS D CM Lead attended SE Qualified Provider meeting to seek knowledge
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			<p>and possible strategies for the CM Qualified Provider Project.</p> <ul style="list-style-type: none"> ● Meetings with JCA contractor Linda Rolfe: On 8/21/201 and 9/26/2017 and provided edits fro v2 of provider application and scoring guide; next meeting planned 11/14/17 ● CM Qualified Provider Project internal meetings: 9/14/2017 reviewed application/scoring guide, developed plan for support from leadership and plan to communicate to the field. 10/23/2017 developed plan to include stakeholders and edit draft of application and scoring guide. ● Communication of the project to the field: 10/10/2017 DDS Regional Case Management phone call, 10/26/2017 DDS Regional Office Case Managers Quarterly meeting and 10/27/2017 DDS Statewide Agency Directors Quarterly meeting. <p>Supporting Documents:</p> <p>Qualified Provider Project Agenda for Case Managers September 26, 2017</p> <p>Expiring Providers Report CM Agencies List 9 14 17</p> <p>Overview of QP Project for CM _ Draft</p> <p>Agenda Regional Office Case Management</p> <p>Coordinator Monthly Phone Call 10 10 17</p>
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			DDSD Regional Office Case Managers Quarterly Meeting Agenda October 2017 Agenda for CM Agency Director's_October_2017
Safety Objective S5.4 Develop and implement an effective, integrated DD Strategic Information Management System.			
S5.4a The DOH must evaluate its information management system's ability to use information related to JCMs in an integrated manner.	Original Date: 11/30/15 Date Ext. 1: 8/31/16	<i>BSI Bureau Chief</i>	Milestones Achieved in the Quarter: • Disengagement determination request in process.
S5.4b The DOH must ensure that the "ad-hoc reports pulled from HSD's MMIS" are available from DDSD.	Original Date: 12/31/15 Date Ext. 1: 8/31/16	<i>BSI Bureau Chief</i>	See S5.4a .
S5.4c Defendants must evaluate the usefulness and gaps in the above described data collection system and must modify or update the system where practicable.	Original Date: 4/30/16 Date Ext. 1: 8/31/16	<i>BSI Bureau Chief</i>	See S5.4a .

SUPPORTED EMPLOYMENT PLAN:

GOAL 1: People who want to work will work.

GOAL 2: Every class member will have access to a quality network of providers throughout the state.

Providers who cannot achieve work goals are eliminated.

GOAL 3: Provide a reliable available form of targeted technical assistance to providers of supported employment based on all provider reviews.

GOAL 4: Assist class members to have meaningful lives.

Major Strategies:

1. Employment First Policy/Procedure - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with the Workforce Innovation and Opportunity Act (WIOA).
2. SELN Database - Established provider accountability for employment outcomes.
3. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
4. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
5. Strike Force - This is an extension of the work that has previously been completed. This strategy involves working completing an ISP review to make an initial determination about the level and quality of community participation for each JCM. The ISP review is followed up with a site visit to compare what is documented in the ISP with what is actually occurring. The site visit also serves as an opportunity to provide suggestions about improving services directly to the staff members who are performing the work with the JCM. The goal is to increase the time spent in community participation and decrease time in facility-based non-work settings, while improving the quality of the activities.
6. CLE Project - This is a research project through ThinkWork that is developing a National toolkit to be used to assist providers with Community Life Engagement. The four providers in the pilot are receiving technical assistance from National experts in the field. The goal of this project is to ultimately assist providers with compliance of the CMS Final Rule and create a systemic culture shift.
7. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

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| | <p>8. <u>DVR Outreach Project</u> - DDSD is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:</p> <ul style="list-style-type: none">• Earn less than minimum wage; or• Work less than 10 hours per week; or• Are receiving a paycheck from a provider agency rather than a community business. |
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Supported Employment Objective SE 1.1 Achieve an annual increase of Jackson Class Members working “at criteria,” in accordance with information gathered regarding the Jackson Class Members’ abilities and desires to be employed, and the guardians’ positions on employment of the Jackson Class Members. Defendants must provide technical, supported employment assistance to the Jackson Class Members and support for teams to assist all qualified and willing Jackson Class Members to obtain “at criteria” employment.

Major Strategies:

1. SELN Database - Established provider accountability for employment outcomes.
2. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
3. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
4. DVR Outreach Project - DDS is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:
 - Earn less than minimum wage; or
 - Work less than 10 hours per week; or
 - Are receiving a paycheck from a provider agency rather than a community business.

SE1.1a Defendants must obtain current statistics on JCMs who are not working at criteria, but who wish to work and are capable of working at criteria, provided the JCMs’ guardians support working at criteria.	<p>Original Date: 10/31/15</p> <p>Date Ext. 1: TBD</p>	<p><i>DDS Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco
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SE1.1b Defendants must provide technical vocational assistance and support through job developers and job coaches for all JCMs identified in SE1.1a.	Original Date: 10/31/15 Date Ext. 1: TBD	<i>DDSD Supported Employment Lead</i>	<p>started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations.</p> <ul style="list-style-type: none"> ● SELN FY18 Q1 data has been collected, validated and imported into the Supported Employment database. This is the sixth quarter of data in the database. ● The work of the DVR Outreach Project continues. After an initial 2-day kickoff meeting in July, six teams
SE1.1c Defendants must achieve an annual increase in the number of JCMs working at criteria, consistent with SE1.1a.	Original Date: 1/31/16 Date Ext. 1: 9/30/16 Date Ext. 2: TBD	<i>DDSD Supported Employment Lead</i>	

