

STATE OF ILLINOIS DEPARTMENT ON AGING

Colbert Semi-Annual Report

November 2014 – April 2015

Office of Transitions and Community Relations

5/1/2015

This Colbert Semi-Annual Report outlines Colbert Consent Decree implementation activities from November 1st, 2015 to April 30th, 2015.

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Background

The *Colbert v. Quinn* lawsuit alleged that individuals are being unnecessarily segregated and institutionalized in nursing facilities in Cook County in violation of the Americans with Disabilities Act (ADA) and Rehabilitation Act. Through the Colbert Consent Decree, the State of Illinois agreed to provide the necessary supports and services to enable a definitive number of consenting Class Members to live in the most integrated community settings appropriate to their needs. The State also agreed to gather data that would reflect the costs of maintaining Colbert Class Members in community-based settings relative to the costs of maintaining those same individuals in nursing facilities. The results would be used to develop a Cost Neutral Plan to be used to guide the State in future community reintegration efforts-

The Illinois Department on Aging (IDoA) assumed the leadership of the Colbert Consent Decree implementation on January 22, 2014.

Introduction

In the 15 months since IDoA assumed leadership of the Colbert Consent Decree implementation, IDoA has made significant advances relative to the processes necessary to transition Colbert Class Members to community-based settings which include:

- Creating a new departmental division the “Office of Transitions and Community Relations” (OTCR) currently staffed with seven (7) FTEs
- An average 42 Class Members transitioned per month, 700 Class Members transitioned to community-based settings as of March 31st, 2015
- Operating protocols were established and providers were trained
- Management systems established to monitor provider transition activities
- An electronic web-based provider data entry system was created for real time tracking of Class Member transition activity
- Outreach materials were revised and distributed.
- Three (3) Housing Locator agencies were funded through performance-based contracting to provide transition services for certain Colbert Class Members
- Ten (10) community mental health centers were contracted to provide transition services for Colbert Class Members who need community mental health services through Inter-Governmental Agreements (IGA) with Department of Human Services (DHS)
- Three (3) Recovery Drop-In Centers were funded for the use of Colbert and Williams Class Members

Highlights from work accomplished in the last 6 months include:

- A Six Month Plan to Achieve Compliance developed and negotiated with Class Plaintiffs’ attorneys
- Administrative and contractual cost data prepared and submitted for Cost Neutral planning
- Contracts with Managed Care Organizations (MCO) renewed include more stringent performance indicators
- IGA with University of Illinois at Chicago – College of Nursing (UIC-CON) for clinical oversight and quality assurance activities submitted to Governor’s Office of Management and Budget (GOMB) for approval.

- IGA with the University of Illinois at Chicago - College of Social Work for a “Center of Excellence” to provide training, technical assistance for providers and State staff in best practices related to community reintegration and services approved by the State
- Procedures developed for selected Case Coordination Units (CCUs) to provide outreach, evaluation and transition services for Colbert Class Members age 60 and over.
- Contracts with Community Mental Health Centers (CMHCs) have been approved to provide evaluations for Class Members diagnosed with serious mental illness to increase the number of referrals to CMHCs for transition services
- Improvement of MCO Evaluation recommendation rate by 29% (from 30% to 59%) over last 6 months

The 6 Month Plan referenced above is appended to this document. It extends the date for achieving 1100 transitions of Colbert Class Members to community-based settings until November 30, 2015, along with other very specific benchmarks. IDoA staff will continue to work to finalize the pending initiatives and to monitor them closely along with established transition processes as they are integral to the State’s achievement of compliance with the revised benchmarks as stated in the Six Month Plan. Details regarding these initiatives and other activities conducted from November 1, 2014 through April 30, 2015 are found in the body of this report.

Cost Neutral Planning

The Financial Analyst position that is principally responsible for collecting and reporting administrative and contractual costs for IDoA was filled in March, 2015.

Medicaid cost data for services provided to Colbert Class Members from July 1, 2014 through March 31, 2015 was submitted to Berkley Research Group on April 20, 2015 by HFS. Administrative and contractual cost data for services billed from July 1, 2014 through March 31, 2015 was collected by IDoA and submitted to Berkley Research Group on April 30, 2015.

Berkley Research Group will analyze data submitted and report to the Cost Neutral Group regarding its viability for Cost Neutral planning purposes at the May 22, 2015 meeting convened for that purpose.

Court Monitor's Report

The Court Monitor issued the court mandated Annual Report November 25, 2014 regarding the State's compliance with the requirements of the Colbert Consent Decree. In his report, the Court Monitor found the State in compliance with the Outreach and Education requirements of the Consent Decree but out of compliance with the Evaluation and Transition requirements.

The Court Monitor noted the State's progress in the months since IDoA took the lead of the Consent Decree implementation. However, concerns remain regarding the quality of the Evaluations and Service Plans of Care that are developed by one particular vendor and, that, as of November 8, 2014, the State had transitioned 527 Colbert Class Members, 273 less than the 800 transitions mandated by the Consent Decree.

The Court Monitor made a number of recommendations that the State is working to implement. See the recommendations below with strategies developed by the State in response.

1. Require the Managed Care Companies (MCOs) doing Evaluations to standardize the Evaluation forms and required information (e.g., social histories and Service Plans of Care).
This task is included in the deliverables articulated in IGA between IDoA and UIC-CON expected to be executed May 1, 2015.
2. Conduct routine and detailed audits/reviews of MCO Evaluations to ensure consistency, quality and comprehensiveness.
This task is included in the deliverables articulated in the IGA between IDoA and UIC-CON expected to be executed May 1, 2015.
3. Develop a process/protocol for reviewing Evaluations that have a recommendation for no Community placement. This independent review should include the ability to challenge and overturn a negative recommendation.
This task is included in the deliverables articulated in the IGA between IDoA and UIC-CON expected to be executed May 1, 2015.
4. Increase the number and consistency of referrals to Housing Specialists and CMHCs by increasing the number of Evaluations and Service Plans of Care completed by MCOs on a monthly basis.
The number of Evaluations and Service Plans of Care has increased in the months of February and March from previous months (see Exhibit C). IDoA attributes this to 1) the reference to a requisite number of evaluations to be completed monthly in the December 2014 contract renewals for Aetna and IlliniCare, 2) IDoA weekly strategy discussions with Aetna and IlliniCare, 3) IDoA monitoring of the number of evaluations completed monthly, 4) Aetna and IlliniCare

development of their respective outreach strategies. Additionally, IDoA will increase the number of evaluations completed through new processes described in the Colbert Program Innovations section of this report.

