



Secretary of State **Oregon Audits Division**



Oregon Department of Human Services

Developmental Disabilities Leadership is Proactively Addressing Program Challenges to Ensure Optimal Service Delivery

August 2021
Report 2021-24

Secretary of State Shemia Fagan
Audits Division Director Kip Memmott



Executive Summary

Why This Audit is Important

» The Office of Developmental Disabilities Services (ODDS) and its partners serve more than 30,000 adults and children in Oregon at a cost of about \$1.6 billion a year.

» ODDS provides services to cover a lifetime of support to people with intellectual and developmental disabilities.

» Individuals with disabilities have the power to influence change to benefit not only other individuals with disabilities, but the communities in which we live.

» The COVID-19 pandemic affected people with disabilities and their families, and it is crucial their voices are heard in the midst of this crisis.

» The Secretary of State's Office is committed to helping the state improve and expand equitable services provided to Oregonians.

Oregon Department of Human Services

Developmental Disabilities Leadership is Proactively Addressing Program Challenges to Ensure Optimal Service Delivery

What We Found

1. ODDS is proactively identifying challenges and implementing strategies to address the complexity of service delivery created by significant changes to the program over the years. Leadership has a vision, goals, and strategies in place to ensure people who need support and service can easily access and navigate the state's developmental disability system. For example, ODDS has implemented an equity framework to inform policy and budget decisions, a Service Equity Plan, and increased translation efforts to provide information in languages other than English. ([pg. 8](#)) ODDS is also receptive to strategies that could improve processes such as the complaint handling and stakeholder outreach.
2. The ODDS complaint process needs improvement. The process is not streamlined; relies on professional but untrained staff to address complaints; is being used for multiple purposes other than complaint handling; and is not apparent to the individuals receiving services from ODDS. ([pg. 11](#))
3. ODDS is actively engaging with many stakeholders and is pursuing strategies to better engage historically underserved populations in the state. However, current methods, such as email subscriptions and virtual meetings, are not reaching those who do not have access to the required technology. Some individuals with developmental disabilities reported they need additional resources to be able to actively participate in meetings or workgroups within ODDS. ([pg. 15](#))

What We Recommend

We made six recommendations to ODDS to improve its complaint process and stakeholder outreach.

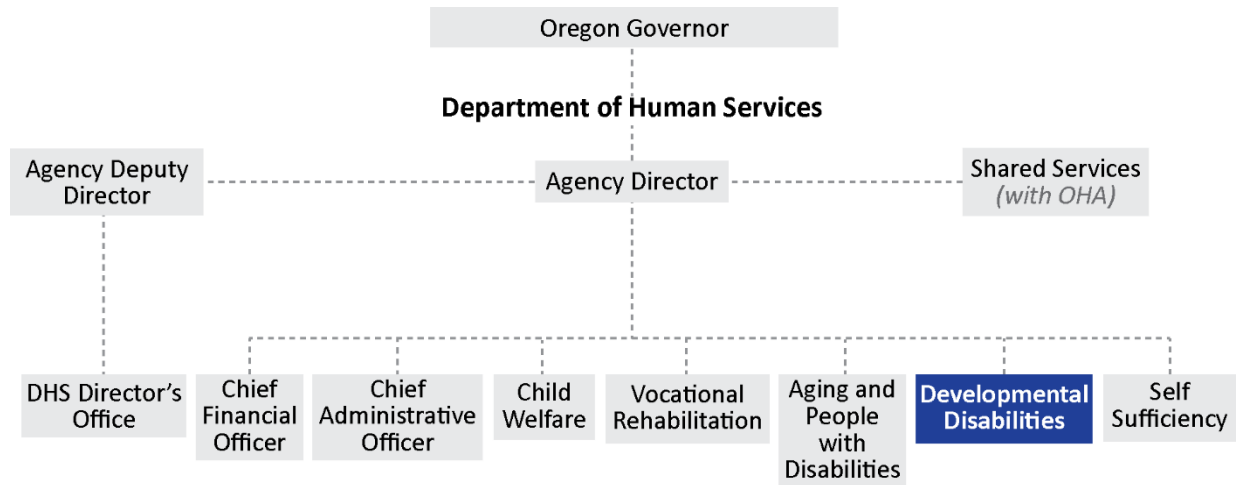
ODDS agreed with all of our recommendations. The response can be found at the end of the report.

Introduction

In the last 50 years, there has been a significant shift in providing services to people with intellectual and developmental disabilities, away from housing individuals in institutions and towards people with intellectual and developmental disabilities living independently in their own homes and in community settings. Segregating people with disabilities in institutions is a form of discrimination that deprives them of the opportunity to participate in their communities, interact with people who do not have disabilities, and make daily choices. The rate at which people were institutionalized began to decline in the 1950's; since then, people with disabilities have won important legal and public opinion efforts for equitable inclusion in society and a recognition of their rights. As a result of their efforts, systems of support slowly grew. Oregon closed its last institution, the Fairview Training Center, in 2000.

Systemic supports, such as accessible parking spots, ramps, and closed captioning, are provided to the entire community. Personalized supports and services are delivered based on the needs of the individual receiving them. In Oregon, the delivery of publicly funded personalized services is coordinated by the Office of Developmental Disability Services (ODDS).

ODDS is a division within the Oregon Department of Human Services (ODHS), which serves some of Oregon's most vulnerable residents, including children, families in poverty, and people with intellectual and developmental disabilities. ODDS' 2019-21 budget includes \$3.1 billion and 916 full-time equivalent staff. The mission of the division reads: ODDS, stakeholders, and the developmental disabilities community come together to provide services, supports, and advocacy to empower Oregonians with intellectual and developmental disabilities to live full lives in their communities. The program values choice, self-determination, and person-centered practices; community inclusion and community living; strong relationships; and service equity and access.



This audit focused on the division's efforts in improving services to individuals and strategies that the program can implement to support its improvement efforts. ODDS, like many state programs, has challenges and limitations to achieving program mission and goals; however, ODDS management and staff, stakeholders, and partners are addressing these challenges. If ODDS continues its improvement efforts and implement needed changes — particularly with regard to complaint handling and outreach to underrepresented stakeholders — the division will be successful in its continued efforts to improve services to individuals and their families.

ODDS supports and services are for individuals with a range of abilities in a variety of settings

Every person experiencing disabilities is unique, meaning each individual uses a range of differing supports and services based on their personal situations. Individuals with developmental disabilities may experience mental or physical impairment or both. The impairment is expected to continue indefinitely and limits the individual's ability to participate in daily living activities, such as communicating, grooming, dressing, and other social skills. Autism and Cerebral Palsy are examples of developmental disabilities. Individuals with intellectual disabilities experience significantly sub-average intellectual functioning along with limited ability to participate in daily living activities.¹ Intellectual and developmental disabilities are used interchangeably throughout the report, as indicated by the acronym I/DD.

As a result of changes to Medicaid with the Affordable Care Act, most people receive services in their own homes from professional caregivers. Other home and community-based settings include adult foster homes and group homes. Services may be comprehensive 24-hour care, or a monthly service like transportation for employment purposes. Types of support include assistance with everyday activities like preparing meals; bathing; dressing; transportation and shopping; employment support and money management; relief for family caregivers; and home modifications to make homes more accessible.

A person receiving state-provided services must have a qualified disability or disabilities and meet Medicaid financial requirements. Children with I/DD whose families have incomes over Medicaid limits are still able to qualify for services depending on their disability. After an adult is determined eligible, the individual has the option of receiving case management services from either a Community Developmental Disabilities Program or Support Services Brokerage.

Figure 1: As of March 2021, over 30,000 adults and children were enrolled in I/DD services

Adult Services	Count	Children Services	Count
In-Home	9,113	In-Home Support	3,969
Foster Care	3,039	Foster Care	335
24-Hour Residential Care	3,011	Intensive In-Home	362
Supported Living	767	Residential and Family Support	164
Stabilization and Crisis Unit	79	Stabilization and Crisis Unit	15
Case Management Only	4,309	Case Management Only	4,558
Total	20,318	Total	9,403

Source: Office of Forecasting, Research and Analysis Caseload Variance June 2021 Report.

ODDS receives funding and guidance from the federal government and partners with multiple entities to provide services

The state delivers publicly funded DD services through a decentralized model with central oversight provided by ODDS. The following provides overviews of the entities involved in the service delivery system.