<p>SE1.1d Defendants must provide technical assistance to JCMs and their teams to obtain jobs for JCMs consistent with the federal definition of Supported Employment.</p>	<p>Original Date: 1/31/16 Date Ext. 1: TBD</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>(one in each region and two in Metro) continue to work with Abby Cooper, a PFE contractor to develop intervention strategies for JCMs who:</p> <ul style="list-style-type: none"> a. Earn less than minimum wage; or b. Work less than 10 hours per week; or c. Are receiving a paycheck from a provider agency rather than a community business. <ul style="list-style-type: none"> ● A follow-up face-to-face meeting with the DDSD CI Coordinators and DVR Counselors has been scheduled for November 16. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> ● DOH DDSD Informed Choice monthly deliverable report -June 2017 ● DOH DDSD Informed Choice monthly deliverable report -July 2017 ● DOH DDSD Informed Choice monthly deliverable report -August 2017 ● DOH DDSD Informed Choice monthly deliverable report -September 2017 ● Wage and Hour Report 10.13.17 ● MP DS 7.27.17 final ● LifeROOTS Summary through June 2017 ● RC Discovery Report tool ● M Zel Discovery Project ● Melody Z Discovery Project Z 2 ● Final Discovery Summary T Alvarado ● NM Discovery Summary Final VG ● My Morning Coffee - VG ● Important - VG ● I Love Music - VG
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			<ul style="list-style-type: none">● I love being beautiful - VG● Hair Cut Plus - VG● Getting My Coffee Out Part 1 - VG● Getting My Coffee Out Part 2 - VG● Getting My Coffee Out Part 3 - VG● Getting My Coffee Out Part 4 - VG● At the Library - VG● All About Me - VG● A Day with My Friends - VG● Final 1 NM Discovery Summary VG● TV JCM IC tracking log 9.2017● PT JCM IC tracking log 9.2017● Informed Choice Project Update 10.13.17● FY18UNM 070026
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Supported Employment Objective SE 1.2 Defendants will increase the number of qualified providers statewide in order to increase the number of Jackson Class Members earning minimum wage or better, and to increase the average number of hours per week worked by Jackson Class Members. Defendants will develop a plan with time lines to provide quality supported employment at criteria to all priority class members who are determined to be appropriate for work.

Major Strategies:

1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
2. DVR Outreach Project - DDS is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:
 - Earn less than minimum wage; or
 - Work less than 10 hours per week; or
 - Are receiving a paycheck from a provider agency rather than a community business

<p>SE1.2a Defendants must develop a written strategy and process to recruit and retain qualified employment providers for all JCMs who wish to and are able to work at criteria, with their guardians' consent.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext. 3: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDSD to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. ● The work of the DVR Outreach Project continues. After an initial 2-day kickoff meeting in July, six teams (one in each region and two in Metro) continue to work with Abby Cooper, a PFE contractor to develop intervention strategies for JCMs who: <ol style="list-style-type: none"> 1. Earn less than minimum wage; or 2. Work less than 10 hours per week; or 3. Are receiving a paycheck from a provider agency rather than a community business. <p>Here are a few outcomes of the project so far:</p> <ol style="list-style-type: none"> A. Staff are obtaining a better understanding of how to see a person's strengths and how to translate that information into additional tasks a person could perform for pay.
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			<p>B. DDSD is developing an understanding of how DVR operates and is able to help remove barriers.</p> <p>C. DDSD Regional Coordinators have been able to teach VR a more inclusive approach to working with individuals, they're sharing their expertise.</p> <p>D. Some staff have done a great job on building on community connections to expand possibilities</p> <p>E. Some teams are visiting the worksite and identifying unmet needs and working with the provider to determine if the employer is interested in increasing hours to address those needs.</p> <ul style="list-style-type: none"> • A follow-up face-to-face meeting with the DDSD CI Coordinators and DVR Counselors has been scheduled for November 16.
SE1.2b Defendants must provide a current written list of qualified employment providers to JCMs and their guardians.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: 4/30/16</p> <p>Date Ext. 2: 6/30/16</p> <p>Date Ext. 3: 9/30/16</p>	<i>DDSD Deputy Director</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.
SE1.2c Defendants must use the list of qualified employment providers to increase the number of JCMs earning minimum wage or better and to increase the number of hours per week worked by JCMs.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: 6/30/16</p> <p>Date Ext. 2: TBD</p>	<i>DDSD Deputy Director</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.

<p>SE1.2d Defendants must create and must disseminate a timeline with target dates for the employment at criteria of all JCMs who wish to work, who can work, and who have the consent of the guardians to work at criteria.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 6/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.
<p>SE1.2e Defendants must maintain and must report annual statistics on the number of (1) JCMs who wish to work at criteria, (2) JCMs who can work at criteria with their guardians' consent, and (3) JCMs who are working at criteria. Defendants must correlate these annual statistics with the target dates in the timeline.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.

Supported Employment Objective SE 1.3 Personnel who develop or implement career development plans will receive and pass competency based training based on DDW standards on career development planning.

Major Strategies:

1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
2. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE1.3a Defendants must develop competency based training on DDW standards for career development planning.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 6/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDS Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDS to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro),
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<p>SE1.3b Personnel must have satisfactorily passed competency based training on DDW standards for career development planning before providing career development planning to JCMs and their guardians.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting.</p> <ul style="list-style-type: none"> • The FY18 PFE contract was signed. • Cesilee Coulson from the Washington Institute for Supported Employment WISE visited New Mexico 9.12.17 and 9.13.17. She met with two of the PFE partners - UNM/CDD and DDSD. From that visit, PFE has created a draft training plan. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • FY18UNM 070022
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Supported Employment Objective SE 1.4 Increase capacity to create traditional and non-traditional paths to employment.

Major Strategies:

1. SELN Database - Established provider accountability for employment outcomes.
2. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
3. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
4. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.
8. DVR Outreach Project - DDS is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:
 - Earn less than minimum wage; or
 - Work less than 10 hours per week; or
 - Are receiving a paycheck from a provider agency rather than a community business.

<p>SE1.4a The DDS Deputy Director must develop an approved action plan to deploy an SE expert or experts to work with qualified employment providers to increase the number of traditional and non-traditional employment opportunities for JCMs to work at criteria.</p>	<p>Original Date: 7/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDS Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDS to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDS CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. ● The FY18 PFE contract was signed. ● Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations. ● The work of the DVR Outreach Project continues. After an initial 2-day kickoff meeting in July, six teams (one in each region and two in Metro)
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			<p>continue to work with Abby Cooper, a PFE contractor to develop intervention strategies for JCMs who:</p> <ul style="list-style-type: none"> • Earn less than minimum wage; or • Work less than 10 hours per week; or • Are receiving a paycheck from a provider agency rather than a community business. • A follow-up face-to-face meeting with the DDS CI Coordinators and DVR Counselors has been scheduled for November 16. <p>Supporting Documentation: See SE1.1a for documents related to the Informed Choice Initiative.</p>
SE1.4b Defendants, through Partners for Employment, must deliver customized employment training to qualified employment providers in reference to employment of JCMs at criteria.	<p>Original Date: 10/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<i>DDS Deputy Director</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.4a for updates.
SE1.4c Defendants must use funding available through the IGA for the development of JCMs' vocational assessment profiles (VAPs).	<p>Complete in FY15. Negotiation underway for FY 16. Date Ext. 1: 9/30/16</p>	<i>DDS Deputy Director</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • DDS and DVR met on 9.21.17 to discuss the ongoing efforts related to scaffolded funding and the IGA. A conceptual plan has been developed. DDS to attend the State Employment Leadership Network (SELN) October 18-20. The topic of the meeting is partnerships between state DD and VR systems.