5. Continue to expand and improve the availability of housing units for Class Members who use wheelchairs.

With the Illinois Department of Housing Development Authority (IHDA) among its funders, IFF will provide a total of 70 fully accessible units exclusively for Colbert Class Members, with an additional 55 units through its Access Housing Project which will be made available to Colbert Class Members as well as other individuals disabilities. OTCR has also entered into a master-lease type agreement for ten (10) units in a wheelchair friendly building on the south side of the city featuring an elevator and large accommodating space for ease of mobility. Additionally, OTCR has secured a clustered-model agreement which includes a minimum of ten (10) accessible units in a building in the Irving Park neighborhood on the north side of Chicago. IDoA continues to explore and develop new relationships with developers that have accessible units in their existing portfolios. It is expected that other master lease type arrangements for 15 to 20 wheelchair accessible units on the north and south sides of the city will be finalized by June 30, 2015. The State's efforts for future development include IHDA's changes to the Qualified Application Plan that will include tax incentives for the development of accessible units.

6. Explore alternative strategies to engage, evaluate and place Class Members over the age of 60. Evaluate the potential role that Care Coordinator Units (CCUs) might play in this effort. *IDoA will utilize selected CCUs to improve outreach to Colbert Class Members 60 years of age and greater in nursing facilities where referrals to the Money Follows the Person (MFP) Program Web Application have been deficient. With the assistance of the Illinois Department of Healthcare and Family Services (HFS), IDoA will provide names of Class Members that reside in assigned nursing facilities for outreach by selected CCUs. The CCUs will identify Colbert Class Members age 60 and greater that are interested in transitioning to community-based settings, conduct Evaluations, develop Service Plans of Care, Risk Mitigation Plans, Social Histories, 24-Hour Back-up Plans and provide post-transition monitoring for 12 months in accordance with the Colbert Consent Decree and IDoA requirements.*
7. Develop (in an expedited way) the capacity to analyze and manage all levels of incidents that occur with Class Members. The proposed IGA with University of Illinois at Chicago - College of Nursing (once finalized) should provide a core, missing piece. The State also needs designated staff to ensure that all elements of the review (e.g., mortality review) are done in an in depth, and timely manner. *Currently, incident reports are submitted to IDoA for review. Staffings are conducted by IDoA staff with CMHC and MCO staff for review of incidents that involve Class Members that receive community mental health treatment. Other incidents are managed internally by MCO staff. The IGA between IDoA and the UIC-CON, expected to be effective May 1, 201, includes incident management for all Class Members in the deliverables. The Quality and Compliance Liaison position is principally responsible for managing the deliverables of this IGA and it is anticipated that this position will be filled in June 2015.*

Outreach

IDoA continues to contract with two Colbert Outreach providers: AgeOptions, the Aging and Disability Resource Center (ADRC) serving suburban Cook County and the City of Chicago Department of Family Support Services (CDFSS), the Aging and Disability Resource Network (ADRN) serving the City of Chicago. Each agency has hired and trained three (3) Transition Engagement Specialists to conduct outreach, education and engagement activities for Colbert Class Members.

The ADRC and ADRN submit monthly reports to IDoA regarding their Colbert Outreach, Engagement and Peer Mentoring activities. The report captures quantifiable data from each agency’s outreach efforts in their respective nursing facilities in Cook County. The type of data that is reported each month includes number of outreach and engagement activities, sum of participants that received Colbert Consent Decree information and total number of referrals generated as a result of outreach information. The monthly report also includes a section for each provider to report any challenges and/or successes from their Colbert Outreach and Engagement activities. See Exhibit A for activities reported October 1, 2014 through March 31, 2015. It is notable, that, as of March 31st, 2015, Colbert Outreach contracts have conducted outreach activities in 157 (84%) of the 186 nursing facilities located in Cook County.

Exhibit A

Colbert Outreach & Engagement Activities

	ADRC – AgeOptions	ADRN -- CDFSS
# of Colbert Referrals	206	460
# of visits to Nursing Homes	91	104
Total # of Nursing Homes Engaged	90 of 108	67 of 78
# of Peer Mentors	5	8

Peer Mentoring Program

In October 2014, the ADRC and ADRN began recruitment and training of Colbert Class Members that have successfully transitioned to the community and are willing to share their experience with nursing home residents who are considering transitioning into community living. Colbert Peer Mentors are to accompany the Transition Engagement Specialists to nursing facilities and participate in group and individual presentations. The ADRC and ADRN will give the peer mentors a stipend to cover their time and transportation.

The ADRC and ADRN monthly activity reports include the number of peer mentors and the name and date of nursing facilities that were visited during the month. The ADRC and ADRN are expected to utilize a Peer Mentor in their outreach activities at least two (2) – three (3) times per week. Transition Engagement Specialists from both the ADRC and the ADRN have reported greater interest among Class Members when Peer Mentors are utilized and, often, a larger number of Colbert referrals generated. The ADRC and ADRN utilized the assistance of a trained Colbert Peer Mentor on average four (4) times per week since the first Peer Mentor involvement in November 2014. Given the effectiveness of this approach, IDoA will encourage the ADRC and ADRN to continue their recruiting efforts and maximize the use of Peer Mentors in their outreach efforts.

