

DRAFT
DDS-South Region
Regional Advisory and Planning Council
Meeting Minutes
September 22, 2010

Members Present: Chair Nancy Kalal, Jean Brookman, Carol Cooney, Michael Del Sole, April Dipollina, Jack Frost, Lori Richardson, Danielle Shepard, and Mary McKay, DDS-SR Regional Director/Ex-Officio Member.

Members Absent: Steve Fusti, Diane Martin, and Kim Wollschleager.

I. Chairperson's Report

- **Call to Order** –Chair Kalal called the meeting to order at 6:15 p.m.
- **Citizen Comment** – None presented.
- **Review of Minutes** - A review of the June 23, 2010, meeting minutes ensued. **In the presence of a quorum, and upon a motion duly made and seconded, the Council voted to approve the minutes of the June 23, 2010, meeting as presented to the meeting.**

II. Regional Director's Updates

- **Family Forums** - South Region Fall Family Forums will be held on September 23 at the East Lyme Senior Center, September 29 at Milford Hospital and on October 6 at the Offices of DDS South Region in Wallingford. Information will be shared on Entitlements, Title XIX, Social Security, Guardianship, the DDS Helpline, DDS' Educational Liaisons/Transition Coordinators, the Budget Process and the DDS Waivers. RAC members, Nancy Kalal, April Dipollina and Jack Frost will share their personal experiences in advocating for services for their child. The content area of the forums was suggested by families. Announcement flyers were distributed to case managers, family support groups, and SPED directors. The flyer was also posted to the DDS Website and sent to families of grads.
- **Legislative & Budget Update**
 - Attendance Based Reimbursements – Ms. McKay updated the Council on the status of the attendance based reimbursement system. The average rate of program attendance statewide is 89.5%. DDS saw some savings in this area but not as much as was initially expected.
 - Budget Reduction Options – The State's budget for FY11 was settled quickly in June thru the use of 1x dollars. FY12 budget projections

indicate a deficit, greater than any known by the state before. Under statute, the outgoing administration must forward to the incoming administration a transitional budget. The new Governor then develops his own budget.

Last month, all state agencies were required to submit to OPM a Current Services budget. More recently all agencies were required to submit to OPM Budget Reduction Options totaling 15%. With DDS' current services budget over \$1B in FY12, DDS' required reduction plan amount is about \$161M. It is important to remember this is only a plan at this point, however all areas of our service system will be impacted if the ideas are adopted (see pie chart distributed at the mtg.). The new Governor's proposed budget may or may not include any of our reduction options.

Although there have been no rescissions in FY11 to date, past rescissions have been taken solely through public services in DDS (i.e. ERIP, CLA conversions, fleet givebacks, moratorium on office supplies, and mileage reductions). The loss of over 400 staff coupled with limited refill approval, backroom functions such as data entry and payroll are challenging. The state employee giveback agreement which guaranteed no layoffs for two years ends next summer.

- **Helpline Satisfaction Survey Data** – A summary of the Helpline Satisfaction Survey was distributed and reviewed. The 772 surveys that went out represents a subset of families, as each region serves about 1000 individuals with no assigned case manager. Surveys were mailed only to families that contacted the Helpline. Overall survey response rate was good. Grants, respite, and benefits and entitlements were the top three areas families sought help with. In general, the quality of service provided by Helpline staff was good. This year, DDS has decided to track response time. A goal of returning incoming calls within 24 hours has been established in DDS' business plan. DDS is ramping up efforts to market the Helpline by establishing an email address for each Helpline and creating a Helpline tab on the DDS web page.

Ms. Brookman inquired about the possibility of families opting out of case management in order to save money. Ms. McKay explained that the DDS is bound by CMS regulations that require us to provide case management to people on the waiver and those on Title XIX (fee-for-service Medicaid). The Department is examining how case management is delivered in an attempt to identify areas that could ultimately lead to savings within the limits of the regulations.

- **Data – Eligibility and Wait List** – As a follow-up to a request made at the Council's June meeting, Ms. McKay distributed and reviewed Eligibility and Wait List data. During Q4 of FY10, there were 78 inquiries to the Eligibility unit. During that time period, 127 eligibility determinations were made. Out

of the 127 determinations, 104 individuals were found eligible for DDS services. 44.23% of the individuals made eligible were between the ages 8-17.9 years old and 18.27% were between the ages of 18-20.9 years old. No significant geographic trends for incoming applications exist.

