

LDDC Quarterly Meeting

1/16/2020 Transcript

APRIL DUNN: All right everybody, can you please take your seat so we can get started. I want to call the meeting to order and welcome everybody. My name is April Dunn, the chairperson of the council. I want to welcome Temisha to her first DD Council. A little housekeeping, I want to remind people to use microphones when speaking. Wait to be recognized before speaking. Press the button once to turn the mike on, speak directly into the mike, once again to turn the mike off. Now I would like to go around the table and introduce ourselves I will start with my left.

SHAWN FLEMING: Good morning. Shawn Fleming, interim executive director.

RANDALL BROWN: Randall Brown, vice chair of the council.

BRENTON ANDRUS: Brenton Andrus, council staff.

MITCH IDDINS: Mitch Iddins, self advocate.

HYACINTH MCKEE: Hyacinth McKee, member at large, region one.

BAMBI POLOTZOLA: Bambi Polotzola, director of the Governor's Office of Disability Affairs.

EBONY HAVEN: Ebony Haven, council staff.

ROBIN WAGNER: Robin Wagner, Louisiana Department of Health, Office of Aging and Adult Services.

ROSLYN HYMEL: Roslyn Hymel, self advocate, region ten.

LILLIAN DEJEAN: Lillian DeJean, self advocate.

JILL HANO: Jill Hano, self advocate.

MELISSA BAYHAM: Melissa Bayham, director of Louisiana Rehabilitation Services.

PATTI BAROVECHIO: Patti Barovechio, Office of Public Health, title five rep.

TEMISHA SONNIER: Temisha Sonnier, parent advocate, region five.

MATTHEW ROVIRA: Matt Rovira, Community Provider Association.

MICHAEL BILLINGS: Michael Billings, parent advocate, region two.

JULIE FOSTER HAGAN: Julie Foster Hagan, assistant secretary for the Office for Citizens with Developmental Disabilities.

JEN KATZMAN: Jen Katzman, Medicaid deputy director.

AMY DONARSKI: Amy Donarski, region nine.

KIM BASILE: Kim Basile, parent region three.

PHIL WILSON: Phil Wilson, LSU Human Development Center.

TORY RACA: Tory Raca from The Advocacy Center.
Not a member, just filling in today.

KRISTI JO PRESTON: Kristi Jo Preston, director of special education policy Louisiana Department of Education.

TARA SMITH: Tara Smith, parent advocate, region nine.

COURTNEY RYLAND: Courtney Ryland, council staff.

STEVEN NGUYEN: Steven Nguyen, self advocate.

MARY TARVER: Mary Tarver, parent, region six.

MARILEE ANDREWS: Marilee Andrews, council staff.

MICHELL GUILLORY: Michelle Guillory, Office of Elderly Affairs.

APRIL DUNN: Now will guests introduce their self.

LIZ GARY: Liz Gary, parent from region nine.

DONNA BRAUD: Donna Braud, family advocate.

NICOLE FLOREZ: Nicole Florez and Chainy Guidry, region four, Families Helping Families Acadiana.

CHARLIE MICHEL: Charlie Michel, Bayouland Families Helping Families, region three.

JAMES SPRINKLE: James Sprinkle, region six.

MELINDA: Melinda, the Columbus organization.

KATIE CORKEN: Katie Corken, parent advocate.

SHARON DUFRAN: Sharon Dufran, Joe's mom.

ERICA AGULARD: Erica Agulard, LDH.

LAUREN GOODSIDE: Lauren Goodside, LDH.

JENA YOUNG: Jena Young, LDH.

TAMMY BROWN: Tammy Brown, LDH.

APRIL DUNN: Now Hyacinth will read the ground rules.

HYACINTH MCKEE: Louisiana Developmental Disability Council ground rules. Members must be recognized before speaking. Be respectful of each other's opinion. Break for ten minutes every one and half hours. Discuss council business in a responsible manner. Except as necessary restrict the use of electronic communication during council and committee meetings. Silence or turn off all cell phones. Mission statement is posted at every meeting. Be on time for meetings. No alphabets. Side conversations are kept to a minimum, done quietly and restricted to the subject at hand.

APRIL DUNN: Now Steven will read the mission statement.

STEVEN NGUYEN: To lead and promote advocacy, capacity building and systemic change to improve the quality of life for individuals with developmental disabilities and their families.

APRIL DUNN: Now I want to ask Randall to help me facilitate the meeting today.

RANDALL BROWN: Good morning again everyone. I wanted to remind everyone today that council bylaws do not allow for proxy voting. Anyone representing a council member cannot vote on any issue. And anyone who has not been appointed by the governor cannot vote. If any of our visitors would like to make a public comment at the end of the meeting please see Halie at the back table for a card to complete. You can speak for up to five minutes. Visitors are also welcome to provide comments or ask questions throughout the meeting after the council members have had a chance to do so on each issue. Please wait to be recognized and for the mike before you speak. First on the agenda is the July meeting summary. Do I have a motion to approve the summary. It's October, I'm sorry.

JILL HANO: I read it. I can make a motion.

MARY TARVER: I will second.

RANDALL BROWN: Do I have any discussion? Any

abstention? Any objection? Hearing none, this motion carries. Next is the chair person's report.

APRIL DUNN: Did anybody get a chance to read my chair person report? I am not going to read all the stuff on the chair person, all the meetings I attend on the chair person report. But I really want to talk about some of the stuff on my chair person report. The first thing I appoint the following council members to serve on the membership committee. I appoint to make recommendations for applications for North Louisiana. The people are Bambi, Mitch, Dr Hyacinth, Temisha. And Randall will chair the meeting. Those are the people I appoint for the membership committee.

AMY DONARSKI: I have a question about the membership committee appointments. I was honored to be a part of the membership committee that was originally appointed for the Northern Louisiana and Southeast Louisiana regions. At the last selection meeting we had a discussion that we were going to reopen recruiting. However we also had talked about continuing with the same committee. And I am not sure if Ms. Hano was notified we were rolling off and there were going to be new selections. Can you explain to me the process that was involved in that.

SHAWN FLEMING: It's the chair's decision to appoint any committee members and she selected other members to continue the process.

AMY DONARSKI: Can you clarify when that happened and also can you please clarify for allowing the same members to be appointed to the committees over and over again.

SHAWN FLEMING: It's the chair's discretion to appoint members to any committee. April exercised her authority to appoint people. That's the protocol.

APRIL DUNN: Any other questions? Randall will do the recommendation for the executive committee.

RANDALL BROWN: The executive committee met four times since our last meeting. On November 12th, on December 5th, January 3rd and January 15th. There are recommendations for your consideration on the screen. In October 2019 the executive committee passed the motion for the council to consider adopting the following mission statement and position papers at the January 2020 meeting. The proposed mission statement is to increase independence, self determination, productivity, integration and inclusion for Louisianans with developmental disabilities through advocacy, capacity building and systems change. Public comment

was received with a recommendation to replace the word through with the phrase by engaging in between disabilities and advocacy. This motion is presented for your consideration today. Discussion? Any public comment? Are there any objections? Any abstentions? The motion carries. There are six proposed position papers and I believe you all have copies. If there is any comment on any one of them you can do so now. Are there any public comment? Any objections? Any abstentions? Hearing none, this motion carries. Our next motion from the executive committee recommends sending the investigation letter as amended to the full council for approval. A letter be sent to Louisiana Department of Health, Board of Ethics, and The Office of Inspector General. And the letter needs to be signed by both Chair April Dunn and myself the vice chair and offering this motion for the council's consideration. And human resources.

TARA SMITH: Do we have a copy of that letter.

RANDALL BROWN: At the sign in sheet. Who doesn't have a copy?

TARA SMITH: Can somebody circulate them.

CRYSTAL WHITE: I quickly read through it and I think what's important here, someone may have been

advised to do a recording, but it said transcribing and dissemination of the recording that I think needs to be in here. I am not sure that would have been advised to do with that recording. So make sure in this letter I would like for it to also reflect that the recording was transcribed by staff or outsourced, not sure, but also disseminated. I think that needs to reflect so that can be a part of this complaint. Thank you.

RANDALL BROWN: Anymore discussion? Any public comment?

SHARON DUFRAN: I don't know if you are aware, you cannot send a complaint to three different agencies. If you look at the complaint forms one of the things that happens, you cannot send a complaint to three different governmental investigative agencies. They will not review independently and then you get to pick the best answer or two out of three wins. If you look at the complaint forms they clearly ask have you filed with another agency the same complaint or do you plan to. Because they are not going to compete with each other. Typically what will happen the default will go to like the mother ship. So be like LDH because that's closest at hand. The last thing I heard you wanted this investigation to not be internalized. Speaking as

a parent, I find that if you send it to LDH it's keeping it within the same internal mechanisms. My suggestion would be to send it to a different agency. I was just wondering what kind of exhibits or information you plan to send along with this letter. Have you asked like for instance the partners in policy making people if they would like to write statements to be read or to provide any kind of exhibits or other information that could be considered very important to how the findings turn out to this. I would like an answer to that. That's it. Thank you.

RANDALL BROWN: Thank you. We do have copies of letters that were sent to us from the partners' class when they were initially informing the executive committee of their grievances. So we do have those to be included. We also have the resignation letter of our former partners' coordinator, and the region two and statewide LaCAN leader included in that as well. If that answers your question on those we do have. And your suggestions are noted. Do we have any other comments?

CRYSTAL WHITE: In those exhibits did we also include any transcript from all the public meetings? Including everything from all the meetings they have

attended.

RANDALL BROWN: Yes. The transcripts of the meetings will be included.

SHARON DUFRAN: I was able to attend the executive committee meeting via streaming and there is a lot of confusion and misinformation about how these complaints are processed. In particular, The Office of Inspector General was discussed yesterday, and I don't know where this information came from, but I think the complaint processes needs to be looked at when you are selecting which agency. Because it's absolutely not true that the OIG holds things in secret and nobody gets to know the outcome. I don't know where that came from. I would assume that if a complaint is filed there is a letter, a formal letter sent. That is called a paper trail. The council should be on notice for I think there is a discrepancy in the diversity that has been mentioned many, many times. There should be some sort of letter that is sent to the council or at least the staff from an agency whenever the council is under investigation clearly stating what the parameters of that investigation are. I am not seeing any documentation about anything so far. Past investigations, current investigations or future investigations. I think a

little more homework needs to be done as to which agency keeping in mind what their process is. Which agency does what. What kind of information goes out, who it goes to, what kind of information you expect back and then what you are going to do with that information. Let's say some of these allegations are on target, what is going to happen then. I think a lot more to discuss then let's just send this letter somewhere. Thank you.

RANDALL BROWN: Thank you.

TARA SMITH: My suggestion is the letter go to the Louisiana Board of Ethics verses LDH for the reasons that have been stated. I think probably the most appropriate entity to take a look at this. Just want to follow up what was said, is there some sort of investigation of the council going on right now cause I am not aware of that.

SHAWN FLEMING: Yes. The Office of Inspector General contacted me, Sandee was already gone, regarding a complaint related to our membership and I responded.

TARA SMITH: What is the status? Is it closed, open?

SHAWN FLEMING: I do not know. I think it's still

ongoing.

TARA SMITH: Is it your understanding we will get some sort of decision?

SHAWN FLEMING: I was told the decision would not come to us. It would not be made public. I was told it would go to the governor. I am not totally familiar with the workings of The Office of the Inspector General, but that was how it was explained to me. They investigate and they address and their share findings and what not with the governor.

AMY DONARSKI: Mr. Tyler Kinison from The Office of Inspector General actually came to the membership selection committee meeting on December 18th. I did have some questions for him that he did not answer. He did not clarify what his investigation was. I continued with an email to Mr. Kinison and he did respond to me and informed me he was not investigating the council membership. It was another investigation that he would not clarify with me, but he said in the middle of that investigation is when he stumbled across the membership issue. He clarified in the email to me it was not the investigation of the membership. I think we need to clarify what the actual investigation is. Actually he did say there were two.

KIM BASILE: Thank you Randall. Why would the OIG show up randomly at a membership committee meeting and not go straight to executive committee or to council? Why were we not informed of this until just now?

RANDALL BROWN: Mr. Kinison reached out to me about a week ago and I reached out to him and have yet to hear back.

KIM BASILE: When he phoned Shawn was it followed up by a letter, an email. There has got to be a paper trail.

SHAWN FLEMING: Yes, he first reached out you know requesting information, information was provided. He followed up with a phone conversation. He visited me in my office. He made additional requests. Every time he made a request I have provided information. He told me he may go to that meeting. I told him when that meeting was occurring. He told me he may come to this meeting. I can't speak for him. He told me a complaint was filed and the complaint is confidential. Like, he can't share it. I answered him to the full extent of information I had.

KIM BASILE: It's my understanding it's not the complaint itself that is confidential. It is the person making the complaint that is kept in confidence.

Can we see what you have gotten from him?

SHAWN FLEMING: Sure.

AMY DONARSKI: I also want to clarify when Mr. Kinison did present to the membership selection committee that he had no questions for the membership committee. At all.

JILL HANO: I did feel like I was being singled out because this is a council of 28 people and there were four people in the room that when he came I didn't think, I felt like that was an unjust because if he had a council issue, not an issue with the four people in the room. I did feel very singled. Everything there is a time and a place and I think that if he wanted to come investigate the council what needs to be done needs to be done, but I did not think that was the time nor the place. And I felt ambushed and singled out.

RANDALL BROWN: Thank you.

AMY DONARSKI: I just want to echo what Jill said. It was a very intimidating presence. Mr. Kinison did not have any questions for the council. He showed up on our lunch break, asked for our names and the spelling. He told us that he was investigating the council. He would not tell us what the investigation or the complaints were. He did not ask any questions.

And he would not answer any questions that we had for him. It was odd and it was very intimidating to the four people that were in the room. Just wanted to echo what Jill was saying.

HYACINTH MCKEE: I just want to say that although it was a very uncomfortable environment for our membership committee to be a part of, we cannot question the authority of The Office of Inspector General. It's unfortunate that it was uncomfortable. It's unfortunate that it was uneasy, but this is The Office of Inspector General. If the Office of Inspector General is asking information from us it is not whether we feel comfortable with disclosing it or not. It is not what we feel good about the experience. It is about we need to adhere to the request of The Office of Inspector General. And I understand that and empathize with your experience, but we are not here to question The Office of Inspector General. With that being said, I am hoping we can get back to the business of the Developmental Disabilities Council, get back to the agenda. What I don't want to do is minimize all the other information we need to hear from the public being stuck on this same conversation. I am asking my council, fellow council members to wrap this up so we

can get back to the agenda. Thank you and I appreciate your time.

BAMBI POLOTZOLA: I just want to clarify, Amy said we all felt uncomfortable. I did not. I understood why he was there and the reason behind it.

RANDALL BROWN: I want to take an opportunity, this meeting I would normally chair I had an issue come up and I was unable to be present so Bambi stood in as chair for the meeting that day. Just so you are aware.

MICHAEL BILLINGS: It's my understanding and experience in government when they run an investigation they direct where they are going and the investigation themselves. Did the council request them to attend the membership committee meeting?

SHAWN FLEMING: No.

MICHAEL BILLINGS: That sums it up. Thank you.

JILL HANO: I agree with everything y'all said and I understand and I know you do not question the Attorney General's Office, but that in no way negates the fact that, and I can't speak for the three other people in the room, but that is in no way changes the fact that I again felt ambushed and singled out.

RANDALL BROWN: Thank you for the comment. We still have the issue of the letter before us. Tara you

made a suggestion.

TARA SMITH: I did not because I see it's going all three. Unless somebody has knowledge why it shouldn't go to all three I am fine with the motion. If we had to chose one my suggestion would be the Board of Ethics.

RANDALL BROWN: Are there any objections? Any abstentions?

SPEAKER: Julie and Jen abstain.

RANDALL BROWN: Any other abstentions? Any objections? Hearing none, this motion carries. Next we have our legislative agenda. Executive committee recommends the council make the following changes to the council's 2020 legislative advocacy agenda and offers this motion to the council's consideration. I am going to ask Shawn to explain the first two points.

