

Testimony of Walter L. Glomb, Jr.  
on the DDS Five Year Plan  
December 6, 2016

To begin, I support the overall goal of this plan to continue following national trends, toward community-based residential supports and away from publicly-operated, institutional care.

There needs to be a specific plan for the Waiting List. There has been no progress on the Waiting List in the past five years and there are no specific plans to reduce the Waiting List in this Five Year Plan.

The only “plans” to address the address the Waiting List are a) the ID Partnership which, among other things, seeks to “identify strategies to make resources available to address the waiting list for residential services” and b) a partnership with DOH to develop a supportive housing service model. We need more specific goals for these activities.

The so-called “Lean” exercise at DDS is nothing of the sort. A Lean project requires metrics for customer value and a schedule for achieving specific improvements in those metrics. The DDS Plan has neither.

There are many more than 17,000 eligible individuals in Connecticut. Statistically here should be about 40,000. Where did DDS get 17,000?

Shared Living was highlighted as a residential solution at our housing conference. The Plan does not list Shared Living as a residential service but then notes that that a Shared Living committee was established and DDS added Shared Living to the Individual Support and Comprehensive Medicaid Waivers. Is Shared Living available or not?

Thank you.