

# Department of Developmental Services

## *At a Glance*

**Jordan A. Scheff, Commissioner**

**Elisa Velardo, Deputy Commissioner**

**Established – 1975**

**Statutory authority –**

**Conn. Gen. Statutes Chap. 319b – 319c**

**Central office – 460 Capitol Avenue,**

**Hartford, CT 06106**

**Number of full-time employees – 1,880**

**(total permanent FT filled count as of June 30, 2023)**

**Number of individuals determined eligible – 17,348**

**Organizational structure - Services**

**and supports for more than 17,000 individuals**

**and their families are provided through a**

**network of public and private providers across**

**Connecticut. In Fiscal Year 2023, the**

**Office of the Commissioner**

**oversaw and directed the following divisions:**

**Equal Opportunity Assurance;**

**Legal and Government Affairs;**

**Executive Affairs; and Regional Services.**

**The Office of the Deputy Commissioner**

**oversaw and directed the following divisions:**

**Fiscal; Health and Clinical Services;**

**and Waiver Services.**

**The department operates three regional offices,**

**and provides or funds residential, day program**

**and family support services.**

**The Independent Office of the Ombudsperson**

**for Developmental Services and the Council on**

**Developmental Disabilities are housed within**

**the department.**

## *Mission*

*The mission of the Department of*

*Developmental Services (DDS)*

*is to partner with the individuals*

*we support and their families, to*

*support lifelong planning and to join*

*with others to create meaningful opportunities*

*for individuals to fully participate as valued*

*members of their communities.*

## **Statutory Responsibility**

The Department of Developmental Services (DDS) is responsible for the planning, development, and administration of complete, comprehensive, and integrated statewide services for persons with intellectual disability and persons medically diagnosed as having Prader-Willi Syndrome. DDS provides services within available appropriations through a decentralized system that relies on private provider agencies under contract or enrolled with the department, in addition to the state operated services. These services include residential placement and in-home supports, day and employment programs, early intervention, family support, respite, case management, and other periodic services such as transportation, interpreter services, and clinical services.

## **Public Service**

The department continues to engage in a number of activities designed to improve services and the management of its public and private programs. DDS also continues to be involved in initiatives designed to meet the increasing expectations of the Centers for Medicare and Medicaid Services (CMS) concerning health and welfare, and quality improvement protocols for the operation of Home and Community Based Services (HCBS) waivers.

### **Five Year Plan**

In February 2022, DDS released a new Five Year Plan. The plan encompasses the department's goals for the next five years, charting a course for continued progress. These goals have been influenced and shaped by involvement from the department's many stakeholders over the years and through many channels. Most recently, feedback was gathered during the Commissioner's "Seeds of Change" tour in mid-2021. This stakeholder engagement initiative offered important insight from individuals, families, advocates, providers, staff, and others and helped the department to clearly identify challenges, gaps, and improvements to be made. The department will continue to seek ongoing input in the upcoming five year cycle.

The new Five Year Plan also puts a focus on the Charting the LifeCourse (CtLC) framework. DDS continues to work toward full implementation of the framework and its tools across DDS services and those delivered through sister agencies and other entities. Throughout the "Seeds of Change" process, DDS sought to frame agency planning using the same framework to think about growth, progress, and priorities.

### **Data Sharing and Collaboration**

This year, DDS continued to plan for the implementation of updated race, ethnicity, and language (REL) categories in support of compliance with Public Act 21-35 Section 11, which requires that standards are developed and implemented for the collection and reporting of REL data. Through discovery, we identified that REL information is asked upon eligibility application and is not part of the routine data collection process and is not updated often. To capture the information accurately when new people apply to DDS, we evaluated modifications to our paper-based forms for the Eligibility Application. These changes were the subject of two focus group sessions to review options with the DDS self-advocate coordinators, who provided feedback on content and usability from the individual's perspective. DDS participates in an ongoing implementation workgroup hosted by the Office of Health Strategies and has presented to the work group to share the importance of including feedback from those receiving services when considering making important changes to the information we collect. DDS has also explored accessing valid sources of external data for DDS individuals through data sharing agreements to provide additional context and for comparative purposes. It is our hope that DDS will identify external data which is already in use and meets our permitted use cases, so that we can leverage existing information to assess the equity of services and supports in the DDS system using key demographic features. DDS has begun to review key areas, such as Abuse and Neglect allegations and Planning and Resource allocation to assess differences through the lens of equity and inclusion. We plan for ongoing collaboration with the DDS Director of Diversity, Equity and Inclusion to identify key areas for exploration and will work

