

Mississippi Department of Mental Health

Bureau of Intellectual and Developmental
Disabilities



State Plan for Services and Supports for
Individuals with
Intellectual/Developmental Disabilities

FY 2010

VISION

The Department of Mental Health/Bureau of Intellectual and Developmental Disabilities promotes and supports the **vision** of a comprehensive service system for individuals with intellectual/developmental disabilities that encompasses the belief that the system should provide accessible and appropriate service and support options which increase independence, productivity, and integration/inclusion in the community.

The Bureau is directed toward accomplishing this vision through the realization of the following:

- providing, through person-centered planning, the opportunity for individuals with intellectual/developmental disabilities to make choices in lifestyle, services/supports, and familial relationships that increase their quality of life;
- assisting and supporting families of individuals with intellectual/developmental disabilities;
- offering a broad array of support services which improve the quality of life of individuals with intellectual/developmental disabilities by allowing them to control their lives, make their own decisions, and reach their full potential as responsible citizens;
- increasing the number of individuals served as well as choices and options available;
- assisting in the acquisition of adequate, safe, affordable community housing options offering varying levels of support to enable persons with intellectual/developmental disabilities to live where they desire and, at the same time, where they are able to function successfully in the most interdependent and integrated environment;
- educating service providers and the general public about how to include individuals with intellectual/developmental disabilities in activities of life, their needs, and how to provide appropriate services and supports;
- making case management services a priority for all individuals with intellectual/developmental disabilities to assist them in accessing the service system and advocating for their rights, self-responsibility, and privileges;
- assisting in the development, utilization and maintenance of natural supports among persons receiving services, their families, and their communities;
- empowering persons with intellectual/developmental disabilities, families, and advocacy groups to effectively increase the responsiveness of the public, governmental officials, and service agencies to their needs;
- participating in the development and implementation of interagency agreements to ensure collaborative efforts are successful in maximizing resources and providing needed services and supports without duplication;

- encouraging communities to assume their responsibility in providing supports as well as inclusion of individuals with intellectual/developmental disabilities in its activities and services; and
- making the necessary system changes so that the services and supports provided are responsive to the expressed needs and choices of individuals with intellectual/developmental disabilities and their families.

NEEDS

The Mississippi Department of Mental Health/Bureau of Intellectual and Developmental Disabilities utilizes Service Utilization Data and Planning List Data to project **needs** and plan for the future.

Existing Service Utilization Data

Data gathered from Bureau of Intellectual and Developmental Disabilities community services programs generates information about admissions, discharges, and demographics of the individuals served. While data is reported by each specific program, the data system is able to provide an unduplicated total number of Mississippians with intellectual/developmental disabilities receiving services from DMH/BIDD programs. While some individuals may be enrolled in more than one service, information indicates that **6,459** individuals are currently receiving community services/ supports through the Bureau of Intellectual and Developmental Disabilities and its providers.

LIVING ARRANGEMENTS

Table 1 presents the number of individuals served in specific community services during Fiscal Year 2008.

TABLE 1 COMMUNITY SERVICES DATA – FISCAL YEAR 2008	
SERVICE	NUMBER OF PERSONS SERVED
Assistive Technology Evaluations	653
Case Management	1,673
Community Living Services	862
Diagnostic and Evaluation	1,499
Early Intervention/Child Development	822
Employment Related Services	325
HCBS - ID/DD Waiver	2,077
Support Services (Day Support/Elderly Psychosocial, and Day Treatment)	289
Work Activity	1,065

Data relative to the number of individuals served during Fiscal Year 2008 at each of the comprehensive regional centers for individuals with intellectual/developmental disabilities is reported in Table 2.

TABLE 2 REGIONAL CENTERS DATA – FISCAL YEAR 2008		
CENTER	Residents at Beginning of FY 08	Residents at End of FY 08
Boswell Regional Center	139	139
Ellisville State School	503	494
Hudspeth Regional Center	282	281
North Mississippi Regional Center	274	273
South Mississippi Regional Center	123	130
TOTAL	1321	1317

LIVING ARRANGEMENTS

Bureau of Intellectual and Developmental Disabilities **Planning List Data**

Programs currently utilizing DMH/BIDD funds to provide non-waiver services are required to submit monthly planning list information. As part of this data, the programs provide information about individuals requesting services. This information is useful when planning for additional services, identifying areas of greatest need, or modifying existing services/ supports. Table 3 represents the planning list data for those services to which individuals have requested admission and for whom no services are available as of April 1, 2009.

TABLE 3 PLANNING LIST DATA	
SERVICE	NUMBER ON PLANNING LIST
Case Management	5
Employment	4
Day Support	0
Community Living	236
Work Activity	61

State Plan Advisory Council 2009

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PURPOSE

The **purpose** of developing the annual Bureau of Intellectual and Developmental Disabilities State Plan for Services and Supports to Individuals Receiving Services is:

- To establish an ongoing state planning process that guides the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities in developing, implementing and maintaining a comprehensive system of services and supports for persons with intellectual/ developmental disabilities which is based on their needs and choices;
- To enable the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities to communicate to the citizens of Mississippi a plan for the development of an array of services and supports for persons with intellectual/developmental disabilities and their families;
- To serve as a resource for the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities to communicate funding needs and priorities to the Mississippi Legislature, government officials, and others;
- To provide, through the establishment of a Bureau of Intellectual and Developmental Disabilities State Plan Advisory Council, an avenue for individuals with intellectual/developmental disabilities, their family members, and service providers to work together in identifying and planning an array of services and supports for citizens of the State with intellectual/developmental disabilities through the annual update of this Plan; and
- To serve as a component of a comprehensive effective working plan suggested in the Supreme Court decision in Olmstead v. L.C., 119 S.C. 2176 (1999). This decision provides an important legal framework for our state to continue its efforts in enabling individuals with intellectual/developmental disabilities to live in the most integrated setting appropriate to their needs. The Court's decision is based on Title II of the Americans with Disabilities Act (ADA) and clearly issues challenges to states to develop more opportunities for accessible, cost-effective community-based care.

MISSION

The **mission** of the Department of Mental Health is supporting a better tomorrow by making a difference in the lives of Mississippians with mental illness, substance abuse problems, and intellectual or developmental disabilities one person at a time.

PHILOSOPHY

The Department of Mental Health is committed to providing the citizens of Mississippi with an array of services and supports. DMH is committed to preventing or reducing the unnecessary use of inpatient or institutional services when individuals' needs can be met with less intensive or less restrictive levels of care. Our system is a person-centered one that is built on the strengths of individuals and their families while meeting their needs for special services and supports.

VALUES

As part of the DMH's array of services and supports, the Bureau of Intellectual and Developmental Disabilities strives to adhere to the following **values**:

- All people are capable of growth and learning regardless of any physical or mental disabilities they may have, or the severity of those disabilities.
- Persons with intellectual/developmental disabilities should have access to life experiences and living conditions as they choose and which are appropriate to meet their individual physical, emotional, spiritual, and intellectual needs.
- Persons with intellectual/developmental disabilities should be treated with the same respect and dignity as any other citizen and be able to utilize any community services and supports.
- Services should be designed to meet the individual's needs and choices throughout his/her life. In providing options, needs must first be determined, and then the options offered must make it possible for the individual's needs to be met in the most integrated setting of his/her choice.
- Services and supports for persons with intellectual/developmental disabilities should be designed to promote individual independence, productivity, and integration/inclusion in the community.
- Services/supports should be designed to promote meaningful relationships between individuals with intellectual/developmental disabilities and their families, communities, and individuals at work, school, and in any other environment in which the individual participates.
- Persons with intellectual/developmental disabilities should be able to control their own lives assuming responsibility for choices made.
- The provision of services/supports for individuals with intellectual/developmental disabilities should be a shared responsibility among families, communities, government, and service providers.

FISCAL RESOURCES

The Bureau of Intellectual and Developmental Disabilities in the Department of Mental Health is responsible for the allocation of all **fiscal resources** received for services for persons with intellectual/ developmental disabilities. The responsibility for fund allocation was established by the Mississippi Legislature in the Mississippi Code of 1972, annotated, Section 41 4, et seq., State Department of Mental Health. The Mississippi Department of Mental Health is charged

"to serve as the single state agency in receiving and administering any and all funds available from any source for the purpose of service delivery, training, research and education in regard to all forms of mental illness, mental retardation, alcoholism, drug misuse and developmental disabilities, unless such funds are specifically designated to a particular agency or institution by the federal government, the Mississippi Legislature, or any other grantor."

Funds received by the Bureau of Intellectual and Developmental Disabilities are as follows:

- A. **General Funds** - The Mississippi Legislature appropriates funds to the Bureau of Intellectual and Developmental Disabilities through the Department of Mental Health's Appropriation Bill for services and supports for persons with intellectual/developmental disabilities including, but not limited to, comprehensive regional center services, a specialized treatment facility, community living arrangements, work activity/employment related services, and Medicaid match for the Home and Community Based Services - ID/DD Waiver. The state funds appropriated for Medicaid match currently draw down federal Medicaid dollars at an approximate ratio of 24% to 76%.
- B. **Social Services Block Grant** - The Department of Mental Health is a contractor of the Department of Human Services for the provision of social services as supported by Social Services Block Grant funds. Funds received by the Bureau of Intellectual and Developmental Disabilities support work activity/employment related services, child development, and case management services.
- C. **Council on Developmental Disabilities** - Public Law 106-402 allocates funds to states for planning and development of model programs for the state's citizens with developmental disabilities. The Mississippi Council on Developmental Disabilities establishes funding priorities through its State Plan and areas of emphasis which currently includes quality assurance activities, education activities and early intervention, child related activities, health related activities, employment related activities, and other community services including formal and informal community supports that affect quality of life. The Department of Mental Health/Bureau of Intellectual and Developmental Disabilities, as Designated State Agency, is responsible for an accounting of the utilization of funds.

SERVICES/SUPPORTS COMPONENTS

Although there are limited fiscal resources available in the state, there is an **array of services and supports** for individuals with intellectual/developmental disabilities. While all services may not be available in some areas, there are regional/state services which may be accessed. The array of services includes:

ASSISTIVE TECHNOLOGY

CASE MANAGEMENT

DIAGNOSTIC AND EVALUATION SERVICES

EARLY INTERVENTION/CHILD DEVELOPMENT

EMPLOYMENT/VOCATIONAL SERVICES

FAMILY SUPPORT GROUPS

HOME AND COMMUNITY-BASED SERVICES - ID/DD WAIVER

LIVING ARRANGEMENTS

SERVICES FOR OLDER ADULTS

PROTECTION AND ADVOCACY SERVICES

QUALITY ASSURANCE

RESPIRE

SUPPORT SERVICES

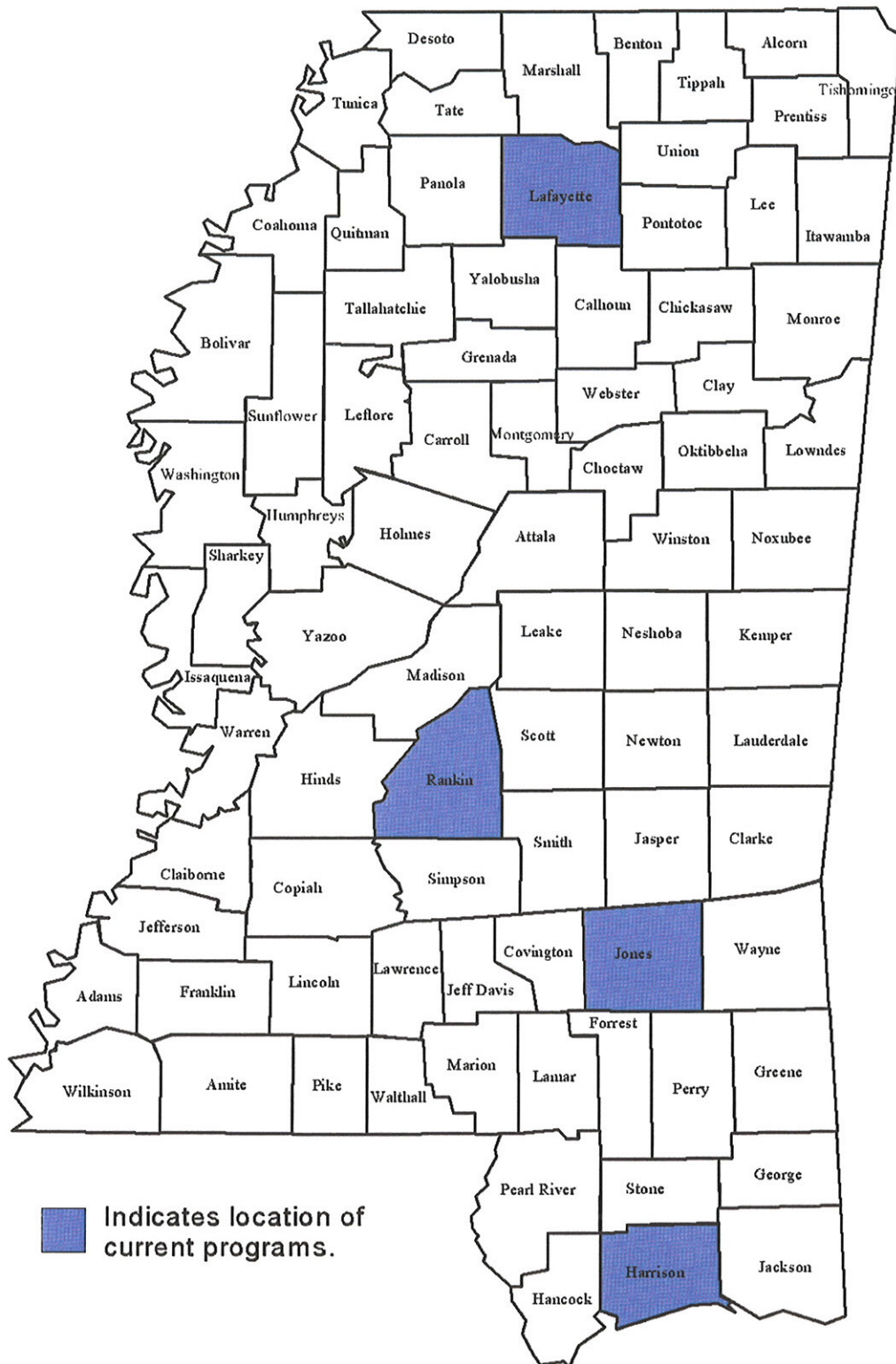
ASSISTIVE TECHNOLOGY SERVICES

Assistive Technology Services are designed to provide individuals with disabilities assistance with selection, acquisition, and use of appropriate technology to meet their specific needs for communication, mobility, learning, daily living, and environmental control. The purpose of the services is to help increase and improve the ability of an individual to fully participate in daily activities at school, work, and home. The array of services available includes evaluation of an individual's assistive technology needs, demonstration of assistive technology devices, and training on the use of specific assistive technology for the individual, family and other service providers.