<p>SE1.4d Defendants must demonstrate through annual statistics that they have increased the capacity to provide traditional paths for employment of JCMs at criteria.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● SELN FY18 Q1 data has been collected, validated and imported into the Supported Employment database. This is the sixth quarter of data in the database. ● Partners for Employment offered three trainings by Ashlea Lantz on, “Making Social Security Work”. 29 people attended the Las Cruces session on June 6. 8 people attended the Roswell session on June 7. 13 people attended the Albuquerque session on June 8. ● Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> ● DOH DDSD PFE Monthly Deliverable Report- June 2017 ● DOH DDSD PFE Monthly Deliverable Report- July 2017 ● DOH DDSD PFE Monthly Deliverable Report- August 2017
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Supported Employment Objective SE 1.5 Individual records (including ISPs) of Jackson Class Members will contain accurate employment plans that include information about the Jackson Class Members’ desires to work, the Jackson Class Members’ skills for existing jobs, and whether the guardians want the Jackson Class Members to work.

Major Strategies:

1. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
3. Strike Force - This is an extension of the work that has previously been completed. This strategy involves working completing an ISP review to make an initial determination about the level and quality of community participation for each JCM. The ISP review is followed up with a site visit to compare what is documented in the ISP with what is actually occurring. The site visit also serves as an opportunity to provide suggestions about improving services directly to the staff members who are performing the work with the JCM. The goal is to increase the time spent in community participation and decrease time in facility-based non-work settings, while improving the quality of the activities.

<p>SE1.5a Defendants, through appropriately trained personnel, must update each JCM’s ISP with a current and accurate employment plan, including information about the JCM’s employment goals and whether the JCM wishes to work, has skills for existing work, seeks traditional or nontraditional work, and has the guardian’s consent to work.</p>	<p>Original Date: 4/30/16 Date Ext. 1: TBD</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Strike force meetings continue to occur weekly. ● A Review Grid was developed for FY17 Q3 to document who is involved in Strike Force, the CLE Project and the Informed Choice Initiative each quarter. It has been updated for FY18 Q1. <p>Supporting Documentation: Cover Sheet to Review Grid Strike Force Reviews 10.16.17.</p>
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Supported Employment Objective SE 1.6 When there is a change in an individual’s life that impacts their employment status, the team will meet within 10 days and take action to minimize the disruption to the class member’s employment.

Major Strategies:

1. **Strike Force** - This is an extension of the work that has previously been completed. This strategy involves working completing an ISP review to make an initial determination about the level and quality of community participation for each JCM. The ISP review is followed up with a site visit to compare what is documented in the ISP with what is actually occurring. The site visit also serves as an opportunity to provide suggestions about improving services directly to the staff members who are performing the work with the JCM. The goal is to increase the time spent in community participation and decrease time in facility-based non-work settings, while improving the quality of the activities.

<p>SE1.6a Defendants must have a system in place to minimize the disruption to a JCM’s employment when a JCM suffers a “life change” (hospitalization, significant health status change, relocation to another city, loss of employment).</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> See SE1.5a for update. <p>Supporting Documentation: See SE1.5a for Strikeforce documentation.</p>
<p>SE1.6b Defendants must promptly document any life change for a JCM in appropriate forms, including Case Management Site Visit Forms and IDT Meeting minutes.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> Strike Force met weekly. Discussing changes in a JCM’s life as part of that review process. <p>Supporting Documentation: See SE1.5a for Strikeforce documentation.</p>

<p>SE1.6c The JCM's team must meet within ten (10) days of a JCM's life change to take appropriate actions to minimize a disruption in the JCM's employment.</p>	<p>Original Date: 10/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none">● See SE1.6b for updates..
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Supported Employment Objective SE2.1 Qualified regional providers will be available in each region for each individual seeking employment.

Major Strategies:

- 1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.**

<p>SE2.1a Defendants must develop a process to produce a list of qualified employment providers in all regions of the State for JCMs who seek employment.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: 7/31/16</p>	<p><i>DDS Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDS to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDS CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting.
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<p>SE2.1b Defendants must create written standards that qualified employment providers must meet, including standards addressing employment goals for JCMs.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.
<p>SE2.1c Qualified employment providers that do not meet Defendants' standards must be placed on probation for a period not to exceed six (6) months. If a qualified employment provider does not meet Defendants' standards by the end of the probationary period, Defendants must eliminate that employment provider from the list.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.
<p>SE2.1d Defendants must ensure that JCMs in every region of the State have some choice of qualified employment providers. Defendants need not provide qualified employment providers in regions of the State where there are no JCMs who seek employment.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 6/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE1.2a for updates.

Supported Employment Objective SE2.2 Defendants will implement the Employment First Policy that explicitly sets forth the role and importance of employment, as well as expectations for employment, in a Jackson Class Member’s life.

Major Strategies:

1. **Employment First Policy/Procedure** - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with WIOA.
2. **Qualified Provider Project** - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.

<p>SE2.2a The DOH must develop and must implement an Employment First Policy consistent with professionally accepted standards of practice that apply to a JCM.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Employment First policy/procedure was completed effective 11.15.2016.
<p>SE2.2b The Employment First Policy must set forth in writing the role and importance of employment for a JCM and a JCM’s expectation of employment.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 4/30/16 Date Ext. 2: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See SE2.2a for updates.

