B.4 Stakeholder Involvement

Design Phase

After receiving the grant award, the State established a Stakeholder Group composed of representatives from hospitals, and nursing home associations, policymakers, and key advocacy groups. Many of the participating individuals also served on the Olmstead Task Force to develop the Olmstead Implementation Plan. Consumers were identified who had successfully navigated the transition from institution living to community living.

As members were recruited, they were informed of the level of commitment that would be required during the design phase as well as the ongoing responsibilities to monitor the implementation of the project. The Stakeholder Group members were tasked with the following responsibilities over the five years of the project.

- Represent consumers and/or their family members, advocacy groups, provider associations, and state agencies.
- Provide input as draft processes, guidelines, and criteria are developed for structuring the project.
- Provide input on policy and technical matters to the Department of Human Services (DHS) to achieve rebalancing outcomes.
- Monitor achievement of grant benchmarks.
- Monitor implementation progress of the grant during the five-year period.
- Recommend changes to improve the grant implementation.

The members of the Stakeholder Group and their affiliation are shown in Table B.4.1.

Table B.4.1. Stakeholder Group and Affiliation.

Member	Affiliation
Government Agencies	
Tim Kitagawa	Department of Human Services (DHS) Social Services
	Division
	(Medicaid home & community based waiver services)
Patti Bazin	DHS Med QUEST Division
	(Medicaid QExA health plan services)
David Fray	Department of Health (DOH)- Developmental
	Disabilities Division
Susan Jackson	DOH Office of Health Care Assurance
Thomas Hester	DOH Adult Mental Health Division
Noemi Pendleton	Executive Office on Aging
John McDermott	
Michael Flores	U.S. Department of Housing and Urban Development,
	Honolulu Office of Public Housing
Hospitals, Nursing Homes & Residential Providers	

Ruthie Agbayani	Adult Foster Home Association
Lani Akee	
Ron Gallegos	Alliance of Residential Care Administrators
Richard Meiers	Healthcare Association of Hawai'i (representing
Coral Andrews	hospitals and nursing homes)
Sharon Ogawa	Hawai'i Long-Term Care Association (representing
	nursing homes, Type II- adult residential care homes,
	and Assisted Living Facilities)
Advocacy Agencies/ University Units	
Janet Eli	Alzheimer's Association:
Waynette Cabral	State Council on Developmental Disabilities
Sheryl Nelson	State Independent Living Council
Rebecca Ozaki	University of Hawai'i Center on Disability Studies
Leolinda Parlin	Family Voices
Gary Smith	Hawai'i Disability Rights Center
Pat Lockwood	Hawai'i Center for Independent Living
Consumers	
Anne Smith	Transitioned from hospital
Garrick Lau	
Nathan Say	
William Burwell	Transitioned from an institutional
Going Home Plus Management Team	
Madi Silverman	DHS Med-QUEST Division
Jean Johnson	University of Hawai'i Center on Disability Studies
Christy Nishita	University of Hawai'i Center on Disability Studies

The members of the stakeholder groups were given specific responsibilities. Government agency personnel were asked to determine whether the changes, if any, can be made operationally with or without amending the Administrative Rules. The hospitals, nursing homes, and residential providers were asked to explain the medical conditions and challenging circumstances of waitlisted patients in the hospitals and nursing home residents. Residential providers gave input on the type of additional assistance/training/support that might be needed in order to care for these individuals with complex needs in the community. Organizations representing consumers and community-based providers are being asked to participate to identify any difficulties or barriers within the system and the supports needed to assist individuals and families in the transition process.

To ensure the full participation of consumers, all transportation expenses of consumers, family members, and attendants were and will be reimbursed using grant funds. For consumers living on the neighbor islands, airfare and ground transportation will be reimbursed. Efforts were made to also involve a key group of stakeholders – those who were currently living in institutions and would be eligible to participate – but were not able to effectively participate in group meetings. Advocacy groups began referring potential participants to members of the Management Team. Individual members of the Management Team have been meeting individually with some of

these difficult-to-place individuals, assessing their challenges which were delaying placement, and getting their input for planning purposes.

In addition to the two identified consumers, a number of the representatives from advocacy groups were also individuals with disabilities.