Existing Services: Assistive technology services are available through four of the comprehensive Regional Centers. Each center serves multiple counties in their assigned catchment area. Table 4 lists the Assistive Technology programs and Map 1 indicates their location.

TABLE 4 ASSISTIVE TECHNOLOGY SERVICE PROVIDERS AND SITES	
Ellisville State School	Ellisville
Hudspeth Regional Center	Whitfield
North Mississippi Regional Center	Oxford
South Mississippi Regional Center	Long Beach

MAP 1 ASSISTIVE TECHNOLOGY PROGRAMS



CASE MANAGEMENT SERVICES

Case Management Services assist individuals with intellectual/developmental disabilities in achieving maximum utilization of available community resources which enable them to be self sufficient and remain in the community in the most integrated setting. These include: follow along services which ensure a continuing relationship, lifelong, if necessary, between a provider and a person with intellectual/developmental disabilities and the person's immediate relatives or guardians; coordination services which provide support, access to, and coordination of any and all services a person may receive; information on available programs and services to meet individual needs; and monitoring of progress. An assessment of individual needs provides information about the services/supports the individual currently receives and the services/supports still needed by the individual to be able to participate fully in community life.

Overall, Case Management Services assist persons with intellectual/developmental disabilities in accessing services and supports in the community to meet medical, social, educational, vocational, and recreational needs. Critical to the implementation of case management is the role of the case manager as a facilitator who helps enable the individual to access the necessary services/supports in the community. This facilitation can be indirect with a regional case manager providing supervision to a local case manager or it can be direct with the case manager directly assisting the individual with accessing the necessary services.

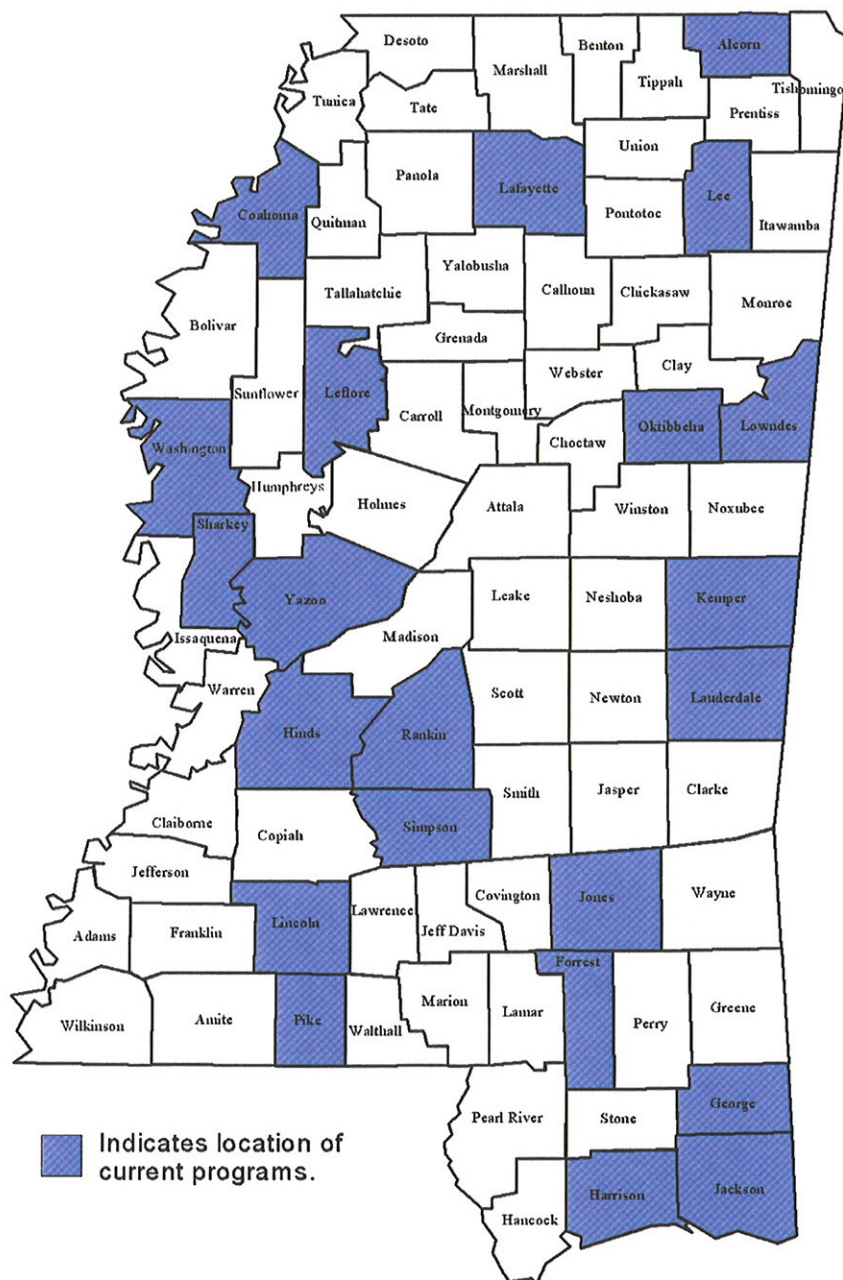
Existing Services: The Department of Mental Health/Bureau of Intellectual and Developmental Disabilities Case Management Services are available from the Community Services Departments at each of the five comprehensive regional centers for individuals with intellectual/developmental disabilities, some regional community mental health/mental retardation centers, and private, nonprofit programs receiving funds from the BIDD. Table 5 lists the Case Management programs and Map 2 indicates their main office locations.

Currently, 1,779 Mississippians with intellectual/developmental disabilities receive case management services.

TABLE 5
CASE MANAGEMENT PROVIDERS AND SITES

Boswell Regional Center	Magee and Brookhaven
Ellisville State School	Ellisville and Columbus
Hudspeth Regional Center	Whitfield, Meridian, and DeKalb
Mississippi Christian Family Services	Rolling Fork
North Mississippi Regional Center	Oxford
South Mississippi Regional Center	Long Beach
Region 1 Mental Health Center	Clarksdale
Region 4 Mental Health Center	Corinth
Region 5 Mental Health Center	Greenville
Region 6 Mental Health Center	Greenwood
Region 7 Mental Health Center	Starkville
Region 8 Mental Health Center	Brandon
Region 11 Mental Health Center	McComb
Region 12 Mental Health Center	Hattiesburg
Region 14 Mental Health Center	Pascagoula
Region 15 Mental Health Center	Yazoo City

MAP 2 CASE MANAGEMENT PROGRAMS



DIAGNOSTIC AND EVALUATION SERVICES

Diagnostic and Evaluation Services provide comprehensive, interdisciplinary evaluations for individuals with intellectual/developmental disabilities. Components of the diagnostic evaluation include: psychological testing, hearing screening, vision screening, medical evaluation, dietary assessment, speech/language testing, adaptive and social skills assessment, vocational skills assessment, and other diagnostic services as deemed appropriate for each individual.

As a result of the evaluation, the Interdisciplinary Team makes recommendations for services and supports in the most integrated setting based on the individual's strengths and needs identified in the evaluation process. The Diagnostic and Evaluation team provides as much information to the individual and family as possible so they can make informed choices when choosing service/support options. In many cases, individuals and their families are referred to Case Management Services to further assist them in accessing community support in the most integrated setting.

Referrals for evaluation are accepted from a myriad of sources including, but not limited to: the individual, family members, concerned parties, physicians, schools, courts, county health and human services departments, and other mental health or intellectual and developmental disability facilities. Likewise, evaluations are requested for numerous reasons such as initial identification and description of disorders, preadmission or continued placement in an ICF/MR or nursing home, determination of eligibility for a community services program, to provide parent education regarding programming needs for their children, and/or to monitor at-risk children.

Existing Services: All five of the comprehensive regional centers provide Diagnostic and Evaluation Services for individuals with intellectual/developmental disabilities who live in the community. Diagnostic and Evaluation Services are highly utilized by individuals with intellectual/developmental disabilities (infants through adults) and their families to establish initial and continuing eligibility for a variety of programs and services. Appendix A indicates their location and areas served.

EARLY INTERVENTION/ CHILD DEVELOPMENT SERVICES

All Early Intervention/Child Development programs for children with intellectual/developmental disabilities provide activities which promote the development of the intellectual, physical, emotional, and social growth of children as well as parent support and education. The programs are intended to supplement parental care through a program of planned developmental experiences which assist the child from birth to age four in developing skills and abilities which increase their potential for self sufficiency in the future. The service is also intended to assist parents in maintaining their child in the home by providing information and activities about each child's individual needs and how to meet those needs, thus avoiding institutional care. Each child applying for Early Intervention services receives an individualized evaluation. This evaluation assesses the child's capabilities and identifies needs. The results are utilized by the family and staff to develop an individual plan to address areas of need as well as to determine any specialized services the child may need. The individual plans are reevaluated at least annually and serve as the basis for services and supports the child receives.

Center-based, home-based, and outreach services are available. Children are served via the method most appropriate for him/her. Center-based services include a balance of individual and small group sessions. The setting is conducive to maturation and learning and includes materials, toys, and equipment to stimulate, motivate, and entice the child to explore his/her surroundings. Special adaptive equipment is also available as needed for children with severe physical disabilities. Additionally, home-based and outreach services are available in some programs. Home-based services provide support for families by having program staff come to the home to assist parents in incorporating developmental activities into the child's daily routines. Outreach services involve program staff providing support/training to the child and other providers in natural settings such as day care programs.

Existing Services: Currently, there are four (4) Early Intervention/Child Development program sites receiving funds from or operated by the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities. Table 6 lists the Early Intervention/Child Development programs and Map 3 indicates their location. Additional locations which provide outreach services are also listed.

Currently, 601 Mississippi children with intellectual/developmental disabilities and their families receive early intervention/child development services.

TABLE 6
EARLY INTERVENTION/CHILD DEVELOPMENT PROVIDERS AND SITES

Boswell Regional Center	<i>Sites:</i> Brookhaven <i>Outreach Counties</i> - Simpson, Pike, Adams, Lincoln, Walthall, Wilkinson, Amite, Jefferson, Copiah, Claiborne, Lawrence, and Franklin
Ellisville State School	<i>Sites:</i> Ellisville, Waynesboro <i>Outreach Counties</i> - Jones, Smith, Jasper, Forrest, Greene, Covington, Clarke, Perry, and Wayne
Hudspeth Regional Center	<i>Sites:</i> Whitfield, Meridian, Yazoo City, Louisville, Philadelphia <i>Outreach Counties</i> - Rankin, Madison, Hinds, Leake, Yazoo, Scott, Winston, Webster, Noxubee, Holmes, Humphreys, Neshoba, Sunflower, Lauderdale, Newton, Choctaw, Clarke, Kemper, Attala, Sharkey, Warren, and Issaquena
North Mississippi Regional Center	<i>Sites:</i> Oxford, Grenada, Hernando, and Clarksdale <i>Outreach Counties</i> - DeSoto, Leflore, Tate, Montgomery, Quitman, Tallahatchie, Panola, Yalobusha, Calhoun, Marshall, Tunica, Benton, Carroll, Grenada, Union, Lafayette, Coahoma, and Pontotoc
Region 5 Mental Health Center	<i>Sites:</i> Cleveland and Greenville
Willowood	<i>Site:</i> Jackson

The map displays the following counties and their program status:

- Dark Blue (Current Programs):** Desoto, Coahoma, Bolivar, Washington, Sharkey, Yazoo, Hinds, Rankin, Jones, Wayne.
- Light Blue (Outreach Programs):** Tunica, Tate, Marshall, Benton, Tishomingo, Union, Pontotoc, Lee, Itawamba, Tallahatchie, Yalobusha, Calhoun, Chickasaw, Monroe, Grenada, Montgomery, Webster, Clay, Okfuskee, Lowndes, Choctaw, Atala, Winston, Noxubee, Leake, Neshoba, Kemper, Scott, Newton, Lauderdale, Smith, Jasper, Clarke, Simpson, Copiah, Warren, Issaquena, Madison, Lincoln, Lawrence, Jeff Davis, Marion, Lamar, Forrest, Perry, Greene, George, Jackson, Hancock, Pearl River, Stone, Harrison.

EMPLOYMENT/VOCATIONAL SERVICES

Employment/Vocational Services consist of the following two options:

- Work Activity Services
- Employment Services

Work Activity Services: Work Activity Services are for persons 16 years and older with intellectual/developmental disabilities. These programs provide training to enable individuals to function more independently and become as self-sufficient as possible while preventing institutional placement or reinstitutionalization. The services offered provide for the acquisition of necessary work skills and employment opportunities to allow the individual to remain in the community. The training provided in the work activity program is directed toward increasing productivity and enabling individuals to gain more independence and dignity within their own community.