to support ongoing measurement to gauge the effectiveness of any strategies to address inequities encountered.

DDS is collaborating with the Department of Social Services (DSS) to share Critical Incident information allowable through the DSS oversight responsibilities of the Medicaid Waivers DDS operates under their authority. DDS Business Intelligence and IT staff collaborated to provide information to the ReaCT “Reviewing Event Across Connecticut” project team working to configure the shared system to be used for shared analysis based on the permissions of the approved users. The new system will allow the Critical Incident information for Medicaid participants to be automatically transferred from DDS to the new analysis system and will provide key individuals responsible for oversight of this information to access or receive notifications and alerts for specific types of incidents. The project pilot includes DDS and DSS, however the larger project seeks to incorporate data from DPH, DMHAS, and DCF for Medicaid recipients and has been planned with support from the Center for Health Care Strategies through the DSS Medicaid Academy.

DDS has been active with many American Rescue Plan Act (ARPA) projects, some of which have included significant collaboration with partners for reporting purposes. DDS has invested significant resources in performance measurement and project management activities focused on project status tracking and project outcomes tracking. DDS is working with partners in the Office of Policy and Management Evaluation and Impact Unit, and others, to provide the most up to date project performance information being used for Statewide reporting. DDS is working to create forward facing status trackers for ARPA initiatives that will be an important part of our communications plan to share and show results with our stakeholders.

### **Positive Behavioral Support and Trauma-Informed Care**

DDS continues to promote the use of evidence-based clinical, behavioral, and trauma-sensitive practices in order to best serve individuals who present with challenging and complex needs. In FY23, DDS continued to provide training for behaviorists employed by private providers in order to improve service delivery and program oversight. Dr. Tolisano provided training on various topics to state agencies and private providers. These included crisis intervention, positive behavior supports, and psychotropic medications. DDS remains affiliated with the PBS Steering Committee of the National Association of State Directors of Developmental Disabilities Services and continues to provide training to Connecticut Emergency Mobile Psychiatric Services for children and teens. Beginning in the fall of 2023, DDS will collaborate with the traumatologist, Karyn Harvey, on training and research about trauma-informed support. Dr. Tolisano will also provide national training on neurodiversity with Carelon Behavioral Health in December of 2023.

### **Self-Advocate Coordinators**

The Department of Developmental Services’ Self-Advocate Coordinators (SACs) play a vital role in leading the department in supporting individuals, families, community partners, and all support staff. The SACs voice support, guide, question, and strengthen the department practices, policies, and culture. The SACs remain connected by being role models, providing on-going training, and promoting advocacy. The SACs support individuals in their understanding of what it means to live a self-determined life and be part of our CT communities in an ever-changing world. The nine SACs located in all three regions, are employed by DDS to inspire people to take a “STEP” (Supporting Transformation to Empower People) in the direction of living their best life. Through

their passion for advocacy, the SACs are instrumental in promoting as well as executing the department's five-year plan.

#### *FUN, ADVOCACY AND BRAINPOWER (FAB), COMMUNITY OUTREACH AND MORE*

The DDS Self Advocate Coordinators (SACs) are available to support all Self Advocacy (SA) groups around the state of Connecticut by providing monthly resources for a fun and informative SA meeting. Every fiscal year, the SACs select monthly topics for July through June. Any SA group looking for ideas to support their meetings can go to the Self-Advocate Corner on the DDS website. FAB ideas assist in making the SA group a time to: have Fun through making friends, become a great Advocate, and learn information to increase knowledge and Brainpower, to assist in understanding various topics to make their life happen! One item that was of interest to have a resource for as a FAB topic was emergency preparedness. The SACs created an accessible PowerPoint Presentation (e.g., voiceovers with audio descriptions of the information).