SHAWN FLEMING: So the first two items to change are to add an item to the advocacy agenda related to funding for TEFRA. A big success last session to get TEFRA, but there is \$9.1 million needed for the implementation that came out of a meeting Friday so that is the reason that was just added. And the second one at the kick off when the LaCAN leaders and Families Helping Families coordinator and partners coordinator

received all the input from everyone it didn't say provide a rate increase, it said direct support professional wage increase. The only mechanism to get to them is to pay the providers. And the same thing with skilled nursing. How do you get it so you provide more money to the people actually providing the care. I met with Julie a couple of times and she helped develop the thought of two things. One is to require some minimum pay levels for DSPs and nurses connected to provider rate increases. And sort of mirroring what other agencies do, done in education, a certain percentage of those rates would have to go directly to the person providing the care. The example I had was in education 70 percent of minimum foundation funds have to be for instruction. I don't have a percentage here. I think we have to negotiate that to make sure that some percentage of that rate goes directly to the people providing care. That's where those two come from. Then the other one, I will let Randall finish, the TEFRA would make it ten items. So the committee voted to remove a few of them. Well to change one, sorry. We're not taking skilled nursing off. Combining it as one agenda item as provider rates specific to DSPs and nursing. Want to clarify that

first scratch off. The other ones are elimination.

RANDALL BROWN: The ones we recommend for removal from the current agenda would be expanding Medicaid to cover diapers and wipes for all ages and expanding Medicaid to cover dental care for adults. We also recommend the removal of training for school resource officers as it relates to students with disabilities. And removal for training of teachers and administrators on how to handle students with challenging behaviors.

MARY TARVER: And I just wanted to say further into the agenda that the education and employment committee met to talk about while it might not be on the legislative agenda, something we can move over to the action plan. So two of the things on there related to education and employment and those were about the training of the resource officers and also about the teachers and administrators. We have in our motion today to move those over to the action plan so that we still will be looking at that issue it just won't be part of the legislative agenda. We will have it as part of the action plan.

RANDALL BROWN: Thank you.

CRYSTAL WHITE: Since TEFRA is being added to our list that \$9.1 million dollars and that means we are

going to get people to testify for those dollars. I think it's very important to be transparent with what is going on with those dollars. In the last workgroup that I was in that is going to cover from about 800 to 1,000 people to have access to TEFRA and it will be a lottery system. We know more people are going to need TEFRA. So parents testify I think they should be aware of how it's going to be implemented, this would be a lottery system. If they are testifying even if they qualify they wouldn't automatically get it as what they were advocating for in the previous session. Since TEFRA has kind of evolved and changed if we are going to have people testify we need to be transparent in how TEFRA has changed from last year to where it is now or what the plans are for it now. And also the same thing I am going to reiterate this that I said yesterday in the committee meeting, if we are going to have parents testify for provider rates they are going to testify thinking those dollars are going to go going to their worker to get a wage increase. At this point with what we have now, unless we amend this, we can't guarantee those dollars are going to their workers. It's going to go to the provider agency and hope it makes it to the worker. We can't get safe guards, there is nothing

in place. I just want to make sure we're not misleading our public testimonies and parents don't get frustrated when they go pour their lives and souls out in front of strangers, and it's not easy, and we're not letting them know exactly what they are testifying for. Please let's just make it clear to the people who testify for us what they are testifying for exactly.

JEN KATZMAN: Can we clarify A or number one about TEFRA whether that is state general fund dollars or total means of financing.

SHAWN FLEMING: My understanding it's state general fund. I wasn't in the meeting.

JEN KATZMAN: I would make that your state general fund number. But yes, can we clarify it in the ask. Otherwise they may only give you nine.

BAMBI POLOTZOLA: In regards to B the provider rate and setting a minimum require and pay level, I am all for that, we do need to pay our DSPs more and nursing. The issue that was done prior, not sure at what point, prior to the Jindal administration, a requirement for providers to increase the rates to I think 8-dollars an hour or 8.50 an hour. As you all know during the Jindal administration the rates were cut to the providers. But because of labor laws the

providers were getting much less. We know that difference because we were able to get that increase this session in 2019. So providers were still having to meet the labor laws of not reducing the wages although their rates reimbursed by Medicaid was reducing significantly. There just needs to be more thought that we are not creating something that could cause problems. And also another point is, if we increase the rates sometimes there are clients who get more than 40 hours and now with labor laws there is a requirement now for, in the past it wasn't like this, where they have to pay the time and half overtime rates. So if you require a certain amount that may eliminate a providers' ability to be able to negotiate those rates and allow for that worker to be able to work longer hours that both the client and the worker agree is beneficial or best for them. Some repercussions for that and we need to think through it all.

CRYSTAL WHITE: I think we need to learn from the past and our mistakes that we have made with our direct support workers and the rates they receive. And that is noted. But as of now the way it stands we cannot tell these parents we know if any of these dollars are

going to their direct support worker. So what I think is fair if we have to amend it, and I believe I don't want to speak for Mr. Rovira, in yesterday's committee meeting he said it would take an amendment and they are willing to work on it with us. I think it's something we need to do. Since you have a lot of knowledge on what happened in the past and I wasn't there, I think it's something we need to take into consideration so history doesn't repeat itself. We want to come up with a solution that helps everyone. But I also just want as of right now if we have a parent testify that they know we don't know if these dollars, without an amendment, will make it to your employee. I think it's important we are transparent with these people. Especially whenever we know they are in crisis. If we are telling them to come testify we need to guarantee that is going to be helpful for them.

LIZ GARY: I am just reading over and over again and I am not getting the feeling it's asking for a rate increase only to provide it specifically a minimum. When I look at number three funding for skilled nursing rate increase. When you go up there it says clarify the provider rate increase. Are you asking for a rate increase and then saying let's put that rate increase

as a minimum for the nurses and for the DSPs. I am not reading that as both a rate increase and the minimum requirement. Reading it as only a minimum requirement. Not sure what you are trying to accomplish there. Doesn't sound you are doing both, asking for a funding increase and asking for the requirement.

RANDALL BROWN: We are asking for both.

SHARON DUFRAN: I wanted to speak to two things. Number one, this is not TEFRA. This is not how it's handled across the United States. I am very concerned that as a family member who has never been able to receive a single penny in any sort of support for my son that we are now going back to a system. I guess this is new, a lottery. At first it was you are on a waiting list with 14,000 other people. Ten years later it was we're going to use a SUN assessment. If you are a three or a four you don't get anything at all. Now we're going to a lottery system where people who are coming on this list with severely medically fragile children are in the same ticket. I have a child with high functioning autism. I would love to be one of those lucky lotto members. But this is not TEFRA. My understanding of TEFRA those who need are provided. \$9.1 million, that is nothing. I have some real

questions about where the overages that end up at the end of the fiscal year when people have these waiver services and all this money was allocated and they didn't use it I kind of wonder where that money goes to. No one has ever really given me an exact explanation. I am kind of wondering if there is not a lot of money out there that we could tap into. But make no mistake, this is not TEFRA we are advocating for. The other thing, the bottom line for family members is not to ensure profitability of providers. We are not here representing providers. This is not what this council does. If one of our motions doesn't directly affect families and our bottom lines we should not be doing this. A thousand yellow shirts out there, free lobbyists for private providers, I don't think so. And thank you Crystal because it does need to be made known. This may not affect us. And then finally I want to speak to the motion to remove Families Helping Families from the agenda. Families Helping Families has not received a pay raise since their inception. I am old, I have been around for a while. I can remember days when Families Helping Families was actually allowed, had the funds to go to IEP meetings with family members who had no idea how to navigate special

education services. So much has been added onto their obligations, their deliverables for the contract that we family members once again are just washed over. This is what we need. This is what families need. Absolutely any agency, hospital, private therapist that you go to that provides resource papers say here are your resources, the number one on the list is Families Helping Families. Yet year after year their contracts increase in deliverables. Do you understand this is only 50,000 dollars per Families Helping Families.

RANDALL BROWN: Thank you.

HYACINTH MCKEE: Families helping families is not being eliminated. That is a typo. Sorry you read it that way. I think our chair would clarify that for you.

RANDALL BROWN: It is included for the 2020 legislative session.

CHARLIE MICHEL: A few things from a very objective standpoint. First off, to address what Joe's mom said about the direct provider not wanting to be profits. I think what we have to look at it is the big picture. If in fact there is something we do that has an effect to the profitability of those agencies and those agencies go out of business then we don't get any

service at all. I think we need to look at that. The other thing, if we are going to revise this particular agenda item so that we can do legislation that will provide money for the direct service providers. Shawn you are absolutely correct, 70 percent of MFP is used for classroom instruction. One of the issues is the definition of classroom instruction is not always crystal clear. Hope we can define what those +
-percentages are. Who is involved in those percentages. Kristi Jo, I was wondering, the thing with school resource officers, the training and the administrators and the teachers, I think a lot of that is going on. Is there any way the state department of ed could question districts to see what they are doing, if they are doing job embedded training, or bringing consultants in. So maybe we can have some information for the council. I think removing it from the agenda item we might be more comfortable it is taking place. May not be as effective as we wanted. But it does two things, it is not a forgotten entity and it puts it on the radar for the school districts that they may want to look at the effectiveness and make changes accordingly.

KELLY MONROE: Kelly Monroe with the ark. I just

happen to walk in when he said that about the school resource officers. The ark does training for law enforcement across the state and we learned the other day that it's the responsibility of the sheriff's department to train the school resource officers. I think maybe just getting something into their curriculum that they are already training might be a better thing to do. Just putting that out there. We literally just learned about this maybe three weeks ago when we were putting a training together for Ascension, St. James, and St. John Parish. And we asked if they could include the resource officers and they said we already do because they are part of the sheriff's department.

RANDALL BROWN: Any other comments? Any objection? Any abstention? Hearing none, this motion carries.

JILL HANO: Sorry, I was not in the room. It is not going to be in our agenda to increase FHF funding?

RANDALL BROWN: It is.

SHAWN FLEMING: The four items that have strike, actually five, but the skilled nursing is in, just been moved. And four other items that were struck out. The Medicaid expansion for dental, for diapers, those two

are struck out. And the training for school resource officers and the training for teachers, those two were struck out. You have five items on your advocacy agenda. Those five items on the screen is what the advocacy agenda as it stands.

JILL HANO: Do we have fact sheets on all five of these items?

RANDALL BROWN: All but TEFRA. We're working on that now. Since it was unclear, are there any objections to this motion?

ROSLYN HYMEL: I do have a question. Off of what Shawn just said I wanted to make it clear cause I kind of got lost, can you explain the nursing you was talking about, what they need. Because for where I live at I live in a group home setting and we getting not one staffing, we're getting two staffing and getting another staffing from another agency. Isn't that still be in effect for what you were saying?

SHAWN FLEMING: This advocacy on skilled nursing will not impact you or any institution services provided. This will not change anything relative to your situation or people in your situation.

ROSLYN HYMEL: Just not for my setting. Trying to speak for other settings as well.

SHAWN FLEMING: This is for nursing provided in people's homes for waivers. It would impact that. but not institutional services provided.

AMY DONARSKI: I am just wondering, do we have an idea of what the minimum requirement of pay levels for DSPs we're advocating for?

RANDALL BROWN: We have not yet specified. Talked about in self determination, as Crystal mentioned earlier, the need to put in I guess call it a floor, a minimum. That is something we have not established a number, but something we would be committed to doing.

AMY DONARSKI: That is still up for discussion? Thank you.

KELLY MONROE: I have a question about what Amy was just asking. There are still 12 years of a rate that has not been tended to when it comes to the providers. I understand about setting a floor. We have talked to LDH about it. We all agree that once we get up to 2020 and not a 2008 rate that providers would be able to. But since then they have had so many expenses, Obama Care, nurses. I mean you name it, the cost to provide the services are tremendous. To tell them how much they have to pay a DSP, which they are probably going to give raises anyway, we have a hard

time keeping employees. People are going to try to figure out a way to do this because they have to and because they want to. They don't pay DSPs low wages because they want to. Nobody wants to do that. But they have to cover the costs if they want to still be able to provide a service. I think it's most appropriate to let them get up to 2020, set the floor then and say okay here we are. Then let's let house bill 390 that past last year do its job. But right now to say they need to pay a certain amount of money, we don't go into any business and tell people how much to pay. We don't go into nursing homes and say you need to pay this person this. I think it's a ridiculous request right now especially when people are being paid at the rates of 2008. Twelve years ago. To now say you have to pay your employee this with what we are willing to pay you back in 2008. I wanted that to be on the record because I couldn't let the arks think, or any other provider think I sat here and didn't say anything. This is not appropriate at all. I do know the providers are going to be asking for a rate increase and I would hate to see when we finally came together last session to see a divide between providers and advocates because we will get nowhere.

MATTHEW ROVIRA: I do echo Kelly's thoughts. Providers are desperate and we want to partner with the DD Council in a big way because LaCAN the DD Council are such strong advocates when it comes to legislative initiatives. Providers are desperate. We have 50 percent turnover. We went from 1649 providers down to 600, I think 600sh providers in the state over the last ten years. We are getting squeezed. My comments yesterday, and you are correct, she is correct, we want this to go to our workers to the extent possible because we want to slow down the turnover and we want to improve quality. It does get complicated as Ms. Bambi has stated, as well as Kelly, when we go to be prescriptive about this. Because you have the fair labors standards act that requires providers to pay overtime. Also the department could be considered a joint employer if they are very proscriptive on what we pay. And there are a lot of other factors that go into determining a DSPs' wages, transportation, so many different issues. The intent is we want to partner with the DD council. We want to improve wages in Louisiana. The average wage is 6.83 in this state and it needs to be higher. We just can't compete with our other forces.

JILL HANO: This is a very sensitive issue and I did never pay attention to this because most of my personal DSPs want to come and sit on my sofa and take a nap for an hour. So did the worker when I was ready to get up and go and start being productive she said how are you only going to sleep for an hour. I was never a big fan of the rate increase, but then higher rates means better workers and better workers means better care for me. So I am in it for purely selfish reasons. But today this rate increase is striking a nerve because the worker wants an increase or he is going to go find another job and then what do I do now. How am I going to get to my doctors' appointments. I can't go without a DSW. I want to do whatever it takes to make sure these workers get more than they are making because the rates they are getting is laughable. Employees suffer, but it's me who suffers in the long run. I want to do whatever it takes to not only give this provider increase, but to make sure that the DSP him or herself gets an increase in funding.

BAMBI POLOTZOLA: Point of order because we have already passed.

RANDALL BROWN: The motion before us has passed. Everyone's comments are noted. I want to make clear

this motion has passed. I would encourage us to move forward. We have a lot of things to cover with the understanding every ones comments have been noted.

CRYSTAL WHITE: From what we are advocating for from what we are going to need an amendment to be able to advocate for a compromise on the provider rates for some to go to the employee. I would like to make a motion that we notify, that we work on an amendment to come to a compromise to ensure some of the dollars will go to the employees.

RANDALL BROWN: I believe that is what we are already planning to do.

CRYSTAL WHITE: So we are going to work on an amendment. Is that clear?

RANDALL BROWN: Yes, we would. If groups such as Matt's or anyone else who is involved in the process is willing to help, yes we would work toward an amendment to get that done.

CRYSTAL WHITE: So they are open to working with us on an amendment.

RANDALL BROWN: There would first have to be a bill, which there is not yet. Once there is a bill if anything needs to be amended we would work toward that process.

CRYSTAL WHITE: Let's make sure since we are the voice of self advocates and families. That's what they are testifying for, make sure it's known before they testify we need to get that amendment in before we have people go testify for that to not mislead them.

RANDALL BROWN: Understood.

MARILEE ANDREWS: Point of order. Is that a motion?

CRYSTAL WHITE: We still need it as a motion to make sure people don't testify before we have a proper amendment in place.

RANDALL BROWN: When you talk about amendment, you mean to a future bill or you mean to this?

CRYSTAL WHITE: Until we actually know there is a compromise and dollars will go to employees, which is what we will have people testify for, then we shouldn't be testifying until we know there is a compromise.

SHAWN FLEMING: In order to even engage in discussions with providers, which is what I think is the next step to talk about what the compromise would be related to wages and percentages, we need, y'all need, which you already did, say that's the direction y'all want to go in, that is what y'all are advocating for. One of the reasons we didn't specify, cause I

didn't have these conversations cause I am not authorized to, have all this necessarily with providers. That would be the next step. And then we'll fill y'all in through the executive committee. Engage them in terms of negotiations and decisions and what compromises look like. They can direct it from there. I don't understand the amendment what you are referring to.

PHIL WILSON: I think the issue is that the wording of what the council is agreeing to do as an activity or initiative or priority, whatever, is confusing to most of us out here. It's not clear as the way Crystal stated it that whatever number three is going to do is going to include a pay raise or wage increase for DSPs or DSWs. It may just be the wording of number three is confusing to some of us out here.