Each individual entering a work activity service program receives an evaluation of his/her vocational potential. Information from this evaluation is utilized by the individual and staff to develop an individualized plan which identifies the individual's strengths and needs relative to working. From this information, needs for supports are determined in relation to the degree to which the individual requires supervision in order to be successful in the particular work setting.

Each work activity service program provides work and functional skills training. Work must be real, remunerative, productive, and satisfying for transitional or extended work periods. Work must be planned and adequate to keep workers productively occupied. Functional Skills Training may include work related activities, application to or experiencing community resources (community awareness), and daily living skills. Individuals are referred to Vocational Rehabilitation, Supported Employment Services programs, or directly to the private sector to obtain employment.

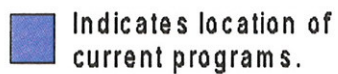
Existing Services: There are 57 work activity centers receiving funds from or operated by the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities. Table 7 provides a listing of the work activity programs and Map 4 indicates the locations of each of the programs.

Currently, 1,065 Mississippians with intellectual/developmental disabilities receive work activity services.

TABLE 7
WORK ACTIVITY PROVIDERS AND SITES

Boswell Regional Center	Brookhaven and Magee
Ellisville State School	Laurel, McComb, Columbus, Heidelberg, Taylorsville, Bay Springs, Prentiss, and Richton
Hudspeth Regional Center	DeKalb, Meridian, Morton, Louisville, Kosciusko, and Kilmichael
MIDD-West	Vicksburg
Mississippi Christian Family Services	Rolling Fork
North Mississippi Regional Center	Bruce, Fulton, Hernando, Verona, Iuka, Oxford, Corinth, Batesville, Pontotoc, Ripley, Grenada, Holly Springs, Booneville, Senatobia, and Clarksdale
Region 5 Mental Health Center	Cleveland and Greenville(2)
Region 6 Mental Health Center	Greenwood
Region 7 Mental Health Center	Starkville
Region 8 Mental Health Center	Brandon, Canton, and Mendenhall
Region 12 Mental Health Center	Columbia, Hattiesburg, Prentiss, Laurel, Purvis, and Waynesboro
Region 13 Mental Health Center	Gulfport
Region 14 Mental Health Center	Lucedale and Gautier
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Biloxi, Picayune, Poplarville, Wiggins, and Gautier
Willowood	Jackson

WORK ACTIVITY PROGRAMS



Supported Employment Services: Supported Employment Services increase the independence, productivity, or integration of a person with intellectual/developmental disabilities in community work settings. Services provided include: employment preparation and vocational training leading to employment; services to assist in transition from school to employment; services to assist transition from sheltered work settings to employment; job finding; job training; and continuing support.

Existing Services: There are five (5) providers of supported employment services receiving funds to serve individuals with intellectual/developmental disabilities. Table 8 lists the Employment Services programs and Map 5 indicates their location.

Currently, 192 Mississippians with intellectual/developmental disabilities receive employment services.

Table 8 EMPLOYMENT SERVICES PROVIDERS AND SITES	
Boswell Regional Center	Magee and Brookhaven
Ellisville State School	Columbus
Hudspeth Regional Center	Whitfield, Meridian, Louisville, Morton, Pearl, Madison, Jackson, Brandon, Kosciusko, Byram, Kilmichael, and Clinton
North Mississippi Regional Center	Oxford, Hernando, Bruce, Verona, Iuka, Corinth, Holly Springs, Batesville, Fulton, Pontotoc, Grenada, Booneville, Ripley, Senatobia, and Clarksdale
South Mississippi Regional Center	Biloxi, Poplarville, Picayune, Gautier, and Wiggins

A map of Mississippi divided into its 67 counties. The counties are labeled with their names. A legend at the bottom left shows a blue shaded square next to the text "Indicates location of current programs." The counties shaded in blue are: Desoto, Marshall, Benton, Alcorn, Tunica, Tate, Tippah, Tishomingo, Prentiss, Union, Lee, Itawamba, Panola, Lafayette, Pontotoc, Quitman, Yalobusha, Calhoun, Clickasaw, Monroe, Tallahatchie, Grenada, Webster, Clay, Bolivar, Sunflower, Leflore, Carroll, Montgomery, Choctaw, Oktibbeha, Lowndes, Washington, Humphreys, Holmes, Attala, Winston, Noxubee, Sharkey, Yazoo, Leake, Neshoba, Kemper, Issaquena, Warren, Madison, Scott, Newton, Lauderdale, Hinds, Rankin, Smith, Jasper, Clarke, Claiborne, Copiah, Simpson, Jefferson, Adams, Franklin, Lincoln, Lawrence, Jeff Davis, Covington, Jones, Wayne, Wilkinson, Amite, Pike, Walthall, Marion, Lamar, Forrest, Perry, Greene, Pearl River, Stone, George, Hancock, Harrison, and Jackson.

FAMILY SUPPORT

Family Support Services reinforce and strengthen the ability of individuals with intellectual/developmental disabilities and their families to secure services and supports which meet their needs. Individuals with intellectual/developmental disabilities have the same needs as all children and adults; however, in some cases, the support they require may be more intense, frequent, and long lasting, requiring the individual/family to obtain services far beyond basic healthcare and education.

There are three major components of Family Support - Family Support Groups, Case Management, and Respite. Family Support Groups provide support for their individual members by providing opportunities for family members' participation in sessions and meetings in which education and support information is presented. They also provide opportunities for participation in special projects to meet identified needs of their family members, and, generally, provide a means for effective communication between families and service providers. Case Management provides support for families by assisting them to access community services and supports for their child. The Case Manager supports families of individuals with intellectual/developmental disabilities by providing them with information on services/supports, resources, family support groups, etc. The availability of adequate service resources enables the individual with intellectual/developmental disabilities to become as independent as possible while enhancing his/her family's support. Respite Services provide families a brief relief in caregiving and allows them the opportunity to pursue and accomplish personal needs.

Existing Services: Each of the Department of Mental Health's comprehensive regional centers has an active family and/or friends support association. Other family support organizations and/or groups are present in local communities throughout the state. These groups include local/county Arc of Mississippi support groups and support groups for families of individuals with specific disabilities such as Autism and Down Syndrome. Case Management is available throughout the state. Please refer to the Case Management section for the locations. Respite services are provided through the regional centers and HCBS-ID/DD Waiver providers. Please refer to the "Respite" section for additional information as well as a description of Support Coordination and respite services provided through HCBS-ID/DD Waiver.

HOME AND COMMUNITY BASED SERVICES – ID/DD WAIVER

The Department of Mental Health and the Division of Medicaid have developed and implemented the Home and Community Based Services - ID/DD Waiver (ID/DD Waiver) to provide services to individuals with intellectual disabilities/ developmental disabilities who; 1) are eligible for Medicaid; 2) require the level of care found at an Intermediate Care Facility for persons with Mental Retardation (ICF/MR); and 3) could be placed in such a facility if services were not available through the ID/DD Waiver. The process for requesting enrollment is initiated through the ID/DD Waiver Support Coordinators at one of the Department of Mental Health's five regional centers.

The ID/DD Waiver Support Coordinators at Boswell Regional Center, Ellisville State School, Hudspeth Regional Center, North Mississippi Regional Center, and South Mississippi Regional Center are responsible for referring individuals to the Diagnostic Services Department at the appropriate regional center to schedule an evaluation. Appendix A shows each facility and their corresponding service area. The ID/DD Waiver Support Coordinators are responsible for developing the written Plan of Care with each individual, assisting the individual in locating and gaining access to all services on the Plan of Care regardless of whether or not it is an ID/DD Waiver service, for ongoing evaluation of the continued effectiveness and appropriateness of the services and supports on the Plan of Care, and conducting annual recertification of an individual's need for ICF/MR level of care.

Currently, there are 2,077 individuals enrolled in the ID/DD Waiver program. Services available through the ID/DD Waiver are: home and community supports (HCS), respite care; residential habilitation; day services for adults; prevocational services; supported employment services; specialized medical supplies; behavior support/ intervention; and occupational therapy, physical therapy, speech pathology, and audiology. Descriptions of these services/supports follow.

Home and Community Supports (HCS). Home and community supports are a range of services for ID/DD Waiver participants who require assistance to meet their daily living needs, ensure adequate functioning in their home and community, and provide safe access to the community. HCS provide:

- Support which may take the form of hands-on assistance (actually performing a task for the person) or cuing to prompt the participant to perform a task (total support, partial physical support, prompting);
- Support and assistance for community participation by accompanying and assisting the individual as necessary to access community resources and participate in community activities.
- Medication administration and other medical treatments to the extent permitted by state law;
- Supervision and monitoring in a person's home, during transportation (if provided), and in community settings;

- Provision and/or assistance with housekeeping which is directly related to the individual's disability and which is necessary for the health and well being of the individual. This activity does not comprise the entirety of the service;
- Assistance with money management, but not receiving or disbursing funds on the part of the participant; and
- Food shopping, meal preparation and assistance with eating, but not the cost of the meals themselves.

Existing Services: Table 9 lists the Home and Community Supports providers and the locations they serve. Services are available statewide through various providers.

TABLE 9 ID/DD WAIVER HOME AND COMMUNITY SUPPORTS PROVIDERS AND SITES	
Boswell Regional Center	Magee and Brookhaven
Ellisville State School	Counties: Jones, Smith, Jasper, Forrest, Pike, Lowndes, Perry, Walthall, Greene, Newton, Wayne, Covington, Jeff Davis, Lamar, and Marion
Hudspeth Regional Center	Counties: Hinds, Rankin, Madison, Lauderdale, Choctaw, Webster, Attala, Montgomery, Scott, Winston, Leake, Sunflower, Holmes, Leflore, Carroll, Bolivar, and Yazoo
Millcreek	Collins (statewide)
North Mississippi Regional Center	Oxford (northern 23 counties)
Nursing Management	Biloxi (statewide)
Oxford HealthCare	Jackson (statewide)
Prime Care, Inc.	Magee (statewide)
South Mississippi Regional Center	Counties: Harrison, Hancock, Stone, George, Jackson, and Pearl River
Southern Healthcare	Jackson (statewide)
Region 14 Mental Health Center	Pascagoula and Lucedale

Respite Care. Respite is provided to individuals unable to care for themselves, on a short-term basis, because of the absence and need for relief of those persons normally providing the care. Respite care can be provided in the recipient's home, a certified community setting or a

licensed ICF/MR. Respite provided in the recipient's home may be provided by a Licensed Practical Nurse (LPN) or a CNA, depending on the needs of the individual served. Respite provided in a community setting is designed to provide families/care givers with an avenue of receiving respite while their family members are in a setting other than their home and where they are safe and provided with activities to meet their interests and needs. Community respite is not provided overnight and cannot be provided in a private residence.

Existing Services: Table 10 lists the Respite Providers and the areas they serve according to the type of respite provided. Respite Services of some type are available statewide through various providers.

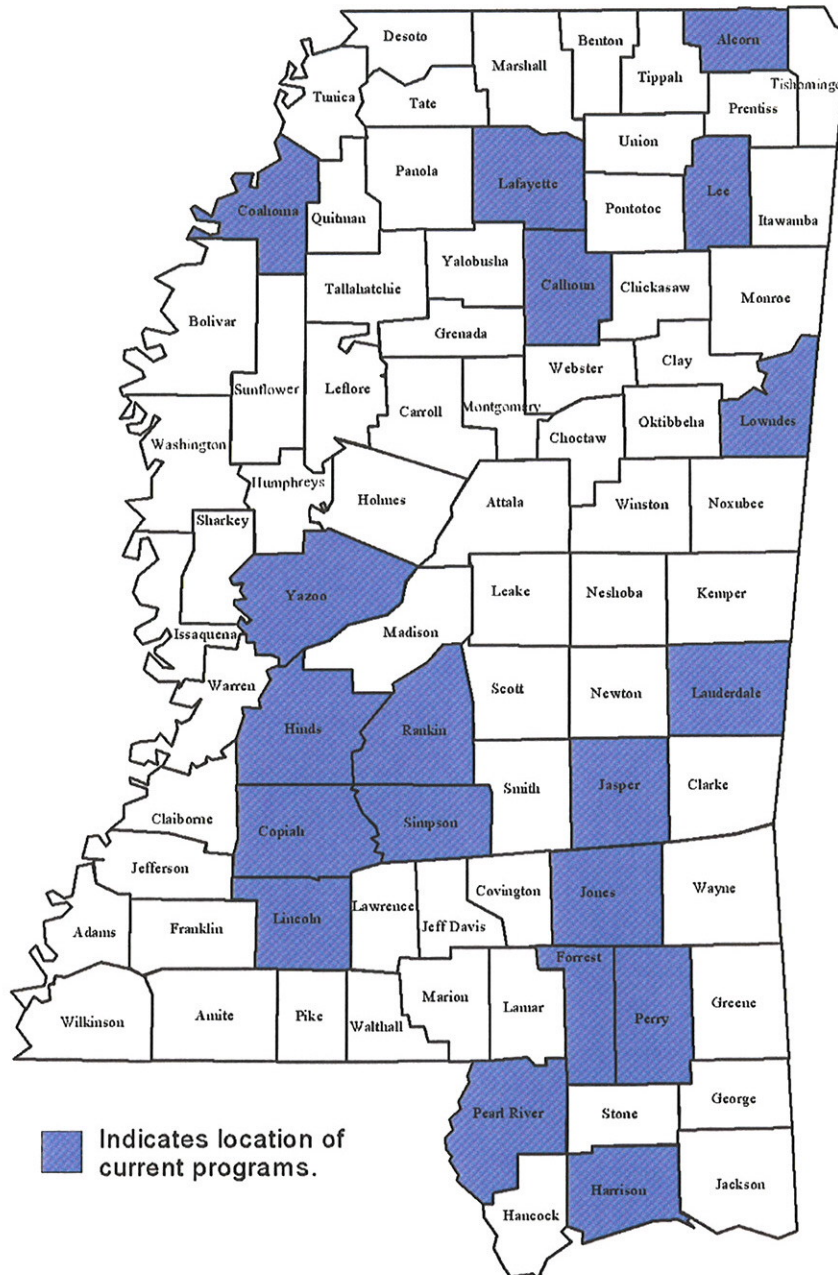
TABLE 10 ID/DD WAIVER RESPITE PROVIDERS AND SITES	
Boswell Regional Center	<i>In home Respite:</i> Brookhaven and Magee <i>Community Respite Sites:</i> Brookhaven and Magee
Ellisville State School	<i>In home Respite Counties:</i> Jones, Smith, Jasper, Forrest, Pike, Lowndes, Perry, Lamar, Newton, Clay, Walthall, Covington, Wayne, Jeff Davis, Lamar, and Marion <i>Community Respite Sites:</i> Columbus and Laurel
Hudspeth Regional Center	<i>In home Respite Counties:</i> Hinds, Rankin, Madison, Lauderdale, Holmes, Yazoo, Attala, Sunflower, Leflore, Bolivar, Winston, Leake, Oktibbeha, Scott, Montgomery, Carroll, Choctaw, Webster, and Washington
Millcreek	<i>In home Respite Counties:</i> Statewide <i>Community Respite Sites:</i> Collins, Grenada, Jackson, Long Beach, Tupelo, Port Gibson, and Escatawpa
North Mississippi Regional Center	<i>In home Respite Counties:</i> Northern 23 counties
Nursing Management	<i>In home Respite Counties:</i> Statewide
Oxford HealthCare	<i>In home Respite Counties:</i> Statewide
Prime Care, Inc.	<i>In home Respite Counties:</i> Statewide
South Mississippi Regional Center	<i>In home Respite Counties:</i> Harrison, Hancock, Stone, George, Jackson, and Pearl River <i>Community Respite Sites:</i> Bay St. Louis and Gulfport
Southern Healthcare	<i>In home Respite Counties:</i> Statewide