¹ The definitions of developmental disability and intellectual disability derive from Oregon Administrative Rule Chapter 411 Division 320.

Federal Centers for Medicare and Medicaid Services (CMS) provides funding and sets some program requirements for Oregon and other states for the provision of supports and services to people with I/DD.

ODDS provides strategic planning, funding, policy development, general oversight, and technical support to case management entities (CMEs) located within Oregon's counties and communities.² Per Oregon Revised Statute, ODDS delegates the responsibility for administration of these programs to local county governments, Community Developmental Disabilities Programs, and Brokerages.³ Except for a small percentage of the population, ODDS does not provide direct services to people with I/DD.⁴ ODDS' quality assurance staff perform CME field reviews every two years and issue corrective actions to ensure people with I/DD get the assistance they need, are safe, and healthy.

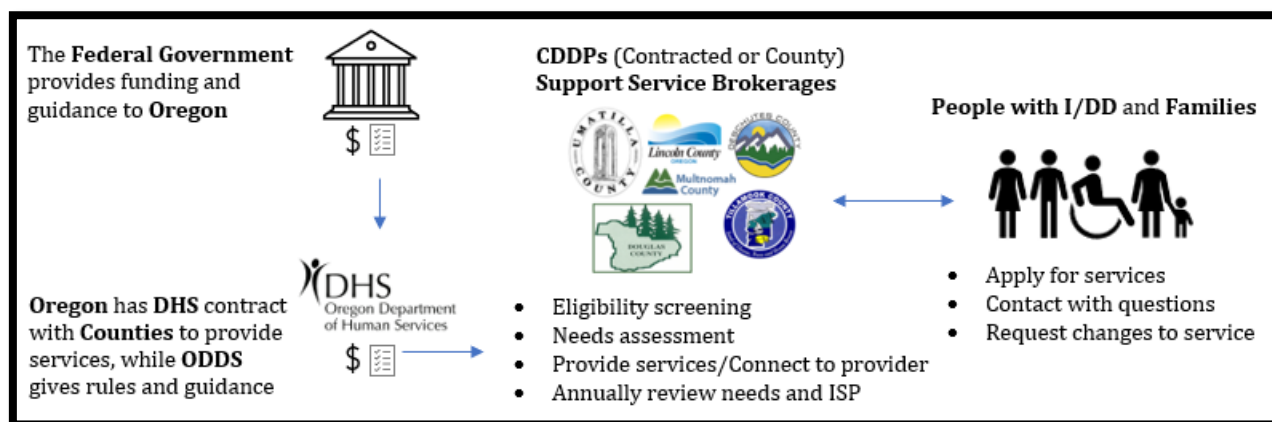
Community Developmental Disabilities Programs (CDDPs) are entryways for individuals and their families who need services. Eligibility specialists determine service eligibility and guide individuals through the enrollment process. CDDP case managers provide direct services to individuals such as support needs assessment and development of individual service plans. CDDPs are also responsible for investigating allegations of abuse and complaints, reviewing and revising service plans for individuals, and ensuring individual rights are protected. CDDPs operate in a specific geographic service area of the state under a contract with ODHS, the local mental health authority, or other entity as contracted by ODHS.

County Governments can choose to run a CDDP themselves, contract with another entity to operate as a CDDP for the county or defer to ODDS to provide CDDP services for a county or group of counties through contract agreements.

Support Services Brokerages contract with ODHS to provide case management services to adults living in home settings.

There are 31 CDDPs and 14 brokerages that provide case management services and coordinate care for individuals throughout the state. ODDS employees provide care for about 2% of individuals enrolled in the program, with CDDPs and brokerages serving the rest.

Figure 2: ODDS partners with multiple entities to provide services



² Case Management Entities include Community Developmental Disabilities Programs, brokerages, Children's Intensive In-Home Services, and the Children's Residential Program of ODHS.

³ ORS 427.104.

⁴ ODDS does provide direct support to people in the Stabilization and Crisis Unit and some children services, but this is only about 2% of Oregon's I/DD population at any given time.

The decentralized model for Oregon accommodates the state's differences in geographical regions. For example, the community resources available to someone in Multnomah County — such as mass transit, employment opportunities, and support worker availability and expertise — can be vastly different from those available to someone in Jackson or Lake counties. People with I/DD need support from those who are experts in local resources; for instance, a brokerage could be aware of a local business with open positions matching someone's career goals or interests.

Treating people with disabilities as people first and foremost is a critical component of disability rights advocacy

A note on fieldwork for this audit:

The phrase "nothing about us, without us," is often used in disability rights advocacy to remind non-disabled people in positions of power to include members of the population being discussed in any examination of issues covering that population. Due to the COVID-19 pandemic, in place of live interviews, auditors worked with adults with I/DD, family members of children with I/DD, direct support professionals, and ODDS staff to create a questionnaire to help meet that responsibility.

The questionnaire was sent to advocacy groups and brokerages throughout the state, who then delivered it to the families and adults with I/DD in their networks. It was also translated into Spanish, and a video recording of audit staff reading the instructions and questions was made available to participants. The responses received by auditors identified the respondents as people with I/DD, or as family members assisting someone with I/DD in filling out the questionnaire.

Auditors also held three focus groups via videoconferencing with adults with I/DD, coordinated by the Oregon Self Advocacy Coalition. Auditors used the questionnaire as the basis for discussion questions in these groups and took note of the responses.

Auditors heard a wide range of opinions and examples of how well ODDS is meeting its mission. In addition to the data reviewed, this report includes anonymous statements received from people with I/DD as a way of highlighting their voices.

The audit team regrets they were unable to meet in person with people with I/DD to discuss their experiences, and are deeply grateful to those who engaged virtually, who responded to requests, and helped develop the questionnaire.

A person without a disability may not have a full understanding of the rights and abilities of a person with an intellectual and developmental disability. A critical piece of disability rights advocacy is the importance of person-centered practice: acknowledging that people with disabilities are people first, with the same complexity and potential richness of life as non-disabled people and should have choices and self-determination regarding their support.

People with I/DD use various supports and services to help them live full lives in the community. People with disabilities and advocates dismiss terms such as "high" or "low functioning," as reductive and in opposition to the person-first framing. The support needs of a person with I/DD ranges in complexity. An individual could require a wheelchair or other mobility device to navigate their home, need assistance with meals or personal hygiene, or communicate with a method other than verbal speech. People with comparatively low support needs may still require weekly or daily personal support to help them plan grocery trips, keep their home clean, or apply for jobs.

Historically, the United States has been slow to design and implement infrastructure, programs, and services for people with disabilities. This unfortunate history can be attributed to stigmatism and discrimination towards people who have different needs than the majority population. Most

improvement resulted from legal cases and hard-fought advocacy efforts conducted by the I/DD community. Stories about people with disabilities overcoming barriers that exist for them are framed as heroic or inspiring, rather than focusing on why these barriers exist in the first place.

ODDS leadership and staff hold the person-centered principle as a core tenet and strategy. They frequently discuss the people being served by their agency and their mission.

ODDS has been through many changes over the past few years

Question: Please tell us something about yourself.



"I like animals (particularly dogs), video games, cooking, hiking, etc. I'm trying to find a life goal."



"Look for housing. I like to go out into community and do things. I work 20 hrs week at [retail store] for 7 years."