SHAWN FLEMING: The bullet under number three says with a requirement of minimum pay levels for DSPs and nurses, respectively, and a requirement for minimum percentage of provider rates be budgeted for DSPs and nursing wages respectively. This motion passed. If you want to amend the previous motion to clarify because that's not clear to you.

PHIL WILSON: With a requirement of an increase in

pay level would probably do it for me. I don't know if that works for everyone else. Minimum pay level doesn't really ensure an increase, just means there is going to be a floor.

SHAWN FLEMING: The reason it doesn't say increase is there was a wage pass through before and how that would work there was an increase. So say Randall is my DSP, he is getting 10 dollars an hour wage increase of 1 dollar. Most DSPs, he quit within a year. The next person who shows up doesn't get the 11 dollars an hour to get the 10 dollars. That is why it's not a wage pass through. If you want to amend it y'all need to speak to make an amendment.

TARA SMITH: Does this mean if a minimum pay level isn't adopted that we would then be silent on any legislation regarding increase in funding for this? Cause I think that's something the council needs to consider with that requirement. Not saying I am for or against it, if for whatever reason whoever decides to put up a bill for this decides they are not going to put in a minimum does that mean we are comfortable being silent on an increase for the next legislative session?

RANDALL BROWN: At that point that would be up to

your executive committee to decide what our stance would be should there be a minimum. And we have taken notes. I have Crystal's concerns today about letting parents know.

MATTHEW ROVIRA: My concern about the minimum, and while I appreciate the intent of the council cause we all want to reduce turn over. Providers are struggling. Many nonprofit providers provided documentation that they are continuing to lose money and are struggling to stay in business. That's a fact. The issue with the minimum, and this is technical, under the fair labor standards act if the Department of Health requires a minimum payment for direct support workers it would tie them in as a joint employer. We are joint employees in this business. For instance, I am an employer of a direct service worker, but the family member is also considered a joint employer because they can remove that employee at anytime. With that said, this is going to open the department to class action lawsuits when it comes to not paying overtime. Their attorneys know this and so it does get more complicated then it seems on the surface. It's real complicated because long term PCS paying CCW waiver, all get different rates. Very complicated when

we try to be prescriptive. My intent is we are asking for about 1.25 increase for the new opportunities waiver this year. Rough estimate. We want this to go to direct service workers, but it's hard to legislate that because it opens up a lot of unforeseen things that we just haven't thought about because it is a very complex industry.

KELLY MONROE: I wanted to clear something up. I think there's a misunderstanding about the 2dollar wage pass through. The reason why it was not so great for providers was because they were given the 2 dollars to increase DSP wages and then they did and six months later they took it away. But the wages still had to be increased by those 2 dollars because then it's against the law to decrease the employee's pay. The reason why providers frown upon the wage pass through because at any time LDH can pull those dollars, sorry we don't have the money. And that happened in OCDD, at OAS, everywhere. To nobody's fault, just was a very unfortunate situation and the providers pay for it and paid for it for 12 years. They are not going to go in there and agree to another wage pass through or floor until they get where they are and where they need to be so we can have quality employees to provide a service

to all these families. The providers are serving 33,000 families across the State of Louisiana.

MITCH IDDINS: The more I hear from public comment and from Matt and some of the other folks here I am really concerned if we're advocates, if this motion has carried, concerned by setting a floor that like we said we are really going to do more harm than good to our providers. I think the initial intent for a rate increase is to help everyone. I fully have confidence the providers want to give pay raises if they are able to do that. You don't have the money to do that, you can't do that. But I agree with Kelly and Matt, if we force some minimum standards here we are really opening ourselves to doing more harm than good to providers and ultimately to consumers. If providers can't stay in business and we don't have providers to help provide the DSPs training and those sorts of things. I am foreseeing a lot more problems by forcing this minimum pay increase and this floor we are talking about. I think we need to really reconsider that. I am making a motion that we amend this to just simply say we are going to advocate for a rate increase for providers and let providers do what they know how to do and what they are professionals at doing.

MARY TARVER: There's already a motion on the floor from Crystal. She made that motion. Nobody seconded it. I don't know where she went. I need to clarify that is her motion and someone needs to second it. This is how her motion reads. We, assuming the council, work on an amendment to ensure some of the rate increase dollars go directly to DSPs and nurses before we have people testify for the provider rate increase in the 2020 legislative session. I am not sure if that was the intent and she is not in the room. And I haven't heard a second.

SHAWN FLEMING: When she comes back she can make another motion. She can clarify. There was no second.

KIM BASILE: Can we just table this until she gets off of her work phone call and come back?

RANDALL BROWN: Let's do a ten minute break.

Okay everyone. Let's get back to business please. Want to move us forward. We will revisit the issue to the amendment to the legislative agenda at a later point in the meeting. For now, I would like to move us forward in the interest of time for some other business. Crystal's motion does not have a second so we will revisit that when she returns. Mitch however does have a motion and I believe a second. So, do we

have a second? Mitch has made a motion and is here.
Do we have a second?

MARILEE ANDREWS: I need your motion.

MITCH IDDINS: I motion we strike through the bullet point with a requirement of minimum pay level for DSPs and nurses respectfully and require a minimum percentage of provider rates be budgeted for DSPs and nurses. I feel fully confident as we move forward and advocate for the pay raise increase, if we get it, I don't have any doubt providers will do the right thing.

RANDALL BROWN: Do we have a second to Mitch's motion?

ROSLYN HYMEL: Second.

RANDALL BROWN: Now do we have discussion of Mitch's motion. Any discussion of Mitch's motion on the floor? Any public comment? Any objection? Any abstentions? Hearing none, the motion passes. Again, we will revisit Crystal's motion at a later time.

JILL HANO: Am I allowed to ask a random question about council business?

RANDALL BROWN: Typically when we have a motion on the floor it's discussion on that motion.

JILL HANO: Never mind. I can Google it. I'm good.

RANDALL BROWN: The next thing we have to consider is the executive committee recommends the council promote the following items under activity 1.4.2 and request staff initiate work to do these items as funding permits and offers this motion for the council's consideration. And this is related to the cost of the search firm for the executive director. We are having to cover those costs and so this initiative will be done as was directed by the council. Just we want to prioritize it so we can begin to do it, don't have to wait until funding is available we can begin to roll those out. The motion is to produce and disseminate videos on employment, produce diagrams, visual flow charts and other visual aids. The second would be to produce videos, diagrams, visual aids, flow charts and other visual aids for accessing home and community based services, including waivers. And the third would be videos on act 833 promotion and graduation pathways for students with disabilities and featuring people who graduated with a diploma and featuring people who are successfully employed. The fourth is information on related services. And 5th is self advocacy. This is the motion before you. Is there any discussion of this motion?

ROSLYN HYMEL: Does that mean for all videos from all five before what I am reading off of the board itself. Are we going to delete.

RANDALL BROWN: All of these topics and videos will be done. Simply prioritize because the funding we thought we had to do all of them we won't have because we are doing the executive director search. The executive committee prioritized so we can begin to do the work now. We won't wait. It's funded. As funding permits each will get done. All videos will be done as was directed.

ROSLYN HYMEL: Like you said we all did it together as a team. Does that mean we have to really pay a certain amount of money on it or what are we really looking for all five?

RANDALL BROWN: Each video will have a cost associated with making it. As we have the funding to do each one we will do them.

ROSLYN HYMEL: Right now there is no cost.

RANDALL BROWN: As soon as you authorize we will go in the order this motion starts out as funding permits us to do. Any other discussion, questions?

MITCH IDDINS: They are prioritized in order, start with employment.

RANDALL BROWN: As you see it listed. Any other questions, discussion? Any public comment? Do I have any abstentions? Any objections? Hearing none, this motion carries. Our next motion is the executive committee recommends the council send letters regarding the selection of the superintendent of Department of Education and the secretary of Louisiana Department of Health and offers this motion for the council's consideration. Send letters on both of those vacancies.

TARA SMITH: Do we have drafts and what are you proposing the council say with respect to those open positions?

RANDALL BROWN: We still would be working on a draft of those. But we would propose they encourage the selection of a leader who would support our mission, goals and values.

AMY DONARSKI: Maybe I am a bit confused. Are you saying we want to send a letter asking that their selections be supportive of us? We don't have candidates in mind?

RANDALL BROWN: Correct. We would be asking the respective departments to please keep in mind the values and mission of our council and our work as they

select their new leaders.

KRISTI JO PRESTON: Who are you sending these letters to?

RANDALL BROWN: Yours would be to BESE is my understanding. And the secretary of health would be to the governor at this point.

TARA SMITH: My suggestion on the letter to the governor regarding LDH would be that person needs to work in a full time capacity.

RANDALL BROWN: Do we have any further discussion? Any public comment? Any objections to discussion.

ROSLYN HYMEL: Did he have a certain governor that we have to send this letter to?

RANDALL BROWN: Yes.

ROSLYN HYMEL: Do we have this governor right off hand?

RANDALL BROWN: Yes, we do. Do I have any objections? Any abstentions? Hearing none, this motion carries.

APRIL DUNN: Next up is executive director report, Shawn.

SHAWN FLEMING: Morning again. You have my report. Just going to hit a couple highlights in it. First we submitted all the federal reporting

requirements. The other thing there was a cyber attack when we were at the conference on November 18th. Quite disruptive. Actually lost some emails. There were emails submitted that you have not received during a chunk of time, end of November, early December. I apologize. It actually still affects us in the office a few different ways. I want to commend the staff for making sure the operations of the council never had any disruption to it. Meetings that went on, a lot of activities that went on. I want to commend Courtney for doing all our federal reporting and putting all that together as well. Congress did pass a little more money using council's nationwide about 74 million dollars, added 2 million. Get a little bump to our appropriation. That won't happen for a while. But it will be reflected when I give numbers in terms of what's available to the planning committee. I will run those numbers soon. We did have some changes in membership and I have submitted all that. And I will leave it at that. Are there any questions related to anything else in my report? Budget report.

APRIL DUNN: Next is the budget report.

SHAWN FLEMING: Thank you. If you look at the November and December the budget I was pulling off of

the wrong data on November and so the budget and the balances are a little different. All expenditures were correct. It was pulling off, I have all these things automated drawing off a number of different files and I apologize for the need to change it. Doesn't really change expenditures. We're on target with all expenditures. Everything is being done according to the plan. Our travel expenditures this year are the highest they have ever been since I have been here. Actually in the last half the year close to what we have expended in a full year previously. I was having to figure out I do not think I am going to have to ask to make an adjustment to that budget. But we have spent more. It's okay. We had a lot of big activities and I don't foresee our budget being hit with those level of activities in the next six months. Any questions?

APRIL DUNN: Committee reports. Act 378 committee.

BAMBI POLOTZOLA: The act 378 subcommittee met yesterday and reviewed fiscal year 20 2nd quarter data for programs within The Office for Citizens with Developmental Disabilities, Behavioral Health and Office of Aging and Adult Services through The Ark of

Louisiana. These reports can be found on the council's website under the council meeting section if you would like to review. Our committee did not make any recommendations or decisions for the council's consideration, but there is one update I want to share. Regarding the council's recommendation for updates to the individual and family support and consumer care resource programs. Tanya Murphy with The Office for Citizens with Developmental Disabilities shared the program rules have been updated and was released December 2019 issue of the Louisiana Registrar. Public comments can be submitted on the proposed rule through 4:30 p.m. on January 30th. After public comment is received the manual will be updated and training of the district and authority staff will occur. Any questions?

RANDALL BROWN: I will be doing today's self determination community inclusion committee report. I sat in for Mike as temporary chair yesterday for that meeting. The self determination and community inclusion committee met yesterday and has three recommendations for the council's consideration. First the committee discussed the training on sexual abuse and exploitation offered by Team Dynamics in

partnership with the council. Members felt the council should recognize the positive work by Team Dynamics and the trainers. So the first motion I have is as follows. The self determination and community inclusion committee recommends the council send a letter to Team Dynamics LLC to acknowledge the positive work they are doing facilitating statewide trainings on relationship, intimacy and the prevention of sexual abuse and exploitation and offers this recommendation for the full council's consideration. Do I have any discussion of the motion? Any public comment? Any abstentions to this motion? Any objections? Hearing none, this motion carries. Next the committee discussed activities to recommend to the planning ad hoc committee for inclusion in the council's fiscal year 2021 action plan under goals one and two. This plan will begin in October 2020. The motion is as follows. The self determination and community inclusion committee recommends the planning ad hoc committee consider the following activities for inclusion in the fiscal year 21 action plan and offers this recommendation to the full council for consideration. Continue providing relationship, intimacy, abuse and exploitation trainings. Develop a

mechanism for people to anonymously share ratings, comments and their experiences with service providers and home modification contractors to assist individuals in determining the best provider for their needs and family. This motion is now on the floor for discussion. Do I have any abstentions? Sorry, I didn't ask for public comment. Any public comment? Any discussion? Do I have any abstentions? Any objections to this motion? Hearing none, this motion carries. Third, the committee reviewed the council's approved five year planning process and discussed concept ideas and proposals for the council to consider including in its next five year plan which runs through fiscal years 2022 through 2026. Our committee considered the following areas of emphasis. Quality assurance, health, housing and informal and formal supports and decided to focus on quality assurance and housing. The motion I have before you is as follows. The self determination and community inclusion committee recommends the ad hoc committee consider the following items for inclusion in the fiscal year 2022 through 2026 year plan and offers this recommendation to the full council for consideration. Our areas of emphasis and possible implementation strategy quality

assurance, live broadcasting and participation of council members and the public via video for council meetings. Make available a neutral party, non staff, non council member person to assist council during the meetings. And to replicate the Oklahoma Disabilities Council youth leadership forum program. Under housing, raise awareness and advocacy for funding to address the housing crisis in the state. This is the motion before you. Do I have any discussion?

MICHAEL BILLINGS: Was any consideration given on live broadcasting regarding like closed captioning for hearing impaired? I know that has been an ongoing issue with other government broadcast.

RANDALL BROWN: That was not mentioned or brought up. Of course we would consider that if we do any kind of broadcasting.

CRYSTAL WHITE: The motion yesterday it included any public meeting, not just our council meetings. It was any open public meeting that we have. That would be committee meetings, ad hoc meetings. Not just one meeting.

RANDALL BROWN: It was the intent for all our public meetings. We would make that change to reflect that.

JILL HANO: Can you explain this because when I was reading before hand in the meeting yesterday, how in layman's term, how do these areas of emphasis tie in with the five year plan. I am very confused. I just don't understand how this all ties in. Can y'all explain it to me? I am lost.

SHAWN FLEMING: There are nine areas of emphasis in the DD act. And the council, every five years the council makes a new five year plan and at that time it gets to decide which of those nine areas of emphasis to concentrate on. And then each year from that selection of those areas of emphasis y'all create goals and objectives. And each year for those five years create activities to address and target each one of those goals and activities in each area of emphasis selected.

JILL HANO: So our goals for the five years will come out of our goals for the five year plan will come from these nine areas of emphasis?

SHAWN FLEMING: Correct.

RANDALL BROWN: Do I have any more discussion?

TARA SMITH: Would you tell me a little bit about the youth leadership forum out of Oklahoma.

LILLIAN DEJEAN: I am so glad you asked. I love talking about this. Since last council meeting I have

been doing a lot of research in the world of youth advocacy. Previously I had thought there weren't enough resources out there, but the issue is the accessibility. The most fruitful Google search you can put in I think is self advocacy youth summit. If you look that up there will be plenty of resources. But the three I want to highlight is Nevada DDC council. They are doing a program where they go into the sped classroom once a week for five weeks to expose them to everything self advocacy. And also all of my research is summarized on a paper all the way in the back on the left side of your blue folder. I definitely recommend checking that out. Then I found Oklahoma DD Council who runs a program called youth leadership forum. Essentially teens with disabilities sophomores and up go to a college campus during the summer, they stay overnight for five days. It's a very intensive self advocacy program. They cover things like sexuality training, take them to the capitol to see the legislative process, talk about IEPs, transition. It is genius. And what they have actually started doing is hiring nurses and teachers to come be staff. If you think about it's pretty genius because it's system change from the inside. Teaching the nurses and

teachers about self advocacy. And it has been immensely successful. And I do want to highlight two other points. Oklahoma actually has someone on staff full time to implement, I think a youth self advocacy coordinator for youth. And also the fact 31 other states are doing youth leadership forums. And a national association overseeing all of these forums. And it seems to be an very successful program. Sometimes funded by DD Council, sometimes not. But it's happening across the nation and it is kind of your one stop shop. Your partners for teenagers, essentially. That's what that is. And I will be going to Oklahoma this summer to be staffed at their forum so I can learn firsthand how things run and bring that information back to you guys.