Residential Habilitation. Residential Habilitation provides individually tailored supports which assist an individual with the acquisition, retention, or improvement of skills related to living in the community. Services provided include: adaptive skill development, assistance with activities of daily living, community inclusion, transportation, and social and leisure skill development. Habilitation, learning and instruction are coupled with the elements of support, supervision, and engaging participation to reflect the natural flow of learning, practice of skills, and other activities to promote independence as well as care and assistance with activities of daily living when the individual is dependent on others to ensure health and safety. Residential Habilitation providers have staff immediately available 24 hours per day, seven days per week. Staff are able to respond to requests for assistance within five minutes. The provider is responsible for providing an appropriate level of services and supports 24 hours per day during the hours the participant is not receiving day services or is not at work (either because of holiday, weekend, illness). The Residential Habilitation provider shall oversee the participant's health care needs by assisting with making doctor/dentist/optical appointments, transporting, and accompanying the individual to such appointments and, if the individual gives consent, talking with medical professionals.

Existing Services: Table 11 lists the ID/DD Waiver Residential Habilitation providers and Map 6 indicates their location.

TABLE 11 ID/DD WAIVER RESIDENTIAL HABILITATION PROVIDERS AND SITES	
Boswell Regional Center	Magee, Mendenhall, Hazlehurst, and Brookhaven
Ellisville State School	Hattiesburg, Laurel, Heidelberg, Ellisville, Beaumont, and Columbus
Hudspeth Regional Center	Brandon, Pearl, Jackson, Clinton, Meridian
North Mississippi Regional Center	Oxford, Corinth, Tupelo, Bruce, and Clarksdale
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Biloxi, Gulfport, and Picayune
Saint Francis Academy	Picayune

MAP 6 **ID/DD WAIVER RESIDENTIAL HABILITATION PROGRAMS**



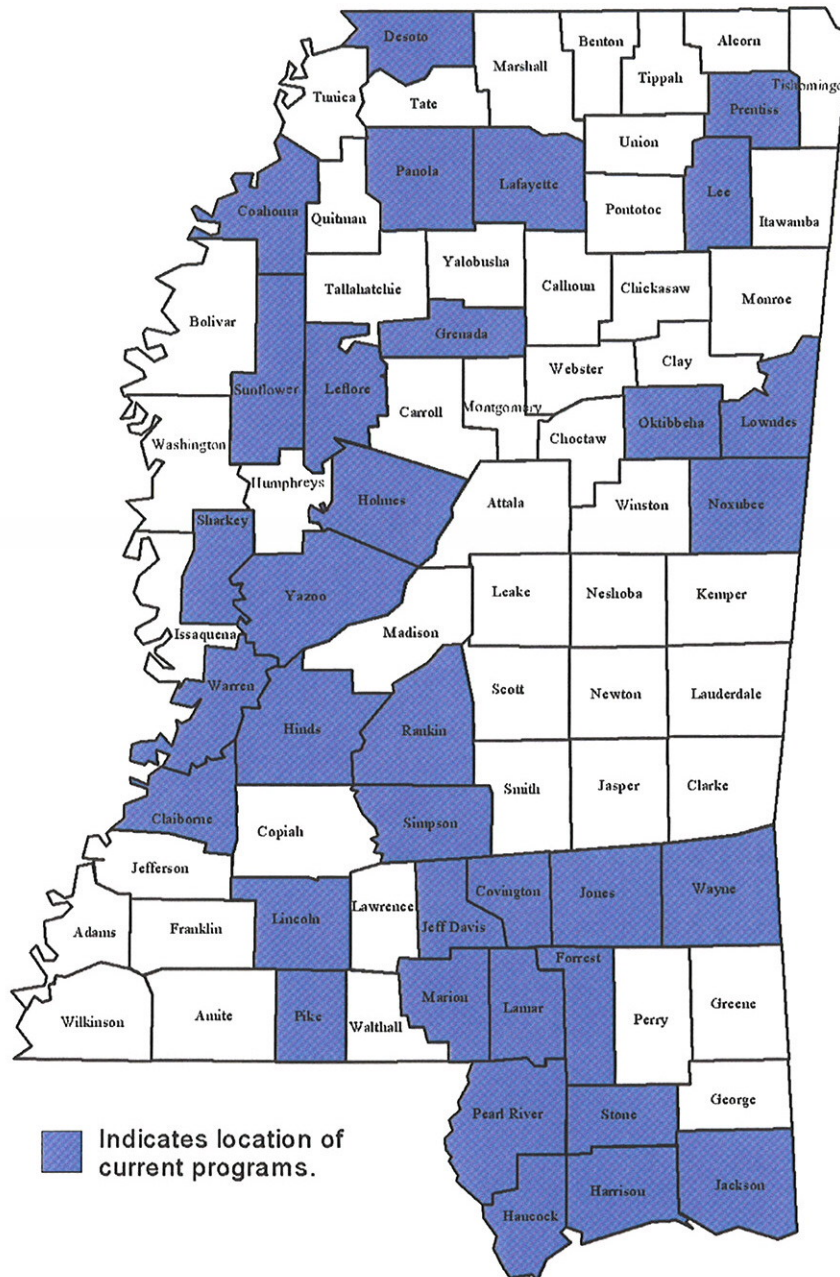
Day Services - Adults. Day services for adults provide assistance with acquisition, retention, or improvement in self-help, socialization, and adaptive skills. Services are provided in a non-residential setting, separate from the participant's private residence or other residential living arrangement. Activities and environments are designed to foster acquisition of skills, appropriate behavior, greater independence, and personal choice. Services are furnished four or more hours per day on a regularly scheduled basis for one or more days per week or as specified in the participant's Plan of care.

Day services for adults focus on enabling the participant to attain or maintain his/her maximum level of independence and shall be coordinated with any behavior, physical, occupational, or speech therapies on the Plan of Care. In addition, day services for adults may reinforce skills or lessons taught in other settings. Services may be furnished both in DMH certified sites and in community settings. Transportation is provided between the recipient's residence and the day services for adults setting, whether it is at a certified site or in the community.

Existing Services: Table 12 lists the Day Services - Adults providers and Map 7 indicates their location.

TABLE 12 ID/DD WAIVER DAY SERVICES – ADULTS PROVIDERS AND SITES	
Boswell Regional Center	Brookhaven and Magee
Ellisville State School	Laurel, McComb, and Columbus
MIDD-West	Vicksburg
Millcreek	Port Gibson, Collins, Grenada, Long Beach, Tupelo, Jackson, and Escatawpa
Mississippi Christian Family Services	Rolling Fork
North Mississippi Regional Center	Clarksdale, Grenada, Tupelo, Batesville, Hernando, and Booneville
Region 6 Mental Health Center	Greenwood, Indianola, and Lexington
Region 7 Mental Health Center	Starkville and Macon
Region 12 Mental Health Center	Waynesboro, Laurel, Hattiesburg, Columbia, Purvis, and Prentiss
Region 14 Mental Health Center	Pascagoula
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Wiggins, Biloxi, Picayune, Poplarville, Gautier
Willowood	Jackson

MAP 7 **ID/DD WAIVER DAY SERVICES – ADULTS PROGRAMS**



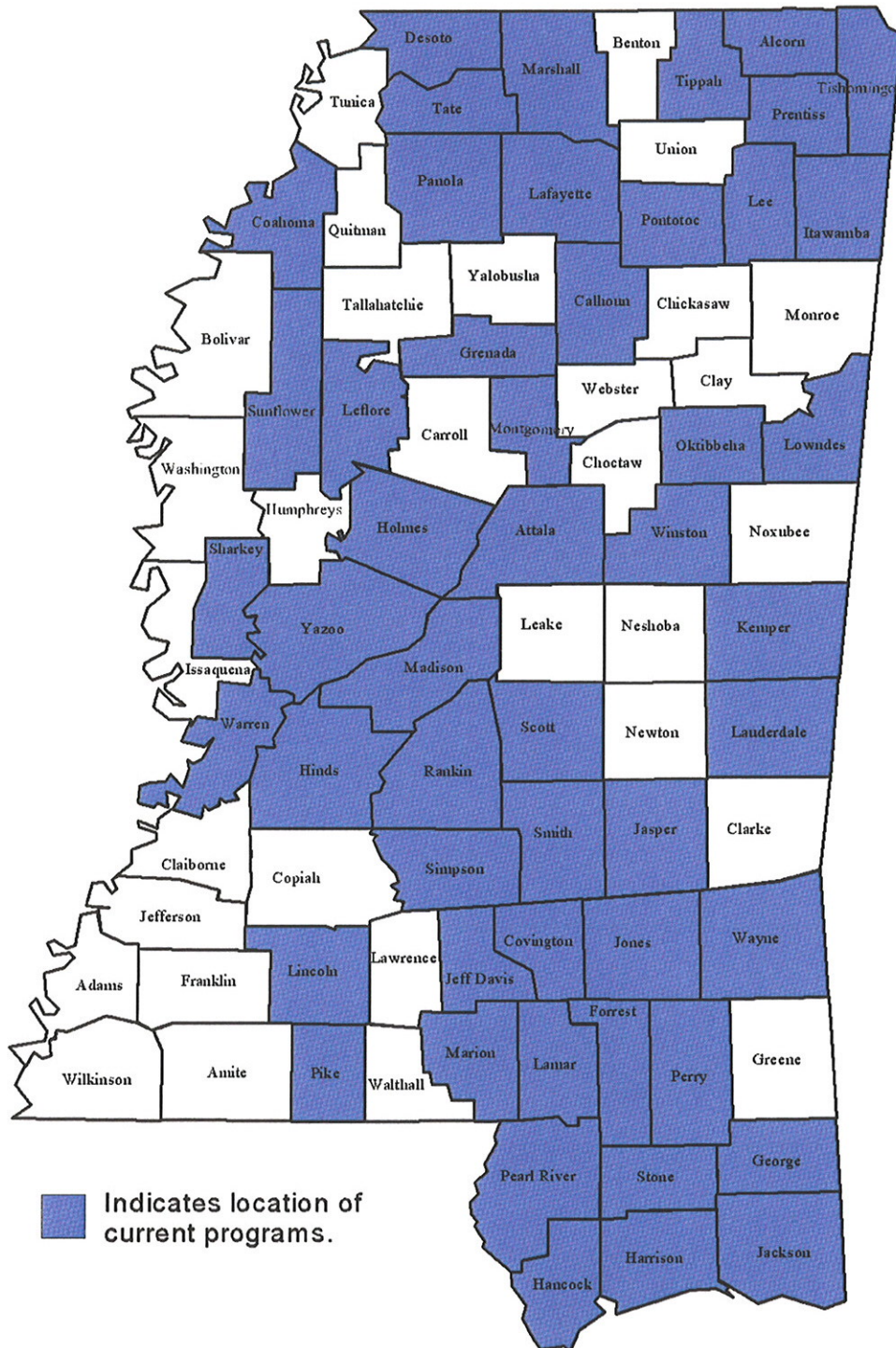
Prevocational Services. Prevocational Services are designed to prepare an individual for paid or unpaid employment, are not job task oriented, and include teaching such concepts as compliance, attending, task completion, problem solving and safety. Transportation is provided between the recipient's place of residence and the prevocational services site as well as to sites in the community. Prevocational services are provided to persons not expected to be able to join the general work force or participate in a transitional sheltered workshop within one year (excluding supported employment programs). Prevocational services are not available under a program funded under section 110 of the Rehabilitation Act of 1973 or IDEA.

Existing Services: Table 13 lists the Prevocational Services providers and Map 8 indicates their location.