<p>SE2.2c The DOH must make available to a JCM and the JCM's family and guardian information on how to obtain vocational assistance, vocational assessment, assistance for non-traditional employment, and DVR services.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● 9 training sessions occurred this quarter (43 total training sessions held) with outreach to 809 audience members including 109 DVR field staff. ● 123 agencies trained, of those 45 identified as providing services to JCMs. ● An Employment First webinar was recorded on October 5. It will be posted to the Partners for Employment website. ● Language from the E1st policy/procedure is being incorporated into the DD Waiver Standards revisions. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> ● Employment First Presentations Master Training List 10.13.17
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Supported Employment Objective SE2.3 Clarify what the employment first principle means in terms of day-to-day practice for all stakeholders (people with disabilities, family members, providers, guardians, advocates, case managers, DDS, DVR, Partners for Employment)

Major Strategies:

1. Employment First Policy/Procedure - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with WIOA.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.

<p>SE2.3a Defendants must communicate to stakeholders, including pertinent agency personnel, the meaning of New Mexico’s Employment First Policy as it relates to day-to-day practice and assistance to JCMs and their guardians.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 6/30/16 Date Ext. 2: 8/31/16</p>	<p><i>DDS Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● 9 training sessions occurred this quarter (43 total training sessions held) with outreach to 809 audience members including 109 DVR field staff. ● 123 agencies trained, of those 45 identified as providing services to JCMs. ● An Employment First webinar was recorded on October 5. It will be posted to the Partners for Employment website. ● Language from the E1st policy/procedure is being incorporated into the DD Waiver Standards revisions. <p>Supporting Documentation: See SE2.2 for Employment First Presentations Master Training List</p>
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<p>SE2.3b Defendants must communicate information about New Mexico's Employment First Policy through formal training sessions, delivery of written materials, or other outreach efforts.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE2.3a for updates.
<p>SE2.3c Defendants must use the proposed Communication Matrix—which contains columns indicating audience size, frequency of event, method of communication, key message delivered, and date of communication—to identify communications about New Mexico's Employment First Policy.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Communication Matrix updated. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • SE Communication Matrix 10.11.17

Supported Employment Objective SE2.4 Identify quality employment providers based on employment outcome data.

Major Strategies:

1. SELN Database - Established provider accountability for employment outcomes.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.

<p>SE2.4a Defendants must measure qualified employment providers through employment outcome data that includes each JCM's name, start and end date of each job, employer of record, wages earned, hours worked, and summary of qualified employment providers' assistance.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16</p>	<p><i>DDS Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDS to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDS CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. • SELN FY18 Q1 data has been collected, validated and imported into the Supported Employment database. This is the sixth quarter of data in the database.
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Supported Employment Objective SE2.5 Review CPR and other employment data. Analyze data and use the resulting information annually to help make improvements to the employment system and improve provider performance.

Major Strategies:

1. SELN Database - Established provider accountability for employment outcomes.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.

<p>SE2.5a Defendants, in consultation with the Jackson Employment Expert, must maintain and must analyze current employment data and the CPR.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDS Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • SELN FY18 Q1 data has been collected, validated and imported into the Supported Employment database. This is the sixth quarter of data in the database. • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDS to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDS CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting.
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<p>SE2.5b Defendants, through the Statewide Supported Employment Lead will use the resulting information to enhance employment outcomes for individual JCMs and the employment system.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE2.5a for updates.
<p>Supported Employment Objective SE2.6 Increase the number of qualified providers statewide. Qualified providers are defined as those that get people jobs in the community, maintain jobs and help individuals with career advancement.</p> <p>Major Strategies:</p> <ol style="list-style-type: none"> 1. <u>Qualified Provider Project</u> - DDSD is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes. 2. <u>Competency-Based Training and Technical Assistance</u> - DDSD continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers. 			
<p>No need for evaluative component per court order. Component Manager is DDSD Deputy Director.</p> <p>Date: 9/30/16</p> <p>Activities Completed in the Quarter:</p> <ul style="list-style-type: none"> • See SE2.1a Qualified providers update. 			

Supported Employment Objective SE2.7 CMs will demonstrate competence in facilitating IDTs regarding employment outcomes for class members. Competence will be demonstrated by passing competency based training regarding DOH employment policies.

Major Strategies:

1. Competency-Based Training and Technical Assistance - DDS/D continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.
2. Competency and Performance Based Training for Case Managers: DDS/D is in the process of developing an overall training vision that will entail a review of existing trainings, training needs, frequency of training, and ongoing quality and fidelity of training. Case Management requirements will be reviewed and developed as needed during this process.

<p>SE2.7a DOH, in consultation with the Jackson Employment Expert, must provide competency-based training for all JCM case managers.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 6/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDS/D Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • FY18 PFE contract was signed. • Cesilee Coulson from the Washington Institute for Supported Employment WISE visited New Mexico 9.12.17 and 9.13.17. She met with two of the PFE partners - UNM/CDD and DDS/D. From that visit, PFE has created a draft training plan.
<p>SE2.7b DOH must identify JCM case managers who have not passed the competency-based training and must take appropriate actions until the case managers are successful.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDS/D Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE2.7a for updates.

Supported Employment Objective SE2.8 DOH will disseminate information to CM[s], Providers and IDTs regarding strategies for overcoming identified barriers to employment and will promote use of the RORI system by CMs, providers and IDTs to seek assistance from DOH when they encounter obstacles related to employment. DOH will review and use the information from the RORIs at least annually.

Major Strategies:

- 1. Employment First Policy/Procedure - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with WIOA.**

<p>SE2.8a The DOH must collect annual data and information useful in identifying barriers to employment and in developing strategies for overcoming barriers to employment for JCMs. The data and information may include CPRs, RORIs, and input from JCMs, JCMs' families and guardians, case managers, providers, DDSD personnel, DVR personnel, and advocates.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • No updates this quarter
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<p>SE2.8b The DOH must disseminate the information addressed in SE2.8a to case managers, providers, JCMs, guardians, and IDTs.</p>	<p>Original Date: 12/31/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● 9 training sessions occurred this quarter (43 total training sessions held) with outreach to 809 audience members including 109 DVR field staff. ● 123 agencies trained, of those 45 identified as providing services to JCMs. ● An Employment First webinar was recorded on October 5. It will be posted to the Partners for Employment website. ● Language from the E1st policy/procedure is being incorporated into the DD Waiver Standards revisions. <p>Supporting Documentation: See SE2.2 for Employment First Presentations Master Training List</p>
<p>SE2.8c The DOH must collect RORI information on an annual basis and must promote RORI use to identify barriers that JCMs encounter in obtaining employment.</p>	<p>Original Date: 10/31/15</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See SE2.8a for updates.

Supported Employment Objective SE2.9 Qualified employment providers have capacity to do individualized job development.