Referrals for Evaluation

The core recruitment strategies for Colbert Class Members continues to be 1) use of Transition Engagement Specialists employed by AgeOptions and CDFSS to provide information about the Consent Decree and make referrals when appropriate, 2) Aetna and IlliniCare outreach to their respective Integrated Care Plan members, 3) the support of the Chicago Regional Ombudsmen’s Office and the Cook County Suburban Ombudsmen’s Office, 4) information provided to Colbert Class Members and the community at large that encourages self-referral as well as referral by families and friends.

The MFP Web Application reports a total of 4233 referrals for evaluation for transition to a community-based setting since implementation began in February 2013. From October 1, 2014 thru March 31,

2015,¹ 1406 referrals were made for evaluation. The HFS MFP Web Application continues to be the primary vehicle for Colbert referrals, but Class Members and the community at large can access hard copies of the MFP referral application through Ombudsmen, Engagement Specialists, nursing facility, MCO and Senior Help Line staff as needed. See Exhibit B below for the sources of Colbert referrals since implementation and during this reporting period.

Exhibit B

Colbert Referrals to Evaluation by Source

Source	# of Referrals Prior to 9-30-14	# of Referrals from 10-1-14 to 3-31-15
NH Staff/MDS 3.0 Q	1141 (40.4%)	358 (25.5%)
ADRC/ADRN	660 (23.4%)	498 (35.4%)
Ombudsman	361 (12.8%)	72 (5.1%)
State or Community Agency	259 (9.2%)	195 (13.9%)
Self	100 (3.5%)	93 (6.6%)
Family/Friend/Guardian	63 (2.2%)	5 (0.4%)
MCO	74 (2.6%)	166 (11.8%)
Other	169 (5.9%)	19 (1.4%)
Total	2827	1406

This first step in the transition continuum is a critical one. In order for there to be a sufficient number of evaluations and, ultimately, transitions, there must be a sufficient number of referrals for evaluations.

To increase the number of referrals for evaluations, with the assistance of HFS, the OTCR has targeted nursing facilities that have lower case mix indices and age ranges 60 years of age and greater. These nursing facilities were assigned to Aetna and IlliniCare for outreach and evaluation efforts in addition to their efforts with Class Members referred through the MFP Web Application. This targeting effort generated minimal referrals for Evaluation and transition. As reported by the MCOs, many of these targeted nursing facilities have low Medicaid census and high numbers of Class Members who either have a Dementia diagnosis or are elderly and refuse Evaluation. MCOs have independently developed strategies to improve referral and Evaluation outcomes. For instance, MCOs have noted that they receive more referrals for Evaluations where they have nurtured relationships with nursing home staff. In Exhibit C, see the number of Evaluations conducted for the last six (6) months.

¹ October 31, 2014 through March 31, 2015 will be the referenced data reporting period throughout this document unless otherwise stipulated.

Exhibit C

Evaluations Per Month last 6 months

	October	November	December	January	February	March
Recommended	68 (54%)	44 (44%)	67 (63%)	63 (70%)	85 (61%)	123(62%)
Not Recommended	57 (46%)	56 (56%)	40 (37%)	27 (30%)	54 (39%)	75(38%)
Total	125	100	107	90	139	198

The OTCR is currently working to implement several new initiatives that are described in detail later in this document which include strategies to increase the number of referrals for evaluations of Colbert Class Members. In the CCU Process, staff of selected CCUs will provide outreach and opportunities for evaluation of Colbert Class Members age 60 and over in certain targeted nursing facilities. In the CMHC Initiative, staff of selected community mental health centers will provide outreach and opportunities for evaluation of Colbert Class Members who require community mental health services. Both CCU staff and CMHC staff will self-refer for evaluation via the MFP Web Application to ensure consistent data collection.

Evaluations

Aetna and IlliniCare Care Coordinators have conducted 2827 Evaluations since Colbert implementation began in February 2013, of which 849 (30%) Evaluations were recommended for transition to a community-based setting. They have conducted 759 Evaluations in the time period covered by this report, of which 450 Evaluations (59%) were recommended for transition to a community-based setting. Exhibit D shows the number and type of dispositions for recommended and non-recommended completed Evaluations.

Exhibit D

of Evaluations by Disposition

Evaluations Recommended by Disposition		
Dispositions	# of Evaluations thru September '14	# of Evaluations Oct '14 thru March '15
Aging Network	128 (15%)	77 (17%)
DRS Home Services	112 (14%)	67 (14%)
CMHS	366 (43%)	227 (51%)
SLF	34 (4%)	29 (7%)
Other Services	11 (1%)	34 (7.5%)
No Services	198 (23%)	16 (3.5%)
Total Recommended	849 (30%)	450 (59%)
Evaluations Not Recommended by Disposition		
Dispositions	# of Evaluations thru September '14	# of Evaluations Oct '14 thru March '15
Requires 24hr Nursing Care	408(21%)	102 (33%)
Aging Network	22 (1%)	6 (2%)
DRS Home Services	0 (0%)	5 (2%)
CMHS	384(20%)	114 (36%)
Other Services	207(10%)	21 (7%)
SLF	0 (0%)	5 (2%)
Class Member Lost Interest	473 (24%)	34 (11%)
Unknown	484 (24%)	22 (7%)
Total Not Recommended	1978 (70%)	309 (41%)
Total	2827	759

In the Court Monitor’s Annual Report to the Court dated November 25, 2014, the Court Monitor found the State to be out of compliance with regards to Evaluations and made certain recommendations. See the Court Monitor’s Report section of this report for detail about the recommendations and the State’s responses.

Transitions

The Colbert Consent Decree mandates that 300 Colbert Class Members be transitioned to community-based settings by November 8, 2013; 800 Colbert Class Members are to be transitioned to community-based settings by November 8, 2014, with a grand total of 1100 Class Members to be transitioned to community-based settings by May 8, 2015. The first benchmark of 300 completed transitions was reached in June 2014.

