

## **Governor's Commission on Building Access to Community-Based Services**

### **Minutes of September 19, 2018, Meeting at DHSS Chapel**

Co-Chair Rita Landgraf called the meeting to order. She asked for a moment of silence to honor the life and work of the late advocate Jamie Wolfe.

Rita introduced Alyssa Cowin, operations support specialist in DHSS' Office of the Secretary and a recent graduate of Partners in Policymaking. Daniese McMullin-Powell, a commission member, is also a graduate of Partners in Policymaking.

Alyssa presented her Partners project, a video about the strengths and challenges of Paratransit, and how the transportation service and transportation, in general, for people with disabilities could change in the coming years and decades. Despite the challenges that Paratransit faces in Delaware, Rita said Delaware is the only state that goes beyond the requirements of the ADA. Where Paratransit used to make 400 trips a day, it now makes 4,000 a day.

Commission member Dava Newnam said she saw Alyssa's Paratransit bus leave without her one day. She asked Alyssa how often that happens. Alyssa said that was the second time this year.

Rita asked Alyssa how she would change Paratransit if she were the boss. Alyssa said more drivers and more Paratransit vehicles, and Paratransit running on Sunday.

Commission member Terri Hancharick said people with disabilities need more options like they have in other states.

Alyssa said she already had shown the video to the Community Advisory Council for UD's Center for Disabilities Studies, and Rita said it would be good for her to show it at DART's Elderly and Disabled Transit Advisory Committee (EDTAC).

The commission thanked Alyssa for her presentation, and wished her well in changing policy.

The commission then shifted to its ongoing Strategic Planning work. For alignment, Rita had asked each division with advisory councils or commissions to send her and Secretary Walker an inventory of their priorities. The commission went through the priorities for:

**Transportation:** Marie Nonnenmacher mentioned the certified of need and Steve Groff mentioned the certificate of public necessity. Daniese said Paratransit starts at 6 am; fixed-route at 4:30. Rita said we do not have a robust public transit system like Washington or New York. That's why DTC is looking at alternative offerings to innovate. Rita said UD is working with driverless cars and will go live in Wilmington in the Riverside neighborhood by picking up teens and bringing them to the Teen Warehouse. Daniese said Uber has no accessible vehicles in Delaware. You can call Philadelphia, but it will cost you, she said.

**Housing:** In Delaware, 350 individuals experiencing homelessness also have a disability. For too many people with disabilities, there is not enough affordable housing; DSHA providing support for construction and rehab of affordable rental housing.

**Division of Developmental Disabilities (DDDS):** Marie said DDDS is doing a rebasing at the request of the General Assembly. DDDS is also looking to find any barriers to services, and is assessing support needs. Marie said technology is an emerging need in support of advancing independence. She said shared living – adult foster care – is increasing, with more than 100 individuals living in the community through that means. Need to overcome barriers for new supported employment providers. Big up-front cost. Has an aging in place task force. Must develop direct support professional (DSP) workforce and providers' workforce.

**Division for the Visually Impaired (DVI):** Elisha Jenkins said DVI is a lifespan-oriented agency like DDDS. The advisory councils presented priorities, including enhanced employment and training, vision services to be provided by the school district, not DOE or DHSS, requesting Governor's Commission on Building Access to Community-Based Services to provide oversight; and increase employment outcomes by 15%.

**Division of Vocational Rehabilitation (DVR):** Very specific priorities regarding increasing employment for people with disabilities, especially with the country near full employment. Expand services to students beginning at age 14 and increase each year the number of students who receive pre-employment transition experience.

**Division of Services for Aging and Adults with Physical Disabilities (DSAAPD):** Volunteer recruitment plan to help perform vital services; expand Grant-in-Aid funding for senior centers; alternate transportation programs; and licensed reciprocity between states to take advantage of skills of income retirees. Terri said she would like to see more collaboration with AARP.

**Behavioral Health Consortium:** 3-year action plan, including access and treatment, education and prevention, family and community readiness, and changing perceptions and stigma.

**State Council for Persons with Disabilities:** Promote and provide better coordination of state services, policies, programs, plans and activities to achieve full integration of individuals with disabilities in the community. Hold agencies accountable for advancing full integration. Rita said maybe the State Council could keep inventories and assess annually.

**Employment First Commission:** This commission may play a role in tracking metrics for agencies related to employment of people with disabilities. Group asked can the Governor's Commission lend value to these priorities when we are not achieving a goal.

**Developmental Disabilities Council:** Improve advocacy skills, implement a person- and family-centered approach, improve access to quality health care, and maximize the potential of persons with developmental disabilities through the provision of vocational and life skills.

**Governor's Advisory Council for Exceptional Citizens:** Outcomes for students will be improved by monitoring and supporting the implementation of the Annual Performance Report.

**Medicaid:** Medicaid has federal advisory councils, not state ones, by there was discussion about trying to develop the workforce since Medicaid is so crucial to people with disabilities. Consensus was maybe we could concentrate on this so everyone is improving.

Rita said there is a gap among all the advisory councils and that's on the health side, transformation of the system. Commission could fill that space in supporting people with disabilities. Goal No. 1: Advance the transformation of health care delivery to respond and advance better outcomes for individuals with disabilities inclusive of long-term care and health equity.

Co-chair DHSS Secretary Dr. Kara Odom Walker thanked commission members for the inventory, and said the next step will be consolidating the priorities in advance of presenting the strategic plan to the Governor. She said the commission will need feedback from the Governor on the best path forward.

Daniese said she sees this commission as a feedback loop.

Rita said the big question that commission members needed to answer is: Why and how this commission can add value? Rita said she think the commission can, but its members need to think strategically. How do we support agencies and commissions in a productive way, and, ultimately, achieve better outcomes for people with disabilities.

Rita said dates for the November meeting would be explored. With that, the meeting was adjourned.