TARA SMITH: Thank you for doing all that research. We look forward to hearing from you about everything you learn this summer. It sounds like something we can definitely get behind. Thank you for bringing that to us.

RANDALL BROWN: Do I have any other?

JILL HANO: When did you say you were going?

LILLIAN DEJEAN: This summer.

RANDALL BROWN: Anymore discussion from the

council on this motion?

LIZ GARY: I know probably 12, 13 years, but I seem to remember we used to have an LYLF Louisiana Youth Leadership Forum. And for some reason I want to say it did similar things where they all got together and would stay for a week. And Matt you might be able to help me, I think it was in the GODA office. I think we need to see if we can't pull some research back then because we used to have it. I believe it changed when leadership changed and Governor Blanco left and Bobby Jindal came in. I think that's what I remember when it changed.

MATTHEW ROVIRA: You are absolutely correct. And Lillian a couple names I remember Ms. Sharon Visco and Ms. Brenda from Metairie. I will try to get those names and contacts for you.

JILL HANO: I was on the phone yesterday with a contact and I just happen to bring it up and she knew some details what I was talking about. And GODA does sound very familiar. I think it ended during Katrina. I actually have a very good friend that was there with me as staff. I will reach out to her and get y'all in contact for sure.

RANDALL BROWN: Anymore discussion of the motion?

Anymore public comment? Any abstentions? Any objections to this motion? Hearing none, this motion carries. That's all I have for you all.

APRIL DUNN: The education employment committee.

MARY TARVER: Our education and employment committee met yesterday and received several reports about our current plan activities and they are included in your status report. During the meeting we determined there were two recommendations that we would like the council to consider. The first one is the council discussed possible activities and initiatives to consider when developing a draft action plan for next year. And our motion is the education employment committee recommends the following items be considered by the council for recommendation for the planning committee to consider for the inclusion of the FY21 action plan. To track implementation of the local special education advisory panels that are supposed to be set up in each LEA across the state. And then the contractual activities that we had, customizing employment training. Our post secondary inclusive education group. The collaborative effort between the DD network to address issues related to schools understanding responsibilities related to serving

students with developmental disabilities. And training for resource officers and teachers and administration on handling students with disabilities related to behavior.

RANDALL BROWN: This is a motion on the floor for your consideration. Do we have discussion?

TARA SMITH: I have a question. On the last summary, and I know I sat on this yesterday and should have asked, since we removed the training for the school resource officers from our legislative agenda why are we putting it on here as something the planning committee needs to consider? Not that I am against it, but I believe we had some discussion over the lack of jurisdiction to implement it. Has there been any further research? Do we have the ability to do this or just a gratuitous offering to the sheriff's office to assist them if they were receptive.

MARY TARVER: Since this would be an activity that would be considered for the action plan we would have time between now and the planning committee to figure out what that might look like and have some discussion. But we did want to make sure that we kind of put it as a place holder in case there is some activities we need to make sure. We are not sure what the practice is,

some new information or information we know that sheriffs' departments are supposed to be doing the training. Are they doing it, is there something we need to investigate more. Just have a better feel what the programs look like. If we see some gaps or have some areas that are not doing as well as others if it's on our action plan something we could work on to try and help make sure the information is put out there for the training or at least get them to the resources they need.

RANDALL BROWN: Questions, discussion? Any public comment? Do we have any abstentions to this motion? Any objection? Hearing none, this motion carries.

MARY TARVER: The next motion we have recommends the following items be consider for the council for the implementation of the planning ad hoc committee to consider for inclusion in the 22, 26 five year plan. Our area of emphasis to consider including, which three we already had, education and early intervention, employment and childcare. Recommending to add transportation and recreation. And then our implementation strategies to consider would be informing policy makers about regarding the need for policy that are inclusive and meet the needs for

students with disabilities. To coordinate with other entities regarding children issues. Talked about system design and redesign as it relates to transportation, education and recreation. Interagency collaboration and coordination, especially when it comes to transportation. Barrier elimination to make programs more accessible. And demonstration of new approaches to services and support, especially when it comes to transportation.

RANDALL BROWN: Any discussion of this motion? Any public comment for this motion? Any abstentions to this motion? Any objections? Hearing none, this motion carries. Before I move forward with my next two items I would like for us to go back and revisit the legislative agenda question since Crystal has returned.

JILL HANO: I thought in self determination, I was not paying attention, didn't we make a motion about the FHF deliverables in self determination?

RANDALL BROWN: It was a committee decision. We didn't need a full council motion for that one. I would like for us to go back and revisit Crystal's motion on our legislative agenda. While you were away Mitch made a motion to strike the DSP portion of the wage requirement and that passed just so you are aware

while you were away.

CRYSTAL WHITE: Can somebody read it to me as a whole.

RANDALL BROWN: That's the motion as it reads now.

MARILEE ANDREWS: The part that was removed was the bullet in number three with a requirement of minimum pay levels for DSP and nursing respectively and a requirement of a minimum percentage of provider rates be budgeted for DSPs and nursing wages. So the new 2020 legislative agenda reads exactly the same except missing that bullet. Do you still need me to read? The 2020 legislative agenda as recommended by the executive committee includes increased funding for Families Helping Families regional resource centers. Fully fund the SPAS program. Funding for home and community based provider rate increasing relative to DSPs and skilled nursing rate increase through EPSTD and waivers. Require cameras in special education classrooms upon request. Funding 9.1 million for TEFRA.

CRYSTAL WHITE: For number three can somebody interpret. What are we advocating for exactly?

MITCH IDDINS: Just move forward and advocate for the pay rate increase. Sorry, provider rate increase.

CRYSTAL WHITE: To the agencies or saying we want any money to go to employees?

MITCH IDDINS: Again, I have full confidence that providers understand the seriousness of this and that if we get a provider rate increase I feel confident the providers will do the right thing.

CRYSTAL WHITE: As long as we are being transparent with families who are testifying and they know you are not testifying for money to go to your employee, it's going to the agency. That's all that needs to be done. Being transparent with the people who are testifying and they know what they are testifying for. If they choose to do it, that's fine. Just want them to know what they are testifying for and we cannot guarantee that they are going to have to quote trust.

MITCH IDDINS: Yes.

CRYSTAL WHITE: Can someone let me know how are we going to notify these people, what is going to happen?

RANDALL BROWN: The people who will be testifying?

CRYSTAL WHITE: Yeah. Who is going to explain this to them clearly, not like that.

RANDALL BROWN: Wouldn't that be the LaCAN leaders.

CRYSTAL WHITE: So the contractor that holds LaCAN is she going to give the directive to the LaCAN leaders that they would do that?

RANDALL BROWN: Yes.

CRYSTAL WHITE: Who is going to notify the contractor?

RANDALL BROWN: It would be staff.

CRYSTAL WHITE: Can we be copied on that?

RANDALL BROWN: Yes.

HYACINTH MCKEE: Who is going to notify the LaCAN leader of region one that does not have a LaCAN leader?

SHAWN FLEMING: If there is not a LaCAN leader the Families Helping Families center in that region assumes those responsibilities. We communicate to our LaCAN leaders to always be clear with their communication, provide information and I don't see any shift in that. Continue to provide clear information to them and ask them to be clear and honest with all the people they deal with.

APRIL DUNN: I had the same concerns Dr. Hyacinth have. Who is going to notify about my region because we already know that. Going to notify me and the rest of the people in region two. We don't have a LaCAN leader either.

BAMBI POLOTZOLA: I don't think it's appropriate for us to ask for the communications. We are the governing council and operations is with the staff. We are telling the staff what to do. This is our agenda. They are to develop the fact sheets, they are to give that information to the people who are contracted which is Families Helping Families that holds LaCAN contracts. And then also communicate with those LaCAN leaders. If there aren't LaCAN leaders the next step is Families Helping Families have to provide that information. We are instructing the staff of what to do. They don't then have to include us in that communication with their staff and contractors. I don't think that is appropriate for us at our level of governing.

CRYSTAL WHITE: That is fine. How about this, whenever the correspondence is sent out can it be sent to us. Don't have to be copied on who it is to. I just want to see what is being verbalized to the families. What we are telling them to be clear. Sometimes whenever I get information from our staff it's very confusing. I want to make sure we're getting clear language that expressed what they are testifying for.

HYACINTH MCKEE: I just want to note it is important for the council to know that LaCAN, there is no representation of LaCAN leadership in region two and region one. And that is very important. We need to work towards making sure that happens and I just don't want that to be overlooked.

SHAWN FLEMING: I do want to say something. So we communicate a lot to our LaCAN leaders to determine which ones of those communications merit sending to y'all so y'all can address distrust issues, is the best way I can explain it, is not a healthy way to operate. I take offense that communications have been put forth by staff have been confusing. I and the rest of the staff I will address. But the staff that are under me all provide very clear communications in every correspondence that is put out. As it relates to the legislative advocacy agenda there was a LDDC news that went out on December 4th that multiple people accused me of changing the agenda and being confusing. It was a one page document. If there were specifics related to that that you could clarify I will take that into consideration. But I will not accept leveling insults to staff related to their communication being confusing.

CRYSTAL WHITE: I would like to call the question.

RANDALL BROWN: There is no motion currently on the floor.

CRYSTAL WHITE: So to be clear, we get no correspondence and that is fine. Let's just move on.

BRANDON: Good morning. Brandon, my mom used to be a family representative on this council. I have a new company in region three, waiting on Medicaid. I want to let y'all know I am brand new. Y'all need to understand, or please understand with this increase I hear trust issues with providers, the money in the right place. I am a nurse, ex veteran in the navy. My number one priority is to make sure caregivers have what they need to give the care that these children need, and seniors. I can't wait to hear what y'all have to say about seniors. So much going on that y'all have no idea. I see the rates are very low to pay these caregivers so I am so excited that y'all are actually putting these plans into motion to get more money to the ground floor whichever way. I do want to say a couple things. I understand if y'all make us pay the caregivers a certain rate and that money is gone that is going to hurt me tremendously. Whichever way it can get in there. Just want to promote trust that

we will try to get it. Nobody else deserves it more. The caregivers, the nurses training the caregivers. It needs to go to the boots on the ground. Kind of the mentality the military holds. Whatever stresses at the top level do it so that the boots on the ground can keep doing their mission. Trust the providers. Also after this anybody want to give us some pointers in the right direction that would be great.

RANDALL BROWN: The question has been called. We're moving on to membership report. Have that for you now. The committee met twice on December 3rd and 16th to fill the upcoming seats. One from Southeast Louisiana and the other from Northeast Louisiana. Public comment was received expressing concern over the federal restriction preventing a parent of a child with disabilities who passed away from serving on the council. A motion from the membership committee for the council's consideration. The membership committee recommends the council consider sending a letter requesting the administration on community living reconsider the rule defining a parent of a child with a developmental disability, for purposes of council membership, to not exclude parents whose children with developmental disabilities have died. And this is a

motion on the floor for your consideration. Any discussion? Any abstentions to the motion? Any objections? Hearing none, this motion carries. Next, the committee attempted to interview all candidates who originally scored 4.25 out of 5 on the ranking of attributes by the initial reviewer. Due to scheduling conflicts the committee was unable to interview the candidates from North Louisiana. Therefore the committee decided to reopen the application process for the council seat representing North Louisiana. Following recommendation for your consideration. The membership committee recommends the council consider Liz Gary for submission to the governor for his consideration and Sharon as the alternate to fill the vacancy in the southeast area of the state. A motion for your consideration. I want to note the administration on community living, which is our funding from the federal government, stresses addressing our under representation of minorities.

MICHAEL BILLINGS: I think the world of Liz Gary. She lives and breathes advocacy so this really doesn't have a lot to do with her. It has a lot to do with this letter from ACL. And just to make sure everybody understands and we're transparent here, the letter says

the membership of council shall be geographically representative of the state and reflect the diversity of the state with respect to race and ethnicity. And I got a couple points and questions. What are we doing as a council moving forward to address this and have we done anything, or do we have a plan moving forward to address specifically educating the governor's appointment office of the DD act requirements?

RANDALL BROWN: We are aware of the letter and of the requirements the DD act has for us as a council. This letter very directly lets us know we have to keep that in mind. With all the vacancies we have to consider that issue, the issue of both gender and ethnicity. Our recruitment efforts have to be strongly looked at. One thing, I am new as your membership chair I took over that role in early October. This is my first chance to get a feel for it. We definitely need to look at better recruitment of minority candidates.

HYACINTH MCKEE: Want to ask the council an opportunity to allow me two minutes to speak in regards to this letter provided by the administration for community living. And also being one of the only three African Americans that sit on a council of 28 non

people of color. Asking the council to allow me two minutes to speak. Greetings council. On yesterday January 15th my sorority Alfa Kappa Alpha sorority incorporated the first female African American sorority was founded 112 years ago in 1908. For clarification, I am not here speaking on behalf of my sorority, but please know I am a very proud member of the sorority because they have provided service to all mankind in the areas of healthcare, education, economics, the arts, governmental policy and humanities. I am often asked by people outside the sorority, particularly people in sororities of non people of color about why we make such a big deal about our sorority. I often hear you sure wear a whole lot of pink and green. We see that everywhere especially during this time of the year. We also see other colors by other black fraternities and sororities worn this time of the year. It is important to note that these sororities and fraternities are considered as the divine nine. As they too celebrate organizations this time of year that promote inclusion. So to that my response is that our sororities and fraternities continue to strive to fight against struggles and obstacles of institution inequities that African Americans have endured over

centuries. This struggle is in a response of African Americans attempt to have the opportunity to sit at a table to discuss issues that are pertinent to society. You see, these sororities and fraternities were established to provide these opportunities for all people, in particular people of color in response to racial disparities, oppression, prejudice, marginalization and exclusion by white fraternities and sororities that denied access to people of color. I guess you're saying what does this have to do with the DD Council and why am I rambling. So I sit here before you today to say to you that I proudly wear pink and green because of the skin I am in. Perhaps if I was another skin color, white, I may have been afforded the opportunity to be included in a white sorority. As I look around this room I see a lot of opportunities as I did see one and half years ago when I was appointed to this council that have been provided to others, other people that are not of color, to participate on the DD Council. Whether intentional or not, one cannot deny that as they too look around this room they see the same. Over 30 years ago my father sat on this council as one of the only African Americans on this council. Thirty years ago. It is with great sadness that we sit

here 30 years later in 2020 to debate and discuss this issue in respects to race and diversity on the Louisiana Developmental Disabilities Council. So I ask, have we made progress since 30 years ago. As it relates to diversity. Who are we to date. Who do we want to be remembered as. To my fellow council members who say a person should not be appointed solely based on color of their skin, I agree. But guess what, they should not be excluded either. They should not be excluded based on lack of opportunity. We are on the federal mandate, and you all see it in the letter, section 125 speaks specifically to the diversity issues that we have on this council today. I ask again, who are we. What do we want to be remembered as on this council. So the next time someone sees me wearing pink and green recognize that we wear that because we celebrate the history of what we have done in the past 112 years as it relates to diversity. So the next time someone sees someone on the DD Council and they look around this room and see 28 seats let them see with their eyes who we are. Our history, who we represent today. And who we have chosen to be. Thank you.

RANDALL BROWN: Thank you. Thank you for your service to the council, doctor.

MICHAEL BILLINGS: I have a couple more follow up questions regarding the letter and also the membership committee. First I will address the membership committee. As a council member I had the opportunity on two or three occasions to be asked to serve on the membership committee. Sometimes it worked out, sometimes it did not. Could you please clarify for everybody's knowledge here in the room, cause I know when I was asked it was for different council vacancies. It's my understanding the membership committee is not a longstanding committee.

RANDALL BROWN: Correct. It is called, it's ad hoc. Called into session as needed. When there is a vacancy it's called into session. The only permanent member of that member is me, the chair. As vice chair of the council I serve as chair of the membership committee.

MICHAEL BILLINGS: Thank you. Also the last of this letter is if you have any questions or concerns please reach out for assistance. Have we done that, or I know it's only been a day, but do we have a plan for that and a plan for documenting what the council is doing to address the diversity?

