

3160

14-540-(298)

Kroh, Karen

From: Melanie Hill <melaniehill@jandfcommunity.org>
Sent: Tuesday, December 27, 2016 10:57 AM
To: Kroh, Karen
Subject: Retry
Attachments: ODPRegs12-19-16.docx



Karen,

Thanks for letting me know that you were unable to open the document I sent last week. I changed the format to Word and am re-sending it. Please let me know if you are unable to access it in this format.

Have a great day!

--

Melanie Hill, MS

Executive Director of Operations

Jessica and Friends Community

1625 East Market Street York, PA 17403

(717) 747-9000

www.jandfcommunity.org

The mission of Jessica and Friends is to provide faith-based support and services for individuals with autism and intellectual disabilities.

Confidential - This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.



✝ *Faith-based support and services for individuals with autism and intellectual disabilities*

December 20, 2016

Ms. Julie Mochon
Human Service Program Specialist Supervisor
Office of Developmental Programs
Room 502, Health and Welfare Building
625 Forster Street
Harrisburg, PA 17120

**Re: Comments on Chapter 6100 – Support for Individuals with
an Intellectual Disability or Autism**

Dear Ms. Mochon:

Thank you for the opportunity to provide comments and make recommendations on Chapter 6100 – Support for Individuals with an Intellectual Disability or Autism

Jessica & Friends Community is a 501(c)(3) nonprofit human service organization that supports many individuals with autism and intellectual disabilities who receive community services and supports through our residential, community and in-home programs. As the Executive Director, my review of the Chapter 6100 regulations and comments are provided from a program perspective.

Since the sections commented on below are also included in the 2380 and 6400 regulations, these recommendations will apply to all three sets of regulations.

Rights Team 6100.52

Objection: Rights Team:

As part of the already well-established Incident Management system already outlined in 6100.401, all allegations of rights violations must be investigated. If a violations of rights is established, the existing system has an established corrective action follow-up process.

Recommended solution: I recommend that the 6100.52 Rights team section as proposed for the new regulations be eliminated completely.

Rationale: The establishment of a new Rights team would necessitate that agencies incur additional costs. The Incident Management system currently in place is more than adequate in investigating potential rights violations in a timely manner.

1625 East Market Street © York, PA 17403
Telephone 717-747-9000
www.jandfcommunity.org

Annual Training Plan 6100.141

Objection: Interns and volunteers should not be included to go through the training process. The interns and volunteers are time limited. The information they need should be included in an agency orientation at commencement of volunteer/intern activity. Requiring the same training as paid employees is going to be cost prohibitive for agencies and time prohibitive for volunteers and interns.

Recommended solution: A general agency/program orientation can take place at the time volunteers/interns begin volunteer hours. The required annual training hours should be stricken from the proposed language.

Rationale: Volunteers and interns have limited time to donate to agencies. Required annual training hours will likely be a deterrent to community volunteers stepping forward to assist. This will also diminish the ability to further integrate individuals within the community as well as their ability to interact with members of the community who may not be disabled.

Facility characteristics relating to size of facility 6100.446

Objection: The Community Rule does not impose an absolute cap on program size. Federal regulation expressly provides the following: We do not believe there is a maximum number that we could determine with certainty that the setting would meet the requirements of HCBS setting. The focus should be on the experience of the individual in the setting." (79 Fed Reg 2968 January 16, 2014).

Recommended solution: The maximum capacity of 8 per residential home and 15 per Day Program site should be stricken from the proposed regulations. Agencies should have the discretion based on staffing and the needs of individual needs and their families to determine the level of community integration.

Rationale: Setting maximum capacity, particularly in Day Programs conflicts with the rights of the individuals to have choice in their daily activities. Should a number of individuals be unwilling or unable to leave Day Programs on any given day, agencies will be in violation. There are no clear exceptions or guidance in the proposed regulations indicating that individuals have the right to choose to be in the program or engage in community activities.

Facility characteristics relating to location of facility 6100.447

Objection: In subsection (a) "in close proximity" is undefined and provides no guidance to providers as to the expectations. In areas where there are a concentrated number of providers, how are agencies to determine the locations of other agency facilities without violating HIPAA laws? Homes that are integrated into the community already will be nondescript and not easy to identify.

In addition, there is concern about the maximum capacity of no more than 10% of the units in an apartment, condominium or townhouse development may be funded in accordance with this chapter.

Recommended solution: It is recommended that "close proximity" be removed from the proposed regulations as well as the 10% cap.

Rationale: These requirements as proposed could seriously diminish the options for disabled individuals in terms of independent housing. It also clearly reduces their "rights" in terms of

choosing where they would like to live which is in conflict with their right to make choices as anyone else would do in regards to housing. This appears to be an unfair practice as there is no such requirement for non disabled housing.

Development and Revisions of PSP 6100.221

Objection: Consistent and inclusive language –

This section should have consistent language to correspond with other licensing chapters specifically 2380 and 6400. This will allow the PSP team sufficient time to develop the PSP and not delay receiving services. This would eliminate the need for section 6100.222.

Recommended solution: Eliminate section 6100.222

PSP Process 6100.222

Objection: Redundant –

Information in this section should be present in 6100.221

Recommended solution: Remove this section completely as it is included in 6100.221

Content of the PSP 6100.223(18 - 19)

Objection: Need added content

Services and supports not well-defined and level of participation

Recommended solution: Add (18) to include in PSP need for behavior support. Add (19) to include in PSP the individual's choices in regards to participation in community employment and other integrated services based on the PSP process in relation to their rights.

Documentation for Support Delivery 6100.226

Objection: Overly prescriptive and unnecessary

Subsections c and e should be eliminated regarding documentation every time a service is delivered as this is overly prescriptive and a duplicate of Chapter 51. It is inappropriate to require such documentation every time a service is provided. Subsection f could be deleted as unnecessary and overly prescriptive.

Recommended solution: Delete section c, e, and f

Medication administration 6100.461, 462, 463, 464, 465, 466, 467

Objection: Codifying content that requires modifications over time into regulations will lock a crucial component of service provision into temporal practices which will become obsolete as new information, prevailing practices and technology emerge. Duplicating content which is as detail-specific as the proposed regulations here when the state already has an externally accepted training module invites discrepancy between the regulations and the training manual and prohibits the training module from staying current as new information, prevailing practices, and technology emerge. There are already discrepancies between the proposed 6100 regulations and the Department's Approved Medication Administration Training. The training's required checklist for medication self-administration has discrepancies with the proposed regulation. There is also a discrepancy regarding the practice of pre-pouring medication.

Recommended solution: The section on self-medication (461) needs to be rewritten to be in compliance with the Department's Medication Administration Training modules. The section on Medication Administration (462) delete sections a-c and reword to "Persons who administer prescription medications or insulin injections to individuals shall receive training by the individual's source or healthcare or satisfactorily complete the Department's/ODP's most current

Medication Training Module.” Sections 463, 464, 465, 466, and 467 are far too prescriptive and subjective given the training that must be completed by the provider staff. It should be edited for clarity and brevity.

Thank you for taking the time to review my comments.

Sincerely,

Melanie Hill, MS
Executive Director of Operations