Other safety items beyond emergency preparedness that the SACs promoted included collaborating with CT Family Support Network (CTFSN) on different areas of interest. One of the SACs in the North Region collaborated on a presentation focused on Woman's Issues. Other community partnerships included collaborating with Special Olympics Connecticut (SOCT) to interview SOCT athletes for success stories. The finalized stories are shared on the DDS website and DDS social media sites to inspire all to strive to "STEP" toward independence.

#### *AGING MATTERS*

The Aging Matters Conference returned to in-person for 2023 at the Keeney Memorial Center in Wethersfield. The SACs continue to partner with the CT State Department of Aging and Disability Services & The CT Chapter of the American Association on Intellectual and Developmental Disabilities to spread the word about the conference. One of the South Region SACs remains an active participant in the Aging Matters Committee to lend ideas to the planning of the annual conference, which included breakout sessions. This year's conference, entitled "Aging Matters - Assistive Technology to Support Diverse Needs," provided information, resources and ways to bridge the digital divide. The Keynote Speaker Dr. Lauren Tucker provided attendees with hands-on activities and explorations of ways to navigate efficient and effective access to resources through technology from healthcare, communication, and social networking — technology which is the key to these crucial supports. The Breakout sessions that were planned included presentations from the CT Assistive Tech Act, Town of Wethersfield Senior Support Programs and 211.

#### *FORUMS/EVENTS*

One of the SACs from the North Region took part in the CT Association of People Supporting Employment First (APSE) conference. The APSE conference allows SACs to share many resources and information about self-advocacy groups and how the SACs can support people to gain skills to get a job and keep a job through the use of the LifeCourse materials, especially the Integrated STAR. Another event that the SACs were able to provide support and information at was CT Assistive Technology Innovation Conference in June. The conference provided an opportunity to help enhance awareness, understanding, access, and acquisition of Assistive Technology devices and services in Connecticut.

### *EDUCATION, TRAINING AND COMMITTEES*

The SACs provided training to stakeholders in 1:1 advocacy, IP Buddy Supports, being Self-Determined, how to advocate (10 Steps of Being a Good Self Advocate), exploring self-directed supports, promoting employment opportunities, promoting healthy relationships, sharing the various living options available, learning to hire and manage your own staff, understanding abuse and neglect, promoting the Individual Plan used by all people supported by the department, promoting LifeCourse strategies and materials, promoting Peer 2 Peer Waiver supports, and being available to listen to advocates of all ages to find their voice. All SACs are valued members of various regional and statewide committees including: Diversity Equity and Inclusion (DEI), Aging Matters, Youth Leadership Program, interview teams, SELN, employment, Provider Qualification, Job Development Leadership Network (JDLN), and People First of CT. This year brought a host of new committees and panel discussions for the SACs to participate in, such as a meeting with Sarah Ullom-Minnich of Digital Equity in Connecticut. Sarah shared with the SACs that everyone deserves the right to access the Internet. With federal funding, Digital Equity in Connecticut is launching a survey to get the word out. The SACs will have an impact by sharing this information and helping people get connected. Another discussion the SACs participated in this year was with Ricardo Salas Murillo and Josh Scalora from DDS to provide insight and information on how to capture race and ethnicity for the department to have data information to provide to public health agencies to eliminate disparities between groups of people. SACs were pleased to suggest using the LifeCourse Integrated STAR as a way for individual(s) to share their race and ethnicity as long as they felt comfortable with doing so.

The SACs continue to partner with a Planned Parenthood of Southern New England Educator who have been trained to teach the curriculum that has been written By, For, and With Self Advocates. The series is conducted in each of the 3 regions at least 2 times a year. The “Healthy Relationship Series” curriculum the department is using promotes healthy relationships for all individuals.