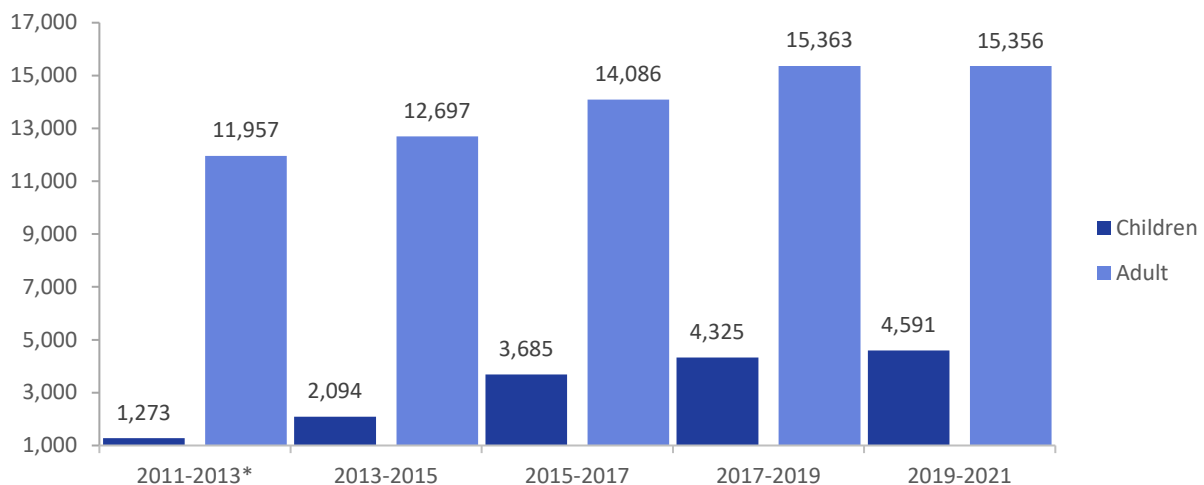
"I'm a young mom of 3 kids, taking care of them. I enjoy spending time with family. I enjoy listening to music. I have a puppy that makes me tied down."

ODDS has had to manage many changes over the years. These changes resulted, for example, in increased enrollment in the program and revised requirements for employment-related services. The most recent changes are related to the COVID -19 pandemic. ODDS, in its oversight role, is responsible for managing these changes and the accompanying challenges, while maintaining its work to achieve the program mission. ODDS is responsible for setting goals, policies, and rules to serve Oregonians with I/DD.

The Affordable Care Act Increased Enrollment in I/DD program

Enrollment in the I/DD program has been increasing since 2010, with larger increases after the implementation of what is known as the K Plan, a component of the Affordable Care Act that became effective in Oregon in 2013. This plan allows states to provide home and community-based services and supports while receiving a 6% increase in medical assistance funds from the federal government. This change essentially allowed people to receive care at home that would have previously only been covered if administered in a residential setting. As a result, Oregon saw an increase in enrollment and covered services for people with I/DD, as demonstrated in Figure 3. The plan also saves both the state and the federal government money as services provided in home and community-based services are more cost-effective than institutional care.

Figure 3: The number of individuals receiving services has been increasing since the 2011-13 biennium



Source: ODDS April 2021 presentation to the Legislature.

*K – Plan was implemented in 2013

The increase in the number of people receiving services resulted in increased budget for ODDS. The division's total budget more than doubled, from approximately \$1.36 billion in the 2009-11 biennium to \$3.06 billion in 2019-21 biennium.

Legal and legislative expectations introduced additional changes

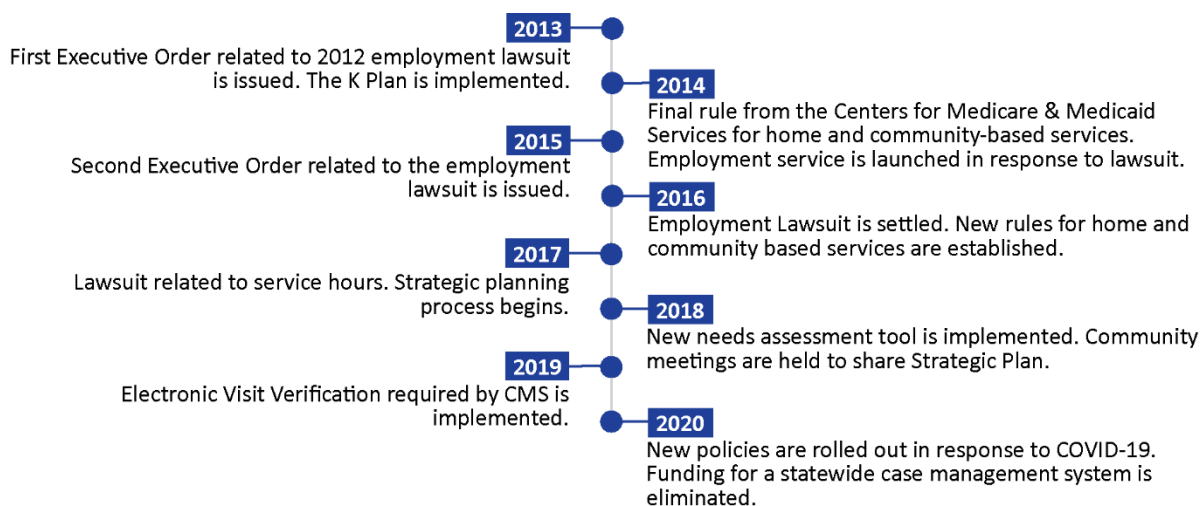
In 2012, ODDS was named as one of a handful of Oregon government defendants in a class-action lawsuit aimed at changing the nationwide practice of having people with I/DD work in "sheltered

workshops.” These were jobs which paid sub-minimum wages — including less than \$1 per hour — in segregated settings (working only with other people with disabilities). A 2015 settlement led to the phasing out of that practice, as well as new requirements for job training intended as a pathway to gainful community employment for people with I/DD. Oregon completely stopped funding sheltered workshops for people with I/DD in September 2020.

Another lawsuit came in 2017, after Disability Rights of Oregon sued ODHS and, by extension, ODDS. The lawsuit stated that ODHS arbitrarily and without explanation implemented across-the-board reductions to in-home care services, eliminating hundreds of hours of critical support. Disability Rights of Oregon asked the federal court to direct ODHS to restore previous in-home care hours, change the tool used to determine the number of hours to assign to a person, and change the process for providing notice of benefit changes to people with disabilities and their families. Since June of 2019, a preliminary injunction froze cuts to in-home care services; the lawsuit is pending as of June 2021.

Another significant change to the program was the consolidation of many assessment instruments, used for different services, into one Oregon Needs Assessment used to determine qualifications. Other changes are from the U.S. Congress as well as the Oregon Legislature. For example, in 2016, Congress passed a law requiring electronic verification of visits by care providers through a method that tracked providers’ locations. In 2018, the Oregon Legislature passed a law that changed training requirements for home care and personal support workers and required ODDS to work with the ODHS Aging and People with Disabilities and SEIU to create a training plan for these workers.

Figure 4: ODDS has needed to manage multiple program changes over the years



Source: ODDS staff; OAD created.

The COVID-19 pandemic created additional challenges for ODDS

Audit work began three months into the COVID-19 pandemic. Prior to the start of the audit, ODDS was distributing information about the pandemic, from frequently asked questions and fact sheets, to monitoring and prevention of the virus, and guidance for testing for the virus. Dissemination of information was specific for each type of stakeholder, such as case management entities, providers, and individuals or families receiving services.

We did not assess the effectiveness of ODDS’s effort in addressing the pandemic, but we acknowledge the impact of the pandemic on the program and the individuals receiving services. We

also acknowledge the division's ability to address our recommendations may be affected by the program's response to and recovery from the pandemic.

A significant service provider announced its intention to leave Oregon

While drafting the report, auditors learned the company Mentor Oregon — a service brokerage and Medicaid Provider Agency for people with intellectual and developmental disabilities — will end its services in the state in August 2021. About 1,200 individuals will need to get their services and supports from other providers. ODDS is working with Mentor Oregon and others to ensure continuation of services and supports during the transition.

Audit Results

The publicly funded developmental disabilities services system in Oregon is complex. The system includes multiple partners, stakeholders, advocates, and individuals receiving services and their families. This complexity results in challenges for everyone involved in the system, notably those receiving services. ODDS has spent a great amount of effort to learn about the concerns, challenges, and areas of improvement and prioritized its strategies to address these challenges in an effort to improve and enhance services to Oregonians with disabilities.

This report describes the proactive efforts ODDS has in place, while also highlighting areas that still need improvement. ODDS has a vision and strategies in place to make the developmental disability system easy to access, navigate, and support self-determination and personal choice for individuals receiving services.

While much progress has been made, we identified two areas in need of improvement. The ODDS complaint process is not streamlined, is being used to for multiple purposes outside of its purpose and is not promoted as a communication and feedback tool for individuals receiving services. Additionally, ODDS has not effectively reached out to historically underserved population in the state. Current methods, such as email subscriptions and virtual meetings, are not reaching those who do not have access to or the ability to use the required technology.

