






## I/DD Integration in NWD System Checklist

This checklist provides a guide for ways to promote integration of the intellectual and developmental disabilities (I/DD) network as part of a robust and responsive No Wrong Door (NWD) System for all populations. Integration of these networks further enhances access to long term services and supports (LTSS) that can address social determinants of health (SDOH). The state agency responsible for administering services to individuals with I/DD should be an active part of the NWD System governance structure. Additionally, I/DD network entities can support the development, facilitation, and implementation of NWD System functions. Below are examples of I/DD integration with state NWD systems.

**Table 1. Governance and Administration**

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Intersection points	
<ul style="list-style-type: none"> <li>✓ Ensure that the state department responsible for I/DD services and supports is an active and engaged member of the NWD governance team.</li> <li>✓ Consider local agreements between Area Agencies on Aging (AAAs), Centers for Independent Living (CILs), Developmental Disabilities (DD) Councils and other disability groups to promote collaboration.</li> <li>✓ Formal agreements may not exist or are not necessary; consider other avenues for strong partnership that could be leveraged to formalize partnership statewide.</li> </ul>	
Tools/State or National Resources	
	<p><b>Georgia</b> – The state launched a State Aging and Disability Resource Center (ADRC) Advisory Council with representatives from the state unit on aging, state Medicaid agency, the Department of Community Health, the Department of Behavioral Health and Developmental Disabilities, the State Independent Living Council, all nine of Georgia’s CILs, and the Brain Injury Association of Georgia. The Advisory Council serves as the NWD Steering Committee. The partnerships are solidified through contracts and memorandums of understanding (MOUs).</p>

**Table 1. Governance and Administration**



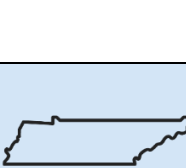
	<p><b>Missouri</b> – The University of Missouri-Kansas City Institute for Human Development houses the Center for Excellence in Developmental Disabilities UCEDD, which serves as the lead entity for the NWD System in the state. The UCEDD distributes funds to local AAAs, CILs, I/DD Information and Referral (I&amp;R), and service providers to support their immediate needs to respond to the COVID-19 pandemic. The UCEDD has also been conducting <a href="#">Missouri Open Door workshops</a> to bolster ADRCs’ knowledge of assistive technology. Lastly, the UCEDD is using funds to increase Missouri Family to Family’s<sup>1</sup> capacity to serve as the lead NWD coordinating entity. All these activities have the goal of increasing the coordination of the NWD System.</p>
	<p><b>Arkansas</b> – The UCEDD in Arkansas, which serves as the lead entity for the NWD system, is creating partnerships with state agencies, non-profits, advocacy organizations, and managed care organizations, which are responsible for delivering the bulk of Medicaid-funded services for individuals with developmental disabilities.</p>
	<p><b>Nebraska</b> – The state’s ADRC formalizes the relationship between AAAs and CILs through MOUs. Attachment Two of this <a href="#">2020 ADRC Annual Report</a> provides a sample MOU between the Nebraska Association of AAAs, the League of Human Dignity, and several other disability groups.</p>
	<p><b>Arizona</b> – The UCEDDs work with the statewide Medicaid system to implement a system for person-centered service planning across the Arizona Long Term Care System’s (ALTCS) home and community-based settings (HCBS) and managed care organizations. UCEDD staff collect information on how Medicaid staff use person-centered planning for continuous quality improvement purposes.</p>

**Table 2. Public Outreach and Coordination with Key Referrals Sources**

<p>Intersection points</p>
<ul style="list-style-type: none"> <li>✓ The state NWD System includes access points for I/DD including I/DD resources in its publicly searchable and internal database.</li> <li>✓ Consider on-going training and established referral protocols for ADRC staff to be informed of I/DD services and how to make seamless referrals.</li> </ul>
<p>Tools/State or National Resources</p>

<sup>1</sup> The [Missouri Family-to-Family Resource Center \(MoF2F\)](#) provides three types of services: information and referral, parent-to-parent, and leadership development opportunities.

**Table 2. Public Outreach and Coordination with Key Referrals Sources**




	<p><b>American Samoa</b> – The UCEDD in American Samoa is developing an outreach plan to respond to the needs of people at risk for social isolation. The UCEDD is translating aging and disability documents into Samoa and conducting training for older adults, people with disabilities, caregivers, and clinicians on using telehealth technologies. Lastly, the UCEDD is enhancing infrastructure and e-services in Manu’a and remote locations in Tutuila to support a single point of entry to access services.</p>
	<p><b>Missouri</b> – Missouri Assistive Technology (MoAT) partners with the UCEDD to provide resources, tools, and technical assistance to enhance technology based I&amp;R, navigation/person-centered planning, social isolation screening, and peer support services provided by AAAs, CILs, Missouri Family to Family, and other state aging and disability entities. They also use grant funds to augment Missouri Family to Family’s capacity to serve as the lead NWD coordinating entity and increase virtual visibility to various partners (e.g., website, social media) and ensure accessible and culturally responsive outreach to target populations across the state.</p>
	<p><b>Tennessee</b> – The ADRC partnered with the Council on Developmental Disabilities to make improvements in their <a href="#">Pathfinder information and referral system</a>. They plan to expand the disability resources included, modernize the website, and increase user friendliness for all disability related services available in the state. They also trained their I&amp;R staff in the Supporting Families LifeCourse model.</p>

**Table 3. Person-Centered Counseling<sup>2</sup>**

<p>Intersection points</p>
<ul style="list-style-type: none"> <li>✓ ADRCs have the capacity to support individuals with I/DD and their caregivers directly or through formal partnerships with other organizations.</li> <li>✓ ADRC staff may have competencies to support individuals with I/DD transitioning from the school-based support system to the adult service system. Staff can also leverage formal partnerships that exist to facilitate referrals to local organizations with these competencies.</li> <li>✓ ADRC staff understand the unique current and future needs of caregivers for individuals with I/DD.</li> </ul>

<sup>2</sup> “Person-centered counseling” is intended to describe systems structures, functions and job duties, but not intended to serve as a brand that all states may use in labeling their access functions or job titles. For instance, states are implementing person-centered planning in various ways, including through training programs designed to bolster and upgrade the skills of their existing options counselors and other staff who use different titles. It is expected that many states will continue to use the term “options counselor” and other such job titles.