RANDALL BROWN: We are documenting every

application we get, ask that question ethnicity and gender. As those are processed and keeping records of those. For the purposes of our funding and as it relates to this letter, you are correct, I haven't had a chance to reach out directly. We are aware and have been aware at least since last May that we are out of compliance on the issue of ethnicity and gender. Something we are aware of and working to correct as best we can with the applications we receive.

MITCH IDDINS: This letter was brought to our attention yesterday in our committee meeting and I had some real serious concerns about some of the language particularly in the last paragraph failure may result of suspension of ACL funding. This is the second notice, to my understanding, fourth notice. I think the language is pretty strong there. If we don't do something about diversifying our body and do it quickly funding could potentially be in jeopardy and we may not be sitting here having this meeting. I think each of us can do a better job, if you know someone. There is a vacancy in North Louisiana, in my area. I am doing my best right now to get the word out there is a vacancy on the council. Doing it to everyone I know. I certainly have diversity in mind when I am talking to

others about applying for the vacancy. If you know someone, particularly keeping diversity in mind, and the needs of the council have them apply. I might add, I believe we have an opportunity today to maybe demonstrate that we are serious about diversity and we want to do what we can do as quickly as possible to come into compliance. We did have an applicant that applied that is an African American female that would certainly have the ability to serve. And she was actually called in for a second interview by the membership committee. I would make the recommendation today again, I agree with Mike wholeheartedly that Liz would make a phenomenal member of this council. But I might recommend Brenda as a member so we can demonstrate we are trying to come into compliance.

RANDALL BROWN: Mitch are you making this as a substitute motion?

MITCH IDDINS: Yes, I am.

MARY TARVER: I will second it.

RANDALL BROWN: Any discussion?

HYACINTH MCKEE: Trying to understand what the motion is. The motion is to recommend to the council the consideration of Liz Gary for the appointment of the governor and then consider Brenda? This is a

substitute.

RANDALL BROWN: Mitch is proposing a substitute.

HYACINTH MCKEE: In lieu of Liz Gary. Trying to get clarification.

TARA SMITH: I think after reading this letter that what we need to focus on is making sure that our membership committee has a very strong eye towards diversity and have some objective standards in the ways they recruit and the people they are interviewing going forward to ensure that we have diversity being considered every time we are looking at applicants from every single region. So I think probably one approach I would consider is making sure that what we are doing from an objective set of eyes is very clear that we're soliciting applicants that are diverse and making sure we are interviewing diverse candidates every single time. And that should include communities including African American, but also Hispanic and others as well. Because I am guessing the last person here that speaks Spanish and today is my last day. We need to make sure that everybody is represented on here. I do have the pleasure of knowing Brenda and knowing Liz both of them personally. I filled for Brenda previously on this council and rode back and forth several times together

because there was a delay in my appointment with the changing of the governor. I think she stayed on two or three extra meetings. She is a wonderful candidate. She [REDACTED] and did a great job here and very gracious in getting me up to speed on what council membership and responsibility entailed. And I think she would be a fine candidate. And I also do know Liz as well. I don't know Liz personally. My interactions have been through this council and have been over the last four years. I also think Liz would make a great candidate for region nine. I have had the pleasure of knowing her and seeing her advocacy efforts across numerous organizations and I think she would be a fine candidate as well. My concern here is that if the membership committee did some sort of rubric and I'm understanding they were graded and brought back for interviews based on a numeric I don't think we should throw the baby out with the bath water in an effort to gain compliance. I think we need to be careful of not giving the appearance of simply filling the position with someone who is African American for the sake of saying we filled it with someone that is African American. We need to look closer at what we are doing as a council

and as a membership committee as a whole to ensure we are changing our ways and not just checking a box, if you will. Because we have a vacancy and we got this letter yesterday. I think we need to make sure our intentions are very clear and moving in the direction I think this letter intends for us to move. One question I have is that since we have a vacancy in North Louisiana and we have that tabled and we don't have anybody up for consideration at this moment over the last four years I have seen people serve in regions in which they do not live. Is it a possibility that we use Brenda to fill the vacancy in the North Louisiana area recognizing she is from region nine. Because we have met her, most of us do know her from her past council work. And she did do very well in the interview process. And kill two birds with one stone. Possibly for the North Louisiana region. I know we have done that before in areas where we needed to fill with self advocates in the past and other members on this council right now that are serving in areas they don't live. Is that a possibility for the council to consider today?

HYACINTH MCKEE: I thought it was based on geographical. Brenda is representing South. North

Louisiana is another area. It's separated between north and south. I'm not sure if Brenda, you guys correct me, if someone from the southern part of the state can represent the northern part of the state. Typically I thought if you were in that southern region you can represent because you are in that southern region. Not geographic locations can jump from south to north. Maybe someone can provide clarification. With that being said also, and I too know Liz Gary, I think she's an exceptional person. I think she would be a great asset to the DD Council. She has been a strong advocate for many years for us. I don't know Brenda Cosse. I have not met, her not seen her. If she walked up to me and slapped me I wouldn't know her. I will say this, and I express and agree a lot with what you are saying. But I am just saying based on what we have done historically as it relates to selection and the way it appears to the public right now it appears to the public we are not adhering to diversity. And to have this conversation about doing this moving forward, African Americans and people of color have waited 400 years. My father sat here 30 years ago. There is no change. If we're asking me and also the people of color to push it off to another

selection to another year how long should we wait until we allow to ensure that diversity is happening on the council today. That is my response. I understand it's not about box checking. How long do we prolong this process and do we wait another five years to develop another rubric. We have to respond to not only this letter we received yesterday, but again four additional complaints, or transaction or communication regarding to diversity prior to this letter. We also had someone come down from the national in April to speak to us that provided us statistics to show us we are completely out of compliance. To ask the council again to do this moving forward, and it's nothing against Liz because Liz is exceptional, exceptional. I don't know Brenda. It is following what we are saying we are here today doing. For the people that we represent. As I look around this table April, Dr. McKee, Temisha is representing African Americans. That is what the public looks like. That is what the public is viewing. The reason we don't get applicants to come because we don't have any black people to say come join. We don't have any Hispanic people so say I am sitting here and you can sit here too. All we have is white people saying come join the council. I know the honesty

hurts, but sorry. That is the honesty. In terms of recruitment efforts get more of us on the council so we can tell people like us that hey, you too can sit here because I sit here too. Sorry for the passionate advocacy. Nothing personal.

MICHAEL BILLINGS: What is the ethnicity of Sherry?

RANDALL BROWN: Caucasian.

MITCH IDDINS: Thank you. I appreciate your comments and we certainly need to work better as a body and look at how we are recruiting. That is the key, our recruitment efforts. In region nine has a vacancy, but another area we are not in compliance is the number of males on the council as well. Something we are way out of compliance too. We have an opportunity here if we can have Brenda serve to help us, because she certainly is qualified to meet the requirement. And then in North Louisiana we begin strong recruitment efforts to find a male to participate, preferably a male of color to participate I think we will really demonstrate our efforts because we have an opportunity today to make some strong decisions. Let's move forward and do that.

RANDALL BROWN: I can tell you as your permanent

member of the membership committee I take this letter and all communications prior to it extremely seriously. I understand the values of the DD act. We will work with the upcoming vacancy in also my region, North Louisiana, to ensure these benchmarks are met, but also if that person is qualified. I take very seriously the work we do and why we do it and what it means to comply with the DD act also.

MARY TARVER: I just wondered if whenever the membership committee is making selections in this past year has there been people that would meet the requirements that we need to add that have already gone through the process besides Ms. Brenda? I understand she went through the process. So is there anybody else that we know of that has already been vetted through the process, through the membership committee, gone through the rubrics, been interviewed and then you have five or six. In the end they are all equal, they all have something to bring to the committee, but just didn't get selected. Is there anybody else out there that has already been through the process that we could revisit.

RANDALL BROWN: The short answer to that is not at this time. We do have some applications I believe, but

as far as going through the entire process as prior to me becoming chair membership, no we don't have vetted candidates ready to assume that role. We will work hard on recruitment for the North Louisiana seat. You have my commitment on that.

ROSLYN HYMEL: This is what I want to know. How many applications that you really talking about that y'all are looking at or going straight through. I am hearing all of this now like the third time hearing it. Do we have any good candidates coming out of it.

RANDALL BROWN: We need to work better at recruiting candidates. We will do so starting now.

ROSLYN HYMEL: Do we have a round up number of recruits that we have on hand?

RANDALL BROWN: No. We don't have really on hand that have been vetted, no. We will begin that process.

ROSLYN HYMEL: Coming from today that we are going to find out.

RANDALL BROWN: We will find out probably at the next meeting. I don't have anything prepared on that today. There was not enough applicants who applied to have an alternate for that seat. We will have to begin a process anew. Bearing in mind what our funding sources are in relation to the DD act and the

principals of what it means to serve.

TARA SMITH: When the membership committee interviewed or went through the applicants did you guys use a rubric for region nine?

RANDALL BROWN: Yes.

TARA SMITH: Can you tell us where Brenda fell? Correct me if I am wrong, Liz was first, Sherry was second. Where was Brenda in that numerical evaluation?

BAMBI POLOTZOLA: The members, each member got assigned certain people to do interviews with. We assigned a score based on this rubric for each person we interviewed. And then based on those scores anyone who had a 4.25 or better then moved on to a second interview done via teleconference or conference call. A second interview for anyone who may have had 4.25 or greater. I don't remember how many were on that, was it six. From region nine it was six people. And from there it wasn't a rubric. It was a discussion and a recommendation on who would be presented. A motion was made, two people voted for Liz and one objection. Only three of us at that meeting because Randall and Mitch were not able to attend the meeting. The only three people that were there Amy and Jill and myself who made the vote. Two votes for this motion and one objection

to that motion. No objective measure once people got past that first measure.

AMY DONARSKI: To clarify I was on that membership meeting both times. The first time the rubric was created there was a motion on the floor, I believe a motion at that meeting to do second interviews based on the scoring. I objected with Brenda because she had missed four opportunities for an interview and it passed anyway. And that is why she was allotted the second interview and we did do those interviews. I scored them. I am not sure if Jill did the second time because we still had the rubrics. She was in my bottom three. At the end of the meeting after we finished the vote staff had informed us he would like to take our paperwork to shred them based on HIPPA compliance. We gave them back to be shredded. So we don't have that information.

HYACINTH MCKEE: Try to say this to the best of my ability. I have some serious concerns that anybody who is sitting on this DD Council who has not went through the vetting process that everyone else has gone through being interviewed by membership committee members, going through the process of a rubric, or whatever the selection criteria is for membership to make any

comments or even sit on the membership committee to do such activities. I am not disclosing anyones names, but if you have been properly vetted through the process that the DD Council has established then you in fact should sit on the membership committee. I call that as a concern. If you are sitting on the membership committee and you have not been properly vetted as everyone else who sits on that membership committee has done it is unfair to make a comment about whether or not a candidate did not be properly vetted through the very membership committee that you were not properly vetted through. We have some serious concerns right now. We have the OIG that's looking at us about our membership process and we need to act as a DD Council. So now we have OIG, ACL, we have reports from the National Council on Developmental Disabilities, we have the public being very concerned about our trust and yet we are sitting here discussing something about diversity that we have the power to change now. From what I understand, which I don't know Brenda Cosse, I understand she was the candidate that was selected in April to be put as consideration before the governor, properly vetted to be considered recommended for region nine. For whatever reason, that did not take place. I

am concerned as a DD Council member that I was just informed of this information just as recent as two months ago that we have individuals that sit on this council that was not properly vetted like other people were vetted on the council. But yet, but yet called to question every time the DD Council membership attends to be in compliance with ACL. I am concerned about that. If you dig deeper it may look like nepotism, it may look like favoritism. It may look like someone was selected because they knew somebody or good friends. I am telling you what it looks like to the public. I am not saying this personally to Dr. McKee, I am telling you what appearance looks like. When I look around this table I see three African American people. We had opportunities to be in compliance. We did not take those opportunities. For whatever reason. Intentional, non intentional, we did not act according to our mandate. What are we going to do today now to deal and address with that. Thank you.

RANDALL BROWN: We have the motion before us. Let's begin with public comment.

SHARON DUFRAN: I need for you guys to know that every time I step up here it's like I am complaining about something. That is not who I am. I served on

this council for years, did a damn good job. Diversity, I am all for it. That's not what I want to talk about. But you need to know something, this council, you have no new business, not allowed anymore. Some unspoken, but well practiced rule by the council is that community members are no longer allowed to be appointed to your membership committees, or education, any committees. We have been ostracized, we are not allowed to attend. We have heard statements by the executive committee saying when they have EC meetings when us public people show up they can't get their job done. Today you have a council member who suggested you inform the parents and self advocates what they will be advocating for and you guys sat silent. So congratulations, you have totally cut yourself off from the communities that you serve. I want you guys to know in my working life, which is kind of an oxymoron cause I never got paid, I was an advocate, special education advocate. I was the complaint whisperer because I wrote complaints for families and I was effective. And until all of this stuff started I wasn't going to say anything because I plan on filing a complaint. The last council meeting I came here for the purpose of saying hey, let's get Families Helping

Families some more money. And then I hear all this stuff that was going on, partners in policy making being recorded by staff members and then transcribed and disseminated against the law. And worse yet, it's against people with disabilities. We are supposed to empower persons with disabilities. And if it doesn't fit the narrative just right I think that you guys have to walk above the narrative. I don't care if it's legal, I am talking about what is right to do in situations like recording partners in policy making people without their knowledge. So know that after that meeting, and I stood up and said some things because I have never been one who can be silent when I see people with disabilities being trampled. I did step up and I said I will help you write a complaint. I went to Shawn Fleming before I agreed to do this and voiced the concerns of these ladies and it fell on Deaf ears. That's really not what I was going to mention today. That just kind of came out cause I asked God to help me with this. You council members need to know something. There has been a concerted effort to keep Liz Gary off this council. I don't care who you pick. Not my decision. But you need to know about this concerted effort because I had a self advocate come to

me, ask the name not be revealed because of the fear of repercussions who was intimidated and told not to vote for Liz Gary. Supposedly Shawn Fleming showed her a stack of papers this high of OIG complaints yet none of you have ever heard about it. That was not presented to the council. All of a sudden a huge push to be 100 percent diversified. You have to know, you are not that far off on the population. You have to meet the population. And you have no Latina sitting on this committee. You are not a parent, are you? I stand corrected then.

TARA SMITH: But today is my last day.

SHARON DUFRAN: Actually, I am right. Why wasn't there a push to find a Latino to sit on this committee.

RANDALL BROWN: Order.

SHARON DUFRAN: No, I am not going to stop until I finish what I am saying. Because all you guys do is shut down people from the community. This is the only voice we have at this mike. And as you can see not many family members show up anymore. There used to be some respectability of this council. And Shawn Fleming the fact that you went to a self advocate and virtually made this person feel like everyone at the table was going to be arrested if we did not vote for Liz Gary.

Do not vote for Liz Gary. So if you think I am making this up note this, you will be receiving another complaint. It's just the legislative auditor hasn't shown me which commission I will be sending it to yet.

CHARLIE MICHEL: Good afternoon. This is one of those problems that is very difficult to solve because every one of you who have spoken at this table is absolutely correct. And there are opposing viewpoints. And not so much that people don't agree, I think people don't know how to solve it. One of the things I find when you have these kinds of problems it requires discussion, it requires a timeline. The ACLU wrote a letter to y'all, ACL. When you get a letter it does make you want to have a knee jerk reaction. I am going to make a couple recommendations. Y'all know I am nobody, so it's worth every penny you paid for it. The first thing I would suggest we not do a knee jerk reaction that involves throwing out the work of the membership committee. Nothing to do with Liz. As far as I am concerned, this is a procedural thing. However, because if the order I am looking at in my mind I am looking at Liz came out first, Sherry came out second, Brenda came out third. I forgot your name.

HYACINTH MCKEE: I'm sorry, that's not how it came

out. Brenda Cosse was recommended in April, but it never made it to the governor's desk. She was already vetted and selected for region nine.

