

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 – 1,618

(total permanent FT filled count as of June 30, 2022)

Number of individuals determined eligible – 17,257

Recurring operating expenses - \$ 566,979,209

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 2022, the

Office of the Commissioner

oversaw and directed the following divisions:

Equal Opportunity Assurance; Family Support

Resources; Quality Management; Legal and

Government Affairs; Legislative and

Executive Affairs; and Regional Services.

The Office of the Deputy Commissioner

oversaw and directed the following divisions:

Audit; Fiscal; Investigations; 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 years and through many channels. Most recently, feedback was gathered during the Commissioner's "Seeds of Change" tour during 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 focus on the collection of critical health information for the population supported by DDS who were COVID positive. DDS tracked positive cases across a number of DDS support settings, and collaborated with the State Data staff at the Office of Policy and Management to deploy forward-facing reporting using the State Open Data Portal. Data can be found by clicking or going to <https://data.ct.gov/> and searching for DDS. DDS also publishes data on the DDS website that visualize the new positive cases and show the growth of positive cases over time. Data can be accessed by clicking or going to <https://portal.ct.gov/DDS/General/COVID19/DDS-COVID-19-Figures-and-Trends>.

A major focus of the past year has been planning for the implementation of Public Act 21-35 Section 11, which requires that standards are developed and implemented for the collection and reporting of race, ethnicity, and language (REL) data. DDS staff provided structured feedback and evaluation of the standards through participation in feedback sessions with OHS, as well as evaluation activities conducted through the State Agency Data Plan Equity Affinity Group. Through the collaborative work of several health and human services agencies with the Office Of Health Strategies (OHS), REL data collection standards and an implementation guide have been developed and published. DDS will continue to work to develop our agency assessment and implementation plan in the coming year. Expanding access to standardized REL data allows comparison of data across support populations and along a number of factors that has been challenging in the past due to differences in categories and collection standards. Once the data is

available we will have the capability to begin to view the DDS system through the lens of equity, identify barriers, and strategize on solutions to enhance equity in service delivery.

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 FY22, DDS continued to focus on collaboration with other state agencies and private providers in ongoing learning series for behaviorists, as well as improved medication and behavioral programming oversight through the Program Review Committee process.

DDS remains affiliated with the PBS Steering Committee of the National Association of State Directors of Developmental Disabilities Services and continues to provide training Connecticut Emergency Mobile Psychiatric Services for children and teens. DDS is also sponsoring an upcoming virtual training on de-escalation practices for the statewide Restraint and Seclusion Prevention Initiative group.

Self-Advocate Coordinators

The Department of Developmental Services (DDS) Self Advocate Coordinators (SACs) remain steadfast with inspiring people to “Speak Up and Speak Out,” ensuring that those receiving supports and services from DDS have a voice. The ten SACs, located in all three DDS regions, are employed by DDS. Planting “Seeds of Change” in promoting the Department’s five-year plan is executed by the SACs sharing information with individuals with ID around topics such as aging in place, assistive technology, community living options and employment. Their voices support, guide, question, and strengthen the department in practices, policies, and culture. The SACs share ideas, challenges, updates, information, and perspectives of the people DDS supports. The SACs are a cornerstone in playing a central role in system changes and making sure individuals supported by the department have an active role in the development and evolution of the department’s service system. The SACs continue to have an ongoing focus on building voices through self-advocacy and empowering individuals to find their own voice. SACs strongly believe in connecting with others and striving to be positive role models, showing that anything is possible if you understand who you are and what you want to accomplish in life. Remaining connected, being role models, providing ongoing training, and promoting advocacy, the SACs support individuals in their understanding of what it means to live a self-determined life and be a part of our CT communities in an ever-changing world.

COVID

As COVID-19 remains ever present, the SACs continue to be an innovative presence with the use of technology to reach as many people as possible to stay focused on “Living Your Best Life” through a lingering pandemic. The SACs shared material through their virtual bulletin boards about social distancing, staying home if you are sick and mask wearing. Keeping social connections was accomplished through virtual recreation activities such as Name That Tune, the Good Life Social group and Virtual Vacation. As the pandemic lingered, the SACs provided information about transportation changes and accommodations to keep everyone safe like rear door boarding and suspension of bus fares.