ODDS has good strategic planning processes in place to identify and address challenges and ensure continuous program improvement

ODDS' proactive approach in identifying and addressing program changes and challenges helps ensure continuous program improvement and optimal service delivery. ODDS strategies and goals are informed by stakeholders' input, goals are steadily being implemented, and barriers to implementing goals are being addressed.

ODDS uses input from stakeholders to develop strategies and goals

The advisory committee that developed the 2018-23 ODDS strategic plan included stakeholders that represent advocacy groups for individuals receiving services, families, care providers, brokerages, and CDDPs. ODDS used input from stakeholders that were obtained through community forums, surveys, and a study commissioned by ODDS to identify challenges that individuals were experiencing while receiving services. ODDS then shared the developed strategic plan by conducting another round of community forums. This approach of obtaining stakeholder feedback is considered a leading practice by performance management professionals. These professionals indicate all government entities should use some form of strategic planning to provide long-term perspective on service delivery and to encourage citizens to provide feedback and get involved in the government's decision-making process.

The most current program performance information available show areas where ODDS is doing well and areas needing improvement. A 2018-19 national survey for people receiving services show an overall satisfaction that is in line or better than the national average. About 80% of respondents in Oregon's children's programs are satisfied with the services and support they currently receive, compared to the 75% national average.⁵ The adult version of the survey showed that 91% of Oregon's respondents reported services and supports help them live a good life, closely matching the national average of 92%. Oregon has also been recognized in recent years as the leader in the

⁵ The [2018-2019 Child Family Survey Report](#) was prepared by the National Core Indicators program. This program is a voluntary effort by state developmental disability agencies to track their performance using a standardized set of consumer and family/guardian surveys with nationally validated measures. The effort is coordinated by the National Association of State Directors of Developmental Disabilities Services.

development and provision of Home and Community Based Services and ranked the second-best state for provision of services to people with intellectual and developmental disabilities.

In terms of areas needing improvement, a 2019 report from Health Management Associates hired by ODDS shows, among other challenges, that enrolling in services is not easy and clear for many people; people with varying cultural needs and preferences find it hard to find information and to communicate due to language-access issues; few people felt case managers help with long-term planning; and some people are unclear about the role of case managers in supporting them to access and engage in other systems, including health care.⁶

ODDS has steadily implemented improvements to service delivery

Strategic Goals

1. Create a system that is sustainable, easy to use, with effective communication and equitable access.
2. Honor and support people to make their own choices about who they want to be and what they want to do in their life.
3. Support equal opportunity for living options and meaningful employment in an integrated community setting.
4. Provide families the amount and type of supports they need to raise their children at home, or when necessary, in another family home within the community.
5. Support people to live rich, full- lives while providing for their health and safety.

ODDS has identified in its strategic plan five goals and 23 related short-term actions to address the issues mentioned in the preceding section of the report. The goals range from creating a system that is sustainable, easy to use, with effective communication and equitable access, to supporting people to live rich, full lives while providing for their health and safety.

ODDS has already made progress toward reaching these goals. Communications and program materials are now translated into many different languages, including Spanish, Vietnamese, Russian, Arabic, Chinese, Somali, and Korean. The Individual Support Plan (ISP) is available in major languages as well. These translations closely match the proportion of languages spoken by individuals receiving services.

ODDS also developed and implemented a framework for developing policy that incorporates a service equity lens. This framework is intended to make available the right tools to support the local service delivery system

and create consistency in applying policy. The framework allows ODDS to ensure new policies are equitable and stakeholders have a part in policy development.

One of the 23 short-term actions calls for an improvement in the cultural competency of the ODDS service delivery system; to this end, ODDS has developed a service equity plan. This plan defines what service equity looks like; describes funding allocation and budgetary decisions through an equity lens. The plan also indicates strategies for increasing diversity in the workforce, developing a data plan, and engaging local communities and community organizations.

Additional accomplishments include creating websites to assist with employment-related goals for individuals with I/DD; expanding the visibility of the developmental disability support services field of work as a viable professional career; establishing relationships and agreements for cross-systems collaborations; and partnering with the Oregon Health Authority to request funding for a housing program for youths; and rate increases for support workers.

Many strategic actions underway to address existing barriers

ODDS encountered barriers while implementing their strategies and goals. Some of these barriers such as funding, lack of a statewide case management system, the legislative process, and the

⁶ [Stakeholder Perspective on Oregon Case Management Services Report](#)

COVID-19 pandemic have slowed down progress. However, ODDS is still steadfastly pursuing their strategic goals and proactively pursuing alternative strategies to mitigate the barriers.

ODDS is working towards implementing the recommendations from the Health Management Associates study to improve case management activities that will in turn improve the lives of individuals receiving services. ODDS needs stakeholder input on these recommendations and the results of the study are being translated into six languages to be sent out for the public input process. The results from the public input process will have to be translated, aggregated, and reported, a process that is estimated to take three months and has already been delayed by the pandemic.

Another barrier is the lack of a statewide case management system. This system would support case management and provide statewide data to inform policy making and report quality of life outcomes for individuals. Funding for the system was approved in the 2013-15 biennium, but other information system priorities delayed its implementation.⁷ The funding was eliminated in the 2019-21 biennium as a result of a statewide budget reduction process due the COVID-19 pandemic.

In the absence of a statewide case management system, ODDS had to rely on other sources of information for program performance data. For example, ODDS relies on the National Core Indication surveys for service satisfaction for individuals; quality assurance field reviews to ensure case management entities comply with program requirements; and the eXPRS payment system to obtain case management information. In the meantime, ODDS turned to the Centers for Medicare & Medicaid Services (CMS) for funding for the case management system; a request was submitted to CMS in April 2021.

To honor and support individuals with developmental disabilities to make their own choices, ODDS submitted a proposal to the Oregon Legislature in 2019 to codify supported decision-making in Oregon statutes.⁸ However, the proposal did not pass. ODDS submitted the same proposal during the 2021 session for the Legislature's consideration and this time, the proposal was modified through the legislative process but ultimately passed and became law.⁹

ODDS is keeping track of their progress, using metrics to measure results, and has plans in place to address areas that are not meeting targets. ODDS's approach, strategies, and actions demonstrate adherence to leading practices reported by performance management experts — strategic planning informed by stakeholders' input, measuring performance, and using existing data to make decisions.

Question: What changes would you make to the current system?



"If the State could make the application processes online that would be a first place to start."



"The system is so badly broken that you have to scrap the whole thing on a federal level and work your way down. This needs to be done by people who receive services and not by politicians who don't have a [expletive] clue as to what is it like to live the life."



"I would like more help from my case manager, who I love, but I know that she is busy."

⁷ ODHS prioritized the Integrated Eligibility Project over the case management system to comply with the legislative intent of [SB 450](#) and [HB 2219](#) to have a single computer system to determine and applicant's eligibility for services. The project began in 2015.

⁸ Supportive decision-making: an alternative to guardianship where a person with disability makes their own decisions instead of a guardian making decisions for them.

⁹ [HB 2105](#).

Individuals with I/DD would benefit from a streamlined complaint process and robust communication with stakeholders