Major Strategies:

1. Informed Choice Initiative- The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
3. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE2.9a Defendants must provide adequate training for providers that are unable to perform the individualized job development.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations. ● Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDSD to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. ● The PFE FY18 contract has been signed. ● Partners for Employment offered three trainings by Ashlea Lantz on, "Making Social Security Work". 29 people attended the Las Cruces session on June 6. 8
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			<p>people attended the Roswell session on June 7. 13 people attended the Albuquerque session on June 8.</p> <ul style="list-style-type: none">● Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. <p>Supporting Documentation: See SE 1.4 for PFE monthly reports.</p>
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Supported Employment Objective SE2.10 Qualified employment providers have the capacity to provide individualized job supports to JCMs.

Major Strategies:

1. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
3. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE2.10a For JCM's who need job supports, Defendants will ensure qualified supported employment providers can supply the required job supports.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDSD to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. • Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations. • The PFE FY18 contract has been signed. • Partners for Employment offered three trainings by Ashlea Lantz on, "Making Social Security Work". 29 people attended the Las Cruces session on June 6. 8
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			<p>people attended the Roswell session on June 7. 13 people attended the Albuquerque session on June 8.</p> <ul style="list-style-type: none">● Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. <p>Supporting Documentation: See SE 1.4 for PFE monthly reports.</p> <p>.</p>
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Supported Employment Objective SE2.11 Provider agencies use outcome data to improve practice.

Major Strategies:

1. SELN Database - Established provider accountability for employment outcomes.
2. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
3. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.

<p>SE2.11a Defendants must identify outcome data related to employment of JCMs that will assist provider agencies to improve their services to JCMs. That data may include information concerning provider agencies that are successfully developing jobs for JCMs at criteria or above criteria, provider agencies that are successfully supporting JCMs in maintaining community based jobs at criteria or above criteria, and provider agencies that are enabling JCMs to work more hours, receive higher wages, and obtain greater levels of social integration.</p>	<p>Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext. 3: 7/31/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • SELN FY18 Q1 data has been collected, validated and imported into the Supported Employment database. This is the sixth quarter of data in the database. • Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDSD to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. • Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations.
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			Supporting Documentation: See SE1.1 for Informed Choice documentation
SE2.11b Defendants must disseminate to provider agencies annual outcome data that Defendants deem helpful for use by provider agencies to improve services to JCMs.	Original Date: 1/31/16 Date Ext. 1: 4/30/16 Date Ext. 2: 6/30/16 Date Ext. 3: 7/31/16	<i>DDSD Supported Employment Lead</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> • See SE2.11a for updates.
SE2.11c Provider agencies must use “the required QA/QI agency plan in regards to ISP implementation specific to Supported Employment.”	Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: 12/31/16	<i>DDSD Supported Employment Lead</i>	Milestones Achieved in the Quarter: <ul style="list-style-type: none"> • See SE2.11a for updates.

Supported Employment Objective SE3.1 Defendants will inform employment providers where to refer Jackson Class Members for a complete, person-centered vocational assessment, and employment providers will understand the requisite elements of a person-centered vocational assessment as defined by Defendants.

Major Strategies:

1. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE3.1a Defendants must identify appropriate tools, e.g., the “Assessment Toolkit,” for employment providers, including information about where to refer JCMs for a complete person-centered vocational assessment.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 6/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • DDS and DVR met on 9.21.17 to discuss the ongoing efforts related to scaffolded funding and the IGA. A conceptual plan has been developed. DDS to attend the State Employment Leadership Network (SELN) October 18-20. The topic of the meeting is partnerships between state DD and VR systems.
<p>SE3.1b Defendants must develop training on how to use the Assessment Toolkit, and DDS Supported Employment Coordinators and other pertinent staff must receive that training.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE3.1a for updates.

<p>SE3.1c Defendants must provide training to employment providers on how to use the Assessment Toolkit.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE3.1a for updates.
<p>SE3.1d Defendants must inform employment providers that they may schedule follow-up meetings with Defendants about the use of the Assessment Toolkit.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Deputy Director</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE3.1a for updates.

Supported Employment Objective SE3.2 IDTs are informed about the importance of accommodations to increase independent performance in the workplace.

Major Strategies:

1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
2. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE3.2a IDTs, case managers, and qualified employment providers must complete competency based training regarding the importance of accommodations, supports, and assistive technology for a JCM so as to maximize a JCM's independent performance in the workplace.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Evaluating the use of accommodations is part of the work of the Qualified Providers project. The Qualified Provider committee met on 6.17.17. Linda Rolfe, SME, in attendance. Seven agencies have agreed to work with DDSD to pilot the application. The agencies are: Aspire (SE), LifeRoots (Metro), Ability First (Metro), Empowerment (NW), Los Cumbres (NE), Phame (NE) and Community Options (SW). The Qualified Provider application and scoring guide was presented to the Association of Developmental Disabilities Community Providers (ADDCP) on 8.17.17 and a follow up meeting was held on 9.22.17. The work with the pilot agencies continues. A follow up call with the DDSD CI Coordinators is scheduled for 10.24.17, as well as a face-to-face meeting in November. Linda Rolfe, SME, will be on the call and at the meeting. ● The FY18 PFE contract has been signed.
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<p>SE3.2b IDTs, case managers, and qualified employment providers must understand, through training and written communications, the availability of accommodations, supports, and assistive technology for use by a JCM in the workplace.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. Systematic Instruction teaches techniques for individuals with severe disabilities to learn multi-step tasks. Using accommodations on the work site is part of the strategy. <p>Supporting Documentation: See SE 1.4 for PFE monthly reports.</p>
<p>SE3.2c Defendants must document the transmittal of information about the importance of accommodations and supports for a JCM to IDTs, case managers, and qualified employment providers.</p>	<p>Original Date: 7/31/15</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> See SE3.2b for updates.

Supported Employment Objective SE3.3 Use the statewide employment institute to provide training and technical assistance to the field to advance employment opportunities for class members.