As of March 31, 2015, 700 Colbert Class Members transitioned to a variety of community-based settings, including apartments with private landlords, the family home, state and federally-funded properties, Supportive Living Facilities (SLF) and senior buildings. Colbert Tracking System data reflects that of those Class Members, 69% moved to locations in the city of Chicago, with 31% of Class Members moving to residences in the Cook County suburbs. The preferred communities in the city are Rogers Park,

Edgewater, Uptown, South Shore, Hyde Park and Portage Park. The preferred neighborhoods in the suburbs are Park Forest, Oak Lawn, Calumet City, Alsip, Oak Park, Evanston and Tinley Park.

See Exhibit E for demographic characteristics of Class Members and Exhibit F for distribution of transitioned Class Members by disability group.

Exhibit E

Demographic Characteristics

Data Population	629
Average Age	55 Years
Prominent Gender	Male (63.75%)
Predominant Race	Black (57.39%)
Predominant Race/Gender	Black Male (36.41%)
Predominant Race/Gender/Age Group	Black Male 51-60 (16.69%)
Chicago Vs. Suburbs	Chicago (68.53%)
Predominant Chicago District	Far North Side (49.49%)

Exhibit F

Transitioned Disposition Total

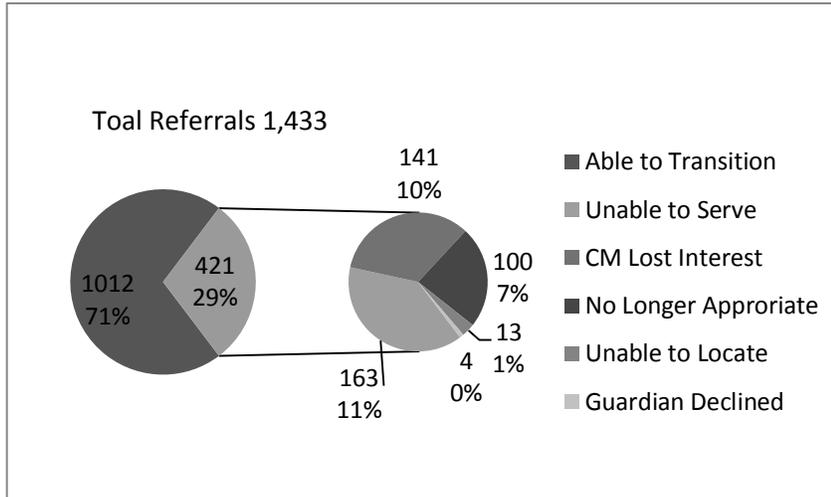
Aging Network	111
DRS Home Services	94
CMHS	302
Other Services	20
No Services	113
SLF	60
Total =	700

Results of Referrals, Unable to Transition

Of the 1,433 total Class Members recommended for transition through March 31st, 2015, 29% were unable to transition due to multiple factors (see chart below). As of March 31st, 2015, there were 312 Class Members in the housing queue, i.e., active participants in the transition process.

Exhibit G

of Referrals, Unable to Transition



Transition Barriers

IDoA staff continues to identify and respond to barriers to the timely transition of Colbert Class Members through regularly scheduled teleconferences with MCOs, housing specialist agencies and CMHCs. This has proven to be an effective process for communication among agencies and coordination of services for Class Members. However, many agencies are struggling with their individual transition targets and many agency monthly transition totals have plateaued. IDoA staff arranged in-person meetings with all of the Housing Locator agency executives and the majority of the CMHC executives (December 2014, January and February 2015) to discuss agency commitment, progress toward transition targets, and barriers to achieving those targets.

IDoA staff combined the list of issues generated from IDoA meetings with additional provider concerns presented by the Class Plaintiffs' attorneys, and responded to the issues with actions that have been executed or are proposed to be executed by IDoA. This document was distributed to all providers with the opportunity to submit comments and suggestions. There were no additions or deletions suggested by providers and IDoA is working to ensure that all of the proposed actions are implemented. See below for challenges to timely transitions articulated by Housing Locators and CMHCs and solutions that continue to evolve:

- Housing issues include need for housing for individuals who are denied in the marketplace due to credit and criminal background, need for accessible housing, and need for housing models with increased supervision and support.
IDoA continues to seek Cluster Housing and Master Lease opportunities to address the needs of Colbert Class Members that have credit and criminal backgrounds, need accessible housing or housing models with increased supervision and support.

- Housing Authority of Cook County (HACC) issues center around communication during inspection process and required landlord documentation
A procedure was implemented several months ago whereby HACC notifies the housing agency contact named on the inspection request form of all inspection results with IDoA copied. HACC will provide IDoA with a list of landlords who have not submitted necessary paperwork for rental payments to be made so that IDoA can notify housing locators for follow-up with landlords.
- MCO performance and quality issues are cited in regards to referrals, evaluations and service planning.
Quality Assurance audits will be conducted of MCO documentation by IDoA staff and UIC-CON. Results will be shared with Parties.
- Providers are not receiving enough Referrals to accomplish transition targets.
IDoA is working with MCOs to increase the number of referrals with some results. Additionally, IDoA is working on other strategies to increase the number of referrals for housing to be distributed to Housing Locators and CMHCs.
- Operational issues center around certain IDoA management and communication practices.
IDoA staff is striving for consistency, fairness and transparency in operations. When errors are made, the team leader is notified and corrective action is taken.
- CMHCs express the need for funding further community mental health capacity to meet the needs of Colbert Class Members.
The Colbert budget includes funding for building service capacity in community mental health centers when needed to meet the needs of Colbert Class Members. IDoA is working with two (2) agencies that service a critical mass of Colbert Class Members to increase capacity in team services, Colbert Quality Administration, Drop-In Centers and other areas.
- Housing Locators communicate the need for increased funding as they are unable to cover their expenses given the current compensation structure and referral patterns.
Housing Locator compensation is being evaluated and will be addressed to ensure that it covers basic Housing Locator operating expenses as well as to provide incentives for transitioning the IDoA targeted number of Colbert Class Members.