The DDS Residential Wait List includes individuals with either an Emergency (E) or Priority 1 (P1) status. It focuses on individuals with emergent needs. At the end of FY10, there were a total of 531 people (163 from the SR) on the Wait List statewide (24 E's / 507 P1's) representing people living at home with families or independently, and having no current residential services in place. During FY10, the list grew by 49 individuals (4 from the SR).

The DDS Residential Planning List includes individuals with pre-emergent needs. At the close of FY10, there was a total 1449 (561 from the SR) individuals on the Residential Planning List statewide who all live at home or independently with no residential services in place. The planning list decreased by 35 individuals during FY10.

- **Family Support Grants – FY10 Summary** – Each region was allocated approximately \$1.2 M in Family Support Grant funding during FY10. The SR gave out 572 grants totaling \$1.187M in funding. The average grant amount in the SR was just over \$2K per person. Families most frequently requested funding for respite, camperships, in-home supports, bridge funding for grads, adaptive equipment, behaviorists, E's and home modifications. Under a new policy, family grant funding has increased to \$10K per FY.
- **Family Support Council** – The CT Family Support Council has three vacancies it is trying to fill. Suggested nominations should be forwarded to Mary McKay. The Council meets on the 2nd. Thursday of every month during the day. Membership representation is 1/3 agency and 2/3 parents. Every state agency that serves children is represented on the Council. The Council is required to submit to the Governor and Legislature an annual report on the needs of CT citizens with disabilities. This submission typically takes place at the Legislative Breakfast hosted by the Council at the LOB in Hartford each year. Ms. Dipollina, who serves on the Council, touched on the self-assessment initiative recently taken up by the Council in order to re-focus its' efforts and improve their effectiveness. Past Council accomplishments include securing funding for all Katie Becket waiver slots and supporting the autism pilot program initiative. Visit www.ctcfsc.org for more information about the Council.

III. Old Business

- **Council “Self Assessment” – discussion of mission & purpose of council based on statutory mandate:** Ms. McKay spoke briefly with Deputy Commissioner duPree about the Council's questions regarding their role in

consulting and advising and the impact it has on DDS policy and administrative decisions. The Deputy Commissioner indicated that the SR RAC is seen as an active group. Further discussion will occur at the Deputy Commissioner's next staff meeting.

Ms. Dipollina described the self-assessment activities of the CT FSC. These activities included a review of their governing statute, an assessment of family needs, the development of action steps to address those needs, and assigning members specific roles and responsibilities in developing a plan to meet those needs.

Statutorily the function of this council is to "advise and consult" the Regional Director. Discussion ensued on the various mechanisms this council uses to accomplish this. At the conclusion of the discussion, the consensus was that the way this council chooses to consult and advise takes on many forms; but is heavily rooted in outreach to parents.

IV. New Business

- **Updated Council Statute** – Revised statute distributed and reviewed. Changes go into effect 10/1/10. The requirements for an attorney and the designation of two individuals by local associations for mentally retarded citizens have been removed. Now at least one member shall be designated by a local chapter of the Arc of CT and one member shall be an individual who is eligible for and receives services from DDS.
- **Agenda/Priorities for Next Year** – Discussion focused on what this Council would like to accomplish during the coming year and how they want to accomplish it. Possible focus areas included:
 1. DDS FY12 Budget Reductions (How was the 15% across the board reduction arrived at - RBA approach-council will need additional data from DDS in order to move forward on this one).
 2. Protecting the DDS budget and the services of our clients (broad topic - legislative advocacy, determine what we can do to mitigate the situation-advocate for changes in CMS requirements, advocate for grads/age-outs/make sure families know they need to get in line).
 3. Increasing family attendance at regularly scheduled RAC meetings.
 4. Easier access to the DDS service system.
 5. Lower cost/creative housing options (i.e. shared family homes, live-in companions arrangements, forging relationships w/universities to support creative housing options, research what other states and families are doing).
 6. Business Plan Goals (formerly known as the Annual Plan).
 7. Forming stronger relationships with Boards of Education through the State Department of Education.

- **Report on Statewide Council on Developmental Services Update** – Jack disseminated some hand outs. The last meeting included a presentation on the CTH program. Discussion did not occur due to time constraints.

V. Adjournment

With no further business before the Council, Chair Kalal adjourned the meeting at 8:20 p.m.

VI. Next Meeting Date

The next meeting of the DDS-South Region Advisory and Planning Council will be held on Wednesday, November 17, 2010, at 6:00 p.m., at the Henry Carter Hull Library, Clinton.

Minutes Submitted By:

Jolie Crescimano-Goss

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