All Things Technology

Continued use of various platforms such as Teams and Zoom have allowed the SACs to participate virtually in a multitude of events, meetings, conferences, and other forums. One such forum is holding daily 30 minute “Tranquility” relaxation meetings to enhance and retain skills. Tranquility meetings help to maintain the opportunities of: keeping connected with each other during isolation, ensuring to keep up with online etiquette, use of new features in Teams, continued exploration of various websites and integrating them into their work, supporting each other, exploring various ways to be calm, remain connected with the coordination and running of an online meeting, and staying comfortable with using technology. SACs promote visiting the lending library at UCP to utilize their assistive technology option to borrow equipment. This option enables people to live their lives more independently. The SACs were able to “spread the word” about using technology to pay for transportation such as using Apple Pay and Google Pay. Virtual trainings are another means the SACs used to continue to have an ongoing focus on building voices through self-advocacy and empowering individuals to find their own voice. SACs promote and educate on internet safety as well as cyber bullying. SACs invited all DDS staff as well as outside stakeholders to participate in Teams virtual “Drop the Mic” forum to reaffirm their commitment to use person first language. The Drop the Mic forum gave SACs the opportunity to spread the word to new and seasoned DDS staff by encouraging people to use “People First Language” and remind all stakeholders to take their Disability Pledge and participate in the “We Are People – Call Me by My Name” campaign.

Inspiring the Next Generation

SACs inspired the next generation through participation in the second virtual Youth Leadership Forum in 2022. They train, model for, and support the youth of CT to become great Self-Advocates. A four-day virtual YLF highlighted that the SACs can provide mentorship to delegates (students) from around the state in supporting the delegates to learn more about self-advocacy, self-determination, volunteering, employment, assistive technology and becoming a good leader. At YLF, SACs were able to share materials such as use of the LifeCourse integrated star and the two pages that explore “what’s important to me” to build their voices to lead self-determined lives in meeting their goal.

Relationships

The SACs supporting the Healthy Relationship Series that is a partnership with Planned Parenthood stayed with a virtual format in 2021/2022 to remain focused on promoting an understanding of positive safe relationships, knowing your own body, and being able to speak up if you are not being respected. The SACs promoted the importance of Sexual Abuse Prevention and Awareness with use of the LifeCourse Integrated Star. By the SACs sharing their Integrated Stars, they will help to empower others with ID to know their personal strengths and community-based resources needed to become aware of sexual abuse and/or violence as well as how to prevent it. In partnership with the CT Alliance to End Sexual Assault, the SACs’ LifeCourse Integrated Stars were incorporated into their information to honor survivors of sexual assault. The SACs continued to take selfies wearing their #itsnotokay pins with politicians and others to further promoting sexual abuse is not okay.

Training

The SACs provided training to all 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. The SACs boost Fun, Advocacy, and Brain Power (FAB) through several different topics such as handling change, your choices, and safety. Presently, FAB topics can be found on the DDS website and SACs are always keeping up to date with current trends in having fun, advocating and using brain power to strengthen the ability to “be heard, have a voice and be self-determined.” SACs created a PowerPoint presentation entitled “How to Best Support Me in the Hospital” in conjunction with the DDS West Region Director of Clinical Services and Director of Nursing Services. The PowerPoint presentation was shared at Stamford Hospital’s grand rounds.

Regional Committees

All SACs are valued members of various regional and statewide committees including: representation on all the DDS Reopening Committees, Assistive Technology, Aging Matters, Youth Leadership Program, interview teams, SELN, employment, Provider Qualification, Job Development Leadership Network (JDLN), and People First of CT. Several of the SACs have participated in a presentation with CTFSN to continue to network to bring people together to discuss varied topics. Along with a multitude of committees, the SACs take part in the National Core Indicator (NCI) interviews which help to gather insight into the quality of support that individuals receive from DDS.

Improvements/Achievements 2021-2022

Individuals Served

As of June 30, 2022 there were 10,867 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, 2022 there were 669 individuals on the DDS Residential Waiting List including 67 Emergencies and 592 Urgents.

As of June 30, 2022 there were 8,387 individuals supported in residential settings. In addition, 14,103 individuals were supported in day and employment settings.

Aging Services

More than 3,500 individuals age 55 and over receive services from DDS. Aging Services continues to integrate the needs and desires of aging individuals, collects and disseminates relevant data, and shares educational information with individuals, families, DDS employees and support providers.

