

**D. C. State Developmental Disabilities
Council
64 New York Avenue, N.E.
Washington, DC 20002**

**Summary
FIVE-YEAR STATE
PLAN
FY 2007 – 2011**

State Plan Approved: October 27, 2006
By: Administration on Developmental Disabilities
Department of Health and Human Services

Comprehensive Review and Analysis

A. Environmental Factors: Describes how economic, social, political, and litigative factors affect persons with developmental disabilities and their families in the state.

Economic

The 2005 U.S. Census Population estimates for the District of Columbia resulted in a negative economic impact for the City/State because of a substantial population undercount. These estimates are used in federal funding allocations, as denominators for vital rates and per capita time series, as survey controls and in monitoring recent demographic changes. The District initiated a formal challenge of the Count to the U.S. Census Bureau and an accepted challenge to Vintage 2005 Population Estimates was issued on July 20, 2006. The revised population for the District is 582,049. The District faces among the highest poverty and child poverty rates in the nation, as well as one of the highest unemployment rates in the nation, and its estimated number of persons living with developmental disabilities is 10,479.

The Federal Deficit Reduction Act (DRA) eliminated the potential for States to be awarded TANF bonus funds and imposed measures that shift costs from the Federal Government to the States. The Income Maintenance Administration has developed cost neutral strategic plans to minimize the potential imposition of punitive penalties that would impact the District's disadvantaged residents.

In addition, the District, in its efforts to mitigate the marriage penalty, has offered more filing status alternatives than the federal system. While the structure does not eliminate all penalties in the city's tax system, it reduces the disincentive to marriage inherent in the tax structure. Finally, because Congress has not reauthorized the Community Services Block Grant (CSBG) Act, the economic picture is uncertain for community-based providers of Child Care, Job Training and Income Assistance Programs.

Social

Barriers that impede the utilization of available services include religious beliefs, cultural and language barriers, and the lack of flexible and on-time transportation. Also, the lack of health providers to cover essential services needed resulted in the initiation of the Health Resources Partnership Project funded by the Mental Retardation and Developmental Disabilities Administration (MRDDA). This partnership is to expand the community health-care capacity to provide health and mental health services that are accessible to individuals with intellectual and other developmental disabilities; to provide enhanced knowledge and understanding of individuals, families and health professionals of the unique health issues experienced by people with developmental disabilities; and to provide improved coordination and consistency in the delivery of health care through the promotion of best health care practices. In addition, the lack of required training, such as the certification of nurses and/or the specific trainings for direct care support professionals needs to be addressed.

Political

Numerous changes in the management of the principal state agency providing services and supports for individuals with developmental disabilities and their families have created disruptions in service delivery due to staff changes, stress and budget challenges. The District has enacted legislation for Language Modernization in all of its local legislation, policies and procedures that will effectively remove and/or replace offensive and insensitive reference to individuals with developmental disabilities. A bill has been introduced to establish a Department on Disability, which would be part of the Mayor's Cabinet. This proposed department does include the Developmental Disabilities Council.

Litigative

In response to a report by the Evans Decree Court Monitor, MRDDA moved forward toward the closure of group homes for individuals with mental retardation that have been identified as problem plagued facilities that fail to deliver sufficient care. The Evans Decree regards a nearly 30-year old lawsuit on the quality of the city's care for individuals with mental retardation. In addition, a special congressional hearing was held to examine the service provision of MRDDA and its accountability. A motion for receivership of MRDDA has been filed and the Judge set a date of October 2, 2006 to begin the hearings on the receivership request. All parties have been urged by the Judge to attempt to settle before that time.

- B. State Service Systems: Provides a summary of the results of the councils review and analyses of the state service system for the people with developmental disabilities. It includes reference to relevant interagency initiations and any specific eligibility barriers to service.**

Child Development Facilities

To improve and enhance community services and supports, rules for licensing Child Development Facilities were developed by a community task force under the auspices of the Department of Human Services and refined by the Department of Health. Each Child Development Facility that serves one or more children with special needs, including infants, toddlers, pre-school age children and/or school-age children shall comply with all of the specific requirements.