In the Court Monitor's Annual Report to the Court dated November 25, 2014, the Court Monitor found the State to be out of compliance with regards to Transitions and made certain recommendations. See the Court Monitor's Report section of this report for detail about the recommendations and the State's responses.

Six Month Plan to Achieve Compliance

The State acknowledges that transition numbers will not meet the Decree's requirement of 1100 Class Members transitioned by May 8, 2015. In April 2015, the State and the Parties agreed on a 6 month Plan to Achieve Compliance, to commence on June 30, 2015. In this Plan (Appendix A) it is proposed that certain new benchmarks be established to define the State's compliance with the requirements of the Consent Decree. It was agreed that these benchmarked activities will be tracked on a monthly basis to assess the State's progress toward compliance. Additionally, these proposed benchmarked activities will address many of the implementation challenges expressed by the providers and the Plaintiff's attorneys including most of those noted above. These new benchmarks include:

- I. The State proposes to transition 1100 Class Members by November 30, 2015.

Transitions by Month

	May	June	July	August	Sept	Oct	Nov
Monthly transition target	44	44	44	44	64	64	64
Cumulative target	788	832	876	920	984	1048	1112

II. The State will use data to project the numbers of Class Members who can benefit from the Cluster Housing Model, Master Leasing programs and accessible housing units. Using data available on the characteristics of individuals currently assigned to these housing models, IDoA can project housing models other interested Class Members may require in the future.

III. The State will benchmark referrals from all sources (MCOs, Division of Mental Health (DMH) vendors, CCUs).

	May	June	July	August	Sept	Oct	Nov
MCO	100	100	100	100	100	100	100
DMH		48	48	48	48	48	48
CCU		12	12	12	12	12	12
Totals	100	160	160	160	160	160	160

IV. IDoA will provide access to various quality assurance reports and methodologies listed below:

- Ongoing reviews of samples of MCO Referral Packets
- Summaries of UIC-CON evaluation reviews, clinical reviews of individuals not referred, clinical reviews of individuals referred and subsequently not found appropriate for transition, incident management reviews, mortality reviews
- Contract compliance reviews (Housing Locators, MCOs, and CMHCs)

V. IDoA will track and report on five (5) benchmarks reflecting salient aspects of the transition experience from Class member perspective (May 2015).

- Time from initial web referral or reported interest in transitioning to contact by a Colbert representative.
- Time of contact by Housing Locator (HL), CMHC or CCU following a referral for transition.
- Time from contact by HL, CMHC, or CCU to onset of housing search.
- Time from web referral or reported interest in transitioning to actual transition.
- Class Member is provided contact information that promotes communication during the transition process

VI. The State will increase the staffing designated for the implementation of the Colbert Consent Decree by May 2015 by three full-time equivalents that will include a Licensed Clinical Social Worker, an advanced degree Registered Nurse and a Project Assistant. The Licensed Clinical Social Worker and the advanced degree RN will focus on quality assurance activities.

Post-Transition

Colbert Class Members continue to receive care coordination and follow-up monitoring for 12 months post transition. Colbert Class Members that are transitioned by community mental health centers receive post-transition monitoring by Colbert Quality Administrators (CMHC staff) as well as MCO Care Coordinators. All other Colbert Class Members receive post- transition monitoring visits and case management services by MCO Care Coordinators for a minimum number of visits in accordance with MFP guidelines. Interested Colbert Class Members continue to have access to the Stepping Stones program and the recovery drop-in centers funded by DMH and IDoA.

Exhibit H sorts Class Members into categories based on the number of post-transition days they reside in the community. As of March 31, 2015, 652 (93%) of transitioned Class Members are residing in community-based settings. The remaining 7% include 23 (3.4%) transitioned Class Members who are deceased, 22 (3%) returned to a nursing facility, one (1) who is incarcerated and two (2) who moved out of state. 166 of Class Members have resided in a community-based setting for over 365 days.

Exhibit H

Community Tenure

In Community	# of Class Members
1-30 Days	43
31-60 Days	39
61-90 Days	43
91-180 Days	119
181-365 Days	242
365+ Days	166
In Community = 652	
No Longer in Community	
Deceased	23
Returned to NH	22
Incarcerated	1
Moved out of state	2
No Longer in Community = 48	
Total	700

Employment

Individual Placement and Supported (IPS) Employment is an evidence-based, fast track, no denial employment program for people recovering from mental illness. The goal of IPS is competitive employment in the community, using a team approach. The team composed of a clinical therapist, employment specialist, and a benefits specialist meet with each participant on a regular basis, to create problem-solving strategies as well as to provide assistance with career planning and advancement.

Currently, this evidence-based practice is available on a very limited basis to Colbert Class Members. DMH has developed the Illinois Individual Placement and Supported Action Plan to Enhance the Availability of IPS to Williams and Colbert Class Members (Appendix B) that will dramatically improve access to IPS for Colbert and Williams Class Members. Strategies include:

- Initiate efforts to hire an individual to function as project manager for the Supported Employment Action Plan
- Implement an education and outreach IPS campaign
- Implement broad based and targeted IPS training and technical assistance to a broad range of individuals and stakeholders
- Build drop-in center skill and capacity to engage Class Members around employment.
- Build Assertive Community Treatment (ACT) teams capacity to provide IPS and evidence-informed practices.
- Implement Process and outcome monitoring to evaluate the effectiveness of the plan and guide plan modifications.

Outcome reporting regarding this initiative will be include in future semi-annual reports. See Appendix B for further details regarding strategies and timelines.

Housing

Bridge Subsidy

In the month of March, 2014, approximately 375 (52%) Class Members of the 700 Class Members that have transitioned to a community-based setting received a Colbert Bridge Subsidy. The remaining 325 (48%) Class Members received a federal subsidy, moved to a Supportive Living Facility (SLF), senior housing, or moved in with family or friends not requiring a subsidy.