**Table 3. Person-Centered Counseling<sup>2</sup>**

Tools/State or National Resources	
	<p><b>District of Columbia</b> – The NWD System in DC initiated a major effort to train their network agencies in Person-Centered Thinking™ and cultural competency. They worked with the Support Development Associates, the Learning Community for Person-Centered Practices, and the National Center for Cultural Competence at Georgetown University to develop a person-centered counseling training program that was offered across the District to NWD entities. A major partner in this initiative was the Department on Disability Services.</p>
	<p><b>Wisconsin</b> – Since the inception of the ADRC in Wisconsin in the late 1990s, Wisconsin has improved the ADRC workforce and infrastructure to better serve individuals with I/DD and their family members. Local ADRCs must hire staff with at least one year of experience working with people who have I/DD or other target populations. ADRC contracts require that local governing boards reflect the ethnic and economic diversity of the geographic area served by the resource center. Per <a href="#">Wisconsin Admin. Code § 10.22(3)</a>, at least one-fourth of the members of the governing board shall be older persons or persons with physical or developmental disabilities or their family members, guardians or other advocates, reflective of the resource center’s target population. Wisconsin also developed an online training and certification program required for all ADRC staff providing person-centered counseling. The online training course stresses the importance of employing person-centered principles and practices in options counseling and gives concrete instructions on how to incorporate these principles and practices.</p>
	<p><b>Georgia</b> – Georgia developed an options counseling certification partnership with Boston University’s Center for Aging &amp; Disability Education &amp; Research. Seventy- seven individuals completed the certification process within the state’s ADRC network. Certified options counselors support each individual’s action plan by connecting the person to private pay and publicly funded LTSS options, including transition and diversion programs such as Money Follows the Person and Nursing Home Transitions. Georgia also received targeted technical assistance from ACL’s National Center on Advancing Person-Centered Practices and Systems to advance person-centered planning in the state.</p>

**Table 4. Streamlined Eligibility for Public Programs**

Intersection points
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- ✓ The NWD System coordinates with the state department of education and other key entities to assist with youth transitions.
- ✓ At the local level, applications for publicly funded programs are coordinated.

Tools/State or National Resources



**Arizona** – Two UCEDDs in Arizona work with disability partners and Medicaid to form the [Arizona Coalition for Transition Success](#), which will develop a Transition Success Plan to support youth with I/DD in transitioning to employment and/or postsecondary education. The comprehensive transition plan promotes the ability of young adults with disabilities to make informed decisions and exercise control over their transitions. The Coalition is also conducting a review and analysis of the current transition landscape in Arizona to identify best practices and create a “no wrong door” approach to transitions or youth with disabilities. Arizona employs a NWD System model with key partners in each of the eight ADRC Planning and Service Areas: AAAs, the Department of Economic Security (ADES) Division of Aging and Adult Services (DAAS), the ADES-Division of Developmental Disabilities (DDD), the ALTCS program of the Arizona Health Care Cost Containment System (AHCCCS), the state Medicaid agency, and the CILs.

**Table 5. Cross Training**

Intersection points

- ✓ ADRC and I/DD programs can promote cross-training on the services each offers. Potential topics include:
  - Availability of HCBS for individuals with I/DD and their caregivers;
  - How ADRCs support access to public and private LTSS through options counseling;
  - Types of I/DD services and financing options; and
  - I/DD service network 101.

Tools/State or National Resources

**Table 5. Cross Training**



**Georgia** – The formation of formal and informal partnerships is an essential element of the Georgia ADRC model. The [Aging and Disability Resource Connection](#) relies on the collaborative nature of multiple agencies at both the state and local level. State and local level partnerships include the Division of Mental Health, Developmental Disabilities and Addictive Diseases, the Division of Aging Services, the Department of Labor-Tools for Life, the Georgia Hospital Association, the Governor’s Council on Developmental Disabilities, the Governor’s Council on Aging, the Governor’s Office of Planning and Budget, the Department of Community Health, Walton Options, Brain and Spinal Injury Trust Fund Commission, Shepherd Spinal Center, the Alzheimer’s Association of Georgia, the Atlanta Alliance on Developmental Disabilities, Adult Protective Services and the Division of Family and Children Services, Service Providers, and Consumers.

**Table 6. Evaluation and Sustainability**

Intersection points

- ✓ I/DD and aging entities discuss data they collect and how they can improve the state access system data storytelling.
- ✓ All entities included in the NWD System coordinate on federal grants.
- ✓ The NWD System entities take advantage of Medicaid administrative claiming.

Tools/State or National Resources



**Arkansas** – The UCEDD is creating a database to track information pertinent to the impact of COVID-19 on people with disabilities and older adults. Certain data elements, such as needed technology enhancements, in-home service gaps, and regional differences, will be available to advise policymakers on systems change.



**Delaware** – The UCEDD developed a [survey about COVID-19 vaccines for older individuals, people with disabilities, and their caregivers](#). Delaware hopes to gain insights on ways to better provide vaccines and boosters in an accessible and equitable manner in the future. Preliminary findings have contributed to an online repository of resources, strategies, and best practices to promote inclusive and accessible preventative care.