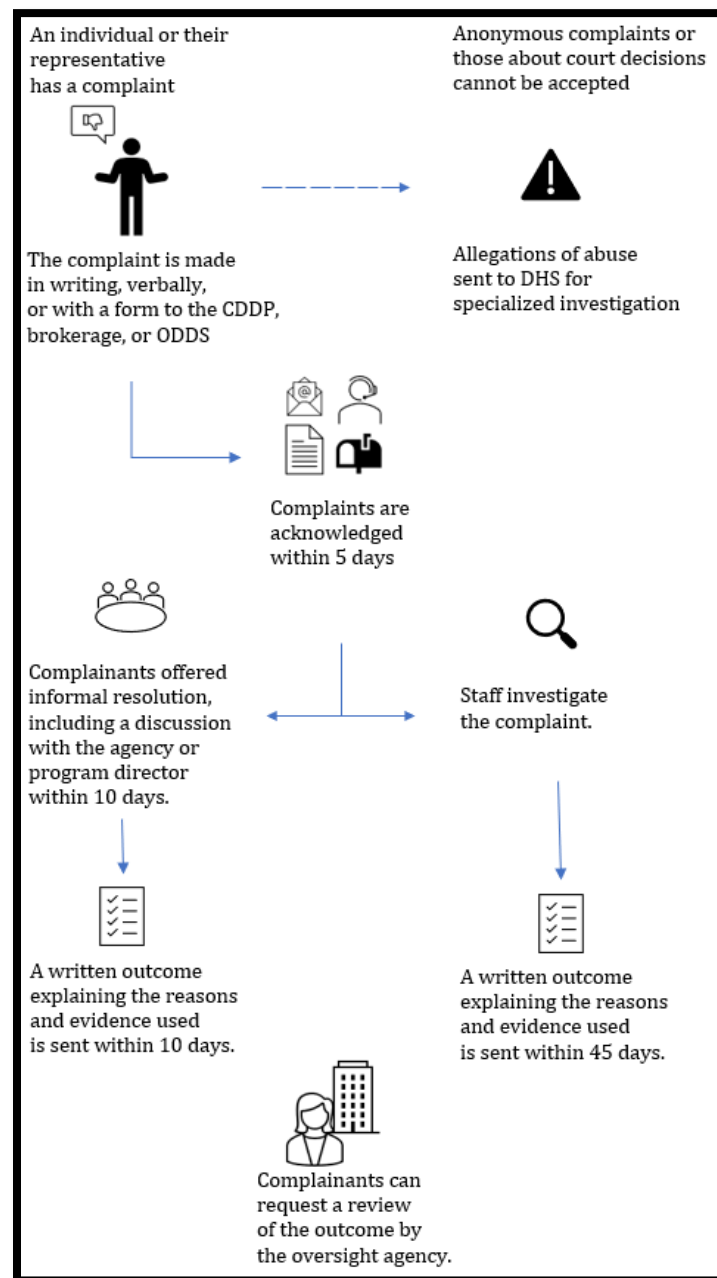
ODDS is open to other opportunities for improvement while they implement their strategic plan. To that end, ODDS requested that auditors review the division's complaint process and stakeholder outreach as part of this audit, stating they believed the processes need streamlining and improvement. To understand the current complaint process, auditors interviewed key staff, received feedback from people who had used ODDS's process, and analyzed a sample of 61 closed complaints ODDS handled from January 1, 2020, to July 31, 2020.¹⁰ For stakeholder outreach, auditors spoke with communications staff, reviewed stakeholder participation for current and past communication initiatives, and interviewed people with I/DD who have and have not been able to participate in ODDS meetings and outreach sessions.

Auditors found that complaint handling at ODDS is a disorganized work in progress; however, ODDS is improving the division's process. Areas of improvement include communication about the existence of complaint processes, and a lack of policies or personnel dedicated to the complaint process. Stakeholder outreach, while constantly practiced, would be improved with changes to accessibility and a deliberate focus on increasing participation by people who speak languages other than English and/or come from communities of color.

ODDS handles complaints as well as conducting oversight of local complaint processes

For any service organization, it is important that an avenue is available for recipients of that service to voice complaints. Not only is it an opportunity for specific grievances to be aired or problems resolved, but it provides insight into the way those

Figure 5: The complaint handling process is several steps



¹⁰ This timeframe reflects all of the complaints received and closed in 2020 by ODDS at the time the audit began, and also reflects the most current complaint processes in place during the audit period.

services are delivered. Analysis of complaints can identify regions of the service area that are outliers in quality of service and trends can be the evidence needed to create or revise systems within the organization

Administrative rules require that ODDS and the CMEs it oversees have a complaint handling process. Rules specify what kind of contact counts as a complaint — the complaint topic, which individual contacts them, who or what the complaint is about — and how quickly staff should acknowledge and investigate the complaint. A by-the-book complaint is handled according to the flow chart in seen in Figure 5.

ODDS has many ways for people receiving services to voice their concerns including the division's social media accounts, general email box, and a formal complaint process. Once a complaint is received, an administrative staff member creates a file on a shared drive and sends an acknowledgement letter to the complainant. At a weekly meeting, staff and the complaints coordinator (and sometimes the complaints manager) determine which of the ODDS field or office staff should be assigned to handle the complaint and provide the compiled case details to this person. This person, on a compliance clock that begins when ODDS staff receive the complaint, must research and provide a written response of the outcome to the complainant within 45 days.

Besides addressing their concerns directly with the person providing care, people with I/DD or their families can talk with the providers' supervisors or program directors. The administrative rules outlining how ODDS must respond to complaints also apply to the CME a person might go to for resolution. However, those rules allow for a complainant to request a review of their complaint by the next level of oversight – a complaint made to a CME could be reviewed by ODDS at a complainant's request, and complaints handled by ODDS are subject to review by staff at the Oregon Health Authority if a complainant should choose.

Auditors did not review the complaint handling procedures of the CMEs who provide service. However, ODDS staff inspects CMEs during periodic quality reviews. Corrective actions are issued for those who are not in compliance with complaint administrative rules.

Awareness of complaints process is limited

Question: Who do you talk to when something isn't working with your services?



"It's very hard to know where to go in Portland or tri-county area, or even to know if a complaint is valid and whether you should talk to office staff. It's hard to know the next step and do you make a complaint known..."

Question: Did you know you can complain to the Department (ODDS) if a problem is unsolved?



"I do not have the phone number, tangible experiences or email of the contact person to make a complaint."



"Yes and we have the forms!!"

In our conversations with people with I/DD and their families — including self-advocates, who are well-informed individuals regarding their rights and available services — there was a general sense of confusion regarding where ODDS's complaint process fit into the processes provided by local entities, and in some cases regarding the existence of ODDS' complaint process at all. Some assumed there was no additional oversight.

This confusion exists despite ODDS being uniquely permitted to conduct oversight of another organization's resolution if a complainant feels it was not properly resolved. In fact, one of the complaints reviewed by auditors specifically requested oversight of a

complaint handled by a CME, which ODDS completed and responded to.

ODDS staff and self-advocates speculated the confusion could be due to inconsistent delivery of the annually required provision of information about a person's rights under ODDS, which includes details regarding the complaint process. ODDS stated they were prepared to partner with advocates to revise the communication of these rights to improve understanding. Some may have not realized administrative rules requiring a complaint process for ODDS and the local entities were created in 2014; previously, according to staff, ODDS only investigated complaints referred to them by the Governor's Advocacy Office.

Disorganization hinders compliance with rules and prevents analysis of records

OAR definition of a complaint:

An oral or written expression of dissatisfaction with a developmental disabilities service or provider.

Another weakness with the current process is the comingling of complaint information with other program information that does not meet the administrative definition of complaints. These non-complaints included questions from other agencies about a policy interpretation or a previously investigated complaint; payment disputes from service workers forwarded

to ODDS by the labor union covering those workers; or questions about services that were not within ODDS's ability to resolve and required forwarding to another agency.

Due to the lack of a case management system, staff use the complaints process to track many kinds of contact received by ODDS. Staff compile these points of contact into an internal web-based application and organize them along with bona fide complaints from people having problems with their service. Out of the 61 files auditors reviewed, 12 of them fit this "consultation" category, but were handled by complaints staff and tracked within the complaints system with no way to exclude them from data analysis.

The internal web-based application allows for one of several categories to be selected in a drop-down menu when the complaint is tracked. The complexity of some cases can lead to difficulty in choosing how to classify a complaint. For example, the majority of samples we reviewed were categorized as Other (24 complaints) or Customer Service (12 complaints). One complaint under the Customer Service category included a child who had not received services for which she had been approved months earlier. Another complaint listed as Other involved seeking approval to change living arrangements and a concern that personal information had been disclosed inappropriately. It is not clear that the labels selected for these complaints accurately reflects their content or is useful for analysis.

The disorganization of the files themselves also contributes to the condition we observed. The de facto management for these files is Windows Explorer. Complaint records are in separate file folders and include PDFs, internal web-based application, word documents, and email threads. These folders lack any kind of organization. In particular, many email threads were incomplete and contained duplicate communications or references to documents not found in the files.

Auditors reviewed a sample of 49 complaint files that met the OAR definition of complaint and found that 55% did not comply with rules. Violations included late responses, missing or delayed acknowledgements, or references to resolutions in email threads instead of documented evidence of the written outcome being provided to complainants.

The current process prevents effective analysis from being conducted on complaints. Staff would like to use the records of complaints to determine larger trends in problems facing people with I/DD and their families, but are prevented by the condition of recordkeeping.