Supported Employment Services and Supports

To improve and enhance community services and supports, Rehabilitation Services Administration (RSA) has developed Memoranda of Understanding with MRDDA and the Department of Mental Health. In addition, RSA has Human Care Agreements in partnership with MRDDA with four community-based providers for supported employment services. This increases the number of provider choices for the consumers requesting supported employment. Some of MRDDA consumers are hired in

competitive employment positions with the CVS Pharmacy Stores after completing training in photography at the New Visions Program.

Transition

The D.C. Public School (DCPS) State Planning Transition Team was established to identify priorities regarding transition outcomes and to develop plans to address the District's transition services. The integration of RSA Transition Specialists in the local school community has increased the awareness and understanding of students with disabilities, parents and school personnel including teachers and special education coordinators, about the vocational rehabilitation program. DCPS, RSA, and other public adult services agencies have joined in a Memorandum of Agreement, which establishes linkages for cooperative transition services and interagency planning. Participating agencies affirm their support for comprehensive coordinated planning and implementation of transition services. Efforts are underway to expand the MOA to include child and youth serving agencies as well. DCPS has also established an agreement with the Marriott Bridges Program for job placement of students with disabilities transitioning from secondary school to employment. This includes placement of students with developmental disabilities.

Eligibility

The absence of psychological testing as described in the IDEA97, which affords special education to individuals with developmental disabilities, at the appropriate time in the DC Public Schools, prolongs the application process. This barrier to eligibility delays their ability to receive entitlements and financial benefits as they have never been diagnosed as having a cognitive impairment. Such barriers may be addressed and referred by and through consumer advisory boards and advocates to the appropriate agency for remedial action. While factors addressed in previous environmental areas may not have determined the selected goal areas, staff and individual council members ensure that issues receive attention through collaborative efforts with the State stakeholders.

- C. Community Services and Opportunities: Provides a summary of the extent to which community services and opportunities related to the areas of emphasis directly benefit individuals with developmental disabilities. Includes information on assertive technology/services and rehabilitation technology, current resources and projected availability of future resources to fund services, and health care and other supports and services received in ICF (MRs) and through Home and Community Based Waivers.**

The Mental Retardation and Developmental Disability Administration (MRDDA) provides a network of community based services and has implemented Human Care Agreements for Employment. In addition, it has an interagency agreement with Rehabilitation Services Administration (RSA) to provide supported employment services. RSA funds upfront services, i.e., situational assessments, job coaching, while MRDDA provides funds for long-term follow-along services. Adaptive equipment for persons with developmental disabilities with Medicaid/Medicare is obtained and Individual Support Plans routinely address the need, acquisition, modification or replacement of adaptive

equipment. Services provided under the Waiver program include Respite, Homemaker, Attendant Care Aide, Chore Aide, PT, OT, Dental, Transportation, etc.

D. **Waiting list:** The District of Columbia does not have waiting list in its principle State Agencies responsible for service delivery to the developmental disabilities population.

E. **Unservd and Underserved: Lists and describes racial/ethnic groups that may be unserved/underserved and describes the barriers to their receipt of supports and services.**

1. Asian: Social factors include religious and cultural beliefs. Outreach is provided through UCEDD and State Office of Asian and Pacific Islanders Affairs.
2. Native Hawaiian or Pacific Islanders: Social factors include religious and cultural beliefs. Outreach is provided through UCEDD and State Office of Asian and Pacific Islanders Affairs.

F. **Rational for Goal Selection [Section 124(c)(3)(E)]:**

Goals were selected based on the outcomes of a Council retreat, designed for that purpose, public hearings, and community forums. Forums were designed to involve the hierarchy of specified agencies, i.e., housing, transportation, and appropriate staff to accommodate necessary action and follow-up. Other topics determined to be a priority, such as voting, were identified through consumer satisfaction surveys conducted as part of a Council project utilizing the “Ask Me” model. In addition, overriding concerns were program integrity, underserved disability areas such as Autism, acts of terrorism and extreme weather conditions and the impact these crises would have on the care and safety of the individuals with developmental disabilities.