TABLE 13 ID/DD WAIVER PREVOCATIONAL SERVICES PROVIDERS AND SITES	
Boswell Regional Center	Brookhaven and Magee
Ellisville State School	Laurel, Heidelberg, Columbus, Taylorsville, Richton, Prentiss, McComb, and Bay Springs
Hudspeth Regional Center	Meridian, Morton, DeKalb, Louisville, Kosciusko, and Kilmichael
MIDD-West	Vicksburg
Millcreek	Collins, Jackson, Long Beach, Escatawpa, Tupelo, and Grenada
North Mississippi Regional Center	Oxford, Fulton, Bruce, Verona, Corinth, Hernando, Holly Springs, Pontotoc, Batesville, Iuka, Grenada, Booneville, Ripley, Senatobia, and Clarksdale
Region 6 Mental Health Center	Greenwood, Lexington, and Indianola
Region 7 Mental Health Center	Starkville
Region 8 Mental Health Center	Brandon, Canton, and Mendenhall
Region 12 Mental Health Center	Waynesboro, Laurel, Hattiesburg, Columbia, Purvis, and Prentiss
Region 13 Mental Health Center	Gulfport and Pearlington
Region 14 Mental Health Center	Lucedale and Pascagoula
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Gautier, Wiggins, Biloxi, Picayune, and Poplarville
Willowood	Jackson

MAP 8

ID/DD WAIVER PREVOCATIONAL SERVICES PROGRAMS



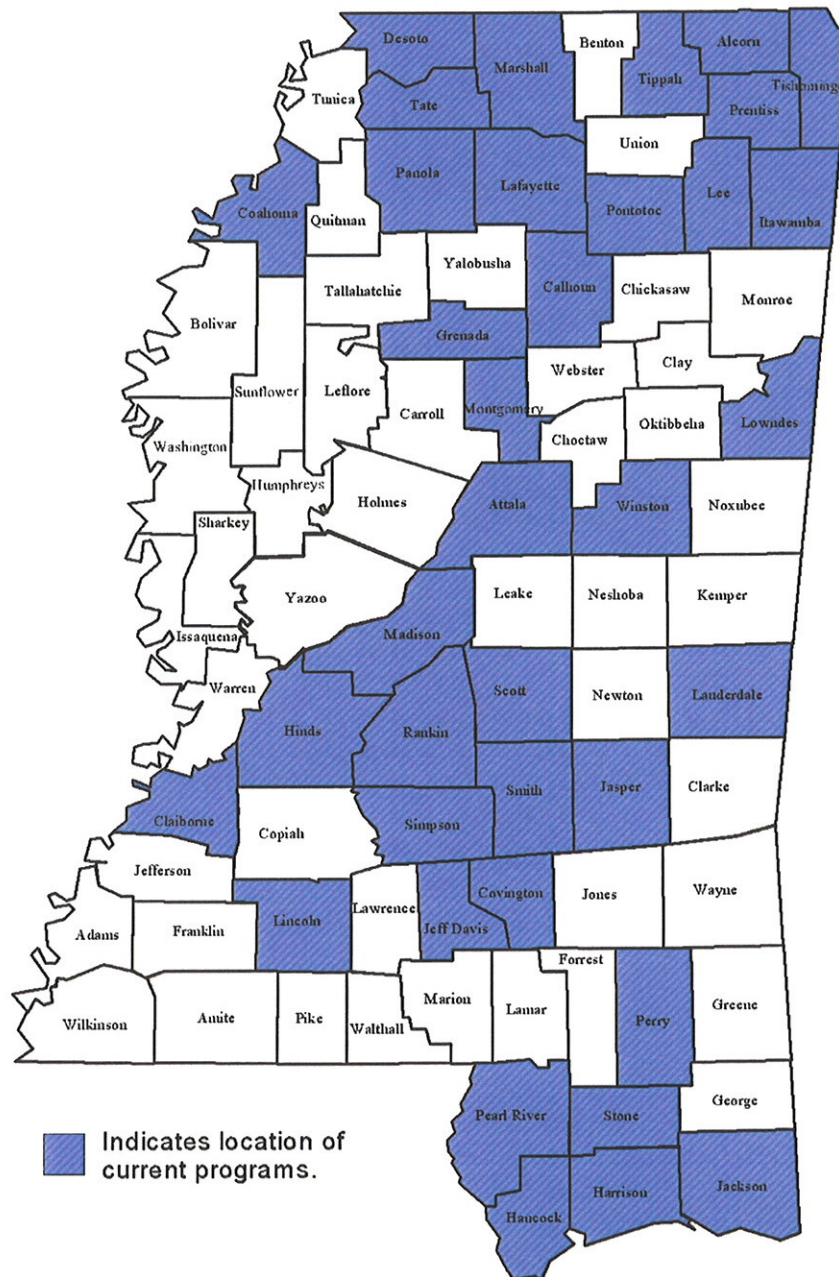
Supported Employment Services. Supported employment services are intensive, ongoing supports which enable participants, for whom competitive employment at or above the minimum wage is unlikely absent the provision of supports, and who, because of their disabilities, need supports to perform in a regular work setting. Supported employment may include assisting the participant to locate a job or develop a job on behalf of the recipient. Supported employment is conducted at work sites where persons without disabilities are employed. Supported employment includes activities needed to sustain paid work by participants, including supervision and training. When Supported employment is provided at a work site where persons without disabilities are employed, payment is made only for the adaptations, supervision and training required by participants as a result of their disabilities. Transportation between the participant's residence and the employment site is a component part of supported employment. Supported employment services rendered through the ID/DD Waiver are not available for individuals who are eligible to receive supported employment from a program funded by either the Rehabilitation Act of 1973, or IDEA.

Existing Services: Table 14 lists the ID/DD Waiver Supported Employment Services providers and Map 9 indicates their location.

TABLE 14 ID/DD WAIVER SUPPORTED EMPLOYMENT SERVICES PROVIDERS AND SITES	
Boswell Regional Center	Magee and Brookhaven
Ellisville State School	Heidelberg, Richton, Taylorsville, Bay Springs, Columbus, and Prentiss
Hudspeth Regional Center	Jackson, Brandon, Pearl, Clinton, Kilmichael, Morton, Kosciusko, Louisville, and Meridian
Millcreek	Port Gibson, Collins, Grenada, Long Beach, Tupelo, Jackson, and Moss Point
Region 14 Mental Health Center	Gautier
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Wiggins, Gautier, Biloxi, Picayune, and Poplarville
St. Francis	Picayune

MAP 9

ID/DD WAIVER SUPPORTED EMPLOYMENT PROGRAMS



Specialized Medical Supplies. Specialized Medical Supplies are those supplies available through the ID/DD Waiver to beneficiaries who are not covered for such supplies under Medicaid State Plan benefits. When Specialized Medical Supplies are not available or have been exhausted under the regular Medicaid State Plan, they may be covered through the ID/DD Waiver if included on the individual's approved Plan of Care. Supplies covered include: specified types of catheters, diapers, and under pads.

Behavior Support/Intervention. Behavior Support/Intervention provides behavioral services for individuals who exhibit a behavior problem which disrupts them from benefitting from other services being provided or cause them to be so disruptive in their environment(s) there is imminent danger of removal/dismissal. The provider works directly with the individual and also trains staff and family members to assist them in implementing specific behavior support/ intervention programs. Services may include: a) assessing the individual's environment and identifying antecedents of particular behaviors, consequences of those behaviors, maintenance factors for the behaviors, and, in turn, how these particular behaviors impact the individual's environment and life; b) developing a behavior support plan, providing assistance to staff/family members in implementing the plan, data collection, and outcome measures that assess the effectiveness of the plan; and c) providing therapy services to the individual to assist him/her in becoming more effective in controlling his/her own behavior either through counseling or by implementing the behavioral support plan; and collaborating with medical personnel and ancillary therapies to promote coherent and coordinated services addressing behavioral issues in order to limit the need for psychotherapeutic medications. The following agencies are certified to provide Behavior Support/Intervention: Boswell Regional Center, Ellisville State School, Hudspeth Regional Center, Millcreek, North Mississippi Regional Center, and South Mississippi Regional Center.

Occupational Therapy, Physical Therapy, and Speech Pathology and

Audiology. These services are provided to ID/DD Waiver participants when they are in excess of therapy services included in the regular Medicaid State Plan, either in amount, duration, or scope. These services are cost effective and necessary to prevent institutionalization. Therapy services will be provided under the regular Medicaid State Plan until the individual reaches his/her maximum health care goal or is no longer eligible for prior approval from the DOM Quality Improvement Organization (QIO) based on medical necessity criteria established for Medicaid State Plan services. Therapy services provided through the ID/DD Waiver begin at the termination of Medicaid State Plan services. Therapy services through the ID/DD Waiver are only available to individuals who are not eligible for said services through the Individuals with Disabilities Education Act or through Expanded EPSDT. The following agencies are certified to provide Occupational Therapy, Physical Therapy, and Speech Pathology and Audiology: MIDD-West, Millcreek, and North Mississippi Regional Center.

LIVING ARRANGEMENT SERVICES

Living Arrangement Services consist of the following options:

- Group Homes
- Apartments
- Home and Community Supports (previously called Supported Living)
- Respite
- Residential Services
- Retirement Homes (See "Services for Older Adults")

Community living services assist persons with intellectual/developmental disabilities in maintaining or increasing their ability to be self sufficient. The specific housing arrangements within this component include group homes, apartments, home and community supports, and independent living. Areas of training within community living include: 1) self help/personal hygiene skills; 2) environmental maintenance and home living skills; 3) use of generic service providers such as the health department and emergency assistance; 4) employment related skill development, i.e., acquisition and utilization of transportation to and from the job and time management; 5) appropriate socialization skills, i.e., developing and using appropriate conversational skills and meeting and maintaining acquaintances and friends; and 6) appropriate use of leisure or recreation time.

Group Homes. Community supervised living arrangements for adults with intellectual/developmental disabilities include group homes that provide 24 hour support in home like settings. Individuals are offered opportunities to gain independence or interdependence in many areas of daily life, including self help skills, money management, management of appointments with other services and programs, use of medications, cooking meals, nutrition, recreation and leisure activities, and participation in a range of individually desired activities and services in the community.

Existing Services: There are 85 community group homes providing services for adults with intellectual/developmental disabilities which receive funds or are operated through the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities. One of these group homes is for individuals with dual sensory impairments and intellectual disabilities. Table 15 lists the Group Home programs and Map 10 indicates the location of each of the programs.

Currently, 852 Mississippians with intellectual/developmental disabilities live in group homes.

TABLE 15
COMMUNITY LIVING – GROUP HOME PROVIDERS AND SITES

Boswell Regional Center	Magee (3), Hazlehurst (2), Wesson (2), Mendenhall (2), and Brookhaven (3)
Ellisville State School	Ellisville (2), Sumrall (2), Richton (2), Waynesboro (2), Hattiesburg (3), Lumberton (2), Columbus, Taylorsville (2), Prentiss (2), Laurel (3), and Bay Springs (2)
Hudspeth Regional Center	Brandon, Meridian (2), Morton (2), Whitfield, Louisville (2), Kosciusko (2), and Kilmichael (2)
Mississippi Christian Family Services	Rolling Fork (2)
North Mississippi Regional Center	Bruce (2), Pontotoc (2), Fulton (2), Oxford, Hernando (2), Corinth (2), Batesville (2), Senatobia (3), Nettleton (2), and Booneville (2)
Region 5 Mental Health Center	Greenville and Cleveland
Region 6 Mental Health Center	Greenwood (2)
Region 7 Mental Health Center	Starkville
Region 14 Mental Health Center	Gautier
South Mississippi Regional Center	Biloxi (2), Gautier (2), Gulfport, Wiggins (2), Poplarville (2), and Picayune
Willowood	Jackson, Clinton and Pearl

A map of Mississippi showing its 39 counties. Twenty-eight counties are shaded in blue, indicating the location of current programs. The shaded counties are: Desoto, Tate, Panola, Lafayette, Pontotoc, Lee, Itawamba, Bolivar, Sunflower, Leflore, Washington, Humphreys, Sharkey, Issaquena, Warren, Hinds, Rankin, Scott, Newton, Lauderdale, Claiborne, Copiah, Simpson, Smith, Jasper, Clarke, Jefferson, Lincoln, Lawrence, Jeff Davis, Covington, Jones, Wayne, Adams, Franklin, Pike, Walthall, Marion, Lamar, Forrest, Perry, Greene, Wilkinson, Annette, Hancock, Pearl River, Stone, Harrison, and Jackson. The unshaded counties are: Tuwica, Marshall, Benton, Alcorn, Tishomingo, Prentiss, Union, Claiborne, Monroe, Yalobusha, Calloway, Chickasaw, Grenada, Webster, Clay, Carroll, Montgomery, Choctaw, Oktibbeha, Lowndes, Holmes, Attala, Winston, Noxubee, Yazoo, Madison, Leake, Neshoba, Kemper, Hinds, Rankin, Scott, Newton, Lauderdale, Claiborne, Copiah, Simpson, Smith, Jasper, Clarke, Jefferson, Lincoln, Lawrence, Jeff Davis, Covington, Jones, Wayne, Adams, Franklin, Pike, Walthall, Marion, Lamar, Forrest, Perry, Greene, Wilkinson, Annette, Hancock, Pearl River, Stone, Harrison, and Jackson.