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 FY22 the DDS MFP unit has assisted 316 individuals who have moved from long-term care settings, Hospitals, Private ICFs, Southbury Training School and DDS Regional Centers into community settings under MFP.

DDS also partners with the Department on Aging and Disability Services, the CT Coalition on Aging and Developmental Disabilities, and the CT Chapter of the American Association on Intellectual and Developmental Disabilities each year for a conference on supporting older adults to remain empowered and engaged.

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 450 individuals statewide in FY 2022, including more than 40 children under 18 years of age. Respite services remained operational, but at reduced census for most of FY 2022, in order to maintain health and safety for the individuals supported.

Case Management

Throughout Fiscal Year 2022, DDS Case Managers have continued to provide quality Case Management services to individuals and their families, some of which continue to be impacted by the public health emergency. Despite challenges including shortages of support staff, Case Managers continued to guide Planning and Support Teams to creatively navigate resources to ensure those they serve receive the supports needed. The Person Centered Planning process (which includes Charting the LifeCourse tools) continues to ensure that the goals of persons served by the department remain the driving force of the support services they choose.

Case Managers were able to safely resume in-person tasks this past fiscal year while simultaneously respecting the comfort level of individuals and families that wished to continue virtual connection a little longer. Nine training Webinars were offered to Case Managers to enhance skill sets in areas of health, technological, resources and entitlements. Despite a number of Case Management vacancies heading into the last fiscal year and a record number of retirements, DDS was able to hire and train 47 new Case Managers, nearly a sixth of the entire unit.

DDS partnered with Probate Court Administration (PCA) this past year to roll out TurboCourt, PCA's electronic filing system. In the fall of 2021, Case Managers, and Case Management Supervisors were trained and then began using the new system for all interactions and document exchange between DDS Staff and the individual probate courts. FileBound, the department's centralized electronic document storage system for document management continues to progress. Case Managers completed the second phase of the multi-year project with the inclusion of Person Centered Plans, which are the basis for individualized service delivery. The use of both FileBound and TurboCourt are steps towards modernizing document maintenance and exchanges as well as business processes.

Federal Reimbursement

As of June 30, 2022, there were 10,867 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 provide training to all new employees and supervisors on affirmative action topics. The EEO staff consult 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 2021, the Council received \$724,000 for work on its current five year plan, which covers fiscal years 2017 through 2021 and is organized around these fifteen specific objectives: 1.1 By 2020, the Council will work with members of the 2020 Committee and state agencies and officials to close Southbury Training School and the remaining five regional centers; 1.2 By 2021, 150 families and self-advocates will implement strategies for self-directed services and supports; 1.3 By 2021, the Council will promote supported decision making so that 50 self-advocates have used this process rather than traditional guardianship; 1.4 By 2019, the Council and partners will plan and implement a second Building a Great Life conference for 400 families and self-advocates; 2.1 By 2021, the Council will provide Partners in Policymaking Leadership training to 125 individuals and parents; 2.2 By 2021, the Council will increase participation in the Cross Disability Lifespan Alliance so that 75 self-advocates have participated in policy and advocacy initiatives; 2.3 By 2021, the Council will provide financial support through the Consumer Involvement Fund to 50 self-advocates to support participation in the community of self-advocates and parents at conferences and other leadership opportunities; 2.4 By 2021, the Council will provide support and training to 75 parents who have developmental disabilities to increase their participation in schools and community activities with their children; 2.5 People First will received financial support and technical assistance from the Council to develop and implement a strategic plan and annual work plan for their organization; 3.1 By 2021, the Council will provide access to customized employment opportunities for 50 people with developmental disabilities; 3.2 By 2021, the Council will develop information and training that provides access to two livable communities that include people with disabilities as members of those communities; 3.3 By 2021, the Council will identify post-secondary educational opportunities for 25 individuals with disabilities so they can access post-secondary educational opportunities; 3.4 By 2021, the Council will increase on-demand transportation option so that 75 individuals with disabilities can participate in community events when and where they choose; 3.5 By 2021, the Council will provide

training and support to CT KASA (Kids As Self-Advocates) to promote transition of 25 youth into adult health care; and 3.6 The Council will change two policies that will increase access to affordable, accessible and available housing for people with 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, electronic health records, and to reflect current best practices. The prioritization of reviewing and revising agency regulations continues.