Clustered/Master Leases

Master lease agreements have been signed with two separate property management companies on the north and south sides of Chicago, providing a total of 13 units for Class Members with the option to add more as needed. The master lease agreements include less restrictive tenant selection criteria for Class Members with criminal and/or credit backgrounds and include a building with an elevator that is accessible for Class Members who use wheelchairs or who have limited mobility.

Renaissance Social Service Inc. (RSSI)

A clustered model site has been identified on the northwest side of Chicago where 15-20 units will be set aside exclusively for Class Members with more severe medical and psychiatric needs and a supportive staff will be able to provide additional supports and services. This building is newly constructed and is expected to be open for occupancy May 1, 2015. The contract necessary to provide the services for this model should be executed by June 1, 2015.

Illinois Accessible Housing Initiative

IFF has acquired 47 units with three (3) more units under contract to complete the 70 units promised to Colbert Class Members in Phases I and II of this initiative. 31 units are occupied by Colbert Class Members, with six (6) additional units in the various stages of the application process. 20 units are under construction, with 12 units pending approval to start construction. All units will be complete and available to Colbert Class Members by August 30, 2015.

Chicago Housing Authority

Chicago Housing Authority (CHA) committed 400 units to the consent decrees in 2012 and an additional 200 units in 2014 to Colbert and Williams Class Members; consisting of 400 Housing Choice Vouchers (HCV), 140-200 Property Based Voucher (PBV) and up to 60 accessible public housing units. By March 30, 2015, 119 PBV have been secured and approximately nine (9) Class Members have been issued HCV.

CHA have committed to transfer another 204 Colbert Class Members from a Bridge Subsidy to HCV in 2015.

Housing Authority of Cook County

The Housing Authority of Cook County (HACC) has committed 10% of turnover vouchers to Colbert Class Members with an anticipated yield of 50 Housing Choice Vouchers (HCV), 35 PBV and Public Housing units, and 35 Non-elderly Disabled (NED) Vouchers for a total of 120 units. To date, all 35 NED vouchers have been issued to Colbert Class Members, an additional ten (10) Colbert Class Members are living in PBV units and 0 Colbert Class Members are living in public housing units, for a total of 45 vouchers/units. HACC have committed to provide an additional 60 vouchers annually for Consent Decree Class Members.

Governor's Office Collaboration

Statewide Referral Network

The Statewide Housing Coordinator, responsible for the Statewide Referral Network (SRN) has created the Heads Up on Housing newsletter that contains information on all SRN vacancies and upcoming developments and is sent at least bi-monthly to more than 600 transition coordinators, case managers and housing locators around the state.

Section 811

IHDA received notification that they have been awarded an additional \$6.4M for 200 Section 811 PRA units in the second round of Section 811 funding. The additional funding also has additional match units and vouchers from the CHA and HACC. This brings the CHA match to 600 vouchers or units with HACC providing an additional 60 turnover vouchers annually bring their commitment to approximately 120 turnover vouchers or units annually.

State of Illinois Housing Resource Website

IHDA contracts with Social Serve to manage the State of Illinois housing resource website, www.IIHousingSearch.org. The website has a new portal which will allow consent decree case managers to add Class Members to SRN property waitlists and will allow case managers to view vacant units when they become available. To enhance the effectiveness of the website, Social Serve is actively seeking landlords and affordable housing units in community areas where there is a high level of interest from class members and not enough units are available.

Housing Retreat

On December 1, 2014, senior staff from IDoA, IHDA, DHS and HFS, members of the Interagency Panel, and the Statewide Coordinators held a day-long housing retreat to review and analyze consent decree and MFP housing accomplishments to date. The retreat provided an opportunity to review issues with Statewide Referral Network (SRN) policy and implementation challenges and, in particular to review Section 811 policy and implementation challenges. A number of agreements were reached and recommendations were provided but the subsequent change in gubernatorial leadership has put any follow up implementation on hold.

Quality Assurance

IDoA continues to strengthen its quality assurance efforts in this reporting period. Since the last report, contract and special audits are underway and new systems for conducting mortality and incident management reviews, through university collaboration, are in process. Many more reports on these activities will be available by the next reporting period. Further, IDoA anticipates launching the Colbert

Quality Assurance Committee in the Spring, 2015. All quality assurance activities and 'dashboard' data will be reviewed by this committee. They will also provide operational oversight to modifications in operational protocols that are approved as a result of these Quality Assurance (QA) activities. This will create the 'feedback loop' associated with robust quality assurance efforts.

Mortality Reviews

During the reporting period, October, 2014- March 2015, seven (7) deaths occurred among Colbert Class Members who transitioned to the community within 365 days of their community transition date. This mortality rate is comparable to the seven (7) deaths that occurred in the last six-month reporting period ending September 2014. UIC-CON continues to execute mortality reviews for the Colbert Class Members. In March 2015, UIC-CON produced a summary report of mortality reviews on Colbert class Members for the period March 25, 2013 through December 31, 2015. During this period, 14 deaths of Colbert class members occurred with the following summary findings:

- All decedents were male with an average age of 59.
- The average tenure in the community prior to the death was 4.5 months.
- Three deaths were associated with natural causes; one was associated with complications from surgery, one heart attack and two with unknown causes.

UIC-CON compared these deaths with deaths occurring in participants in the MFP, described themes among decedents and offered recommendations to IDoA on opportunities for systemic improvements. Consistent with MFP, many of these individuals had multiple hospitalizations and emergency department visits during their community tenure. They were also receiving an average of 16 medications. These factors and others were considered in the context of risk prediction and ultimately risk mitigation for this population. UIC-CON has issued a series of recommendations that are currently under review by IDoA for consideration and immediate implementation.

Incident Reports

The MCOs reported a total of 198 incident reports for the reporting period representing 4.7% (189) increase since the last reporting period. Increases in the medical arena were noted primarily in medical hospitalizations and psychiatric hospitalizations, 11% and 30% respectively. Slight decreases were noted in behavior incidents and deaths were on par. (See Exhibit I).

