

October 21, 2026

Pennsylvania Department of Human Services
Office of Developmental Programs
Attn: Jen Newell
Health & Welfare Building, 5th Floor
Harrisburg, PA 17105

RE: Feedback on ODP Residential Staff Survey Tool

Dear Ms. Newell,

On behalf of the Rehabilitation & Community Providers Association (RCPA), I would like to thank the Office of Developmental Programs (ODP) for giving our members the opportunity to review and provide feedback on the draft ODP Residential Staff Survey Tool. RCPA members appreciate the department's openness to collaboration in seeking to capture this critical data; however, several areas of concern were noted during our review.

To support this effort, RCPA offers the following feedback, gathered directly from our provider members during a dedicated feedback session. These suggestions are intended to enhance the integrity of the data collected while ensuring ease of use for the providers selected in the sample.

RCPA Recommendations:

1. Clarify the Intent and Next Steps for the Data Collected:

Providers strongly request clarity regarding how ODP and Marsh plan to utilize the survey findings. It remains unclear whether this tool will inform future rate modeling, modify the Needs Exception Allowance (NEA) framework, or impact single-person residential service options. Providing clear guidance on how this data will be applied will help relieve provider concerns and ensure consistent, accurate reporting.

2. Address Administrative Workload and Data Tracking Limitations:

Most provider payroll, electronic health record (EHR), and scheduling systems log total hours worked within a site rather than individual-level direct support hours. Salaried employees such as Program Specialists and Clinical Directors support multiple individuals and shift their attention frequently between individuals. Requiring providers to manually break down direct vs. indirect hours down to the individual level creates a significant administrative challenge with a high probability of inconsistent reporting.

3. Incorporate Financial Cost Drivers Beyond Hours Worked:

The current tool collects staffing hours without capturing corresponding wage rates or financial differentials. Measuring hours alone hides potential significant variance in real-world costs, such as acuity pay differentials (e.g., \$3/hour extra acuity differential for highly complex homes), shift differentials, regional wage differences, and specialized nursing or clinical costs. If this tool's data will be utilized in any cost calculations, RCPA recommends incorporating wage/cost metrics so these financial realities are accurately reflected.

4. Account for High-Acuity Ratios, Crisis Intervention, and Specialized Ratios:

The survey structure does not easily accommodate individuals who require intensive 2:1 or 3:1 staffing, or those navigating crisis situations. Additionally, frontline supervisors and managers frequently step into direct support ratio during acute behavioral crises without logging separate direct hours. The tool should provide explicit fields to capture these occurrences of intensive support.

5. Capture Specialized Staff Training and Non-Direct Support Time:

High-acuity individuals often require extensive individual-specific staff training (one example noted a 6-hour training that employees were required to complete outside normal shift hours), as well as significant non-direct staff time for incident management and clinical consultation. The tool currently overlooks these required hours; RCPA requests adding explicit categories for specialized training and non-direct support functions.

6. Sampling Risks and Single-Week Snapshot Distortions:

Selecting a single "typical week" in September risks skewing results depending on whether an individual experienced a crisis or a period of relative stability during that window.

7. Add Data Validation Controls in the Excel Survey File:

A review of the survey spreadsheet revealed a lack of automated data validation safeguards. Without built-in logic checks, user entry errors (such as negative numbers or weekly totals exceeding 168 hours) could go unnoticed and distort the final dataset. Adding simple data validation parameters into the template will help ensure data cleanliness.

RCPA appreciates the department's consideration of these recommendations and remains available to discuss any of these items in further detail.

I would like to extend our thanks once again to the department for its willingness to share this draft version of the tool prior to implementation in this rate refresh cycle. Promulgating rates that accurately reflect real-world costs and anticipated cost growth is essential to ensuring the ODP system can meet current needs and continue to support individuals well into the future with innovative, high-quality services and supports.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Tim Sohosky', with a stylized, sweeping flourish extending to the right.

Tim Sohosky
IDD Division Director
Rehabilitation & Community Providers Association