A data management system is needed to provide population data regarding individuals with developmental disabilities to support the strategic planning and policy development for outyear services and supports to meet their needs. In addition, it will aid in the identification of the under/unserved individuals with developmental disabilities. Currently a myriad of data exists; however, data is singularly exclusive or peculiar to the specific agency/entity and does not lend itself to mutually inclusive analyses. Environmental Factors identified as barriers to service and not adopted as goals will be addressed in concert with responsible agencies through interagency task groups, Advisory Boards and consumer advocates.

Selected Plan goals were then based on identified priorities that could be implemented in collaboration with other stakeholders and where known gaps and Council dollars would have the most impact both in terms of systems change and positive outcomes that ensure the highest quality of life for and inclusion into the community of individuals with disabilities.

GOALS

EDUCATION AND EARLY INTERVENTION: Students reach their potential and infants and young children reach their development potential.

GOAL 1: AUTISM: Collaborate with the DD Network, agencies and others on the topic of autism that addresses the needs of the individuals with autism across the life span.

Objectives:

- 1) By 2007, implement in concert with UCEDD, Quality Trust, state agencies and others, a conference that identifies best practices and evidence-based research for services and supports for individuals with autism.
- 2) By 2008, develop a white paper and/or guidelines to assist state agencies in creating services and supports responsive to the needs of individuals with autism.
- 3) By 2009, collaborate with the DD Network in establishing a parent and family workgroup on expanding the Home and Community Based Waiver to include services and supports for individuals with autism.

Strategies To Be Used: Outreach, Training, Technical Assistance, Supporting and Education Communities, Interagency Collaboration and Coordination, Barrier Elimination, Systems design, and Redesign, Informing Policymakers, Demonstration of the New Approaches to Services and Supports.

GOAL 2: EDUCATION: Collaborate with the DD Network and stakeholders to develop a competency based comprehensive system of personnel development for direct care support professionals.

Objective:

- 1) By 2008, initiate a stakeholder's workshop for the purpose of defining the process and enlisting the consortium of universities and colleges in the Washington metropolitan area.

Strategies To Be Used: Training, Technical Assistance, Interagency Collaboration and Coordination, Barrier Elimination, Systems Design, and Redesign

RECREATION: People benefit from inclusive recreational, leisure and social activities consistent with their interest and abilities.

GOAL 1: INCLUSIVE RECREATIONAL ACTIVITIES: Collaborate with Department of Parks and Recreation, ECEA, and other stakeholders regarding inclusive recreational activities for individuals with developmental disabilities.

Objective:

- 1) By 2008, establish a family-driven taskforce to address recreational needs and systems change to support services and individuals with developmental disabilities.

Strategies To Be Used: Outreach, Training, Supporting and Education Communities, Interagency Collaboration and Coordination, Barrier Elimination, Systems design, and Redesign, Coalition Development and Citizen Participation.

QUALITY ASSURANCE: People have the information, skills, opportunities and support to live free of abuse, neglect, financial and sexual exploitation and violation of their human and legal rights and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity and integration and inclusion in all facets of community life.

GOAL 1: SELF-ADVOCACY: Provide activities for individuals with developmental disabilities to demonstrate self-advocacy skills.

Objectives:

- 1) By 2007, provide technical assistance to establish the framework for the Self Advocacy Network (i.e. policies, procedures, by-laws, funding, etc).
- 2) By 2008, provide technical assistance to the Self Advocacy Network in recruiting and expanding cross-disability memberships annually.
- 3) By 2008, conduct at least three train-the-trainer sessions annually in the area of rights, accessible transportation and family supports.

- 4) By 2011, train at least 50 self-advocates to testify on policy issues before State legislators.
- 5) By 2011, recruit and nominate at least 25 self-advocates to serve on various boards and commissions.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance.

GOAL 2: SELF-DETERMINATION: Inform self-advocates, family members, service providers and stakeholders about the philosophy of self-determination and how it can be applied to their lives.