At the first Stakeholder Group meeting, the *Going Home Plus* Management Team asked stakeholders to either participate in one of several workgroups or nominate others in their organizations who were appropriate for the workgroups. Three formal workgroups were formed to address: benchmarks, informed consent and guardianship, and housing. The benchmark and housing workgroups met twice over the course of the pre-implementation phase and the informed consent and guardianship workgroup met three times. The purpose of these meetings was to develop the associated sections of the Operational Protocol. The following is a list of the membership of the three workgroups:

Benchmark Workgroup- Representatives from:
Family Voices
Hawai'i Long-term Care Association
University of Hawai'i, Center on Disability Studies
Department of Human Services- Med-QUEST Division

Informed Consent and Guardianship Workgroup-Representatives from:
Hawai'i Disability Rights Center
Office of the Public Guardian
Department of Human Services, Nursing Home Without Walls Program
Queens Hospital, Community Based Programs
Aloha Nursing and Rehabilitation Center
Pearl City Nursing Home
Executive Office on Aging- Ombudsman

Housing Workgroup-Representatives from:
Department of Health, Adult Mental Health Division (DOH-AMHD)
Catholic Charities Hawai'i
Hawai'i Public Housing Authority
Department of Housing and Urban Development, Honolulu Office
City and County of Honolulu-Housing
Hawai'i Public Housing Authority, Board
Developer

Quality Assurance- Representatives from:
Department of Health, Developmental Disabilities Division
Department of Human Services, Social Services Division

In addition to these formalized groups, *Going Home Plus* Management Team held over 45 meetings with different community organizations and state agencies (e.g., Developmental Disabilities Council, waiver case managers, waiver provider associations, foster home and care home associations, licensing agencies, hospitals, advocacy groups) to solicit specific information

that would aid in the development of the Operational Protocol. See Appendix J for a list of all meetings.

Implementation Phase

Current consumer membership on the Stakeholder group is 17%. The *Going Home Plus* Management Team plans to increase consumer membership on the Stakeholder Group from 17% to a minimum of 30% by January 1, 2009. The same ratio and deadline has been set for the consumer membership in each of the continuing MFP workgroups. Consumers will be recruited by asking Nursing Home Without Walls and Residential Alternatives Community Care waiver case managers to nominate participants and family members. The GHP Management Team will also invite MFP participants, and/or their family members, who have transitioned to the community. Finally, there are plans to recruit members from the Honolulu Mayor's Council on Disabilities and the Hawaii Center for Independent Living's Consumer Advisory Group. A mix of consumers will be included, such as the elderly, persons with different types of disabilities, persons who had previously transitioned from institutions, and family members. The GHP Management Team is also considering establishing a *Going Home Plus* consumer advisory group, which will meet on a semi-annual basis. The role of consumers in these groups will be to provide personal experience, advice, and input to the project.

During the implementation phase, *Going Home Plus* Project Director will convene the Stakeholder Group on a semi-annual basis. The Stakeholder Group will be responsible to update their constituencies on the status of the project and discuss both successes and challenges. *Going Home Plus* Management Team will ask targeted questions of the stakeholder group and will make necessary adjustments to the project's operations based on their responses.

The first workgroup, quality, will be contributing to the development of an HCBS Quality Management Plan that addresses the goals of managed care. That plan will be field tested during 2010, modified as necessary and implemented by 2011. Enhanced FMAP funds will be used to develop this plan. Future quality meetings will be coordinated on a quarterly basis with the Quality Monitoring Committee established by the Social Services Division whose membership includes state staff, a consumer and representatives from a waiver provider agency, a care home association, and an advocacy agency.

The second workgroup, housing, will be a continuation of the workgroup convened during the pre-implementation phase and will meet quarterly. Given the limited supply of accessible and affordable housing in Hawai'i, the housing workgroup will find accessible housing in the community for persons with disabilities and nursing level of care and identify new strategies to expand the affordable housing stock.

The third workgroup, Service and Supports, will meet quarterly to monitor the implementation of the demonstration and supplemental services. Specific subgroups may be identified to explicitly address areas such as service coordination, service delivery barriers and recruitment of service providers

The *Going Home Plus* Management Team will convene an initial face-to-face meeting with State leadership (i.e., legislators interested in health and human services, the Director of the

Department of Human Services, the Director of the Department of Health) and then brief written reports will be provided to state leadership on a semi-annual basis. Written reports will provide updates on the project, such as the numbers of persons transitioned and the number and type of trainings held. The report will include project statistics (such as the numbers of persons transitioned and the number and type of trainings held), and findings from the Stakeholder, consumer advisory, and smaller workgroups. Reports, possibly in a newsletter format, will be distributed to state leadership, home and community based provider groups, health plans and any other interested party upon request. Reports may be posted on the website.

Evaluation

The stakeholder group will review, comment, and approve the state evaluation. Specifically, the group will approve: 1) the demonstration hypotheses that will be tested; 2) the outcome measures that will be included to evaluate the impact of the demonstration; and 3) the data sources that will be utilized. During semi-annual stakeholder meetings, Dr. Christy Nishita, project evaluator, will update the group on the status of the state evaluation. She will present the latest data related to recruitment, enrollment, and transition. The stakeholder group will be asked to provide advice and feedback for any barriers or challenges found in the evaluation process.