Currently, IDoA is aggregating, reviewing and staffing all reportable incidents that are occurring at the CMHCs. The MCOs are conducting the same activities for other cases. It is anticipated once contract negotiations are complete (expected date: May, 2015), UIC-CON will review all class member reportable incidents. Staffings will be convened by nurse reviewers and root cause analyses will be conducted as appropriate. It is anticipated that the nurse reviewers will submit recommendations for modifications in service plans and reviewed by the MCO and provider clinical teams. Initial reports on this process will be available by the next reporting period.

Exhibit I

of Colbert Incident Reports

Type of Medical Incident	Prior Reporting Period April-Sept 2014	Current Reporting Period Oct-March 2015
Medical Hospitalization	57	63
Psych Hospitalization	27	35
Death	7	7
Behavior Incidents	14	16

In other non-medical areas, there were no evictions reported for this period. Additionally, there were three (3) incidents of a class member being a victim of an incident and six (6) occurrences where individuals were associated with an alleged perpetration of an incident.

Contract Audits

Audits of all contracts associated with the implementation of the Consent Decree required as part of the IDoA quality assurance activity. Many of the audits have been conducted and the first results are expected in July 2015.

Several special audits have been conducted during this report period. A review of sample of evaluations is being aggregated now with results expected in May 2015. This clinical review will focus on the adequacy and completeness of the evaluations conducted by both MCO evaluators. Another special audit was conducted in April 2015, reviewing the adequacy/completeness of the referrals to the Housing Locators by the MCOs. This was executed following multiple complaints by vendor partners. The results are summarized as follows:

- 75% of all cases reviewed had no missing items
- 25% have 1-2 pieces of missing information. The missing information varied and did not fit into any particular category.
- 85% of cases had complete income verification
- 89% of cases had complete state identification verification
- 93% of cases reviewed had questions answered “appropriately”

This information will be communicated to the MCOs to improve their performance and will be considered in the context of overall contract compliance.

Quality of Life Surveys

Quality of Life surveys continue to be conducted in accordance with MFP guidelines for all Colbert Class Members. The completed surveys are forwarded to the University of Illinois for analysis. Currently, UIC is aggregating all data under MFP and has not partitioned the data for Colbert for a more specific analysis. It is anticipated that the Colbert specific data will be available by the next reporting period.

University of Illinois at Chicago – College of Nursing

IDoA is in the final stages of executing an IGA with UIC-CON. The deliverables for this IGA include the standardization of the Evaluation tool, routine audits/ reviews of Evaluations, case reviews for Class Members deemed high risk, incident management and the development and implementation of a

process for reviewing Evaluations with a negative recommendation. It is anticipated that this IGA will be executed and this work will commence by May 1, 2015.

Peer Advisory Council

The Colbert Consent Decree Peer Advisory Council provides a forum for Colbert Class Members who are in the Colbert transition/post transition process to make recommendations and comment on issues pertaining to the experience of Colbert Class Members as relates to the implementation of the Colbert Consent Decree.

The Colbert Peer Advisory Council currently has 10 - 13 active Peer Advisory Members. The Colbert Peer Advisory Council Members are at various places on the post transition continuum and are a mixed representation of the three disability groups; Aging, Physical Disability and Mental Illness. Many of the Colbert Peer Advisory Council Members also participate in the Colbert Peer Mentoring Program which is of great benefit to the Council as Peer Mentors are keenly aware of the current successes and challenges of Colbert Class Members in the nursing home as relates to implementation. During the last meeting, the Colbert Advisory Council agreed that a Colbert Transitional Resource booklet should be developed for the use of Colbert Class Members. The resource booklet should contain frequently used numbers and information regarding social service agencies in the community as well as other information regarding food pantries, job training programs, educational programs, dental programs, volunteer services et al. All recommendations made by the Colbert Peer Advisory Council are reviewed by IDoA staff.

Complaints, Grievances and Appeals

Colbert Class Members continue to receive information concerning their rights to file complaints or grievances during the outreach process. Currently, MCOs address and attempt to resolve complaints concerning the transition process and IDoA is available for a second level of complaint resolution. There have been 29 complaints filed with IDoA since January 1, 2015. Of these, 6 complaints were regarding negative evaluation results. Written material regarding the Colbert appeal process was mailed to these individuals. The remaining 23 complaints were regarding Class Member concerns about their status in the transition process. 13 additional complaints were filed regarding other Colbert related issues, including MCO assignment, Housing Locator assignment, and Peer Mentor compensation.

There were no grievances or appeals filed during this time period.

Colbert Inquiries

From October 1st through March 31st, 123 inquiries were made regarding Colbert processes. Inquiries were made through the Aging.ColbertDecree@illinois.gov email address, the Senior Helpline and other communication avenues. Most inquiries were requests for information regarding Class Members' status in the Colbert process made by the Class Members themselves, Ombudsmen, the ADRC, ADRN, and Class Plaintiffs' attorneys. Other inquiries were primarily Class Members seeking information about post-transition activities (i.e. Peer Mentoring program, Peer Advisory Council, dental resources, housing subsidies, and moving to a new unit). Effective January 1, all inquiries are logged with the name of individual making the inquiry, the Class Member involved, date received, and nature of inquiry.

Colbert Program Innovations

DMH Resident Review Contractors

In an effort to increase the number of evaluations conducted for Colbert Class Members, IDoA is contracting with Lutheran Social Services of Illinois (LSSI) and Metropolitan Family Services (MFS) to

conduct evaluations for Colbert Class Members diagnosed with serious mental illness. The mental health professionals employed by these agencies will use the Resident Review tool approved for the implementation of the Williams Consent Decree. With the assistance of HFS, these agencies will be provided names of Class Members with lower RUGs scores that live in targeted nursing facilities for outreach and potential evaluation.

It is expected that the contract amendments necessary for this effort will be executed by May 1st, 2015 and that evaluation activity will begin on or before June 1, 2015. It is anticipated that these additional evaluations will generate a significant number of Class Members recommended for transition to community-based settings.