CHARLIE MICHEL: What I am going to suggest that you do is that letter is calling for course of action. Doesn't necessary mean to pick someone the membership committee didn't necessarily agree to. What it is calling is that you need to have a plan for recruitment and interviewing. The very first thing that needs to happen is why is not a member of color on the membership committee. April when you assign that committee that would be a good way to do it. I think if you have a course of action that is written down and you sort of put yourself on a corrective action plan with timelines and activities that keeps the community from having to wait forever to be able to see some results. It also tells the people who are writing the letters that are looking at you that you take this seriously and that you're going to take some action on it. It's not I think we need to do something, or I think we need to do this. It is this is what we will do. This is how we will hold ourselves accountable. This is not a problem that is going to be solved quickly by any stretch because with 28 members and four

members of color on the council then you are going to take some time for the turnover and all that stuff. That's all I have to say. As far as the men on the council, I think there is a unique issue moving from one diversity issue to another. Typically men don't participate in this for a couple reasons. One is they are working to make a living to support their children because a lot of times their wives stay home to take care of children. Two, society does not recognize men as fathers as valuable members of the disability community. I am one, just so you know. Keep in mind, there are reasons sometimes why we don't meet certain quotas. Keep in mind what those reasons are. And more importantly keep in mind what can you as a council do to aggregate those problems as much as possible and with as much efficiency and commitment to the community that you serve as possible. Keep in mind the whole time no matter what choice you make, whatever decisions you make usurps the vision and the mission of this council it is not a good decision. I am leaving now not cause I am mad, cause I have another appointment this afternoon.

KATIE CORKEN: I got here today and I saw this updated letter from the ACL that stated January 15th

and as I am reading it I see it references a letter sent to Sandee Winchell on May 20th. I have attended the DDC meetings since then and I don't recall ever this letter being mentioned or given to DD Council members. But it's my understanding that this letter that was dated on May 20th was given to the membership committee in December by another council member who is not on the executive committee. But the other council members had never seen this letter. And so I understand that the council is working towards transparency because there are serious trust issues and obviously those are legit. I want to bring that up that it's very odd that you get this letter, but you didn't get the one in May. I have also attended the past few membership selection committee meetings, one in August for the nonprofit position, a white male was chosen which I understand you are lacking in males. One in September that I also attended where an African American female was chosen. And then I was not able to attend the December 1 on December 3rd, but I am kind of glad that I didn't go because that would have been a wasted trip. Because at some point the council or staff decided the membership selection committee meetings were going to be displaying personal,

sensitive, health information. However the past many membership selection committee meetings it wasn't sensitive then because the applications haven't changed, the information hasn't changed. And I just find it extremely concerning that as the public started attending meetings they decided to say this is confidential. That is concerning to me and I don't know if council members are aware of that that they closed the membership meetings in December to the public. Lastly Dr. McKee kept referencing being properly vetted. If you read the DD act in section 125 it states that council membership and the council appointments in general the members of the council of a state shall be appointed by the governor of the state from among the residents of that state. There have been other council members who were appointed by the governor. And I believe that's how you get into the council. The properly vetting it I believe is something the council maybe made up, but it does not go through the DD act. I find it offensive people think there is a proper vetting and there is a way of going through a back door. I believe I already addressed. But this is serious concerns of mine. That is all.

HYACINTH MCKEE: I am always the one to say let's

stay on the agenda. I want to address a couple issues and I appreciate what you are mentioning. And I saw you at those meetings and appreciate what you are saying. Did you attend the meeting when Brenda Cosse was selected as a membership representative for region nine? Were you able to attend that one? And so the council did have someone they apparently recommended based on whatever the membership application was at the time to the governor. I was just notified that recommendation never made it to the governor's desk. That in fact for some reason another recommendation was made, not by the DD Council membership committee for an individual to be appointed by the governor. When I say proper vetting, maybe the word proper is not right cause proper can very well be subjective. I apologize for using the word proper. I will say the membership process that was established at the time individuals that went through, cause proper is subjective. But apparently the individual that we are talking about, Ms. Cosse went through whatever that membership process is by membership committee to be selected to be recommended to the governor for the governor's consideration. I am not going to speak for my state licensing board, but I will say I sat on a membership

selection process for my Louisiana clinical social work board and we too make recommendations to the governor. And we do have policies that we adhere to. But the recommendations typically come from a body of people who understand the nature of work, who have family members or part of that profession. Those recommendations typically go through that body. In my experience, may not happen with every licensing board. And then from those recommendations the governor then makes a selection based on all of the information that he has in front of him to make the informed selection based on the committee, right, expertise, right. This is not about the governor's authority or right to appoint because that is his authority and his right. We all answer to the governor. In no point are we questioning what he did. The concern is is how information got to the governor for him to make the selection. I don't know cause we need clarification. Maybe the council members need to know too. I need clarity on that. If Brenda Cosse was the individual that the membership committee agreed to based on whatever criteria they had at the time to submit that name back in April because we wouldn't have this conversation because if Brenda Cosse was appointed by

the governor we would still have a region nine vacancy, that Liz Gary who is exceptional, can qualify for. We really would be looking at only filling the seat for Liz Gary because the individual that the committee recommended, which was Brenda Cosse would already be in that region nine seat. It would not be a discussion. Now we have somebody exceptional like Liz, we have to deal with this today, when in fact had we went through the process that the membership committee did, whatever that criteria was and got that name to the governor, perhaps we would not be dealing with this today. I appreciate the person that just spoke before you, her advocacy, she sounds like my dad so I respect her. I appreciate her advocacy on it, but I think it's important that the council know they have been some issues outside of the council that we are being investigating right now by OIG about our membership process. Maybe you can share some clarity to the council, maybe you know, I don't know, how a name other than the name that was recommended by the membership committee back in April arrived on the governor's desk so we at the council dealing with this today. Liz Gary would be appropriate based on the rubric and what the membership committee did just last week, she would be

appropriate. I am questioning why are we having this conversation. Why wasn't Brenda Cosse recommended by the membership committee not sitting here today. Maybe you can share clarification. They don't trust us. And I am concerned. And I appreciate you because you bring valid points. We need to get this together. How did a name get on the governor's desk that did not go through the membership committee process?

KATIE CORKEN: Dr. McKee were you at the July DD Council meeting? I took the privilege to speak in public comment in July because there was still a lot of talk about what you are saying. So I explained the whole process back in July. But I will certainly explain it.

HYACINTH MCKEE: Can you explain it again. I think that's a concern. How did another name that was not selected by the membership committee get to the governor's desk.

KATIE CORKEN: So the governor, it says the governor can receive recommendations from the council, but also from the public. And being the parent to a child with a disability Governor Edwards is very aware of the disability community, he knows many disability advocates, and he also knows myself. So I took the

privilege, as part of the public, to recommend Amy's appointment. I did not know any other avenue at that time because I wasn't privy to membership meetings because I wasn't as involved. However, that is still a very acceptable way to be appointed to a public boards and commissions with the governor's authority. I understand it's being investigated, this appointment, by the OIG as Mr. Shawn Fleming has stated to a few people. But apparently not to everyone. Again, that is concerning to me. That you let some people know, but not others. There is nothing immoral, unethical, illegal about the way Amy was appointed. Except for the fact it is not approved by the council and their policies that they created. I have issues with this and I have been having issues with it since April. If I had known then this would cause such a ruckus because I stepped on people's toes because they like to micromanage things I probably still would have done it.

HYACINTH MCKEE: That means you used your own independent policy to recommend someone for the board?

KATIE CORKEN: Yes, according to the DD act.

HYACINTH MCKEE: Based on your soul recommendation, independently.

KATIE CORKEN: The governor could have taken mine

or he could have not.

HYACINTH MCKEE: But based on your individual opinion of Amy, not any reflection of Amy cause we know she's a good person, you made the decision to make the recommendation based on your experience with Amy as you made the recommendation.

KATIE CORKEN: Yes.

HYACINTH MCKEE: I just wanted clarification that the recommendation came from you and is on record.

KATIE CORKEN: It was on record in July and on record in many other places.

AMY DONARSKI: It should also be clarified I actually applied prior to the council's notification there was a vacancy. I was familiar with my region nine rep. I was familiar that she was going to be vacating her seat and I applied directly through the boards and commissions website. There was no back door thing.

HYACINTH MCKEE: I didn't use the word back door.

AMY DONARSKI: I just wanted to make that clear. Actually I'm a partners' graduate in 2014 and I was told I was allowed to.

MICHAEL BILLINGS: I am just concerned as a council as a whole and our membership as whole that

here we are being addressed for the fourth time about our diversity, yet how do we stop, what input do we have if the governor makes appointments without respect to the diversity of the council.

RANDALL BROWN: It's the governor's decision who he appoints to this council.

MICHAEL BILLINGS: I understand that. If the governor makes appointments, if we are going at it best foot forward to meet our diversity and appointments are made outside of what the council recommends, if there is an answer to that.

SHAWN FLEMING: I would like to clarify a few things. The DD act makes it clear that the governor shall select members, the governor has that full authority to appointment members, but only after soliciting recommendation from organizations, including the council. It explicitly names the council as an organization he must receive recommendations from. The significance of that is in the two letters and the two technical assistance visits related to this. So as it refers to your actions and the reason, and I want y'all to be clear with how the federal government, and they phrased this to me repeatedly, and continually requested I update them on the status of where we are.

And where we are to me, what decisions are being made by this council to comply with the DD act. The first sentence. Or is this council recognizing the requirements in the DD act and is the council moving and taking actions towards reaching that compliance. We have three members who are African American, statistically based on the population of Louisiana we should have six. That is citizen members. Non agency. Matt, you don't even count, no offense. You being male doesn't really help us in this case. The other factors that they looked at is, Tara since you revealed, she makes up Hispanic/Latino. We do have another member who meets that criteria. And that is minimum what we are supposed to have to represent that population as well. The other thing the federal government has communicated is not only are our citizen members all white, but all of our agency members are exclusively white. Unless y'all have a different ethnicity I am not aware of, which I won't ask, but that's what they see. To imply this is some concerted effort related to an individual is absurd. The federal government has been consistent. And this issue was raised, I want to be clear, when the lack of trust of how your staff handled membership, and questions about it, and

questions about whether we lied about having the right number of self advocates. We asked for technical assistance, for clarity for you which raised the issues. And so when Sheryl came here twice she was told, and she is paid to be clear by ACL to provide us support, and she was told if you go there you will tell them they better get in line with diversity issues. I will leave it at that.

TARA SMITH: When Brenda was vetted by the membership committee in April who else did you all vet and interview at that time and what were the rankings. Because that recommendation didn't make it to the full council before the appointment went through. Just curious who all was interviewed at that time.

RANDALL BROWN: I was not on the committee at that time.

TARA SMITH: Who was on that committee at that time?

SHAWN FLEMING: I know who was on the committee. Robert was the vice chair. There was Mitch and I believe Jill D. Is that accurate. Y'all information, in my opinion, is HIPPA protected. Particularly when someone applies for participation and before they are vetted and selected and sent in. I don't even know who

was on that list. I can go back and Sandee has given me access to her records because I am now in this position. But I didn't know who was on the list.

JILL HANO: On the membership, I wasn't in April, but I have been on the membership committee consecutively since like September, October. But that's because we have vacancy after vacancy.

TARA SMITH: I was not aware there were four inquiries or discussions or letters coming to the council about us being in noncompliance. Truth be told, could be my memory is fading, my recollection the word diversity started being mentioning between Dr. McKee and myself and even Hillary several years ago when we were asking about having someone with a developmental disability be employed by the council. I think in the spirit of full transparency and so the council can act objectively and not be in a situation where we get a letter like this the day before we have to meet, that these types of things need to be share with the full council. They need to be circulated and made aware if these things are happening and are under this level of scrutiny. We need to be made aware in real-time. That being said, what I want to say is that we're hearing two very important concerns the council

needs to consider. One of them is diversity, which irrespective of these letters, I think several members on this council have raised quite a while now. I think in the council's best interest and the membership committee's best interest to come up with objective ways of recruiting and interviewing and evaluating candidates on a regular basis so there is objectivity in the recommendations from the membership to the council and then council to the governor. To do anything less is going to invite scrutiny and people's opinions about who gets recommended why, when and where. I think we need to look very hard on developing not only a rubric for evaluating, but means of recruiting all across the state so that we can get ourselves into compliance. The other thing I want to say on this is that whether you like or don't like how Amy was appointed what we are hearing and what we have been hearing consistently suspicion from the public over how we are staffing the council. And we cannot ignore that. Whether it was right or wrong how Amy went to the governor's office it is really not our decision, it's the governor decisions. But we can't ignore that. To combat that we need to have full transparency. We need to have objective means of

recruiting candidates, evaluating candidates and we consistent in our recommendations. Not knee jerking at the last minute because we get scary letters. These letters are scary and serious and we need to give them full consideration. But we have to put some objective means in place and directives to our staff on how to recruit when we have these vacancies. And as we have seen, especially over the last two years, people are dropping like flies. This is happening very regularly. They're having to call ad hoc membership committee meetings because people are resigning faster than we can even meet. We have to have some direction to the council staff on how to handle this so that we are comfortable with making sure that we have adequate diversity and diverse candidates were interviewed for these positions and given the opportunity to apply. But that being said, as I mentioned before, I do fully support Liz's appointment to fill my vacancy. I know Brenda she would be a wonderful choice as well. But she just served right before me. Liz has not been afforded that opportunity. I personally think Liz would be the better candidate simply because I think we need to have someone who has her knowledge and has her experience in advocacy and her background sit on this

council and bring a fresh set of eyes. And she has not previously been given the opportunity to serve.

APRIL DUNN: I want to table this to lunch time. I feel like we all need a break. This is giving me a headache. The second thing I am tired of all this division stuff. Back and forth democrats and republicans, all this kind of stuff. We need to be united. That's what's on my mind. We have too many divisions in this world. With Congress and stuff like that. We need to be united. It's not about democrats, not about republican, about all us working together. United we stand, divided we fall. Right now we are falling because we are falling because of stuff we don't need to be divided on.

RANDALL BROWN: At the direction of our chair we are going to break for one hour for lunch. Everybody be back here in one hour.

It's time to call the meeting back to order. Hope everyone had a good lunch. We had a fairly robust discussion as we all are aware on this motion. I would like for us to call the question and vote on this motion. Let's read it again. Substitute motion currently on the floor and seconded by Mary to recommend the council consider Brenda for submission to

the governor for his consideration to fulfill the vacancy in the southeast area of the state. Motion currently on the floor by Mitch. Do I have any objections to that motion? We now move to a roll call vote. A yes is to motion Brenda would be a nominee. A no would be to not accept this motion.

HALIE BELIN: Patti Barovechio yes, Kim Basile no, Melissa Bayham yes, Michael Billings yes, Randall Brown no, Lillian DeJean yes, Amy Donarski no, Michelle Guillory yes, Jill Hagan abstain, Jill Hano--

ROSLYN HYMEL: Yes.

JILL HANO: No, that's not fair. Ms. Hano says no and that's not fair.

HALIE BELIN: Roslyn Hymel yes, Mitch Iddins yes, Jen Katzman yes, Hyacinth McKee yes, Steve Nguyen no, Bambi Polotzola yes, Matthew Rovira yes, Tara Smith no, Temisha Sonnier yes, Mary Tarver yes, Crystal White no, Phil Wilson no. Thirteen yeas and eight nays.

RANDALL BROWN: Motion has passed.

KIM BASILE: I want to make a clarification that Jill Hano voted no and I would like the record to reflect that.

RANDALL BROWN: The numbers are 13 yes, eight no, with one abstention. The next thing I have for your

consideration, or rather to inform you of is the executive director committee report. The search committee met on November 13th to review the committee's responsibilities as it relates to hiring a new executive director of the council. The committee made one decision during this meeting regarding the salary range for the new director. The committee decided that preliminary range will be from 80,000 to 100,000 annually. We reviewed directors' salaries of other state DD Councils with similar allotments to Louisiana and to determine our initial salary range. This data was compiled and shared with the National Association on Councils with Developmental Disabilities otherwise known as the NACDD. We also looked at two search firms the first company that was recommended by Sheryl Matny of NACDD for their work with various councils. And Emergent Method, a local firm here in Baton Rouge. Both firms offer similar priced competitive services and guarantee should a newly hired director need to be replaced in a certain amount of time. Based on our research we anticipate the cost of a firm will range from 40,000 to 50,000 dollars. Or more once all fees are considered. Per the states policy any services costing 50,000 dollars or more

require a bid. Just before the meeting we received a third bid from RSI Executive Search Solutions. The committee will meet again in the coming days to review all three bids and make a determination which company we will contract with to assist with this search. We hope to begin working with the firm we select as quickly as possible and start recruiting applicants. We originally hope to have two or three applicants available for the April meeting for the full council to consider. But it's likely this time frame will need to be pushed back. That is my report. Do I have any questions? Any comments? Thank you.