Major Strategies:

1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
2. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE3.3a The DOH and University of New Mexico must have a formal agreement that requires Partners for Employment to respond to requests for employment information and consultation.</p>	<p>Original Date: 7/1/15 Date Ext. 1: 7/31/16</p>	<p><i>DDS Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Contracts with PFE executed for FY14, FY15, FY16, FY17. • The FY18 PFE Contract has been signed.
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<p>SE3.3b Partners for Employment must provide training, technical assistance, information, and support to employment providers, JCMs and their families and guardians, and the IDTs in order to advance employment opportunities for JCMs.</p>	<p>Original Date: 9/30/15 Date Ext. 1: TBD</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Three Supported Employment Local Leaders (SELL) Meetings were held in May. May 3 in NE Region with 8 participants. May 11 in Metro Region with 14 participants. May 18 in SW Region with 13 participants. ● Two SELL meetings were held in August. August 4 in the Metro Region with 27 participants and August 9 in the NE Region with 14 participants. ● Partners for Employment offered three trainings by Ashlea Lantz on, “Making Social Security Work”. 29 people attended the Las Cruces session on June 6. 8 people attended the Roswell session on June 7. 13 people attended the Albuquerque session on June 8. ● Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. <ul style="list-style-type: none"> ● Cesilee Coulson from the Washington Institute for Supported Employment WISE visited New Mexico 9.12.17 and 9.13.17. She met with two of the PFE partners - UNM/CDD and DDSD. From that visit, a draft training plan was developed. ● PFE distributed applications for an Advisory Council. The first meeting will be held in November. ● The PFE Steering Committee met on 8.2.17, 9.21.17 and 10.10.17 to review the deliverables of the FY18 PFE contract. ● Two of the PFE partner - DDSD and UNM/CDD attended the Griffin-Hammis, “Best Go West” Rendezvous in August. How to use Discovery and
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			<p>Customised Employment were topics on the agenda, as well as, systems changes from a state/agency level.</p> <p>Supporting Documentation:</p> <ul style="list-style-type: none"> ● Trainings List FY17 PFE ● PFE FY 2018 Core Training Plan - Sept 2017 ● PFE Sample Workshop Format ● PFE FY 2018 Timeline for Completed Activities
SE3.3c Defendants must report quarterly the requests for information about employment, training, technical assistance, consultation, and support made to Partners for Employment that it provided regarding JCMs.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: 9/30/16</p>	<i>DDSD Supported Employment Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See SE3.3b for updates.
SE3.3d Defendants quarterly reports must disclose Partner's for Employment's success in assisting the advancement of employment opportunities for JCMs. When feasible, the reports will include quantitative information.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: 9/30/16</p>	<i>DDSD Supported Employment Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● See SE3.3b for updates.

Supported Employment Objective SE3.4 DDSD will provide technical assistance to teams as requested for individuals whom they support to access employment opportunities.

Major Strategies:

1. Informed Choice Initiative- The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. Competency-Based Training and Technical Assistance - DDSD continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

<p>SE3.4a DDSD must identify necessary technical assistance and information to provide to IDTs and JCMs and their guardians for purposes of responding to JCMs' employment inquiries and issues.</p>	<p>Original Date: 7/31/15 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Strike force meetings continue to occur weekly. • A Review Grid was developed for FY17 Q3 document who is involved in Strike Force, the CLE Project and the Informed Choice Initiative each quarter. It has been updated for FY18 Q1. • PFE hosted the APSE CESP exam on 5.19.17. There are now 24 Certified Employment Supports Professionals in New Mexico. <p>Supporting Documentation: Newsletter Article - CESP August 2017 See SE1.5a for Cover Sheet to Review Grid and Strike Force Reviews 10.16.17.</p>
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<p>SE3.4b DDS D must respond to inquiries about employment opportunities and provide appropriate job-related technical assistance and information that may include job coaching, mentoring, and problem solving to IDTs and JCMs and their guardians.</p>	<p>Original Date: 9/30/15 Date Ext. 1: 12/31/16</p>	<p><i>DDS D Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none">• See SE3.4a for updates.
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Supported Employment Objective SE3.5 Defendants, through UNM/CDD Partners for Employment will provide training for people with disabilities, family members, providers, guardians, advocates, case managers, DDS and DVR consistent with the Employment First Principle. Preparing disengagement

Major Strategies:

1. Qualified Provider Project - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
2. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.

Supported Employment Objective
SE3.6 Defendants will provide training to employment providers and case managers on evidence based practices in Supported Employment.

Major Strategies:

- 1. Employment First Policy/Procedure - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with WIOA.**
- 2. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.**
- 3. Competency-Based Training and Technical Assistance - DDS**

Milestones Achieved in the Quarter:

Original Date: 12/31/15 date of completion-no evaluative components.

Date Ext. 1: 12/31/16

Component Manager: DDS Supported Employment Lead

- 9 training sessions occurred this quarter (43 total training sessions held) with outreach to 809 audience members including 109 DVR field staff.
- 123 agencies trained, of those 45 identified as providing services to JCMs.
- An Employment First webinar was recorded on October 5. It will be posted to the Partners for Employment website.
- Language from the E1st policy/procedure is being incorporated into the DD Waiver Standards revisions.
- Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations.
- The FY18 PFE contract has been signed.

<p>continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.</p>	
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Supported Employment Objective SE3.7 Defendant(s) will work with Partners for Employment (formerly known as Employment Institute) to maintain an ongoing learning collaborative.

Major Strategies:

- 1. Employment First Policy/Procedure - Established the vision for competitive integrated employment as the preferred outcome, including instituting new definitions consistent with WIOA.**
- 2. Informed Choice Initiative- The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.**

This Objective is under preparation for review by the JCA for possible disengagement.

Milestones Achieved in the Quarter:

- 9 training sessions occurred this quarter (43 total training sessions held) with outreach to 809 audience members including 109 DVR field staff.
- 123 agencies trained, of those 45 identified as providing services to JCMs.
- An Employment First webinar was recorded on October 5. It will be posted to the Partners for Employment website.
- Language from the E1st policy/procedure is being incorporated into the DD Waiver Standards revisions.
- Four providers have been or are currently involved in the Informed Choice project. LLCP started on 8.16.16 and completed 10 Discovery Summaries for JCMs. LifeRoots started on 11.30.16 and completed 7 Discovery Summaries including 2 for JCMs. Tresco started on 12.5.16 and completed 7 Discovery Summaries for JCMs. ENMRSH started on 6.28.17 and is in process of completing 2 Discovery Summaries for JCMs. Adelante has agreed to participate in the project but has asked for an extension to start due to other obligations.
- The FY18 PFE contract has been signed.