Care Coordination Units (CCU) Process

IDoA will utilize selected CCUs to improve outreach to Colbert Class Members in nursing facilities where referrals to the MFP Web Application have been deficient. With the assistance of HFS, IDoA will provide names of Class Members that reside in assigned nursing facilities for outreach by selected CCUs. The CCUs will identify Colbert Class Members age 60 and greater that are interested in transitioning to community-based settings, conduct evaluations, develop Service Plans of Care, Risk Mitigation Plans, Social Histories, 24-Hour Back-up Plans and provide post-transition monitoring for 12 months in accordance with the Colbert Consent Decree and IDoA requirements.

Contracting is underway for this initiative and it is expected that CCUs will begin outreach activities on or before June 1, 2015.

University of Illinois Jane Addams College of Social Work Center for Excellence

IDoA is finalizing an IGA with the University of Illinois Jane Addams College of Social Work to fund a "Center of Excellence" that will introduce and maintain systemic innovations required by the State's growing rebalancing initiatives. The Center will provide training on such topics as Assertive Community Treatment, integrated care delivery models, risk management and other best practices that benefit and empower medically complex populations. It is expected that this IGA will be executed on or about May 1st, 2015.

The University of Illinois at Chicago Assistive Technology Unit (UIC- ATU)

UIC-ATU is funded by the IGA with IDoA to identify the assistive technology and accessibility modifications required by Colbert Class Members to successfully transition from nursing facilities to community-based settings, effective February 1, 2015.

The UIC-ATU Colbert evaluation process begins with a Mobility/Activities of Daily Living Evaluation that is administered to the Class Member in the nursing facility once the Class Member is recommended for transition to the community by the MCO. This assessment identifies the member's mobility, transfer, and self-care skills, as well as the member's abilities related to meal preparation and housekeeping. Assistive Technology to enable a member to maximize their independence in the community living environment is identified, and obtained for implementation shortly after the member moves. Required accessibility elements of the community living environment are identified also, to inform the Housing Locator Organization as possible locations are identified.

When indicated, a Home Modification Evaluation will be provided at the community living location chosen by the Class Member. The UIC-ATU will assess the unit for the required accessibility features,

provide specifications for any modifications required, and arrange contractor services, when needed. Through April 24, 2015, a total of 65 referrals have been made to UIC-ATU for ATU/Home Modification services by the MCOs. Mobility/ADL Evaluations have been provided to 15 Class Members, and 1 Home Modification Evaluation in the community-based setting has been conducted.

Mobility/ADL equipment commonly identified thus far has included a hospital bed, bed handrails, utility carts, laptrays, bathtub transfer benches, and cutting boards. Accessibility features identified include grab bars, accessible-height toilets, roll-in showers, and hand-held showerheads.

Colbert Tracking System

The Colbert Tracking System (CTS) is fully functional and utilized by all the provider agencies. Class Member transition activity is tracked from referral to MCO, through evaluation and recommendation for transition, through housing search and transition, and post-transition follow up. CTS enables IDoA and the provider agencies to better pinpoint where obstructions to transition may occur and address them during weekly update telephone meetings. CTS is the vehicle through which IDoA is able to track outcomes and provide reporting to the Parties on transition activities.

Colbert Secure Email

Class Member confidentiality is critical. To ensure that all IDoA and provider agency communications are fully compliant with applicable confidentiality regulations, Colbert provider agencies have been provided with a mechanism by which they can send encrypted State of Illinois email. A secure email group has been set up for all Colbert provider agencies to use when sharing sensitive information about Class Members with IDoA and amongst themselves. All users are provided training and certified as Network Users. Additionally, all users are required to sign a Non-Disclosure Agreement that specifies confidentiality requirements, to include HIPAA regulations. Users are only allowed access to the secure email group upon completion of the training and the Non-Disclosure Agreement.

Trainings and Presentations

- A Nursing Home Webinar presentation regarding the Colbert Consent Decree Implementation and the Nursing Home's role was developed by IDoA staff and presented three times during March 2015.
- A Provider Webinar was presented in March 2015 to review Bridge Subsidy documents and procedures.
- *Reducing the Time from Referral to Transition*, the first of an eight (8) session training series developed for Colbert and Williams providers by Corporation for Supportive Housing was delivered in March 2015
- *Reasonable Accommodations*, the second of the eight (8) session training series developed for Colbert and Williams providers by Corporation for Supportive Housing was delivered in March 2015.
- IDoA staff made a presentation regarding the Colbert Consent Decree and the Role of the Ombudsman to ombudsmen from the Chicago region and suburban Cook County in February 2015
- IFF staff provided refresher training to Colbert providers regarding processes related to the Home First Illinois initiative.
- IDoA staff presented to at the Governor's Conference on Aging regarding the Colbert Consent Decree Implementation

- IDoA staff coordinated and participated in a panel presentation “Guiding Older Adults and Persons with Disabilities Back to the Community” at the American Society on Aging Roundtable in April 2015
- IDoA staff presented at the Housing Action Illinois Conference regarding the Colbert Consent Decree implementation in November 2014.

Staffing

The OTCR is currently staffed with a Project Director, Transition and Research Administrator, Housing and Transition Liaison, Outreach and Technical Assistance Specialist, Project Assistant, Information Systems Analyst and, the most recent addition, a Financial Analyst with principal responsibility for collecting and reporting cost data for the Cost Neutral Plan. Candidates are being recruited to fill three more positions at this time: two (2) Quality and Compliance Liaisons and one (1) Project Assistant.

Budget

IDoA was funded at requested appropriation levels during Fiscal Year 2015 (FY15) receiving \$32,496,400. Due to shortfalls in General Revenue funding statewide, IDoA’s budget was reduced by 2.25% (\$721,200) leaving an appropriation of \$31,765,200. IDoA does not anticipate that these cuts will hinder program support through the remainder of the Fiscal Year ending June 30. IDoA’s introduced budget for FY16, beginning July 1, 2015 requests \$32,496,400 to continue Community Transition and System Rebalancing.