# **DISABILITY CORE COMPETENCY TRAINING**

**Quarterly Report, Period 4 and FINAL** 

Prepared by: Kirsten Murphy Dates: October 1, 2016 to March 31, 2017 Per MOU 03400-MOU-VHCIP-FY16

GOAL STATEMENT: The goal of the Disability Core Competency Training is to provide practical information, resources, and hands-on learning activities designed to improve the delivery of care management and other health-related services to people with disabilities.

PROBLEM ADDRESSED: People with disabilities are a medically underserved group at higher risk than the general population for poor health outcomes and associated costs. A lack of training and experience on the part of providers of adult healthcare was previously identified by VHCIP's Inclusive Healthcare Partnership Project (2015-16) as contributing to provider discomfort and consequent underservice. VHCIP's Disability Core Competency Briefs were chosen as guidelines for developing training to address this problem.

#### ACTIVITIES during this period:

- FINAL WEBINAR: Green Mountain Self-Advocates (GMSA) provided a webinar on Facilitating Trainings and Meetings That Are Inclusive for People with Disabilities (10/5/16). The webinar was recorded and presentation materials were delivered to VHCIP for the Disability Awareness Toolkit.
- REVISED CONTRACT: Negotiated and executed modest revisions to the project Memorandum of Agreement. VHCIP/CMMI approved \$17,444 in addition funds, covering the cost of adding a fourth day of the live trainings and purchase of 4 software packages for e-Learning. VTDDC was granted a three-month extension to draw down these funds and complete a revised set of deliverables.
- VIDEO: VHCIP finalized the CATV video versions of the training series and added them to their on-line resources (http://healthcareinnovation.vermont.gov/core-competencytraining-materials ). These videos may also provide some content for the e-Learning version of the trainings.

## TOOLKIT:

- VTDDC met with Deb Lisi-Baker and Erin Flynn to discuss their vision for the final Toolkit. They requested single page summaries for each of the presentations in the toolkit.
- VTDDC developed common formatting elements and a unifying framework for the Toolkit. VTDDC developed introductory summaries for an eight-part series.

(Two additional modules were presented as webinars and are best accessed in this format.)

#### E-LEARNING:

- Per revised contracts, project partners provided storyboards of their presentations. Although there was some variability in the format and quality of the storyboards, they provide sufficient guidance for developing on-line versions of each training.
- VTDDC contracted with Brandthropology, a marketing firm in Burlington, to create 3-5 e-Learning units based on a selected group of the storyboards. The vendor will also shoot and edit video footage of self-advocates and family members discussing some of the key elements of the disability core competencies – for example, the "dignity of risk" and "assuming competence."
- VTDDC met with Brandthropology five times to review stylistic elements and guide the e-Learning development.
- In collaboration with Green Mountain Self Advocates VTDDC identified subjects for two video shoots at separate locations. Sites were selected to provide an indoor background with a "Vermont feel."
- Brandthropology purchased two copies of Articulate 360, which they transferred to VTDDC and GMSA. It was determined that the four packages in the revise contract were not necessary.
- Brandthropology transferred all raw and edited footage to VTDDC.
- Brandthropology produce draft e-Learning in Articulate 360 for:
  - Disability and the Intersection with Wellness
  - Communication and Interaction
  - Universal Design and Accessibility

## **DELIVERABLES Accompanying this Report**

 TOOLKIT. The Disability Core Competency Tool Kit is a compendium of the training materials organized into eight chapters. Each section has a one-page introductory summary with a link to the CATV video of the segment and a comprehensive list of key resources to further learning about the topic. Some sections also include lists, activities or other tools. Each section includes the slides from the live presentation. There is a description of the partner organizations and biographies for the presenters in an appendix.

Spanning approximately 190 pages, these materials have been sent to VHCIP as one (1) printed copy in a binder and as electronic files on an encrypted flash drive.

Part I:

Key Concepts in Coordinating Care for People with Disabilities

Chapter 1

Introduction to Disability Core Competency Training

The social determinants of health and the role of community supports

Chapter 2

Understanding Disability and the Intersection with Wellness Models of disability, disability etiquette and People First language Assuming competence, self-determination, and the dignity of risk

Chapter 3

Person-and Family-Centered Care, Planning and Thinking
The difference between what is important for a person and what is

important to a person; Tools to support person-centered planning

Part II:

Strategies to Improve Communication & Access for People with Disabilities

Chapter 4

**Cultural Competency and Cultural Humility** 

Cultural and Linguistic competency as a process; the CLAS Standards;

and the role of the interpreter and cultural broker.