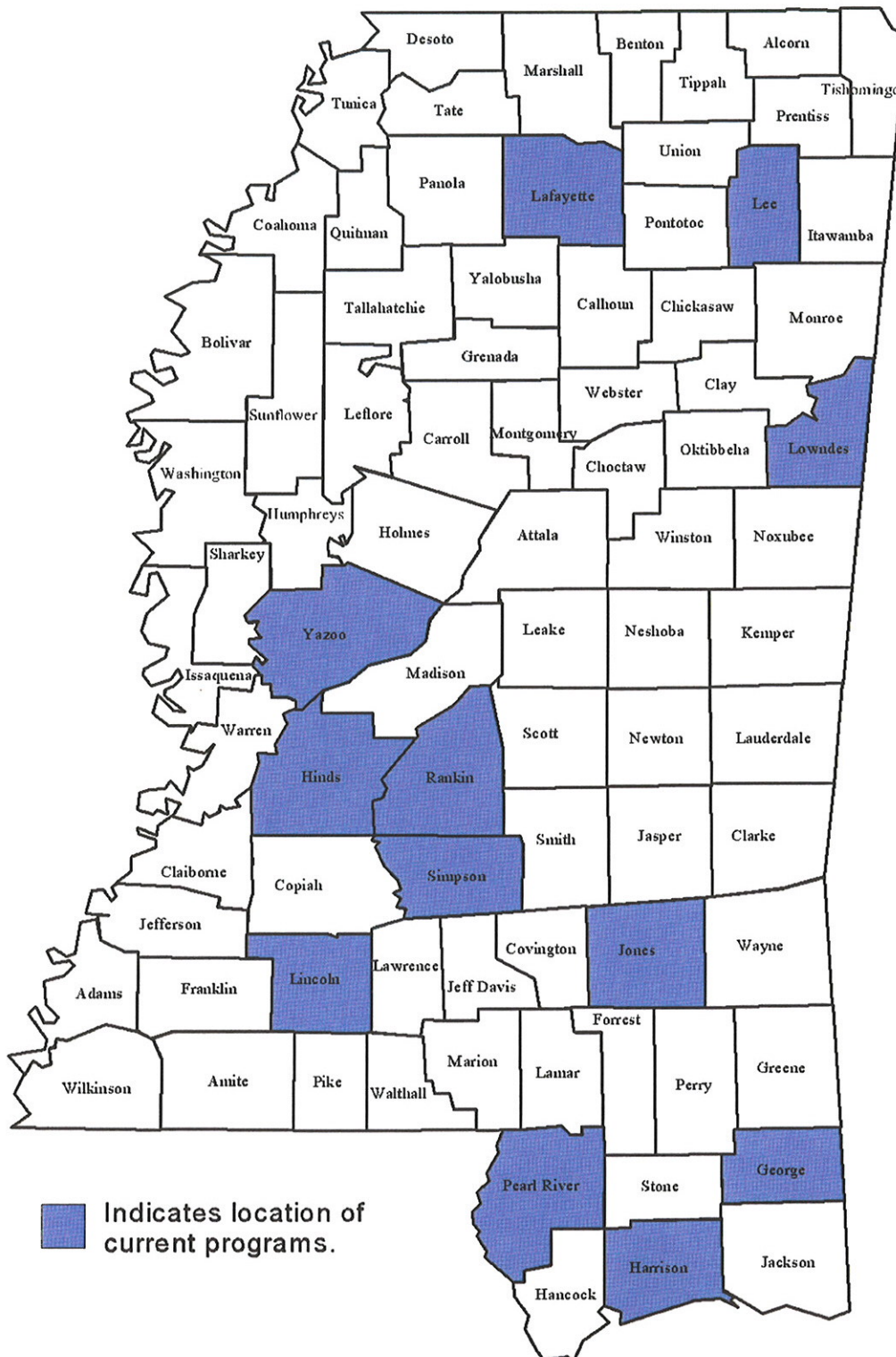
Apartments: This type of community living arrangement is for adults with intellectual/developmental disabilities who choose to live in an apartment setting without live-in staff. Supervision and habilitative training are provided as needed by program staff. Community living coordinators live close by but not in the apartment of the individual with intellectual/developmental disabilities.

Existing Services: There are nine (9) apartment programs provided in communities across the state through the comprehensive regional centers, regional mental health/intellectual and developmental disability centers, and/or nonprofit, private programs. Table 16 lists the Supervised Apartment programs and Map 11 indicates the location of each of the programs.

Currently, over 100 Mississippians with intellectual/developmental disabilities live in supervised apartments.

TABLE 16 COMMUNITY LIVING – APARTMENT PROVIDERS AND SITES	
Boswell Regional Center	Magee and Brookhaven
Ellisville State School	Ellisville, Laurel, and Columbus
Hudspeth Regional Center	Brandon, Pearl, Clinton, and Jackson
North Mississippi Regional Center	Oxford and Tupelo
Region 14 Mental Health Center	Lucedale
Region 15 Mental Health Center	Yazoo City
South Mississippi Regional Center	Gulfport, Biloxi, and Picayune
Saint Francis Academy	Picayune
Willowood	Jackson

MAP 11 **COMMUNITY LIVING – APARTMENT PROGRAMS**



Home and Community Supports: These supported living arrangements in the community include independent living situations where an adult with intellectual/developmental disabilities chooses to live without the need for extensive supervision. A person living in this type of arrangement in the community may be enrolled in a case management program and receive assistance with accessing other needed services.

Existing Services: Over 400 individuals with intellectual/developmental disabilities live in the community in an independent living arrangement according to those records available to the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities through case management services and/or work activity/employment services.

Comprehensive Regional Center Living Arrangements: The comprehensive regional centers provide a full array of services for persons with intellectual and developmental disabilities as intermediate care facilities for persons with mental retardation (ICFs/MR). For those individuals who require residential living arrangements with the level of care found at an ICF/MR, admission may be recommended. However, the person must first be found eligible and appropriate for ICF/MR placement, and then, ultimately, it is the individual's and family's choice as to whether or not this setting will best meet their needs for services and supports. In addition to providing a supervised 24-hour setting, the regional facility provides active treatment for those individuals. This may involve a range of personal care, training, educational, vocational, recreational, social, medical, and counseling services, based on individual strengths and needs. These services include a variety of needed support services to meet special needs.

Persons living at the ICFs/MR participate in individualized programs which are developed through a comprehensive interdisciplinary evaluation and program planning/monitoring process. Information from parents and other family members is integrated into this plan. The interdisciplinary staff may include professionals in audiology, medical/nursing, nutrition, psychology, social work, speech pathology, recreation, physical therapy, occupational therapy, and education.

Training programs can include activities and opportunities for developing skills in daily living; enhancing emotional, personal, and social development; providing experiences needed to gain useful and meaningful occupational or employment skills; and structured academic experiences through a varied curriculum. Recreational programs provide a range of activities and opportunities to explore and further develop interests and skills in the use of leisure time, as well as to enhance social interaction, self-expression, and personal well-being. Professional staff also offer guidance in special skill areas needed to achieve specific goals. Individuals receive assistance in identifying and understanding personal goals and in solving problems which interfere in working toward those goals or in other areas of daily life.

Existing Services: There are five comprehensive regional centers in the state operated by the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities. The five comprehensive regional centers serving Mississippians are distributed geographically by regions throughout the state and are: North Mississippi Regional Center in Oxford (serves 23 counties); Hudspeeth Regional Center at Whitfield (serves 22 counties); South Mississippi Regional Center in Long Beach (serves 6 counties); Boswell Regional Center in Magee (serves as a transition center for adults with mental retardation from across the state); and Ellisville State School in Ellisville (serves 31 counties). Ellisville State School is the only comprehensive regional center

to serve children younger than five years of age who have severe/profound mental retardation and for whom residential services are determined appropriate. Appendix A shows the corresponding regions of the five comprehensive regional centers' service areas. Each center is licensed and certified by the Mississippi State Department of Health, Division of Health Facilities Licensure and Certification.

The four regional centers which serve individuals under the age of 22 employ certified special education teachers and are State Department of Education approved programs. The programs at Ellisville State School, Hudspeth Regional Center, North Mississippi Regional Center, and South Mississippi Regional Center are all accredited by the Southern Association of Colleges and Schools (SACS) and State Department of Education.

Presently, North Mississippi Regional Center, Hudspeth Regional Center, South Mississippi Regional Center, and Ellisville State School collaborate with local school districts to serve some of the students for whom such placement is appropriate by facilitating the attendance of those students in that district's community/local area schools.

Specialized Treatment Facility: The Mississippi Adolescent Center (formerly Juvenile Rehabilitation Facility) is a residential facility dedicated to providing an array of rehabilitation service options to adolescents with intellectual disabilities. Located in Brookhaven, MS, this 48-bed complex serves youth who meet commitment criteria for intellectual and developmental disabilities and whose behavior makes it necessary for their treatment to be provided in a specialized treatment facility. Though most individuals served are between the ages of 13 and 21, persons under age 13 may be considered for services on an individual basis as space is available.

Other Living Arrangements: There are living arrangements required for some individuals with intellectual/developmental disabilities that, because of the nature of the individual's disability require specialized and/or creative approaches. Such is the case with older adults with intellectual/developmental disabilities. Ellisville State School, North Mississippi Regional Center, and Hudspeth Regional Center provide services to meet the needs of older individuals with developmental disabilities through the operation of their licensed intermediate care facilities for the mentally retarded. Services are aimed at maintaining the skills of individuals 55 years of age and older, while providing choices through specialized geriatric programs designed to meet their health, physical, and social needs.

SERVICES FOR OLDER ADULTS

Services for older adults with intellectual/developmental disabilities consist of the following components:

- Living Arrangements
- Day Activities
- Case Management and Other Support Services

Concern for meeting the service and support needs of older adults with intellectual disabilities/developmental disabilities is significant in Mississippi and the Department of Mental Health. Services in the community for persons age 50 and older with intellectual/developmental disabilities are being developed to provide a viable alternative for this population outside traditional placements in nursing homes and intermediate care facilities. Service components include retirement homes as well as other types of living situations such as living in one's own home with minimal assistance/support, living in a supervised apartment, or in a group home.

Retirement Living: Retirement living offers the older adult with intellectual/developmental disabilities a living arrangement to which he or she can retire. Retirement living provides an excellent alternative to traditional community living arrangements. The program offers an individual the alternative of retirement and activities that continue to maintain and even improve their quality of life. Individuals participating in Retirement Living are involved in community programs such as church groups, Retired Senior Volunteer Programs, and community nutrition sites. Their psychosocial interactions with the members of these programs provide excellent peer relations and support. Retirement Living arrangements are supported 24-hours a day by staff who monitor the changing needs of the individuals.

Existing Services: Retirement living arrangements for older adults with intellectual/developmental disabilities are available through Boswell Regional Center in Magee and Ellisville State School in Laurel.

There are also four ICF/MR licensed group homes which offer retirement opportunities. North Mississippi Regional Center has two homes in Fulton and South Mississippi Regional Center has two homes in Wiggins. Currently, 39 Mississippians with intellectual/developmental disabilities live in the retirement homes.

Other Services: Other services for older adults with intellectual/developmental disabilities include day activities and support services such as volunteer support, recreation and leisure education, food/nutritional assistance, transportation, and health care evaluation and monitoring. A significant service component for accessing and providing continuity of services is Case Management. Also, for those individuals with the specific need and who are Medicaid eligible, Elderly Psychosocial Rehabilitation is available through some of the community mental health/mental retardation centers. Please see "Support Services" section for information on this service.

Currently, over 400 Mississippians over the age of 50 receiving services through community programs funded or operated under the auspices of the Bureau of Intellectual and Developmental Disabilities.

PROTECTION AND ADVOCACY SERVICES

The following are components of Protection and Advocacy services:

- Case Management
- Comprehensive Intellectual and Developmental Disability Centers
- Family Support and Education
- Private Non Profit Support/Advocacy

Protection and advocacy for the individual with intellectual/developmental disabilities in the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities' Comprehensive Service System is accomplished through the following approaches and/or services:

Case Management: Advocacy and protection are supported through the inherent nature of case management: accessing needed services; planning and coordinating services, and monitoring of services through follow ups. (See Case Management section of this plan for additional information.)

Comprehensive Regional Centers: Each of the five comprehensive regional centers utilize staff members as advocates to ensure individuals are free from abuse and neglect. These staff members are responsible for reporting any alleged incidents of abuse/neglect/ exploitation of the individuals residing in the centers to the center's investigator. The investigator must investigate the incidents and is responsible for reporting any applicable incidents to the Attorney General's Office, Department of Health, and when the individual is under 21, also to the Department of Human Services. It is the mission of each center to ensure that each citizen with intellectual disabilities will have every opportunity to develop his/her individual capabilities to the fullest in the least restrictive environment possible while receiving care consistent with basic human dignity and being assured that his/her legal rights will be protected.

Furthermore, each center operates a Human Rights/Advocacy Committee which receives complaints filed by or on behalf of individuals residing in the centers regarding any alleged violations of individuals' rights. The Committees have at least five members representing a broad base of consumer groups and professionals appointed by the Regional Center Director with confirmation by the Department of Mental Health Executive Director. At least annually, the Human Rights/Advocacy Committee submits a written report of activities and recommendations to the Board of Mental Health.

Family Support Groups and Education: Providing strong, positive, and consistent support for families of individuals with intellectual/developmental disabilities is vital. Support for the family is necessary from the first day that the family suspects or learns they have a child with intellectual/developmental disabilities. The emphasis of family support provided through agencies, programs, or services should be to provide positive, accurate, person and family

centered support; to support the roles/functions of the family and the individual; and to empower families, not assume the family's responsibilities.

Education efforts address intellectual/developmental disabilities and the services that will appropriately address the needs of the individual and family. Each of the five comprehensive regional centers has an active family and/or friends support association. These groups provide support to family members, conduct activities to provide support for family members with intellectual/developmental disabilities, and identify and implement directions for effective communication and collaboration with the appropriate staff of the respective center.

Family support organizations and/or groups are present at the local and state levels in Mississippi. These include local branches/organizations of the state level ARC as well as the Mississippi Friends Organization.

Private Nonprofit Agency: The Mississippi Protection and Advocacy System for the Developmentally Disabled (P & A) was established to protect and advocate for the rights of individuals with developmental disabilities through negotiations as well as administrative and legal avenues. This system is independent of any agency, organization, or governmental unit providing treatment, services, or habilitation to individuals with developmental disabilities, and receives primary funding through P.L. 106 402, which authorizes state's to develop and implement a protection and advocacy system.