The current process lacks documented policies and dedicated personnel; high provider turnover increases need for expertise

Auditors also identified a lack of dedicated complaint handling staff, and a lack of written policy and procedure, as factors affecting the complaint process. While two ODDS staff and a manager work to coordinate the process, this is handled among their other job duties. There are no ODDS staff who are dedicated full time to any part of the complaints process. The complaint information that auditors reviewed show more than a dozen different staff assigned to complaints, including the division director, deputy director, and program managers.

Interviewing people with disabilities as part of a complaint investigation can have many nuances, which staff must be equipped to navigate. People with disabilities may communicate with a method other than speech that an investigator may not be familiar with, or the person's language may be limited. Limitations are not only grammar and rate of speech. Experiences with marginalization can influence someone's desire to participate in the interview process. Parents and care providers can act as gatekeepers and may decline on the person's behalf to discuss the complaint subject. While people shared positive complaint experiences with auditors, we were also told of fears of caregiver retaliation in response to making complaints about their services, and of support workers discouraging them from making complaints to ODDS.

Staff handling complaints – whether at ODDS or for a local CME – must communicate with patience, compassion, and the assumption of credibility on the part of the person with disabilities. It is reasonable to assume that many CME complaint staff and direct support professionals (DSPs) working with people with I/DD exhibit these qualities. However, expertise comes with experience and a joint ODDS/Oregon Health and Sciences University report on the state of the workforce using data from 2018 found Oregon ranked higher than 22 of the 26 states participating in a survey for annual turnover, at an average of 61%. The study states, "A substantial proportion of the DSP workforce consists of less experienced personnel. In 2018, fewer than half of DSPs had been on the job longer than two years. Nearly one third has less than one year of experience."¹¹ This increases the importance of ODDS having trained personnel available who can focus on complaints as their sole responsibility when a complainant chooses to come to ODDS with their complaint.

ODDS uses subject matter experts (SME) to investigate complaints within the Division. These SMEs are not necessarily experts in complaint handling or research, or in the rules regarding how ODDS complaints must be handled and some of them are field liaisons between ODDS and CMEs. These staff do not receive training on how to handle complaints and noted that a complex case can significantly disrupt their normal workload. These subject matter experts have other primary responsibilities that they sometimes prioritize over complaint investigations.

Many cases can be easily resolved within the 45-day deadline prescribed by administrative rules. Yet even a relatively simple case — a policy clarification, for example, compared to a conflict between residents at a group home — can miss deadlines when the person assigned to handle the complaint needs to sort it among their existing job duties.

For example, one case regarding guidance on visitation during the COVID-19 pandemic was referred to the CDDP in the complainant's county for resolution. Emails showed disagreements between ODDS and CDDP staff regarding who should handle the complaint or what should be done.

¹¹ The [report](#), published for 2020, recommends increasing wages for direct support professionals as a primary method of addressing turnover rates. DHS and ODDS secured a 3.2% increase to personal support worker and adult foster home provider rate models in the 2021-2023 budget, to be implemented in July of 2022.

No further communication is documented on the complaint until three weeks later, when the complainant emailed both ODDS and the CDDP to ask for an update.

Question: What changes would you make to the current system?



"Have more places for people to live independently – not Foster care. A list for your area. Connect others with people like me to live together."



"The DSP's...needs better pay and health care – because of high turn overs."



"It seems that everything takes a long time to implement. I suspect our caseworker's caseload is the reason. Lower caseloads would probably make a big difference."

A written process exists for opening a complaint file, which involves retrieving personal information from a range of ODHS databases. However, once an investigation has begun, the process relies on informal processes and staff institutional knowledge developed over the last several years that are not documented. This also means there is no reference for quality review of their own complaint handling, outside of administrative rules.

ODDS staff assigned to resolve complaints also advised auditors that, without a case management system, investigations rely on CMEs and case managers providing records. Due to the diversity of methods CMEs use to manage their records, they are not always readily available, which can lead to delays in handling the complaints. There is also no way for investigators to know if they have received all relevant records.

Improvements to ODDS's complaint process must continue to ensure compliance with rules

ODDS has taken new steps to improve cooperation and communication among staff involved with complaints. Nearly every complaint we reviewed resulted in a respectful and competent resolution and many people we spoke with who had used the process were satisfied by their outcomes. The staff we spoke with who handle complaints take their work seriously, work hard to resolve complaints, and are aligned in their vision for what an improved complaints process could do to inform long-term planning for ODDS.

Yet, without written policies to ensure uniform and equitable handling of complaints, and without staff trained in those procedures, there is nothing to ensure that respect and competency continues. Without these controls, staff turnover may lead to a potentially ineffective and unreliable complaint process.

While a new case management system will certainly help resolve the concerns with file organization and data integrity, ODDS should document the policies that will support this system and a staffing plan that ensures Oregonians with developmental disabilities will receive the dedicated attention they deserve to resolve their complaints. Once this necessary first step is completed, the efforts outlined in ODDS's strategic plan will ensure that future changes to the complaints process will be well supported by staff and informed by the experiences of those who will be using it.

Available resources can help ODDS increase its engagement with diverse groups throughout the state

Adult members of the I/DD community groups and family members of children with I/DD that we spoke to felt that their voices are not heard because they are unable to participate in meetings or become members of ODDS workgroups and committees. These individuals indicated that they need specific support in order to participate, such as transportation, venues that are accessible by public transportation, materials that are available in plain language, and increased time before and after

meetings to allow discussion and questioning by participants. Individuals also expressed the need to have services hours dedicated to participating in meetings, workgroups, and committees to avoid sacrificing hours intended for one purpose to meet their support needs during advocacy. This feeling was corroborated by ODDS staff, who acknowledge that meetings can be overwhelming to participants.

ODDS does engage in some collaboration with stakeholders, including individuals receiving services and their families. However, ODDS and CME staff we spoke with recognize they need to work harder to engage with people in underserved communities. In our review of some of the existing committees and workgroups where stakeholders participated, we found that no organizations dedicated to underrepresented groups were listed as participants. For example, groups like African American, Asian, or Latino communities were not represented in the committees or workgroups.

Existing outreach and communication approaches do not meet the needs of those who do not have access to the internet or email services. For example, one strategy for communicating with stakeholders is by electronic means. ODDS has an email subscription service and a website that people can sign up for and get updates regarding policies and opportunities to provide feedback. This electronic method of communication is efficient, but it does not directly reach people with I/DD who do not have email addresses or who do not have access to the internet.

ODDS communications are almost entirely driven by changes to programs, settlement agreements, or other mandatory or urgent communication. This leaves few resources for focusing on improving existing communications for basic programs such as stakeholder meetings, or improving the website and public-facing information.

Staff have seen improvements in engagement when they have used virtual stakeholder meetings and expressed, they would like to see an increase in activities like posting minutes or videos of meetings to increase participation. Podcasts for employment initiatives, videos communicating safety strategies for COVID-19, and livestreamed meetings are examples of non-written communications from the last year that staff have seen as positive improvements to communications. All communication staff are aware they need to improve opportunities for engagement and are confident ideas would be welcomed.

To improve communication with individuals receiving services, ODDS has contracted with an outside firm to help finalize their strategic communication plan. The contract, which ends in June of 2021, specifically calls for the plan to include, "Targeted strategies for engaging diverse ODDS stakeholder profiles, including communities that speak a language other than English, Black and Indigenous Oregonian communities, and other communities of color."

Question: What support would you need to join a meeting with the Department?

Range of Responses:

The most frequent responses to this question included caregiver support, assistive technology, and transportation.



"Caregiver support, a writeup of key points of the meeting."



"I just need someone listening to me about my ideas and help me with them."



"We need to know, more than a days' notice, of upcoming opportunities of meetings and what the meetings will contain."



"Speaking slowly and clearly with minimal background noise."



"Accessible building yes with a bathroom that is truly wheelchair friendly."

Research shows that, to be effective, people with I/DD and their families need:

- Individualized supports: Agendas and meeting materials in advance, use of support persons to help with preparation and understanding before and after meetings, awareness of facilitators of the pace of the meetings;
- Financial supports: Stipends for individuals and families on limited income;
- Coordination and communication: A coordinator to establish and maintain communication; communications between meetings; and communications beyond conference calls, as some people use communications devices or have impaired speech or do not have technology to access email and the internet;
- Leadership development: Actively recruit during statewide conferences, ask the more experienced self-advocates for recommendations; and
- Value outcomes: Describe and inform participants how input is being used.