<p>3. <u>Competency-Based Training and Technical Assistance</u> - DDSD continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.</p>			
<p>SE3.7a Defendants must continue to fund and support Partners for Employment in accordance with an active formal agreement between DDSD and UNM, pertinent state procurement rules, and funding appropriated by the state legislature.</p>	<p>7/31/15</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Contracts with PFE executed for FY14, FY15, FY16, FY17. ● The FY18 PFE contract has been signed.

<p>SE3.7b The Partners for Employment program is intended to provide a learning collaborative that enhances employment opportunities for JCMs.</p>	<p>10/31/15</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • Three Supported Employment Local Leaders (SELL) Meetings were held in May. May 3 in NE Region with 8 participants. May 11 in Metro Region with 14 participants. May 18 in SW Region with 13 participants. • Two SELL meetings were held in August. August 4 in the Metro Region with 27 participants and August 9 in the NE Region with 14 participants. • Partners for Employment offered three trainings by Ashlea Lantz on, “Making Social Security Work”. 29 people attended the Las Cruces session on June 6. 8 people attended the Roswell session on June 7. 13 people attended the Albuquerque session on June 8. • Partners for Employment offered a two-day training by Mike Callahan on, “Systematic Instruction” on June 28 and 29 in Farmington. 7 people attended. <p>Supporting Documentation: See SE1.4 for supporting documentation about PFE.</p>
<p>SE3.7c Defendants must annually evaluate the outcomes and efficacy of Partners for Employment as the program relates to employment services for JCMs.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE3.7b for updates on activities. PFE evaluates each training session it conducts. Training evaluations are part of the monthly PFE reports.

<p>SE3.7d Defendants must communicate the results of the annual evaluation with Partners for Employment.</p>	<p>Original Date: 4/30/16</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none">• See SE3.7b for updates.
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Supported Employment Objective SE4.1 Class members are able to explore community work experiences including job sampling, trial work experiences and volunteering.

Major Strategies:

1. Informed Choice Initiative - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. CLE Project - This is a research project through ThinkWork that is developing a National toolkit to be used to assist providers with Community Life Engagement. The four providers in the pilot are receiving technical assistance from National experts in the field. The goal of this project is to ultimately assist providers with compliance of the CMS Final Rule and create a systemic culture shift.
3. Competency-Based Training and Technical Assistance - DDS continues to work with our partners at UNM/CDD and NMDVR (Partners for Employment) to develop training in best practices in Supported Employment and to provide technical assistance and outreach to a variety of stakeholder groups statewide. Training topics include: Employment First, Customized Employment, Discovery, Informed Choice, Person-Centered Assessments, Community Resources and National System Drivers.
4. DVR Outreach Project - DDS is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:
 - Earn less than minimum wage; or
 - Work less than 10 hours per week; or
 - Are receiving a paycheck from a provider agency rather than a community business.

	<p>Original Date: 9/30/15 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Supported Employment Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● The Request for Proposal (RFP) for the FY18 Work Experience Grant was issued. One provider responded, but the application was deemed incomplete. A second RFP is currently in process. ● The work of the DVR Outreach Project continues. After an initial 2-day kickoff meeting in July, six teams (one in each region and two in Metro) continue to work with Abby Cooper, a PFE contractor to develop intervention strategies for JCMs who: <ul style="list-style-type: none"> ● Earn less than minimum wage; or ● Work less than 10 hours per week; or ● Are receiving a paycheck from a provider agency rather than a community business. <p>Here are a few outcome of the project so far:</p> <ul style="list-style-type: none"> ● Staff are obtaining a better understanding of how to see a person's strengths and how to translate that information into additional tasks a person could perform for pay. ● DDSD is developing an understanding of how DVR operates and is able to help remove barriers. ● DDSD Regional Coordinators have been able to teach VR a more inclusive approach to working with individuals, they're sharing their expertise. ● Some staff have done a great job on building on community connections to expand possibilities ● Some teams are visiting the worksite and identifying unmet needs and working with the provider to determine if the employer is interested in increasing hours to address those needs.
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			<ul style="list-style-type: none"> • A follow-up face-to-face meeting with the DDS CI Coordinators and DVR Counselors has been scheduled for November 16. <p>Supporting Documentation:</p> <ul style="list-style-type: none"> • Work Exp Grant Program Report 10.12.17- SE 4.1
SE4.1b Defendants must identify processes that encourage job sampling, trial work experience, and volunteer opportunities for JCMs identified in SE4.1a.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: TBD</p>	<i>DDSD Supported Employment Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.1a for updates. <p>Supporting Documentation: See SE4.1a Trial Work Exp Grant 10.12.17 for Trial Work Experience Updates.</p>
SE4.1c Defendants must communicate processes identified in SE4.1b to JCMs and their guardians, IDTs, case managers, and qualified employment providers.	<p>Original Date: 9/30/15</p> <p>Date Ext. 1: TBD</p>	<i>DDSD Supported Employment Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.1a for updates. <p>Supporting Documentation: See SE4.1a Trial Work Exp Grant 10.12.17 for Trial Work Experience Updates.</p> <p>See supporting documents in SE 2.3 - Supported Employment Communication Matrix.</p>
SE4.1d Defendants must ensure that there are qualified employment providers in each region that will afford opportunities for job sampling, trial work experiences, and volunteer opportunities for JCMs identified in SE4.1a.	<p>Original Date: 4/30/16</p> <p>Date Ext. 1: 9/30/16</p> <p>Date Ext. 2: TBD</p>	<i>DDSD Supported Employment Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.1a for updates. <p>Supporting Documentation: See SE4.1a Trial Work Exp Grant 10.12.17 for Trial Work Experience Updates.</p>

Supported Employment Objective SE4.2 Decrease the amount of time class members spend in congregated, segregated settings for persons with D/D and work with IDTs to promote participation in community activities and generic resources that are comparable to those used by non-disabled persons of the same age.

