

Intellectual Disability Partnership Advisory Committee (IDPAC)
Meeting Minutes
9/20/18

Convened at 1:10pm.

Present: Barry Simon (Oak Hill), Deputy Commissioner Peter Mason (DDS), Commissioner Jordan Scheff (DDS), Shelly Maynes (for Judy Dowd - OPM), Scott McWilliams (DDS), Adrienne Benjamin (parent), Marina Derman (parent), Win Evarts (parent), Collette Bement (parent), Andrea Barton-Reeves (Harc), Katie Rock-Burns (DDS).

Absent: Lauren Traceski (self-advocate), Kate McEvoy (DSS).

Public: Robin Wood (invited to present).

1. Review of Minutes – 8/22/18 meeting

Collette Bement moved to accept. Adrienne Benjamin seconded. All in favor, none opposed.

2. Public Comment

Commissioner Scheff welcomed Win Evarts to the committee. He informed the committee that Mr. Evarts has been named as the replacement for Barry Bosworth and will be representing families on the committee, not Arc CT business.

Commissioner Scheff shared that DDS is also working with The Alliance to replace Andrea Ferrucci as one of the provider representatives.

3. Consideration of additional priorities – Robin Wood

Robin Wood, DDS Director Family Supports and Advocacy, presented a request to use IDP funding to support one additional area.

Ms. Wood gave some background on the national Community of Practice work that DDS has been involved in since 2012. She shared that the first few years of the project were spent looking at different options and best practices to better support families. In 2014, a national decision was made to focus on Charting the LifeCourse (CTLC) tools and processes, in order to help the largest number of families and have the greatest impact over time. CTLC is considered to be the next generation of person-centered planning, helping families to start planning at an earlier age and consider many types of supports, both traditional and nontraditional.

Ms. Wood shared that 38 people in the state have completed the extensive training program. 20 people from the State Department of Education (SDE) and Regional Educational Service

Centers (RESCs) have been trained and are stationed throughout the six RESC locations. SDE is currently developing a plan to roll the concepts and tools out across the state, and they have already been incorporated into trainings at the State Education Resource Center. In addition, the Department of Rehabilitation Services (DORS) has trained the Level Up staff and are conducting additional trainings this fall.

DDS, SDE, and DORS have been working closely together to provide and encourage CLTC training opportunities to encourage broader understanding and acceptance of the model and concepts. At this time, none of the 38 geographically stationed and trained staff speak Spanish. Ms. Wood requested funding through the IDP to target trainings for bilingual staff (at least two in each of the six RESC regions). The cost would be \$500 per person for the training, plus some additional funding for national support. In addition, Ms. Wood requested funding to include 12 additional family members in the trainings. The total estimated cost would be approximately \$20,000.

Commissioner Scheff asked that the three agencies also consider prioritizing trainings for bilingual ASL staff. Ms. Wood agreed.

Marina Derman voiced a concern that the IDP funding is already stretched thin between the four existing priorities and wondered where we might find a trade-off. The group discussed potential areas of trade-off, including consideration of projects that will not require a full year of funding for this fiscal year.

Ms. Wood advocated for the importance of the mindset change that CTLC could bring about, sharing that this work has led to a major collaboration on braided funding between DDS, SDE and DORS. CTLC laid the groundwork for thinking creatively and collaborating to maximize resources.

Andrea Barton-Reeves asked how we would measure effectiveness and return on investment for this project. Commissioner Scheff indicated that DDS has already built some capacity in the Business Intelligence unit to look at longitudinal data on the incorporation of CTLC concepts in the Individual Planning process. Marina Derman suggested that outcomes could not be studied without a control group for comparison. In the absence of this possibility, Barry Simon suggested that DDS look at collecting data in a way that it could be compared to larger data sets on success, health, and other measures.

Adrienne Benjamin suggested that the CTLC wording should be changed, as the continuum labels of “innovative life options” and “traditional life options” might make families using traditional supports feel bad.

The committee decided to move through the rest of the agenda before determining whether to recommend funding this project.

4. Update on CCH home modification funding

Katie Rock-Burns shared that, after research into the possibility, DDS has determined that it will not be feasible to request bonding funding for home modifications in the Community Companion Home program, as it would require liens on family homes. DDS is looking to find funding in other accounts to accommodate this need.

5. Update on priority areas

Commissioner Scheff shared updates on the four existing priority areas. The committee furthered discussed implementation strategies, including funding targets for each area.

1. **Employment:** DDS has determined that the funding for FY19 will need to be in the form of a grant, rather than a loan. The committee recommended focusing on awarding grants for franchise fees and, potentially, additional types of start-up fees. The committee recommended a target funding amount of \$500,000 for this area.
2. **Blended Services:** the DDS Regions are currently working to identify a list of individuals who would be appropriate for a pilot of blended services. The committee recommended a target funding amount of \$500,000 for this area.
3. **Assistive Technology:** DDS has previously determined that this funding will be distributed as grants to providers. The committee discussed offering funding for assistive technology evaluation training, substitute staff, and promotion of assistive technology. Win Evarts will work with several providers offering trainings on use of assistive technology to determine an average cost for a course. The committee recommended a target funding amount of \$250,000 for this area.
4. **Provider Readiness:** DDS has asked the provider representatives to consider useful strategies in this area. The committee recommended a target funding amount of \$250,000 for this area.

6. Next steps

Given the funding targets defined for the four priority areas, the committee recommended also funding the Charting the LifeCourse training (\$20,000).

DDS will follow up on the priority areas and will schedule a meeting for October.

IDPAC Priorities
Finalized 8/22/18

1. **Employment:** support alternative business models or alternative models of support that would employ or encourage the employment of people with intellectual disability through education and consideration of the establishment of a revolving loan fund for startup costs.
2. **Blended Services:** establish a combination residential/day services account to pilot blended services for a small group of individuals.
3. **Assistive Technology:** fund provider staff training on how to properly implement and promote assistive technology.
4. **Provider Readiness:** offer provider readiness analysis and education in the area of Medicaid direct billing.