QUALITY ASSURANCE SERVICES

The Bureau of Intellectual and Developmental Disabilities promotes the provision of quality services to meet the needs of individuals with intellectual/developmental disabilities. At the same time, the Bureau realizes there is a responsibility to the public to provide assurances that other external monitoring agencies concur with the quality of such services. The Bureau of Intellectual and Developmental Disabilities' comprehensive regional centers are monitored by numerous agencies as follows:

Mississippi State Department of Health, Division of Health Facilities

Licensure and Certification: The Mississippi State Department of Health, Division of Health Facilities Licensure and Certification is responsible for the review of health care facilities in Mississippi and licensing of those facilities which meet appropriate standards. The comprehensive regional centers of the Department of Mental Health are reviewed annually. ICF/MR units are licensed by the Mississippi State Department of Health, Division of Health Facilities Licensure and Certification.

Office of the Governor, Division of Medicaid: The Division of Medicaid reviews the level of care of all Medicaid recipients who reside in the comprehensive regional centers at least twice each year. At present, over 90% of the individuals served in the comprehensive regional centers receive some form of Medicaid. Subsequently, over 90% of the individuals' habilitation plans are reviewed twice each year by an outside agency. These agencies are also required to visually observe each Medicaid recipient to ascertain their general appearance, health, and treatment received. The Division of Medicaid also reviews the HCBS - ID/DD Waiver program by visiting the Support Coordinators at each regional center once a year.

Southern Association of Colleges and Schools: Those comprehensive regional centers that serve individuals less than 21 years of age have educational centers accredited by the Southern Association of Colleges and Schools. This regional organization reaccredits the educational programs on an annual basis. This accreditation process assures that the educational program meets the standards for disability services as well as educational standards for citizens in community school programs.

Mississippi Department of Education, Office of Special Education: The Mississippi Department of Education, Office of Special Education is to conduct in depth, on site reviews of the educational program for individuals less than 21 years of age. This review analyzes a sample portion of all individuals' educational records. In addition to the review of the educational program, the Mississippi Department of Education examines the evaluation techniques utilized to determine the need for an individual's placement in the institutional education program.

Bureau of Intellectual and Developmental Disabilities: In addition to external monitoring agencies, quality assurance responsibility also lies within the Bureau of Intellectual and Developmental Disabilities. The Bureau of Intellectual and Developmental Disabilities and its monitoring teams regularly visit and review the community services programs for compliance with the Department of Mental Health's Standards for Community Mental Health/Intellectual and Developmental Disabilities Services and the *Bureau of Intellectual and Developmental Disabilities Record Guide*.

RESPITE SERVICES

Respite services include those offered at the comprehensive regional centers as well as community based respite. Short term respite is one of the most sought after services provided by the comprehensive regional centers for individuals with intellectual/developmental disabilities who live at home with their families.

This service component for individuals with intellectual/developmental disabilities is short term, generally not exceeding a period of 60 to 90 days except for HCBS-ID/DD Waiver ICF/MR respite services which cannot exceed 30 days. Services are available on an emergency or planned basis when temporary, intensive, specialized care is needed. It also is utilized when the family needs respite from providing ongoing supervision and care for their relative with intellectual/developmental disabilities.

Existing Services: Presently, intensive short term residential respite services for individuals with intellectual/developmental disabilities through the Department of Mental Health/Bureau of Intellectual and Developmental Disabilities funded programs are available at the following five comprehensive regional centers: Boswell Regional Center; Ellisville State School; Hudspeth Regional Center; North Mississippi Regional Center; and South Mississippi Regional Center. Appendix A indicates their location and areas served. Respite is also available through the Home and Community Based Services - ID/DD Waiver. Please see the Home and Community Based Services - ID/DD Waiver section for information on Respite services.

SUPPORT SERVICES

Support Services consist of those therapeutic and case management services provided by community mental health service providers for individuals with intellectual disabilities/developmental disabilities who are eligible for Medicaid and are approved for services by a physician. These Medicaid services include: School Based Services; Mental Illness Management Services; Individual Therapeutic Support; Day Support; and Elderly Psychosocial Rehabilitation. Descriptions follow.

School-Based Services: These services are professional therapeutic services provided in a school setting that is more intensive than traditional case management services. School-Based Services may be provided to children with intellectual/developmental disabilities and include consultation and crisis intervention. Consultation is professional advice and support provided by a therapist to a child's teachers, guidance counselors, and other school professionals, as well as to parents, community support providers, treatment teams, court systems, etc. Consultation may be provided as a form of early intervention when no formal treatment process has been established. Parent and/or teacher conferences are included in this service component. Crisis Intervention is therapeutic engagement at a time of internal or external turmoil in a child's life with a focus on producing effective coping. Crisis intervention strategies may be directed toward alleviating immediate personal distress, assessing the precipitants that produced the crisis, and/or developing preventative strategies to reduce the likelihood of future similar crises. This service may be provided to family members when their involvement relates directly to the identified needs of the child.

Existing Services: There are two Day Treatment Providers- Region III Mental Health Center and Weems Mental Health Center. Currently, 149 children receive Day Treatment. Locations are Tupelo and Meridian.

Mental Illness Management Services (MIMS): MIMS are intensive case management services with a therapeutic focus. MIMS may be provided to children or adults with intellectual/developmental disabilities in their current living situation, natural environment, and other appropriate community settings. The scope of Mental Illness Management Services is sufficient to ensure ongoing evaluation and control of psychiatric symptoms while restoring functioning necessary for successful community living. MIMS are distinguished from traditional case management services by the higher level of professional expertise/skill of the providers, required to effectively address the more complex mental health needs of the individual receiving the service. Additionally, MIMS provides indirect services to support program participants in the community (i.e., family support, collaboration of other programs/services).

Individual Therapeutic Support. This support is the provision of one-on-one supervision of an individual during a period of extreme crisis in which hospitalization would be necessary without this service. This service may be provided to children or adults with intellectual/developmental disabilities. The service may be provided in the individual's home, school, or any other setting that is part of his/her environment. This service provides therapeutic support during a time when the individual is unable to participate in regular treatment activities. The focus is on the reduction/elimination of acute symptoms.

Day Support: Day Support is a program for adults with intellectual/developmental disabilities of structured activities designed to support and enhance the role functioning of individuals who are able to live fairly independently in the community through the regular provision of structured therapeutic support. Program activities aim to improve reality orientation, social adaptation, physical coordination, daily living skills, time and resource management, and task completion as well as to alleviate such psychiatric symptoms as confusion, anxiety, isolation, withdrawal and feelings of low self-worth. The activities provided must include, at a minimum, the following: group therapy, individual therapy, social skills training, coping skills training, and training in the use of leisure-time activities.

Existing Services: There are three Day Support Providers- Southwest Mississippi Mental Health Center, Life Skills and Pine Belt Mental Health. Currently, 136 individuals are receiving Day Support. Locations include McComb, Natchez, Gloster, Brookhaven, Indianola, and Lexington.

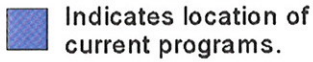
Elderly Psychosocial Rehabilitation: This is a program of structured activities designed to support and enhance the ability of the older adult with intellectual/developmental disabilities to function at the highest possible level of independence in the most integrated setting appropriate to their needs. The activities target the specific needs and concerns of the elderly, while aiming to improve reality orientation, social adaptation, physical coordination, daily living skills, time and resource management, task completion and other areas of competence that promote independence in daily life. Activities in the program are designed to alleviate psychiatric symptoms as confusion, anxiety, disorientation, distraction, preoccupation, isolation, withdrawal and feelings of low self-worth.

Existing Services: There are currently four (4) Elderly Psychosocial Rehabilitation programs provided by regional mental health/intellectual and developmental disability centers. Table 17 lists the Elderly Psychosocial Rehabilitation programs and Map 12 indicates the location of each of the programs.

Currently, 44 older adults receive Elderly Psychosocial Rehabilitation services.

TABLE 17 ELDERLY PSYCHOSOCIAL REHABILITATION PROGRAMS AND SITES	
Region 4 Mental Health Center	Corinth and Ashland
Region 5 Mental Health Center	Greenville, Rolling Fork, and Cleveland
Region 6 Mental Health Center	Greenwood
Region 12 Mental Health Center	Columbia and Laurel

ELDERLY PSYCHOSOCIAL REHABILITATION PROGRAMS



GOALS AND OBJECTIVES

The Bureau of Intellectual and Developmental Disabilities has established the following **Goals and Objectives for FY 2010** with emphasis on meeting the needs and choices of individuals, maximizing available resources and supports, and promoting continuous quality improvement to allow individuals to remain in or return to their local communities.

The time line for all objectives is **July 1, 2009 to June 30, 2010**.

PUBLIC AWARENESS

GOAL. Promote awareness about available services/support options for persons with intellectual/developmental disabilities.

Objective 1. Increase the number of public awareness activities occurring in conjunction with Intellectual/Developmental Disabilities Month.

Activities: Inform all service providers and media of designation of March as Intellectual/Developmental Disabilities Awareness Month.

Obtain proclamation from Governor Barbour and send out press release.

Schedule "Day at the Capitol" and invite all Legislators to attend and learn more about individuals with intellectual/developmental disabilities, available services/supports, and needs for the expansion of services.

Assist service/support providers with development of media kits which focus on the annual Intellectual/Developmental Disabilities Awareness Month theme during March 2010.

Evaluation. Document all public awareness activities conducted by the Bureau of Intellectual and Developmental Disabilities and programs operating under its auspices to promote better understanding of individuals with intellectual/developmental disabilities during Intellectual/Developmental Disabilities Awareness Month. Document the increase in activities in FY 10 from FY 09.

Objective 2. Conduct a statewide abilities awareness campaign in FY 10 to decrease stigma of "mental retardation" as well as continue to promote the replacement terminology "intellectual/developmental disabilities."

Activities: Develop and disseminate literature to newspapers, schools, faith based organizations, and public and private agencies that promotes the use of replacement terminology while highlighting the abilities of individuals with intellectual/developmental disabilities and the benefits of community inclusion.

Compile listing of all media events.

Evaluation. Report and estimate the number of individuals who received information by tracking the number of printed materials including press releases, newspaper clippings, brochures, and flyers as well as tracking the number of interviews and presentations.

PLANNING

GOAL. Continuously collect, analyze, and utilize data and information to increase service and support options to meet the needs and desires of individuals with intellectual/developmental disabilities.

Objective 1. Analyze available data on the number of individuals reaching 18 years and becoming eligible for BIDD adult services.

Activities: Review and compare available BIDD data on all individuals already receiving or waiting for services/supports who are reaching 18 years of age.

Obtain information from the Department of Education on the number of individuals receiving special education services who are eligible for graduation/certificate of completion.

Review and compare information on data gathered regarding individuals who are entering and exiting services to determine service capacity.

Evaluation. Develop a report forecasting possible increases in number of new adults entering the BIDD system and the system's ability to provide supports.

Objective 2. Analyze existing data on the number of individuals 50 years of age and older to determine the number still living with their parents/family members to assist in planning for possible future community living support needs.

Activities: Compile available data on all individuals 50 years or older who are currently receiving services or waiting for services and still live with parents or other family members.

Develop a report showing which supports other than community living are currently being utilized by these older adults.

Evaluation. Develop a report forecasting possible increases in number of community living supports needed to help older adults currently living with parents or family members remain in the community.

Objective 3. Begin the development of a BIDD Self Advocacy Committee (SAC) comprised of individuals with intellectual and/or developmental disabilities, family members, and consumer advocates that will work with the BIDD, the BIDD Advisory Council and the Division of Consumer Family Affairs to engage feedback and guide outcomes of services being provided.

- Activities:** Identify potential SAC Members and request their participation on the committee.
- Assist the SAC in developing a collaborated process of communication with the BIDD and the BIDD Advisory Council.
- Provide training to SAC members on self advocacy and the state service delivery system.
- Evaluation.** SAC will provide the BIDD Advisory Council with a report detailing their progress and goals for the further development of the committee.

SERVICES/SUPPORTS

GOAL. Provide options for quality community services and supports to individuals with intellectual/developmental disabilities.

- Objective 1.** Continue to provide an array of community services and supports as funding allows including:
- Assistive Technology Evaluation Services
 - Case Management
 - Community Living
 - Diagnostic and Evaluation Services
 - Early Intervention/Child Development
 - Employment Program Services
 - Home and Community Based Services - ID/DD Waiver
 - Respite (in-home, community and ICF/MR)
 - Home and Community Supports
 - Residential Habilitation
 - Prevocational Services
 - Day Services – Adult
 - Supported Employment
 - Specialized Medical Supplies (for example, disposable briefs, catheters, and bed pads)
 - Behavior Support/Intervention
 - Occupational, Physical, and Speech/Language/Audiology Services
 - Support Coordination
 - Elderly Psychosocial Services
 - Work Activity Services
- Activities:** Generate and/or obtain monthly reports to carefully monitor the types, amounts, and costs of services provided in an effort to maximize resources and prevent any reductions in services due to the severe budget constraints DMH faces in FY 10.
- Evaluation.** Report on utilization of services in FY 10 and determine if there is sufficient justification to continue to provide the same amounts/types of services or the need to shift resources.

Objective 2. Increase the utilization of supported employment services which provide meaningful work opportunities and community integration for individuals with intellectual/developmental disabilities.

Activities: Provide ongoing training to service providers on the utilization of supported employment and develop relationships with additional resource groups.

Analyze data to determine increases or decreases in the number of people receiving supported employment as well as funds expended for supported employment. Determine the barriers to expanding and/or maintaining supported employment services.

Determine any decreases or increases in the number of people receiving other day options (ie.day support, work activity) as well as funds expended for such.

Evaluation. Develop a report detailing needed changes and alternative methods of service provision and funding sources to encourage the use of supported employment services for individuals.