Research also shows that one effective way to reach out to stakeholders is to engage directly with existing organizations that represent specific groups. There are many entities throughout the state that ODDS can engage with to increase outreach. A few examples include:

- The Community Partners Council at Oregon Health and Sciences University serves to represent the voices and needs of Oregonians with disabilities, and their families, and supporters. The council represents the geographic, racial, ethnic, socioeconomic, rural, and urban makeup of the state of Oregon.
- The University of Oregon Community Advocacy Council is the primary vehicle for guidance on issues that are important for Oregonians who experience disabilities. The council is comprised of advocates, family members, allies, and professionals who work to improve the lives of individuals with disabilities.
- The Coalition of Communities of Color is an alliance of culturally specific, community-based organizations with representation from African, African-American, Asian, Latino, Middle Eastern and North African, Native American, Pacific Islander, and Slavic communities.

ODDS demonstrated throughout the audit their efforts to identify and address program challenges that are negatively impacting people with I/DD and their families. The strategic plan sets out the mission, vision, and goals for the program and ODDS tracks the progress of these goals. The complaint handling process and stakeholder outreach are a couple of ways for ODDS to continue to capture challenges and ideas for improvement. These two areas, if improved, would further progress ODDS toward their goal to allow people with I/DD to live full lives in their communities.

Question: Is there anything else you want us to know?



"I wish I understood more about how the department is involved in my services and the ways they can help."



"The services I get and my caseworker, everything is great right now. Thank you."



"I also find all of the agencies that help are not on the same page and I would like to know if there is a way to understand what does each one does."



"We need a resource navigator to work with the person with disabilities...so that the disable person can choose where to spend their funds, for their needs."



"I think I've summed it all up."

Recommendations

To enhance current efforts to identify and address program challenges while waiting for a statewide case management system, ODDS should streamline the complaint process by taking the following steps:

1. Assign staff, either through staff re-assignment or a request from the Legislature, that would be dedicated to complaint handling.
2. Create written policies and procedures to address:
 - a. Formal complaints as defined by administrative rules.
 - b. All other inquiries that do not fall under the administrative rules definitions but are received by complaint staff.
3. Train and make users aware of the complaint process and its purpose and value during the required case management contacts with individuals receiving services.

To ensure effective outreach and communication with all members of I/DD community:

4. Educate care providers about, and require case managers to discuss, ad hoc service hour increases with individuals during the annual review of rights and during the case management contacts with individuals to remind them of the opportunity to participate in meetings and advisory groups.
5. Increase participation by individuals with I/DD and their families in advisory groups or agency meetings by providing consistent resources to improve accessibility for participating in process improvement such as:
 - a. Accessibility for individuals to attend meetings such as transportation,
 - b. Live streaming meetings with video recordings and captions,
 - c. Increasing notification requirements,
 - d. Varying times of day for meetings, and
 - e. Providing support staff to help individuals ask questions and repeat information.
6. Engage directly with organizations dedicated to a diverse group of people to invite members to participate in ODDS committees and workgroups or when gathering input for process improvements.

Objective, Scope, and Methodology

Objective

The objective of this audit was to assess how ODDS can improve upon its existing efforts to meet its mission and goals of empowering individuals to live full lives in their communities.

Scope

The audit focused on three areas:

- Program management: ODDS's efforts in identifying program challenges and gaps and its strategies for addressing these challenges and gaps,
- Complaint handling: Opportunities to better streamline the complaint handling process, and
- Stakeholder outreach: Opportunities to improve stakeholder outreach to include all populations served by the program.

Methodology

To address our objective, we used a methodology that included but not limited to, conducting interviews, reviewing documentation, and reviewing complaint processes and data. To gain an understanding of the program and to learn the views, opinions, and perspectives of stakeholders we conducted:

- Interviews with ODDS management and staff;
- Interviews with the executive directors from a Brokerage and a Community Developmental Disabilities Program;
- Interviews with representatives from advocacy groups, including individuals receiving services;
- Reviews of relevant statutes and administrative rules;
- Reviews of ODDS stakeholder study and surveys;
- Analyses of complaint files and complaint data; and
- Analyses of responses of a Questionnaire for individuals receiving services.

We collaborated with advocacy groups and ODDS staff in the development and deployment of the questionnaire to ensure it was based on people-centered and inclusive language. We also asked and received consent from respondents to use the information they provided us in the questionnaire and group meetings, while keeping their identities private.

In our assessment of internal controls, which was based on interviews and reviews of relevant control components and principles, we determined that controls for program management were adequate. The controls for complaint handling and stakeholder outreach were not adequate and contributed to some of the causes for these two areas as described in the audit results section of the report.

Internal Control Review

We determined that the following internal controls were relevant to our audit objective.¹²

- Control Environment: Tone at the top

¹² Auditors relied on standards for internal controls from the U.S. Government Accountability Office, report [GAO-14-704G](#).

- Has management established an organizational structure, assigned responsibility, and delegated authority to achieve the entity's objectives?
- Risk Assessment: Determining and Ranking Risks
 - Has management defined objectives clearly to enable the identification of risks and define risk tolerance?
 - Has management identified, analyzed, and responded to risks related to achieving the defined objectives?
 - Has management considered the potential for fraud when identifying, analyzing, and responding to risks?
- Control Activities: Policies and Procedures
 - Has management designed control activities to achieve objectives and respond to risks?
 - Has management designed the entity's information system and related control activities to achieve objectives and respond to risks?
 - Has management implemented control activities through policies?
- Information and Communication
 - Does management use quality information to achieve the entity's objectives?
 - Has management externally communicated the necessary quality information to achieve the entity's objectives?
 - Has management externally communicated the necessary quality information to achieve the entity's objectives?
- Monitoring Activities: Reporting and Reconciliation
 - Has management established and operated monitoring activities to monitor the internal control system and evaluate the results?
 - Has management remediated identified internal control deficiencies on a timely basis?

Deficiencies with these internal controls were documented in the results section of this report.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We sincerely appreciate the courtesies and cooperation extended by officials and employees of ODDS during the course of this audit. We also appreciate the people with I/DD and their families and care providers and advocacy groups for their time and valuable feedback they provided.

Appendix A: Audit Questionnaire

What is this?

The following questions are from a team of auditors (people who research the way things are done) who need your help. We are researching the way the Oregon Department of Developmental Disabilities Services (which we call "the Department") helps people with intellectual and developmental disabilities. We are trying to understand how the Department can do a better job supporting people.

What do auditors want to know?

We want to know how your life is affected by decisions made at the Department. We are focusing on two questions:

- What you do when something goes wrong with your services?
- What would make it easier for you to give your ideas to the people at the Department?

We want to hear about your experience in your own words. Your answers can be long or short. You are allowed to skip any questions you don't want to answer. You can even choose not to do this at all. Your answers will be private.

You do not need to tell us your name, and if you do we will not share it with anyone.

How do I answer these questions?

Your answers can be typed, written down, or recorded with a video on your computer or phone. Whichever way you choose, they will need to be sent by mail or email to the auditors, or to the person who contacted you about helping us. You can have help giving your answers and in sending them. You can attach extra pages if you need more space.

The auditor's email address is: Olivia.Reched@oregon.gov

The auditor's mailing address is:

ODDS Auditors
Public Service Building, Suite 500
255 Capitol St. NE
Salem OR 97310

If you communicate without speaking or writing, a video with your interpreter helping us understand your answers would be fine. Even if you use help, we want to make sure that the answers are what you think and feel about the Department.

Thank you for helping us with our audit. We appreciate your willingness to help us learn about you and how the Department can be improved.

Questions

1. We want to get to know you. Please tell us something about yourself, like your life interests or goals.

2. Please tell us about the kind of services you receive to support living a full life. For example, personal support; job support; nursing; supply delivery; transportation; or indirect support (when a provider helps you but is not in the same place as you, like going grocery shopping for you).

Remember, you do not have to tell us every service you receive, and you do not have to answer this question at all.