The SACs worked with the Director of Assistive Technology (AT) to spread the word on all things AT via a new program called AT and Me. This is a program for individuals supported by DDS to learn how to use technology to live more independently and improve daily living skills. The aforementioned will be achieved by the SACs promoting the program, encouraging individuals to apply to take part in the program, and educating individuals on ways to use a multitude of devices. Instruction with the use of the peer-to-peer modality will allow for comfort, learning at the participants’ pace, and cooperation, and it supports meaningful connections.

The SACs returned to a four day in-person overnight CT Youth Leadership Forum (CT-YLF) on the UConn Storrs Campus. The week was packed with working with CT-YLF staff, Connecticut Parent Advocacy Center (CPAC) staff and past CT-YLF delegates to offer high school students with disabilities the opportunity to explore and develop leadership skills. Three SACs from the West Region presented to the students/delegates topics on Self-Determination, how to use the LifeCourse materials, leadership and how to “Speak up and Speak Out.”

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### **Improvements/Achievements 2023-2024**

#### **Individuals Served**

As of June 30, 2023 there were 10,981 individuals enrolled in the Home and Community Based Services (HCBS) waivers for persons with intellectual disability.

DDS funding priorities continue to address individuals with an emergency need for supports and services and for existing HCBS waiver participants with increased needs or a change in their need. As of June 30, 2023 there were 549 individuals on the DDS Residential Waiting List including 54 Emergencies and 495 Urgents.

As of June 30, 2023 there were 8,471 individuals supported in residential settings. In addition, 14,795 individuals were supported in day and employment settings.

### **Money Follows the Person**

DDS is a partner in CT's Money Follows the Person (MFP) demonstration grant that is intended to assist with the rebalancing of CT's long-term care system, so that individuals can return to living in the community. As of FY23 the DDS MFP unit has assisted 332 individuals who have moved from long-term care settings, Hospitals, Private ICFs, Southbury Training School and DDS Regional Centers into community settings under MFP.

### **Respite Program**

DDS Respite Centers provide 24-hour care for extended weekends in comfortable home-like environments. The department has 11 respite centers that served more than 640 individuals statewide in FY 2023, including more than 40 children under 18 years of age.

### **Case Management**

DDS Case Managers continued to guide Planning and Support Teams to creatively navigate resources to ensure those they serve receive the supports needed through Fiscal Year 2023. With the conclusion of the Public Health Emergency, Case Managers at DDS were well positioned to continue the delivery of services seamlessly.

At the start of the fiscal year, roughly 75% of DDS Case Managers opted to move from a 35-hour work week to a 40-hour work week. The resulting proportional increases in caseload size allowed the department to equalize and stabilize caseloads. This past fiscal year also saw the onboarding of 29 new Case Managers to fill vacancies from retirements and promotions. Case Managers new and seasoned were provided many training opportunities to enhance skill sets. In addition to training and support to and from Case Management Supervisors, 10 webinars offered instruction on processes and resources from presenters both within DDS, and from sister agencies. Additionally, tools were created to assist Case Management staff to ensure thorough completion of processes that are less commonly needed. These combined efforts aim to maintain the high standard of quality services provided by DDS Case Managers to individuals and families.

As part of a third phase of the FileBound project, which moves DDS closer to an electronic record, additional read-only user groups were trained to retrieve records from the system. Staff in the Quality Management, Medicaid Operations and Employment and Day Service units were trained and are now using FileBound to review service planning documentation as part of their existing process. Supervisors of Case Management, too, are using the FileBound system to conduct reviews for quality. This has led to increased transparency as well as efficiency by reducing the need to request documents from Case Managers in the offices.

With the introduction of the department’s STEP initiative (Supporting Transformation to Empower People), Case Managers were educated and equipped to share messaging and answer questions from individuals and families in the latter half of the year. This work will continue into the next fiscal year.

### **Federal Reimbursement**

As of June 30, 2023, there were 10,981 persons enrolled in the DDS Home and Community Based Services (HCBS) Waivers. The HCBS waiver program allows for federal reimbursement for residential habilitation, day programs, and support services provided in the community.