MICHAEL BILLINGS: At our last executive committee meeting we were working on the grievance procedures for the council and we had decided to form an ad hoc committee on that. Can we get a committee together or move on that this meeting so that we don't drag it out any further.

RANDALL BROWN: I am agreeable to that. That will be a motion today for us to form an ad hoc committee. For a grievance policy. Do we have a second?

MITCH IDDINS: I second.

RANDALL BROWN: That's right, it's from the executive committee. It doesn't need a second.

CRYSTAL WHITE: I wanted to see since it's a grievance process if there is a way we can have outside members sit on it who have experience with this kind of thing. I thought it might be a good thing to keep us focused and in the right direction.

RANDALL BROWN: We can consider that as a motion.

CRYSTAL WHITE: I thought it was in the bylaws.

MARY TARVER: What we had talked about trying to get the technical assistance from the national DD council for stuff that is already out there. If it's not then work with them to make sure we have technical assistance on trying to help us with the process so we're not starting from ground zero.

CRYSTAL WHITE: I would also like to suggest using some of our FHF directors because they are required to have a grievance process and I think it just might flow better to keep it more consistent for the public since they are used to seeing one way. Just a suggestion to keep it more fluid and more cohesive as well. I think they would bring a lot of good information to the table.

RANDALL BROWN: Thank you for the suggestion. Do I have any abstentions to the motion? Any objections to the motion? Hearing none, this motion carries.

CRYSTAL WHITE: I would like to make a motion that on that committee we allow outside parties to sit on it, outside of the council.

RANDALL BROWN: Crystal has made a motion for outside parties to be able to sit on this ad hoc committee. Does she have a second?

PHIL WILSON: Second.

BAMBI POLOTZOLA: To say allow it's already allowed in our bylaws. Maybe it should be there will be cause it's already allowed.

CRYSTAL WHITE: Thank you, yes.

RANDALL BROWN: Do I have any objections to the motion? Any abstentions to the motion? Motion carries.

LIZ GARY: Can I ask a question about that. The motion passed so the question is when we used to sit at the council meetings the chair always asked if there was anybody who wanted to sit on that committee for the council, also the public. I in the past had a lot of opportunities to sit on ad hocs. Just wondering how we will go about making sure the outside parties are given the opportunity to do the thing. Because it was in the past you volunteered and you were a part of it.

MICHAEL BILLINGS: I would like to make a motion

to open the floor for volunteers for the committee.

RANDALL BROWN: Mike has a motion for volunteers for the new ad hoc committee. Second?

KIM BASILE: Second.

RANDALL BROWN: Do I have a discussion? Any abstention to this motion? Any objections? Hearing none, this motion carries. Now we have the floor is open for volunteers for our ad hoc committee for our grievance policy.

MARY TARVER: I would like to volunteer.

MICHAEL BILLINGS: I would like to volunteer.

CRYSTAL WHITE: I would like to volunteer please.

LIZ GARY: I would like to volunteer please.

RANDALL BROWN: I also would like to volunteer.

KIM BASILE: I would like to volunteer.

JAMIE TENDALL: I would like to volunteer.

JILL HANO: I was out of the room. What is this ad hoc committee, what are we doing?

RANDALL BROWN: We will be taking a look at our grievance policy.

JILL HANO: Do we have a current grievance policy?

RANDALL BROWN: We currently use the policy of Louisiana Department of Health which is the department we are technically housed with. We don't ourselves

have a policy.

NATALIE LAROSE: I would like to volunteer.

APRIL DUNN: I would like to volunteer.

RANDALL BROWN: Any other volunteers? Thank you all for volunteering.

APRIL DUNN: We're going to change the standing agency reports. First up is The Advocacy Center report.

TORY RACA: We actually have Amitai Heller from The Advocacy Center. He is the attorney who worked on the skilled nursing case. He is waiting for his turn and he stepped out for just a moment. He is here. Here to inform everybody on the status of the skilled nursing case. He has a client meeting and has to be out of here no later than 2:30.

AMITAI HELLER: I come with what I hope to be good news for some people here. I have been asked to come speak and give updates about the class action lawsuit AG verses Gee which I am the attorney for the plaintiffs, the class. I will just go over very briefly what the allegations in the class action were about. Then I am going to talk about how it was resolved in a settlement reached between the plaintiffs and The Department of Health. Mostly because the judge

in the case has set a fairness hearing, meaning people or class members are going to be given the opportunity to object to the settlement agreement. Give the highlights of the agreement and then links and contact information for people to ask questions. I can also take questions at the end of the presentation. What the lawsuit was about was that a class of children, by children I mean people under 21 on OCDD waivers alleged that they were not receiving all the hours they were prior authorized, all the skilled nursing. Including extended home health nursing and intermittent nursing services which we define as less than three hours a day. AKA those nursing services that don't require prior authorization. And we allege that violated a series of federal laws. The settlement agreement only applies to people under 21 who receive in home nursing on OCDD waivers. Everyone else is not in that class is excluded from the settlement agreement. The class represented by myself, Ron Osponado, The Advocacy Center and National Health Law Program which is a national nonprofit reached a settlement with The Department of Health. I am going to basically talk about what the outline, what the skeleton of the settlement agreement is and what kind of relief it's

going to provide for kids and parents. The most significant thing that is going to be offered, one of the most significant things there's going to be an introduction of a crisis response team. So basically children who are not getting 90 percent of the prior authorized skilled nursing hours they should be receiving or children who are at risk of institutionalization because they are not getting those prior authorized hours are going to be eligible for something called a crisis response team. Which put certain responsibilities on The Department of Health to provide, find a way to get those hours met. Have to take reasonable steps to meet those hours. The other thing that is going to happen, a series of things that are going to happen is that, and this has already happened, introduction of some new rate modifiers through the OCDD system for specific targeted hard to meet circumstances overnights, weekends, holidays. The department is also committed to doing an overtime study which if they find there is a need for on the basis of some of the benchmarks laid out in the settlement they would seek legislative appropriation to try to get pass-through. There is going to be some additional training for support coordinators on how to utilize and

use the crisis response team. One of the other important features is The Department of Health is going to conduct and hire, retain a third party to do a rate study to make a determination what the proper rate for in home nursing will be. After that study is conducted then whatever that number is that comes out there will be legislative, seek approval from the legislature to get that new reimbursement rate put into effect. Another thing that may happen, which we're not sure if it will happen, kind of a graduated process, a bunch of benchmarks that need to be met, The Department of Health may do an additional study on whether licensing additional home health provider agencies will increase access to in home nursing. And the other thing the department has another thing the department has done they have agreed to develop and implement a plan to grow the total number of qualified individuals in the job pool for the nursing services in Louisiana. There is also some monitoring that is going to be going on where The Department of Health is going to be sending the results of their work to the plaintiffs who are going to be able to review it. Also attorneys fees as well. The next step that's going to happen. That is the basic skeleton of what this settlement agreement

offers for class members. Kind of the way, a good way to think about it is that rather than coming up with one solution giving one answer, AKA nursing rates need to be this number, we demand nursing rates be 38 dollars an hour, something of that type, this gives some flexibility to The Department of Health to figure out what is actually going on. And what is the cause of this nursing shortage we have alleged. And all the while while that is happening still guarantee a service through this crisis response team. This settlement agreement last five years and I think that's pretty much it.

CRYSTAL WHITE: Everything sounded amazing and I was so excited and then you said the settlement agreement last five years. So can you go into what happens after that five years. Are things really going to be fixed for those most critically medical fragile children. Their lives are at risk without these services and I believe that's what created all of this. I am concerned when you said five years. And now do we have to think about what we can do to help after the five years or where should I be thinking.

AMITAI HELLER: Let me address the five years question first. There is nothing after the five years

expires that would prevent anyone from bringing this lawsuit again. Not like after five years there isn't relief. What it means after five years someone would have to re litigate the issue. But yes, after the five years expired, unless the settlement is modified, which there is language possibly to do that in. The Department of Health doesn't have any more obligations under this settlement agreement. That being said, they always have an obligation to comply with federal law.

CRYSTAL WHITE: In my thinking of this is it safe for me to say we have, this is a short term thing, could be we don't know, but if we as a council for the next five years come up with a plan to ensure with legislation that this can be more permanent for this population of people. Is that a correct way of thinking?

AMITAI HELLER: Let me tell you my operating theory of the settlement. The idea behind the settlement steps will be put in place to permanently resolve this issue. We are hopeful of that after five years if you look at it there may be a new reimbursement rate, maybe additional overtime rates. There is going to a plan to create more nurses within the state. If after five years, I am hopeful after

five years we will see significant and substantial improvements. To say I can't guarantee that, of course. That is the operating theory of the settlement. It's not just about a onetime fix, thinking about what we can do systematically to create the condition to not fall back into this.

PHIL WILSON: Just sort of picking up with what Crystal was asking you. What can this body do, you said some monitoring, but the monitoring sounds like it goes to the plaintiffs. Is that closed to the plaintiffs? Is there something this body can do if things aren't progressing in a way that would suggest at the end of five years something is going to be there for these kids or people that need this service. We can be advocates pushing for that during the five year period, but we need access to reports or something. Is there something you could point us to.

AMITAI HELLER: I think I mentioned that there is going to be periods in the suit. It's a graduated process. Which legislative appropriation is going to be required. That to me is an opportunity for advocacy to make sure that whatever, if the overtime rate is found to be necessary, if the reimbursement rates rise significantly and they are looking at a larger bill

there's going to have to be done some advocacy done by this community to make sure the legislators care enough. In terms of monitoring that is the attorneys' job. You won't have access to that.

PHIL WILSON: So what do we do to ensure that we are four years from now it's not on somebody's plate to go get that information. Is it coming to us, do we request that, how do we ensure we stay in touch with that?

AMITAI HELLER: The class, our obligation is to class as the attorneys. The class is going to be touching a lot of people and their families in this room. And those people are going to have access to the attorneys. And so they will be able to reach out to us if they suspect there is things we are missing. I don't know if that answers your question.

PHIL WILSON: It sounds like the onus is on us to make sure we are requesting that information.

AMITAI HELLER: And we will give whatever information we can. There is certain things that are available and certain things that aren't by virtue the attorney client relationship. I will also add to consider who is not covered by this class action, which is adults on waivers are not covered and they are not

getting the relief of this lawsuit. If you are 22 years old on a now waiver and you are missing your nursing hours you will not be able to get regress from this settlement. In terms of advocacy.

JILL HANO: Can you repeat the class action lawsuit is between y'all and LDH?

AMITAI HELLER: Yeah. The Advocacy Center is not the plaintiff. The plaintiff is the class. But yeah, The Advocacy Center and National Health Law Program are representing all children. Sometimes they are called N Health. Are representing a class that has been authorized by the judge. We are class council. And a class is all children under 21 who receive Medicaid waivers. The other attorneys are National Health Law Program.

JILL HANO: Do you have any information available yet on the progress of this lawsuit?

AMITAI HELLER: Yeah. What I am talking about now.

JILL HANO: I am a big hard copy girl.

AMITAI HELLER: I have hard copies for you all. Also I am going to give some information to Mr. Fleming who can circulate some notices. All I am talking about today is the updates that the judge, the case Judge

Jackson in Baton Rouge in the middle district has authorized us to share with the population about the lawsuit. One other thing that is essential for people here there is fairness hearing on March 19th that is the opportunity for people to object to this lawsuit or to give comments on the documents that are being circulated. It will explain how to do that. If you have specific questions my contact information is on there. Happy to talk to any class member about it.

JILL HANO: Are you with The Advocacy Center?

AMITAI HELLER: I am. I am an attorney at The Advocacy Center.

TORY RACA: In terms of advocacy going forward if the council is satisfied how the settlement is going it is something that could be used as a model for advocating for people 22 and over. Of course it doesn't apply to that right now. But something we could look at using as a model to apply this to other people. If the council would like to.

JESSICA MICHO: Our family was one of the original plaintiffs until my son died in September and thus we were removed from the lawsuit. Of course I can't tell you that, but I just did. I think the biggest course of action is to listen to those families with medical

complexities. They may not tell you they are involved in things that are very important. And they may have access to information that y'all don't. Listening to them and heeding their advice it's really important. But also I would encourage you to revisit the older population, the 22 and older because it is our hope and expectation that our children grow up. Growing up means needing services. They still need services or they need the same services they did when they were small. It's not going to go away. I encourage you to look at adults as well.

AMITAI HELLER: Does anyone have any other questions before I leave. I am going to leave some of these notices up there at the front so you can grab one. My contact information is on there. Thank you.

APRIL DUNN: Robin for Office of Aging and Adult Services.

ROBIN WAGNER: Good afternoon. I am Robin Wagner, deputy assistant secretary. You have our quarterly report, the two pager in your folder. I am not going to read the numbers on this report which summarize the number of people that we are serving in each program. And also the number who are waiting for service or on a registry. I did want to highlight one aspect and that

is under the Medicaid home and community based services update. You will see our waiver registry/wait list numbers. There are a couple of good news items I want to share with you in regards to those numbers. First of all the adult day healthcare waiver reflects 932 people on the registry. The majority of those individuals, kind of a good news, bad news, the majority are in regions where we do not have an adult healthcare center. In terms of people who are requesting ADHC services where there is a center in their area we effectively have no waiting list. All of those people who can be offered ADHC services have been offered. If you call and request services and there is a center in your region we are able to make that offer immediately. That is the news. In regards to the community choices waiver registry you'll see the number in the registry a little over 11,000. Sounds like a horrendous number. But I can remember the past few years it was 30,000. This is a significant improvement to the registry list. And then you will see a second number there which is the wait list, which is just under 6,000 individuals. The difference between the registry and the waiting list is the registry are the people requesting community choices waiver. The wait list are those

requesting that service who are not getting another service. So what that means is over half of the people on the registry, over half of those 11,000 are getting another service. The vast majority are getting PCA services through long term personal care assistance program, LTPCS program. And for those individuals should they require more than what the LTPCS program provides we do have a mechanism to prioritize them for the community choices waiver. This is really, even though the numbers are still significant, this is a significant improvement for us that we have been able to reduce the overall registry numbers and that fewer than half of the people on the registry are actually waiting without a service. And the fact that we at this point have this smaller number of people who are waiting without a service we do hope that last legislative session we got funding for 500 additional waiver slots that helped us reduce the registry and the waiting list. And we're hoping that we will see a repeat of that this year that will allow us to continue to make progress on these numbers. I think those are the major things I wanted to cover, but I should take questions now.

MITCH IDDINS: Are there any priority for those

individuals that are on the waiting list without a current service?

ROBIN WAGNER: Yes, they are the priority. Folks who are getting an equivalent or service that does assist them in the home, such as LTPCS they will not get offers before individuals who are receiving no service at all. When we get additional waiver opportunities those go first of all to people living in nursing homes who wish to transition out. A couple other priorities for people with adult protective services and ALS. What then happens if you are one of those people who is waiting who doesn't have services in your home already we make the offer ahead to those who do have the service in home.

MITCH IDDINS: At one time I believe I recall you mentioning you're working on something similar to the SUN score that LCD is using for the NOW waiver, is that correct?

ROBIN WAGNER: No, sir. Our procedures for looking at people's eligibility for services really haven't change. When you call to request services we do a phone based screening. Then when we are able to offer you a waiver slot you are assessed using the tool we have been using for years. And if you meet

essentially what is called nursing facility level of care then you are eligible for that waiver offer. We really don't have a process in place to try to look at, don't have a needs based assessment that we use for eligibility purposes.

MITCH IDDINS: What about the individuals that are in nursing homes trying to transition. Are they getting priority? Are they like your first?

ROBIN WAGNER: They are our first priority.

MATTHEW ROVIRA: I know last legislative session the rates were restored for home and community based services and long term PCS was restored as well as community choices waiver. Unfortunately with the CCW waiver the rates were very low back in 2008 when compared to long term PCA. Whereas the community choice is much more robust, includes transportation, medication administration. Is there any signal from the administration that this may be looked at this legislative session.

ROBIN WAGNER: We received an inquiry about that recently and we're in the process at looking at what would be the budgetary impact of essentially making PAS rates the same for community choices waiver as they are within LTPCS. I am afraid a little bit late in the day

for budget request since executive budget is already in process. Doesn't mean necessarily not something that we can look at within existing budget or that we can look at in the future. But I am not sure Matt it's feasible for a request to come from our office through this late in the budget development. It is something we will be able to come up with numbers so we can say what it would take to make those rates the same. Thank you very much.