Major Strategies:

1. **Informed Choice Initiative** - The goal of this project is to increase provider capacity relative to discovery. This strategy involves intensive intervention with provider agencies to teach them to use the Discovery theories in their everyday work. As JCMs increase their experiences through Discovery, they will be better informed about the community at large and potential activities to access, which may include working. Discovery will be used as a tool to guide informed choice about employment.
2. **Qualified Provider Project** - DDS is in the process of revising its provider application in order to establish new expectations for providers related to quality outcomes.
3. **Strike Force** - This is an extension of the work that has previously been completed. This strategy involves working completing an ISP review to make an initial determination about the level and quality of community participation for each JCM. The ISP review is followed up with a site visit to compare what is documented in the ISP with what is actually occurring. The site visit also serves as an opportunity to provide suggestions about improving services directly to the staff members who are performing the work with the JCM. The goal is to increase the time spent in community participation and decrease time in facility-based non-work settings, while improving the quality of the activities.
4. **CLE Project** - This is a research project through ThinkWork that is developing a National toolkit to be used to assist providers with Community Life Engagement. The four providers in the pilot are receiving technical assistance from National experts in the field. The goal of this project is to ultimately assist providers with compliance of the CMS Final Rule and create a systemic culture shift.
5. **DVR Outreach Project** - DDS is partnering with the New Mexico Division of Vocational Rehabilitation in order to break down potential funding barriers for Supported Employment. This project includes conducting outreach to JCMs who:
 - Earn less than minimum wage; or
 - Work less than 10 hours per week; or
 - Are receiving a paycheck from a provider agency rather than a community business.

<p>SE4.2a Defendants must identify JCMs who are in “congregated, segregated settings for persons with D/D” and who do not wish to be in these settings.</p>	<p>Original Date: 4/30/16 Date Ext. 1: 6/30/16 Date Ext. 2: TBD</p>	<p><i>DDSD Meaningful Day Lead</i></p>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> ● Strike force meetings continue to occur weekly. ● A Review Grid was developed for FY17 Q3 document who is involved in Strike Force, the CLE Project and the Informed Choice Initiative each quarter. It has been updated for FY18 Q1. ● The work of the DVR Outreach Project continues. After an initial 2-day kickoff meeting in July, six teams (one in each region and two in Metro)continue to work with Abby Cooper, a PFE contractor to develop intervention strategies for JCMs who: <ul style="list-style-type: none"> ● Earn less than minimum wage; or ● Work less than 10 hours per week; or ● Are receiving a paycheck from a provider agency rather than a community business. <p>Here are a few outcome of the project so far:</p> <ul style="list-style-type: none"> ● Staff are obtaining a better understanding of how to see a person's strengths and how to translate that information into additional tasks a person could perform for pay. ● DDSD is developing an understanding of how DVR operates and is able to help remove barriers. ● DDSD Regional Coordinators have been able to teach VR a more inclusive approach to working with individuals, they're sharing their expertise. ● Some staff have done a great job on building on community connections to expand possibilities ● Some teams are visiting the worksite and identifying unmet needs and working with the
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			<p>provider to determine if the employer is interested in increasing hours to address those needs.</p> <ul style="list-style-type: none"> • A follow-up face-to-face meeting with the DDS CI Coordinators and DVR Counselors has been scheduled for November 16. <p>Supporting Documentation: See SE1.5a for Cover Sheet to Review Grid and Strike Force Reviews 10.16.17.</p>
SE4.2b For those JCMs identified in SE4.2a, Defendants must take steps to decrease the amount of time the JCMs spend in congregated, segregated settings, provided the JCMs' guardians agree.	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<i>DDSD Meaningful Day Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.2a for updates.
SE4.2c Defendants must provide education and competency-based training to IDTs and pertinent personnel concerning the importance of having JCMs participate in integrated community activities and reducing the time spent by JCMs in congregated, segregated settings.	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<i>DDSD Meaningful Day Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.2a for updates.
SE4.2d Defendants must annually identify and monitor those JCMs who wish to reduce time spent in congregated segregated settings and those JCMs who spent reduced hours in congregated, segregated settings.	<p>Original Date: 4/30/16 Date Ext. 1: 9/30/16 Date Ext. 2: TBD</p>	<i>DDSD Meaningful Day Lead</i>	<p>Milestones Achieved in the Quarter:</p> <ul style="list-style-type: none"> • See SE4.2a for updates.

<p>OUTCOME E ISP: People will receive appropriate services / supports through integrated and meaningful ISP's</p>	<p>JCA and Community Monitor have been meeting with DDS Deputy Director and Community Programs Bureau Chief in developing the ISP Strategic Plan. An initial stakeholder meeting was held in October 2016. CPB submitted a revised ISP Strategic Plan to the JCA and Community Monitor on 1/19/17.</p> <p>Please see response to S 3.1 d and S 3.4 a</p>
<p>Individual Service Planning</p> <p>OUTCOME C: Identify and correct ISP deficiencies, both individual and systemic, using the community audit information</p>	
<p>OUTCOME K ASSISTIVE TECHNOLOGY: People will have access to appropriate Assistive Technology</p>	<p>On October 3, 2017, the JCA sent Disengagement Determination letter indicating the DOH has met the requirements of the Plan of Action Training and the Technical Assistance Desired Outcome K and Assistive Technology Desired Outcome A obligations.</p>
<p>Assistive Technology</p> <p>OUTCOME A: Enhance and expand the Assistive Technology Initiative statewide.</p>	

2005 Appendix A to the Plan of Action MEANINGFUL DAY SERVICES	No data to report
2005 Appendix A to the Plan of Action DIVISION OF VOCATIONAL REHABILITATION	DVR working with JCA.
JSD Continuous Improvement	Discussions still ongoing about remaining Employment Continuous Improvement items and their possible incorporation into the Individual Quality Review.
ISP JSD Paragraph 35	
Metro:	
Total Program Adequate	DISENGAGED Doc. 2069
Adequate Use of Generic Services	
Person Integrated Into Community	
Southeast:	
Total Program Adequate	Doc. 2074 Plaintiffs Opposed Response, Doc. 2077 Reply in Support of the Motion to Disengage
Southwest:	
Person Integrated into Community	

Behavioral Supports JSD Paragraph 36	
Northeast:	
Behavior Services Integrated into ISP	
Northwest:	
Behavior Services Integrated into ISP	
Southeast:	
Person Receive Behavior Services	
Southwest:	
Behavior Services Integrated into ISP	
Supported Employment JSD Paragraph 37	
Metro:	
Have Career Development Plan	
Person Receive Employment Services	
Northeast:	
Have Career Development Plan	
Person Receive Employment Services	
Southwest:	

Have Career Development Plan	
Person Receive Employment Services	
1998 Audit Recommendations	DISENGAGED 12/14/15 Doc. 2076 Disengaging the 1998 Audit