Objectives:

- 1) By 2008, provide at least two annual training workshops on principles of self-determination and leadership development for self-advocates, family members, service providers and stakeholders.
- 2) In 2007 and 2009, provide technical assistance for advocates to host a self-determination conference in 2008 and 2010.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, and Technical Assistance

GOAL 3: VOTER REGISTRATION/ EDUCATION: Assist individuals with developmental disabilities to participate in available voter registration and education initiatives.

Objectives:

- 1) By 2007, collaborate with MRDDA and service providers to ensure that persons with developmental disabilities have an opportunity to exercise their voting rights.
- 2) By 2007, conduct annual voter registration campaigns.
- 3) By 2008, provide training for individuals with developmental disabilities annually regarding the electoral process, accessibility options and how to use the voting equipment.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

GOAL 4: EMERGENCY PREPAREDNESS: Collaborate with State policymakers on emergency preparedness to ensure that accommodations meet the needs of individuals with developmental disabilities.

Objectives:

- 1) By 2007, coordinate with the Department of Human Services to ensure that emergency preparedness information is available through a variety of venues to reach individuals with developmental disabilities.
- 2) By 2008, advocate and collaborate for the inclusion of individuals with developmental disabilities in mock emergency preparedness activities.
- 3) By 2011, conduct at least 16 emergency preparedness trainings for individuals with developmental disabilities, families, service providers and stakeholders.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

GOAL 5: CONSUMER SATISFACTION: Partner with MRDDA and stakeholders to implement systems change based upon recommendations identified in the Ask Me! Project.

Objectives:

- 1) By 2007, collaborate with MRDDA and stakeholders in the prioritization of recommendations appropriate for modified program policies, provider implementation and annual review.
- 2) By 2007, monitor annually implementation on Ask Me recommendations.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

FORMAL AND INFORMAL COMMUNITY SUPPORTS: Individuals have access to other services available or offered in a community, including formal and informal community supports that affect their quality of life.

GOAL 1: COMMUNICATION: Collaborate with State emergency preparedness coordinators to ensure the communication needs of individuals with developmental disabilities are identified and included in all emergency preparedness plans.

Objective:

- 1) By 2008, determine the feasibility of persons with developmental disabilities using HAM radios and/or other communication devices during an emergency.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

CROSS CUTTING: Council activities that impact all areas of emphasis.

GOAL 1: PUBLIC AWARENESS/RECOGNITION: Initiate a public awareness campaign that focuses on individuals with developmental disabilities and service delivery.

Objectives:

- 1) By 2007, establish a website for DC Developmental Disabilities Council (DDC).
- 2) By 2007, coordinate with DC media to publish and/or broadcast a minimum of two (2) positive press releases about individuals with developmental disabilities annually.
- 3) By 2007, produce and distribute DDC newsletter semi-annually.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

GOAL 2: **RECOGNITION/REWARDS:** Sponsor two recognition/accomplishment events for outstanding performance in the field of developmental disabilities.

Objectives:

- 1) In 2008 and 2010, provide technical assistance and support for advocates to plan the event.
- 2) In 2008 and 2010, collaborate with other agencies/organizations regarding implementation of event.
- 3) In 2008 and 2010, establish a task group to identify criteria for selection of person(s) and/or agency/organization(s) to be recognized at the event.
- 4) In 2009 and 2011, implement a recognition/accomplishment event.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance

GOAL 3: **DATA MANAGEMENT SYSTEM:** Develop an interagency data management system to accurately identify individuals with developmental disabilities and their level of service needs and supports.

Objectives:

- 1) By 2008, establish an interagency work group to identify scope, funding needs and interagency funding levels to support the data system.
- 2) By 2008, develop a Memoranda of Understanding among the participating agencies.
- 3) By 2009, identify and develop a specific data management system.
- 4) By 2010, implement the data management system in selected agencies currently providing services to individuals with developmental disabilities.

Strategies To Be Used: Outreach, Training, Supporting and Educating Communities, Interagency Collaboration and Coordination, Coalition Development and Citizen Participation, and Technical Assistance.