

SCAMPER CATEGORIES

BUDGET

Substitute

Unit rates for total cost of services – get rid of the 15-minute increments

Combine

Combine all of the money to be used in a more flexible way -get rid of the 15-minute increments

Modify

Make budgets easier to understand, from the reports received to the process

The way budgets are done – make a basic list of extra add ons, like paid time off and other things that can be added into the budget to make it easier to do and understand

True Self-Direction wouldn't be tied to units = would be a whole budget, so if I chose to give someone a raise, I could do that by looking at my whole budget

Eliminate

Shouldn't have to get approval of changes & and requirement of 6-month budgets.

Units! A unit driven life is not realistic!

Stop micromanaging budgets, people can't anticipate everything they will need.

UTILIZATION MANAGEMENT

Substitute

Utilization Management for something different

Put to Another Use/Expand

People in Utilization and Management don't know the people for whom they are making decisions. It's all paperwork driven – (problems with that poor writing, assessments, etc.) Must meet the people for whom they are making decisions about their services!

Utilization Management could be used to be back-up staff for people

Change the name and purpose of Utilization and Management – because of the mindset that comes with it.

Utilization and Management (UM) could be used to make sure people get enough services instead of checking to see if they get too many

Eliminate

Tiered system Utilization and Management uses is unfair – not person-centered. Each person should be determined separately

Reverse

Utilization and Management decisions should go back to the person for their approval. No signature on plan until satisfied and final with budget included. People are signing plans without the budget. People are supposed to sign their budgets according to Laura, but that isn't happening. Jill look – Laura do training – Ask Marie

Losing units (hours) based on the lack of staff – stop it! The system needs to ask why hours or units weren't used. The system never adds back the in-kind support provided due to lack of staff.

TRAINING/EDUCATION

Substitute

Current education for robust, good education

Modify

Training needs modification and standardization, with core competencies – so no matter where you live Supports Coordinators, Direct Care Workers meet the same competencies

Training/reference book for folks directing their services in plain language version of technical requirements – not long

- Arc Handbook

Circle of Supports information – how you can pick the people you would like around you

Clarifying roles

Rules around what you can do with a budget (therapeutic horse riding, other community-based options, etc.) Modify or clarify language, simplify rules to show you can use budgets for these things

Put to Another Use/Expand

Get everyone understanding everything, get everyone on the same page with regard to understanding self-directed services.

What if people doing traditional process participate in the development of their budget? Expand understanding of budget beyond S-D to those receiving traditional funding. People can then think about whether or not they are getting the life their budget is paying for

Reverse

CMHs understand that budgets are plans and must be flexible and that under/overspending per month is natural.

SYSTEM – INFRASTRUCTURE

Substitute

Substitute Supports Coordinators for people without a financial stake in what you get for services – without conflict –

Combine

Billing Codes –

Adapt

DEI (Diversity, Equity, Inclusion) – combine with above to push

Adapting the information coming from the Department – clear messaging regarding S-D for everyone

Modify

Modify the waiver language and then...Modify messaging from the Department –

Every CMH has an S-D Coordinator

Raise pay & benefits - Make it easier to attract workers and independent Supports Coordinators (frozen salaries, etc.)

Equal respect for workers employed by agencies and those hired directly & Don't make it difficult to become a worker by requiring so much training modify requirements for training

Built in increase in wages (in CMH/PIHP contracts) could be directed by the Department, also include employee related expenses (for example Electronic Visit Verification and cell phones), especially for directly employed people –

Put to Another Use/Expand

No wrong door – no age limitations, etc. to receiving self-directed services

Eliminate

Units! A unit driven life is not realistic! **How?**

Reverse

Don't look at utilization monthly, but yearly.

Messaging regarding signatures for plans and signatures for budgets needs work.

SYSTEM- OPERATIONS

Combine

Combine process to make changes and adjustments to budget and services – needs to be similar, can't be different steps, make it less complicated

Adapt

System advocacy – people still think S-D is not for everyone – as more agencies are going to contracts there's a lack of education regarding S-D being for everyone

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Modify

Brokers who can come in and help with S-D

Put to Another Use/Expand

Person-Centered Planning - expand so it's actually happening

Make traditional services budgets as transparent as those you get with self-directed services

Eliminate

Diagnosis doesn't dictate services, eliminate the false connection between diagnosis and services.

Start with what is needed – not the rate systems

Bad attitudes

Get money out of the process of getting services, at the beginning at least. More focus on things needed and then talk about the cost.

Reverse

In the state site review process, first focus on quality of life, not compliance.

People who are not getting the budget they agreed to are told to go to appeal if they are not satisfied or happy. That is not what this is about. Appeals threatening – if you don't sign this... what about an outside/independent opinion?

- Don't use appeals to fix budgets!

Eliminate monthly budgets that eliminate money based on utilization monthly not yearly.

PEERS

Substitute

Professionals for peers (people with lived experience) in Information & Assistance for example, have peers more involved in the meetings (add)