Chapter 5

Communication and Interaction

Different ways of communicating; tools to support improved

communication in healthcare settings

Chapter 6

Universal Design and Accessibility

ADA standards for healthcare settings, granting accommodations, and

the principles of universal design

Part III:

Managing Change and Building Resilience

Chapter 7

Transition for Pediatric Care to the Adult Medical Home & Beyond Six elements of successful transition from the Got Transition™ Project

Chapter 8

Everyone Has a Score: A Resilience-Based Approach to Adverse

Childhood Experiences

The ACEs Study and its limitations, The Vermont Sample Study, and

**Building Resilience** 

**Appendix** 

The Curriculum Development Training Team

- STORYBOARDS: As stipulated in the Amended Project MOU and specified in subagreements with Green Mountain Self-Advocates, the Vermont Family Network, and the Vermont Federation of Families for Children's Mental Health storyboards outlining each eLearning unit have been submitted and approved by VTDDC. The storyboards accompany this report as electronic files on an encrypted flash drive.
- LIVE TRAININGS: All supporting materials for the live presentations were previously delivered to VHCIP and are available online at: <a href="http://healthcareinnovation.vermont.gov/core-competency-training-materials">http://healthcareinnovation.vermont.gov/core-competency-training-materials</a>
- E-LEARNING: As noted above, three draft e-Learning units have been prepared as part of this project. Now that the main design elements and templates have been professionally developed, VTDDC and GMSA can enhance these and add additional units. Both organizations have the necessary software to continue the project. To view an example of the e-Learning, see the Understanding Disability and the Intersection with Wellness at: <a href="https://360.articulate.com/review/content/24573397-4c25-47b0-9ee7-1f41a35f2879/review">https://360.articulate.com/review/content/24573397-4c25-47b0-9ee7-1f41a35f2879/review</a>. Please note that this is a draft, with a few placeholders and gaps.

#### PROVIDERS & BENEFICIARIES IMPACTED:

VHCIP reported the following enrollment figures for the in-person trainings provided through the project. Unfortunately, we do not have an unduplicated count of the number of providers who received training through this project.

April – 220 care managers and related professional
June – 150 care managers and related professionals
September – 140 care managers and related professionals
Webinar, Sexuality and Reproductive Health – 26 participants
Webinar, Planning Inclusive Meetings – 15 participants

Key findings from the participant surveys were provided in the second and third quarterly reports. Overall results were positive. It was disappointing to see participation fall off as the series progressed, especially since the September presentation on Adverse Childhood Experiences and resilience received strong praise.

#### **OPPORTUNITIES and SUSTAINABILITY:**

Delivery of these training modules across the State has increased interest in learning about the impact of ableism on health and the delivery of healthcare. The curriculum is flexible and can

be readily adapted to meet the needs of other groups of healthcare providers; and members of the training team are recognized as expert in delivering this content. Three opportunities have already become available:

- GMSA presented at Stepping Forward Together: Advancing Equity and Cultural Competency to Improve Population Health (March 27, 2017).
- GMSA has been invited to provide Disability Core Competency Training to public health professionals at the Vermont Department of Health. This training is anticipated to spread over multiple presentations.
- VTDDC's Executive Director will provide a workshop titled, *People with Developmental* and Other Complex Disabilities: A Medically Underserved Population at the Family Medicine Conference on June 6, 2017.

VHCIP has made all the training materials available on their website. The Toolkit will nicely complement these resources by providing a single, well-organized document that pulls together the series. Strategic "advertising" may be helpful in driving interested healthcare providers to the website and the Toolkit – for example, placing an announcement through various professional associations like the Vermont Nursing Association.

Finally, VTDDC and its partners are excited to continue developing the e-Learning version of these trainings. VTDDC has committed funding, approximately \$15,000, to support the creation of a platform that will host the on-line modules and track utilization. These trainings fill a unique and unmet training gap, and with further development they have the potential to reach a national audience. VTDDC anticipates launching the e-Learning in September 2017.

FINANCIAL REPORT

See next page.

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Finally, on behalf of the Training Team, we would like to thank the Vermont Healthcare Innovation Project and its supportive staff for the opportunity to create these training materials.

Respectfully Submitted:

Executive Director, Vermont Developmental Disabilities Council

## FINANCIAL REPORT:

Final payments were made to the three project sub-contractors following final submission of their storyboards. Final payment has been made to Brandthropology upon completion of three e-Learning units in Articulate 360 and transfer of both raw and edited video footage. There are no outstanding invoices or payments due.

While VTDDC was slightly over in the category of salary and fringe, this was offset by lower than anticipated spending for travel and supplies. VFN and VFFCMH did not require copies of the Articulate 360™ software, so two rather than four packages were purchased.

	Budget per Amended MOU		Subtotal	otal A		Subtotal		Budget vs. Actual		Subtotal	
VTDDC											
Salary	\$	13,894.00		\$	15,990.00			\$	(2,096.00)		
Fringe	\$	5,916.00		\$	6,253.00			\$	(337.00)		
Travel, supplies	\$	3,000.00		\$	858.00			\$	2,142.00		
			\$ 22,810.00			\$	23,101.00			\$	(291.00)
Contracts											
GMSA	\$	71,444.00		\$	70,260.00			\$	1,184.00		
VFN	\$	36,045.00		\$	34,375.00			\$	1,670.00		
VFFCMH	\$	30,320.00		\$	28,920.00			\$	1,400.00		
Brandthropology	\$	37,000.00		\$	36,914.00			\$	86.00		
			\$ 174,809.00			\$	170,469.00			\$	4,340.00
			\$ 197,619.00			\$	193,570.00		unused funds	\$	4,049.00