3. Who do you talk to when something isn't working with your services? For example, you might talk to your caseworker, your caseworker's supervisor, the brokerage, or the Department.
4. Did you know that you, or someone who helps you, can complain to the Department if a problem with your services hasn't been solved? If you have ever done this, can you tell us about it?
5. What kind of changes would you make to improve the services you receive from the Department?
6. Have you told anyone your ideas on how to improve your support? Have you ever told someone at the Department your ideas? Please tell us about it.
7. What support would you need to join a meeting with the Department to hear your ideas? For example, caregiver support at the meeting; an interpreter; listening devices; transportation to the meeting; devices like a computer or iPad; accessible buildings; livestreamed meetings; accessible materials; a stipend; or any other type of support.
8. Is there anything else you want us to know about the support you receive from the Department, or how the Department can help you?

Remember, you can attach additional pages if you need more space to answer these questions.



Oregon

Kate Brown, Governor

Oregon Department of Human Services
Office of Developmental Disabilities Services
500 Summer Street NE
Salem, OR 97301

August 18, 2021

Kip Memmott, Director
Secretary of State, Audits Division
255 Capitol St. NE, Suite 500
Salem, OR 97310

Dear Mr. Memmott,

This letter provides a written response to the Audits Division's final draft audit report titled *Developmental Disabilities Leadership is Proactively Addressing Program Challenges to Ensure Optimal Service Delivery*

The Office of Developmental Disabilities Services (ODDS) appreciates the opportunity to examine its service delivery to individuals with intellectual and developmental disabilities (I/DD) and agrees with many of the Secretary of State's findings.

ODDS is proactively identifying challenges and implementing strategies to address the complexity of service delivery created by significant changes to this program over the past several years. We have a robust stakeholder community and continue to engage stakeholders on the strategic plan and goals. Specifically, the audit noted the strength of the ODDS strategic plan, which outlines the mission, vision, goals, and strategies in place to ensure people who need support can get the services they need to live full lives in the community. We value and appreciate the continued engagement of the I/DD community and are proud of the partnerships we have developed with people with I/DD, families, providers, and case management entities. The audit also highlighted our equity framework that informs policy and budget decisions, our Service Equity Plan, and our increased efforts to provide information in languages other than English.

We appreciate the opportunity to have the Secretary of State's office review the work of ODDS and to provide input and recommendations for further improvements.

Below is our detailed response to each recommendation in the audit.

RECOMMENDATION 1 Assign staff, either through staff re-assignment or a request from the Legislature, that would be dedicated to complaint handling.		
Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	Fall 2023	Chelas Kronenberg, Case Management Services and Supports Manager

Narrative for Recommendation 1

ODDS will request a position to oversee this work during the 2023-2025 legislative session. If approved, ODDS will move forward with hiring a staff to oversee the complaint process. ODDS will be mindful of the need for a dedicated position and will continue to assess opportunities to reassign staff in the meantime.

RECOMMENDATION 2 Create written policies and procedures to address: a. Formal complaints as defined by administrative rules. b. All other inquiries that do not fall under the administrative rules definitions but are received by complaint staff.		
Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	July 2022	Chelas Kronenberg, Case Management Services and Supports Manager

Narrative for Recommendation 2

ODDS has initiated discussions regarding formal and informal complaints. ODDS will hold stakeholder calls and gather input and feedback prior to the summer of 2022 in order to file rule amendments. ODDS is also working with Office of Information and Security to adjust the database that holds complaint details. The adjustments will align with the recommendations such that formal complaints are clearly identified and non-complaints are filed and tracked separately.

RECOMMENDATION 3 Train and make users aware of the complaint process and its purpose and value during the required case management contacts with individuals receiving services.		
Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	September 2022	Chelas Kronenberg, Case Management Services and Supports Manager

Narrative for Recommendation 3

ODDS provides training to case management offices that request the training or when it is identified that complaints are not being processed according to administrative rules. Following the rule amendments, ODDS will provide additional training related to the clarification of formal and informal complaints, expectations for case managers to discuss the option of filing complaints as well as how case management offices respond to complaints.

RECOMMENDATION 4 Educate care providers about, and require case managers to discuss, ad hoc service hour increases with individuals during the annual review of rights and during the case management contacts with individuals to remind them of the opportunity to participate in meetings and advisory groups.		
Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	January 2023	Caitlin Shockley, Policy Manager

Narrative for Recommendation 4

ODDS will add language to the Case Management rule requiring case managers to remind individuals of the opportunity to engage in advocacy at least annually, with the annual review of rights. ODDS will also continue to train case managers to review the individual's ability to request an exception for additional service hours to meet their assessed needs, including service hours to receive support during advocacy activities. ODDS will incorporate this requirement to discuss advocacy opportunities and supports needed for individual to engage in advocacy to case managers training and will issue guidance to case managers and providers around this issue.

RECOMMENDATION 5

Increase participation by individuals with I/DD and their families in advisory groups or agency meetings by providing consistent resources to improve accessibility for participating in process improvement such as:

- a. Accessibility for individuals to attend meetings such as transportation,
- b. Live streaming meetings with video recordings and captions,
- c. Increasing notification requirements,
- d. Varying times of day for meetings, and
- e. Providing support staff to help individuals ask questions and repeat information.

Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	End of 2022	Anna Lansky, ODDS Deputy Director

Narrative for Recommendation 5

- a. Individuals receiving services already have ability to use Medicaid funded transportation services to access advocacy activities, exceptions to increase benefit limits can be granted if there is additional need. With implementation of the new rate model for transportation in July 2022, ODDS hopes to increase provider capacity to provide transportation. Additionally, ODDS has requested to use a portion of ARPA funding to explore creative ways to access transportation resources in the community. ODDS will be working with transportation experts to explore creative types of transportation by the end of 2022.
- b. ODDS is exploring ways to make meetings more accessible in how they are structured, paced, facilitated and what types of supports can be provided during meetings (also including, but not limited to interpretation, live captioning, graphic facilitation, etc.). ODDS will expand these practices to enhance individuals and family member participation in meetings, workgroups and other advocacy opportunities.
- c. ODDS will work, with stakeholder input, to develop ways to increase notification requirements, including providing advance notices and making notifications available in at least five major languages (and other modes upon request).
- d. ODDS has conducted some meetings during various times or by offering scheduling options, including lunch hours, or after work hours to accommodate individual and family schedules. ODDS will continue to expand this practice to accommodate varying schedules when engaging self-advocates and family members.
- e. Individuals have ability to use their paid support staff to support them during advocacy activities.

RECOMMENDATION 6

Engage directly with organizations dedicated to a diverse group of people to invite members to participate in ODDS committees and workgroups or when gathering input for process improvements.

Agree or Disagree with Recommendation	Target date to complete implementation activities	Name and phone number of specific point of contact for implementation
Agree	End of 2022	Anna Lansky, ODDS Deputy Director

Narrative for Recommendation 6

ODDS is committed to community relationship development and included this as one of six priority areas in its Service Equity Plan. ODDS will continue and expand its community engagement efforts in collaboration with the Office of Equity and Multicultural Services (OEMS). ODDS is currently moving its Service Equity plan forward, and through this effort will identify and prioritize specific actions and projects related to community engagement. ODDS is working to hire an ODDS Equity and Inclusion Manager, who will assist ODDS Leadership in spearheading the work to build direct relationships with diverse groups and engage them in providing ongoing input in the policy making process. One example of the ongoing effort is ODDS' ongoing dialog with the Spanish Speaking Family leaders' group, Tribal outreach efforts and others.

Thank you again for the opportunity to review ODDS services. Please contact Lilia Teninty with any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Lilia Teninty". The signature is fluid and cursive, with a large loop at the end.

Lilia Teninty
ODDS Director

cc:



Audit Team

Olivia Recheke, MPA, Audit Manager

Andrew Love, CFE, Audit Manager

Jeffrey Watson, Staff Auditor

About the Secretary of State Audits Division

The Oregon Constitution provides that the Secretary of State shall be, by virtue of the office, Auditor of Public Accounts. The Audits Division performs this duty. The division reports to the elected Secretary of State and is independent of other agencies within the Executive, Legislative, and Judicial branches of Oregon government. The division has constitutional authority to audit all state officers, agencies, boards and commissions as well as administer municipal audit law.

This report is intended to promote the best possible management of public resources.
Copies may be obtained from:

Oregon Audits Division

255 Capitol St NE, Suite 500 | Salem | OR | 97310

(503) 986-2255
sos.oregon.gov/audits