## **Information Reported as Required by State Statute**

### **Affirmative Action/Equal Employment Opportunity Office**

The DDS Equal Employment Opportunity (EEO) Office is charged with ensuring that the principles of Affirmative Action and Equal Employment Opportunities are undertaken with vigor, conviction and ‘good faith’ to overcome the residual effects of past practices, policies and/or barriers. The EEO Office directly reports to and is under the authority of the DDS Commissioner. The EEO staff conducts investigations into internal discrimination complaints, renders findings and is involved in a variety of resolution activities. The EEO staff develop, implement and monitor affirmative action program goals and objectives. The EEO staff monitor compliance with state and federal affirmative action/equal employment opportunity laws and regulations. The EEO staff provides training to all new employees and supervisors on affirmative action topics. The EEO staff consults with managers and administrators on affirmative action matters.

### **Council on Developmental Disabilities**

The CT Council on Developmental Disabilities is an independent, federally funded agency, established by Governor Malloy’s Executive Order No. 19 and operating under the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 (PL 106-402). The Council is composed of 24 members appointed by the Governor. The Department of Developmental Services provides fiscal and administrative services to the Council. In FY 2023, the Council received approximately \$734,000 for work on its current five-year plan, which covers fiscal years 2022 through 2026 and is organized around these nine specific objectives:

OBJECTIVE 1.1: By 2026, increase the access for at least 150 individuals with developmental disabilities to assistive technology pertaining to the areas of emphasis as defined in the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) through collaboration with at least five (5) state departments and agencies and analysis of their existing programs and benefits.

OBJECTIVE 1.2: By 2026, provide assistive technology to individuals with developmental disabilities for the purpose of enhancing quality of life by providing start-up funding for sustainable service models in at least five (5) organizations.

OBJECTIVE 1.3: By 2026, increase the sustainability of services and programs being offered to the developmental disability community by providing technical assistance on social enterprise practices for generating sustainable funding sources to recipients of Council funded grants.

OBJECTIVE 2.1: By 2026, assist marginalized communities to access and understand the available programs and services pertaining to the developmental disability community offered by state-wide

governmental agencies and departments, local boards of education, and other local agencies by providing information and support to at least 20 local advocacy organizations.

OBJECTIVE 2.2: By 2026, inform individuals with developmental disabilities and their caregivers about their civil, housing, employment, and educational rights through at least ten (10) information sessions and the creation, compilation, and distribution of pamphlets, graphics, and other digital media in collaboration with at least six (6) civil-rights or legal advocacy organizations.

OBJECTIVE 2.3: By 2026, collaborate with at least five (5) self-advocacy groups to assess and address the needs of the developmental disability community with the intent of developing self-advocacy, self-determination, and professional skills.

OBJECTIVE 3.1: By 2026, provide the Governor with an annual review and analysis of all existing statutory councils pertaining to the developmental disability community with the intent of encouraging and enhancing accountability, diversity, and efficiencies, in addition to, identifying under-supported, redundant, or inactive councils.

OBJECTIVE 3.2: By 2026, train and educate at least 150 parents, caregivers, and siblings of individuals with developmental disabilities to build connections, cultivate leadership and advocacy skills, learn about the responsibilities of being a caregiver/care-coordinator, and develop healthy self-care practices.

OBJECTIVE 3.3: By 2026, provide training to at least 150 professionals including but not limited to educators, law enforcement officers, public officials, public employees, and medical professionals on disability awareness, appropriate responses to challenging situations, and how to identify and interact with people with developmental disabilities.

### **Regulations:**

The department continues the process of amending the licensing regulations for Community Living Arrangements and for Community Companion Homes and reviewing the contracting regulations concerning Individualized Home Supports and Continuous Residential Supports. The department also is revising and updating its Medication Administration regulations to include online training options, and electronic health records, and to reflect current best practices. The prioritization of reviewing and revising agency regulations continues.