Objective 3. The Bureau of Intellectual and Developmental Disabilities will begin to explore the development of a uniform reporting process for use by all service providers to supply current numbers/information about individuals receiving community services and those requesting community services.

Activities: Obtain information about the current methods of information compilation in use by all service providers.

Analyze current information being provided by service providers and determine any and all additional information that needs to be reported to the Bureau of Intellectual and Developmental Disabilities.

Develop an offsite automated reporting system that all service providers may access for monthly reporting of information requested by BIDD.

Evaluation. Report indicating the functionality of this process and the ability to extrapolate the information needed by BIDD.

Objective 4. Continue to apply for additional funds to expand services/number of individuals served in BIDD programs, including matching funds for a Medicaid waiver program targeted specifically for individuals with autism spectrum disorders.

Activities: Provide needed documentation and justification gathered as a result of the activities included in this Plan to the DMH Legislative Team to assist in justifying the need for expanded services.

Evaluation. Documentation of the DMH's request and justification for additional funds to expand BIDD services, with a special emphasis on services for people with autism.

Objective 5. Provide day services and supports for children birth through 5 years with autism spectrum disorders and their families.

Activities: Seek Medicaid approval to reimburse two pilot programs specifically designed for children ages 3 through 5 with autism spectrum disorders and collect data on the progress of each child served.

Work in collaboration with the Mississippi Department of Education, Office of Special Education, Bureau of Autism Policy and Planning and any local school districts to gain referrals and provide ongoing transition opportunities.

Provide technical assistance and consultation to early intervention programs for infants and toddlers with autism spectrum disorders and collect data on the progress of each child served.

Evaluation. Data collected will assist in the establishment of future programs designed to meet the unique needs of children with autism spectrum disorders.

Objective 6. Secure and maintain funding for Early Intervention programs at North MS Regional Center, Boswell Regional Center, Hudspeth Regional Center and Ellisville State School.

Activities Evaluate reimbursement source and look for alternate reimbursement methods (i.e. Medicaid.) Research the potential for other alternative funding methods.

Evaluation New funding resources have been secured for the Early Intervention Programs.

INTERAGENCY COLLABORATION

GOAL. Actively participate as members of interagency groups developing and providing services and supports to individuals with intellectual/developmental disabilities.

Objective 1. Continue participation in interagency efforts and activities in order to maximize available resources and services for individuals with ID/DD. BIDD staff will participate and coordinate with at least the following entities:

Mississippi Department of Health's First Steps Early Intervention System
State Interagency Coordinating Council (SICC)
Mississippi Council on Developmental Disabilities
Advisory Board for Mississippi Statewide Services for Individuals who are Deaf-Blind
Special Education Advisory Panel
The Arc of Mississippi
Foster Grandparent Association of the Capitol Area
Mississippi Chapter of the American Academy of Pediatrics Children's Mental Health Advisory Panel
Association for Providing Supports to Employment (APSE)
Mississippi Ability Awareness Council
Mississippi Very Special Arts
Fetal Alcohol Spectrum Disorder Advisory Council

Activities: Attend and actively participate in meetings, trainings and work group sessions to assist in the development of policies that enable individuals with intellectual disabilities to participate in the community.

Provide information to other agencies about the Bureau of Intellectual and Developmental Disabilities and its services to help promote joint efforts on special projects utilizing blended funding.

Evaluation. Document involvement of Bureau of Intellectual and Developmental Disabilities staff in collaborative, interagency activities in the Department of Mental Health Annual Report for Fiscal Year 2010.

Objective 2. Participate in meetings with the Division of Medicaid's Bureau of Mental Health Programs to ensure open and effective communication regarding BIDD programs funded with federal and state Medicaid dollars and to maximize any available resources.

Activities: Attend and provide information on Bureau of Intellectual and Developmental Disabilities' Medicaid funded services at meetings.

Provide feedback to the Bureau of Intellectual and Developmental Disabilities on activities, actions which impact the services provided by Bureau of Intellectual and Developmental Disabilities programs

Solicit from the Bureau of Intellectual and Developmental Disabilities staff topics/questions to be included on the agenda with Division of Medicaid.

Evaluation. Maintain copies of Action Plans the Division of Medicaid develops for meetings in FY 10 which demonstrate joint activities and accomplishments regarding the provision of community services for individuals with intellectual/developmental disabilities.

TRAINING

GOAL. Increase the quality of available services/supports through the provision of training/technical assistance for Bureau of Intellectual and Developmental Disabilities service providers.

Objective 1. Provide training and technical assistance on the implementation of the 2010 Department of Mental Health Standards for Community Mental Health/Intellectual and Developmental Disability Services.

Activities: Develop materials to be used in training providers and providing technical assistance to ensure providers' understanding of the changes and revisions in the DMH Standards and the resulting implications for their programs.

Evaluation. Document the provision of training and technical assistance on the Department of Mental Health Standards for Community Mental Health/Intellectual and Developmental Disability Services in the Department of Mental Health Annual

Report for Fiscal Year 2010. Objectives and activities regarding the effectiveness of training are included in the Quality Assurance section.

Objective 2. Provide training and technical assistance on the revised *Bureau of Intellectual and Developmental Disabilities Record Guide*.

Activities: Garner input from BIDD providers about changes/revisions/additions they believe should be incorporated in the *2010 BIDD Record Guide*.

Revise the *BIDD Record Guide* to reflect provider input, changes/revisions in the Operational Standards, the growing use of electronic records, and other issues related to the documentation of services provided by BIDD programs.

Evaluation. Document the provision of training and technical assistance on the *Bureau of Intellectual and Developmental Record Guide* in the Department of Mental Health Annual Report for Fiscal Year 2010. Objectives and activities regarding the effectiveness of training are included in the Quality Assurance section.

Objective 3. Provide or support training regarding supports and services for infants and toddlers with autism or autism spectrum disorders.

Activities: Provide ongoing training and follow-up to early intervention evaluators on identifying infants and toddlers with autism.

Provide ongoing training and follow-up to early intervention practitioners on addressing behaviors of children with autism.

Evaluation. Document the provision of training in the Department of Mental Health Annual Report for Fiscal Year 2010. Objectives and activities regarding the effectiveness of training are included in the Quality Assurance section.

QUALITY ASSURANCE

GOAL: Maintain and improve the quality of services being provided by programs either receiving funds from or operating under the auspices of the Bureau of Intellectual and Developmental Disabilities.

Objective 1. After training and technical assistance are provided on the 2010 DMH Standards for Community Mental Health/Intellectual and Developmental Disability Services and *2010 BIDD Record Guide*, determine the number and types of citations issued to programs during on-site monitoring visits for FY 2010.

Activities: Develop and implement an electronic system to compile information regarding the number and types of citations discovered during each type of monitoring visit for each provider, as well as compiling information on the provider's successful implementation of their plan of correction for the calendar year beginning January 1, 2011.

Evaluation. Prepare a report which analyzes trends and patterns and which outlines corresponding activities on the part of BIDD staff to ameliorate system-wide issues as well as provider specific issues and to promote/teach techniques and strategies to service providers in order to promulgate quality services, resulting in a corresponding decrease in deficiencies.

Objective 2. Determine the effectiveness of BIDD early intervention services in allowing children to transition from early intervention programs to the least restrictive setting.

Activities: Establish a system whereby BIDD early intervention programs can collect and report information regarding each child's progress in reaching the goals and objectives in his/her Individualized Family Service Plan.

Determine the types of settings and the number of children who transition to each setting when they leave the early intervention programs.

Evaluation. The system to be utilized in FY 10 by BIDD early intervention programs will be developed and ready for implementation.

Objective 3. Ensure that care and programming is provided at each DMH/BIDD regional center which adheres to regulations set forth by the Mississippi Department of Health Division of Health Facilities Licensure and Certification, Division of Medicaid, Mississippi Department of Education, Office of Special Education and Southern Association of Colleges and Schools.

Activity: Provide on-going support and technical assistance to the regional centers to ensure adherence to regulations set forth by Department of Health, Division of Medicaid, Mississippi Department of Education and Southern Association of Colleges and Schools.

Evaluation. Report outcomes of compliance reviews to present to the Board of Mental Health. Maintain reports of each regional center's degree of adherence to the regulations set forth by the certifying/licensing agencies.

SYSTEMS REVIEW

GOAL. Review current systems and evaluate need for changes in order for services and supports to meet the needs of individuals with intellectual/developmental disabilities and their families and assist them in remaining in the community.

Objective 1. Evaluate existing case management services to determine how well the services assist individuals in meeting their identified needs to remain in the community.

Activities: Determine number of individuals on waiting lists for BIDD services whom:
a) Have been offered case management services; and
b) Received case management services.

Determine the number of children ages 0-5 years whose families are offered and utilize or decline case management services when they exit BIDD early intervention programs.

Develop and disseminate the following:

- a) A survey for staff providing case management services to determine their perception of the services they provide and how they meet individual needs.
- b) A survey for people who receive case management services to determine if the case manager assists them in meeting their identified needs.

Collect the surveys and analyze the following:

- a) The services case managers say they provide as well as their perception of how well they provide them;
- b) How well the individuals receiving case management services indicate the case manager assists them in meeting their stated needs; and
- c) Similarities and differences in the responses.

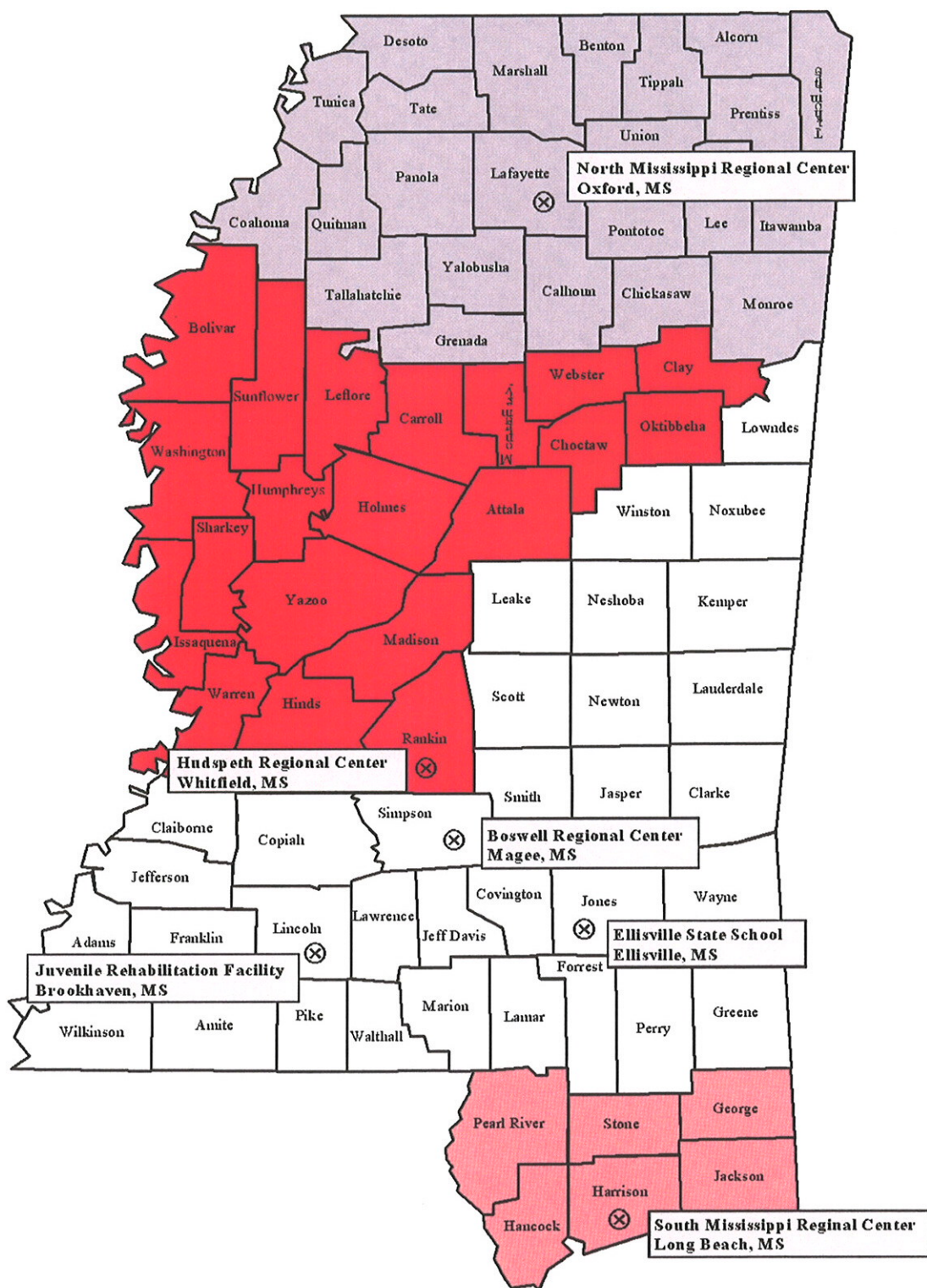
Evaluation. Report on needs met by the provision of case management services and the increase in use of Medicaid funded case management services by individuals, eligible for such, who are on waiting lists for BIDD services.

Objective 2. Develop a process by which individuals receiving services (or their guardian) through BIDD certified programs can be randomly sampled and surveyed on the quality of services they receive.

Activities: Research existing processes and explore other state mental health systems for possible inclusion in the BIDD process.

Evaluation: Prepare a report detailing how this process can be implemented for the FY 11 BIDD State Plan.

APPENDIX A
DEPARTMENT OF MENTAL HEALTH
COMPREHENSIVE REGIONAL CENTERS' SERVICE AREAS



APPENDIX B
**COMPREHENSIVE COMMUNITY MENTAL HEALTH/
MENTAL RETARDATION CENTERS' REGIONS**

