



Council on Developmental Services



COUNCIL MEMBERS:

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DDS STAFF:

Terrence W. Macy, Ph.D., Commissioner
Mary McKay, Interim Deputy Commissioner
Sgt. Shane Hasset, Director of Investigations
Edward Mambruno, Ombudsperson
Christine Pollio Cooney, Legislative and Executive Affairs
Rod O'Connor, Legislative Liaison

Approved Minutes of September 8, 2011

In Attendance: Jen Carroll; Jack Frost; Jim Heffernan, Chair; Dr. John Pelegano, Secretary; Pat Vingo, Vice Chair.

Absent: Donna Bouteiller; David Hadden; Tom Kalal; Sheila Mulvey; Lou Richards; Patti Silva; Commissioner Terrence Macy, Ex-Officio.

Staff in Attendance: Mary McKay, Interim Deputy Commissioner; Christine Cooney; Linda Goodman; James Welsh; Ed Mambruno.

Invited guests: Diane Martin, South Region Advisory Council (RAC) Chairperson (No other RAC members were able to attend).

The meeting was called to order at 6:15 PM.

There were no members of the public present.

Chairman Jim Heffernan acknowledged former Deputy Commissioner Kathryn du Pree's retirement from the Department of Developmental Services (DDS) and noted the Council's appreciation for her work on behalf of DDS and wished her well in her new consulting career. He introduced Mary McKay, DDS South Region Director, who will be the Interim Deputy Commissioner. He also mentioned that Commissioner Macy was unable to attend the meeting due to his attendance at a statewide event in memory of 9-11.

Diane Martin, South Region's Regional Advisory Council Chair, introduced herself and DDS Staff and Council members introduced themselves.

Due to the lack of a quorum, no action was taken on the July minutes.

Ed Mambruno gave his Ombudsman report and outlined his activities for the month. Jim Heffernan asked if there was a process in place for families to be notified of changes in case management due to retirements. Mary McKay said she would check to see if agency policy addresses this issue.

Christine Cooney reminded staff and members that Community Training Homes (CTH) are now officially called Community Companion Homes (CCH) pursuant to a change in state statute that took effect May 24, 2011.



Linda Goodman facilitated a discussion to solicit feedback from Council Members and the RAC member for the DDS Five Year Plan. Ms. Goodman explained that the last plan was done in 2007. She expects a draft of the new plan to be available by mid-October. Commissioner Macy has been conducting listening tours in all three regions with various stakeholder groups to solicit input. A webcast will be done in October and posted to the DDS website and there will be two opportunities for public hearings on November 1, 2011 at the Legislative Office Building from 4:00 to 7:00 PM and at the DDS James Street Office in New Haven from 4:00 to 6:00 PM on November 2, 2011. The final plan will be submitted to the legislature around the beginning of the legislative session.

As the Council on Developmental Services plays an important policy role, Ms. Goodman suggested that members look at the themes to-date and to think about what goals members would like the department to adopt.

Members discussed the outlined themes, and added to them. Some thoughts from members related to the plan included:

- What are the Medicaid requirements and how can we streamline systems while still being responsive?
- Families don't always know at what age they can access DDS services or how to go about getting family support services for their children such as behavioral interventions, respite, helpline guidance and grant opportunities.
- Communication needs to be clearer with families and among DDS staff so that everyone is aware of the same correct information.
- DDS needs to collaborate better with other agencies and help families navigate multiple systems
- Families don't know what they don't know. Are there new and better ways of communicating? For example, make the website easier to navigate and collect an email database for sharing information with families. Not everyone has a computer. Use different channels to share information about services such as schools and doctors.
- For families who do not have case managers, make sure they know how to access the Helplines in the regions. Helpline information should be front and center on the website.
- Can volunteerism be tapped into as an alternative to funded service?
- The plan should list significant accomplishments of the last five years. One example is that there have been many safety improvements.
- A little respite goes a long way. Can we do more for families?
- Can we explore more creative housing options?
- Waiver services are meant to supplement natural supports.
- What are the census and eligibility trends for DDS?
- What does aging in place mean, and how can we help families to do so?
- DDS needs to continue or augment MOUs with UCONN dental and nursing programs. Future, workforce issues need to be addressed in the plan.
- DDS needs to have a clear vision. DDS is a complex system providing services to more than 20,000 individuals from birth to death with varying needs and geographic factors. This is a challenge.
- The plan needs to focus on what is most important for families.
- Who has ownership of the Level of Need Assessment?
- How does DDS anticipate measuring goals? The plan needs to be drilled down to concrete objectives. How can we show that people are better off?

Chairman Heffernan recommended that members refresh themselves with the last plan and continue to think about feedback.



Mary McKay gave the Commissioner's update. She answered a few specific budget related questions related to funding for high school graduates, residential closures and staff retirements. The FY12 budget included funding for 277 high school graduates with a start date of December 1, 2011. Regions have been able to stagger start dates and families with immediate service needs were able to be accommodated. Nearly half of the FY 12 graduates have started adult vocational or community experience programs already. Proposed closures of Community Living Arrangements (CLA) are being looked at on an individual basis. Even though layoff notices were rescinded, many consumers have already moved. In these cases, it made sense to continue with closure and consolidation of staff to fill vacancies in other publicly-run homes to reduce overtime. Closure options will continue to be looked at as attrition occurs. Four hundred and forty seven (447) staff were notified of layoffs prior to the acceptance of the union concessions. DDS has experienced a large number of retirements. The initial wave of retirements involved approximately 250 employees and a second wave of approximately 50-100 employees is expected due to the health care and pension changes that take effect October 1, 2011. Many vacancies are still unfilled from the last round of retirements. DDS is in the process of prioritizing its refill requests and will submit a plan to the Administration outlining critical needs. The authorized position count for DDS is down approximately 500 positions and we anticipate a probable 10% to 30% refill rate.

Jen Carroll recommended that the issue of rebuilding DDS infrastructure and capacity should be reflected in the Five Year Plan. A question was asked about the reuse of closed CLAs. Ms. McKay replied that homes may be potentially reused if they are accessible; however, many tend to be two-story homes with accessibility issues and would therefore go through the state surplus process.

Ms. McKay provided an update on the investigation into alleged abuse in a Community Companion Home in the South Region that was in the media several months ago. An anonymous allegation of abuse and neglect in the Fall of 2010 led to a full investigation by DDS and local police resulting in substantiation and criminal charges. A debriefing process occurred and was facilitated by a key staff person from the Department of Children and Families. The debriefing process resulted in recommendations for review and implementation related to systems improvement outcomes. The recommendations were shared with council members and discussed. Several of the recommendations have already been implemented and others will be discussed by DDS staff to determine their feasibility and timelines for implementation.

Ms. McKay mentioned that the legislature had chosen the CCH program (then the CTH program) for a Results Based Accountability (RBA) review last session and that there is a two-page report card that was submitted to the Appropriations Committee on this program that might be of interest to members.

There was no new business; no old business; and no executive session.

Chairman Heffernan mentioned that statutes governing the Freedom of Information Act were brought to his attention and may require council review related to the conduct of executive sessions.

The meeting was adjourned at 8:10 PM on a motion by Dr. John Pelegano; second by Ms. Carroll.