APRIL DUNN: Pat from Office of Public Health.

PATTI BAROVECHIO: Just to let y'all know I am the orange in your packet. Under the Bureau of Family Health we have many, many programs and initiatives that touch the families of children and youth with special healthcare needs and those with developmental disabilities. You can read all about our programs and projects and how many families we're reaching. One of the things I will alert you to that may not be in the report is that like the council we have a mandate from our federal partners to conduct a statewide needs assessment. And we are in the middle of doing that right now and developing a work plan that will take us from this 2021 for five years. And so that being said, we will be identifying the priorities for children and

youth with special healthcare needs and we will be seeking public feedback and comment on those priorities. May happen between the interim between now and our next quarterly meeting that I may send something and ask it to be disseminated to the council so that you can provide feedback on where we are going as far as our state priorities for children and youth with special healthcare needs. Any questions?

APRIL DUNN: Jen from Bayou Health Services, Medicaid.

JEN KATZMAN: So mine is the one with the blue ones in your folder, but it says Bureau of Health Services Financing which is our fancy name for Medicaid in the budget. If you read through the report it kind of goes over an update on the usual topics we include on permanent supportive housing, money follows the person, long term supports and services incident management system roll out, network advocacy, behavioral health, ADA. I did want to touch on self direction and electronic visit verification. For self direction we procured the contract and it went live in January. There are two vendors now Acumen and Morning Sun. They are both operational. So if you know of anyone who is interested or participates in that

program they can enroll with either of those fiscal employer agents. And also the way it works is if you want to switch between Acumen or Morning Sun it would be implemented at the beginning of a calendar quarter for tax reasons. You don't switch midmonth. You can certainly start the paperwork and do that process at any point in time. But the actual effective date of the changeover will be effective until the start of the next calendar quarter. Just want to update y'all on that. Also on electronic visit verification this is a federal requirement. It means that workers who go into the home have to check in electronically to verify they are there for the service they are providing. And applies to all personal care services under the waiver and a few other things. Kind of the big chunk. The federal requirement that had to be implemented by January 1 of 2020. Also applied to personal care services for EPSDT not a waiver service. What we call Medicaid state plan, available to anyone who has a medical necessity justification under our Medicaid benefits. That is the only piece that is still outstanding because it is a state plan service which means it is covered by our managed care organizations. We are still working through some of the specifics on

that and the data reporting required. And CMS has granted us a good faith exemption to extend the implementation of that this year. You may see that rolling in if you get PCS services through your Medicaid benefit under EPSDT. Make y'all aware of that and it's rolling out this year. The other thing I wanted to touch on, I am getting a lot of questions about it and it is quite frankly the hottest topic, is eligibility. And I know this has been this past year quite a difficult area because of our changes that we have made with the system and how that impacted our waiver and long term care recipients. I just wanted to let y'all know I am working on some tools. Some were specifically asked by Crystal so we are getting those updated and make sure we distribute those. One of the things we were asked for previously that we're finalizing right now is kind of an addendum to the flow chart that OCDD had prepared the process to get a waiver. You already had or may have seen the OCDD process to obtain a waiver or apply for a waiver. But what was missing from that was the Medicaid financial eligibility piece. Now have a page two that we're finalizing right now. It's being reviewed for any gaps or understanding by Karen, she has given us a hand to

make sure we make that make sense. And also working on, we have an existing guide, like a screen shot guide by guide for what we call our self service portal, Medicaid online system. It does have certain prompts for people who access long term care waivers. I think we can do better based on the feedback I am getting. We are going to review that again, make sure it is up to date with the latest changes and it also has a specific addendum in the back that carves out particular focus on waiver and long term care needs on that system. So I am getting a personal tutorial, I asked for that this morning from the user prospective. This is full transparency here. It's frustrating for me cause I do not actually get to see the system. I don't see it from your prospective. That is something that is frustrating for me when I am trying to help you. I am getting my own personal tutorial so I can build these resources to better help.

CRYSTAL WHITE: Thank you so much for that.

Whenever we left our meeting yesterday I was given information the waiver population was carved out of doing the eligibility online. I want to clarify that. Does our population need to do the online eligibility verification once a year?

JEN KATZMAN: Yeah, thank you for asking that. I want to be clear, the online process is available to anyone. There are multiple ways that you can complete, or perform, or conduct your Medicaid eligibility requirements and processes. You can do them in person, you can do them by paper, by phone or online. And that is for everyone. Not particular to a waiver, not particular to any group. However, given the complicated nature of the waiver population as we have discussed I have heard that it is easier usually to talk to someone or go in person. Sometimes the online can be a little tricky to navigate on your own. I appreciate y'all bringing that to my attention. I think to answer your question you are not required to use online ever.

CRYSTAL WHITE: We will have to do eligibility yearly?

JEN KATZMAN: That is a federal requirement.

CRYSTAL WHITE: Maybe develop a best practice for our population.

JEN KATZMAN: Those are the tools I am trying to get. The one we have right now is for the annual renewal, the step by step guide. We are going to carve out that waiver addendum in the back. Just to clarify,

for Medicaid services you do have to renew annually or recertify annually. What you are seeing probably is our new system is very robust. Purposely built to be a more effective eligibility tool for the Medicaid program in the sense it automates much that was manual before. It checks multiple federal and state local databases every single day. Gets updates through those interfaces every single day. Not a human person calling to ask, it's automated now. We get updated information much more frequently which generates a lot more mail to our recipients. So that is why you are seeing more mail, more asks, more questions. The foundation was driven by federal requirements we were out of compliance with. We are trying to stabilize it now. We realize it's been a very difficult first year for our members. And so this next year is 100 percent focused on stabilization and making it work the best that it can work. Instead of trying to innovate and create something new.

CRYSTAL WHITE: I want to reiterate in our last meeting the angst I have is the feedback we tend to be getting about this online portal it's not very user friendly for the waiver population. The concern with parents when we are sending all our financial

information it's requiring parents to do it would affect our children's eligibility, or even our self advocates eligibility. And as you know these services we can't have lapses in services. That's someone's health involved in that. I want to make sure we have a practice that everyone understands they do have to do the eligibility yearly. And make sure we are communicating with the waiver population. I know they are small subset, but they are an important subset.

JEN KATZMAN: What you said reminded me of a few things. Some good things coming up very shortly, things to help with that. We have just implemented this month pre populated renewal forms. The first thing I want to reiterate, and please to everyone you speak to, please make sure they keep their address information up to date with Medicaid. It usually is easiest to do it in that online portal, but if not call us. But we primarily contact you through mail. And so if you don't get that important notice you could miss something really important like an important deadline. With that said, one of things we mail is your renewal notes. It does not apply to everyone. We have a process because we have the fancy new system that if we can check all those databases and all those sources and

it can tell that you are still eligible just based on that information we can what we call streamline renew you. We can do it behind the scenes. You'll get a letter that says congratulations you are approved for Medicaid for a new period of time. You don't have to turn in anything. However, I will say that for the waiver long term care population that is typically unlikely to happen because there is things like asset verification that have to happen. You typically don't streamline. When you don't you fall into a standard renewal process. You get that letter in the mail. It says it's time for your annual renewal, please contact us one of three ways. Now with that letter you're also going to get a pre populated renewal packet form. It will show what we have on your information. I show you make this much money, these assets, you live here. I am getting more information about the steps on that form that you will say do I just sign here or turn it in here. We will have that step by step guide for you. It doesn't actually mail out for the first time until later this month is the first renewal group it will apply to. Very excited because we think it will help a lot. Don't have to start from scamp. A good first step.

MITCH IDDINS: Are only waiver recipients eligible to do self direct? LTPCS recipients do not have the option to do self direct?

ROBIN WAGNER: That is correct. We don't have a self direction option in that program.

MITCH IDDINS: Why?

ROBIN WAGNER: I think it primarily has to do with the fact that program doesn't provide support coordination. Really isn't a good mechanism for offering self direction for supporting self direction and monitoring the effectiveness and whether self direction is ensuring health and safety.

MITCH IDDINS: Is the reason there is no support coordination a budget issue? Why is there no support coordination?

ROBIN WAGNER: So support coordination is a required service in your 1915 C HCBS waivers. The LTPCS program is not a waiver program, one of those state plan services Jen was talking about where you can qualify based on medical necessity you get it. There is a large budgetary implication if we were to add support coordination to that service. It's not required in that particular service and support coordination is a bit of an awkward addition because

it's a single service program. The only thing it provides is PCA. Not a whole lot to coordinate beyond the PCA services.

LIZ GARY: I am just trying to find out, I know there was buzz around EVV having to go more restrictive with it being not just being able to go into the portal and do the signing in. Is there any word, where do we stand, what does it look like and where are we going with that?

JEN KATZMAN: I do know CMS is cracking down on us for that and will be requiring with self direction specifically we won't be able to do EVV the way we originally designed it. Unfortunately it's one of those things when you are the trailblazer in something CMS watches and sees and then gives you the guidance after you have already done it. We have to back track a little on that. I don't have the timeline on it yet, but I can get back with you. Let me circle, I know Brian and our partners at OCDD were helping us work on that. I know we have this year because we got a good faith exemption on that as well. That was the other piece. Let me find out kind of when they are planning to roll it out officially.

LIZ GARY: I have a request I am part of, I don't

know if it's still in existence, part of the self direction Medicaid group. A stakeholder group. And they recently had a call in for anyone who was in self direction so they could learn more, understand more, make sure the handbook was being followed. And there was a comment stated that because they are now doing it big with all of them they are going to probably dissolve this self direction Medicaid group. I am going to ask that not happen because there may only be eight or ten, but I think it's very important to still have, very similar to the systems transformation group, a voice for those people who are not working only for themselves but for the big groups. Hearing a lot of the information coming in. I think it's important for us to still have those groups so we can be throwing those things back and forth so it's not just a big overview, instead we still have that small workgroup. Because it was doing some good work and we were making some good suggestions and had opportunities to share information.

JULIE FOSTER HAGAN: To that point Liz, and we can take that back. My understanding was not that, was not the intention on OCD's part that one would replace the other. We had a request from several folks in self

direction, every other month provider calls for our OCDD providers and there was a request made from folks in self direction we do something similar for folks in self direction because our kind of traditional provider agencies were having access to some different things. And because our folks in self direction are employers the intent there, we had a lot of discussion do we just invite folks in self direction to our traditional provider meeting or do we do something different. The consensus was while there are some issues that are similar there are some that are different. That meeting where all folks in self direction were invited to is supposed to be similar to what we have every other month with our provider agencies. It was not the intent for one to be in lieu of the other.

LIZ GARY: I appreciate that because on the call it was stated it would probably take the place of it. I will follow up with you and let you know.

ROSLYN HYMEL: Does this also apply if you have a home setting with families, or also besides families does it also if you are living in another kind of a setting like a group home setting house parents like DSPs during it work both ways, or is it one way with the program that y'all have or is there a waiting list?

JEN KATZMAN: Are you talking about Medicaid program?

ROSLYN HYMEL: The one you was talking about.

JEN KATZMAN: Self direction is available for anyone with a waiver. So I don't think it depends on where you live. It's up to the recipient of the waiver to decide if they would like to participate in self direction verses have the provider agencies that we have available. If they have someone that they trust and would like to employ to be there worker they can opt into that self direction program.

ROSLYN HYMEL: That's what I wanted to find out. How many programs do y'all have. Is it like more than one or out of one to ten programs, or is it just basic programs all together into one?

JEN KATZMAN: I would say the way you are describing it it's just the two programs. Personal care under the waiver through the provider agency is one. And just self direction as another. As far as the population in each, actually don't know off the top. I think most go through provider agencies and our self direction program is smaller. It's growing more than it has historically. With both Office of Aging waivers and Office for Citizens with Developmental

Disabilities waivers it's around 15, 1600 people in the self direction program. But there is many more in our regular waiver access to provider services.

ROSLYN HYMEL: How many bigger could y'all really go into what you just said?

JEN KATZMAN: It's an either or situation. You are either in the program where you use a provider agency for your personal care or you're in self direction and employ your own personal care worker. In that case it doesn't, one doesn't grow, it's the same pot of people. If there is 10,000 people in the waiver 10,000 people in the waivers are still getting the same services. It could grow if they choose to switch from the provider based option to the self direction option. That is completely at their discretion. There is no limit that I am aware of.

APRIL DUNN: Dr. Phil for Human Development Center.

PHIL WILSON: I don't know Shawn I sent a power point. Our report is this other blue one, teal I guess. The Human Development Center, University Center of Excellence on Developmental Disability. We are a sister agency with The Advocacy Center and DD Council funded under the developmental disabilities act. We

have our own sort of goals and objectives. The reports that we are furnishing actually come out in relation our three over arching goals. We are organizing three different distinct initiative areas. We have early childhood, we have school age K 1,2, and then we have transition, employment and careers is their 3rd more adult oriented initiative area. You can see for all of our initiative areas our three goals are to enhance collaboration. Our mission is not to provide direct services, although we do sometimes do that as models, or for research purposes, or sometimes simply to provide a direct service that is not available in the state or in the surrounding area. To increase access to quality services, that is sort of something that we do those models and so forth. And then promote use of evidence based practice. A lot of what we do is training and teaching both at the pre-service university level, but also a lot of technical assistance, mentoring, coaching, that sort of approach. Having said that, it's all in here. I am just going to give you a couple examples that each of our initiative areas have been doing over the last quarter. Our early childhood program we receive a small contract grant from the Developmental Disabilities Council to do some

professional development in childcare. As those of you who have children or who are siblings or neighbors or friends who have kids, little kids that have disabilities are probably well aware childcare is not at this point a universal right for people to have. And unfortunately just like it used to be for school aged kids guess what, lots of childcare agencies and organizations will not serve children who have disabilities. They are not required to. We try to demystify for them and give them strategies and techniques in order for them to better serve, and not to be afraid of serving children and families that have disabilities. That funding from a Developmental Disabilities Council is very appreciated and the work has already begun. I think we are going to see some great results. And we can talk about it at a future meeting. At the K12 level Dr. Norman, who used to be part of the council here, recently received an interdisciplinary training grant to work with related service staff. So speech therapists, PTs, OTs, music therapy, whatever audiologist, and so on and so forth, and teachers so they can all kind of learn together about how working in an interdisciplinary or trans-disciplinary fashion they can better serve children and

families in school settings. At the transition and employment and career level we continue to work closely with LRS and Workforce to look at different options for supporting kids who have disabilities to transition successfully from high school to career paths that hopefully will afford them greater self determination, and agency, and control of their lives. And that's what we are all about. One of our programs, I am just going to show you a brief video here in a second. One of our programs. Is that the clicker. One of our programs we are very, very proud of Julie Riley has been the director of our LASARD program which is a statewide training and technical assistance coaching and mentoring program for schools that serve kids on the autism spectrum and also other significant disabilities. Works school wide, not with individual children, not with individual classrooms. But at a school wide basis, sometimes a district wide basis to try to promote full inclusion, meaningful participation in schools. I am going to show you, read a little note Julie wrote for me to read and then show you a couple 10 second videos and then I am done. LASARD partnered with the KIP schools in New Orleans, a network of charter schools, and worked intensively at Central City

Academy. The facilitator who worked there, and a network of teachers and other related service and administrators, and families who are part of the KIP network analyzed, and observed, and documented data and reviews and observations determined that social interaction was one of the big areas of need in their school. The children they were serving who had autism and other significant disabilities just they had them in classroom, had them going to lunch and going to play with the other kids, and all those other great things, but still weren't socially interacting. Julie and her team worked with the teachers there and came up with some things around peer mediated instruction. So what I am going to do, so I will kind of cut this short a little bit and skip down to something that one of the central city team members had to say about this program. Our LASARD facilitator helped us to design a peer support program that made such an impact on our students. This particular student you are going to see went from being completely unresponsive with peers to holding full conversations with peers. I believe a junior high, by the way. The peer supports felt empowered, the other peers felt empowered to help one of their own feel supported and cared for and loved.

An amazing experience for all of us and we're grateful for the LASARD team for everything they did. Having said that, could you kind of click us. This is the young man on the right. We won't say who is who, one of them has a disability. They are going through a process of learning how to have conversations. This is what they came up as a way to guide this young man to give him prompts and queues about how to carry on a conversation. This young man had been going to the school for a couple years and no one ever saw him initiate or have an independent conversation with a peer. If you can click on that link it should take us straight to the video. In the interest of time and fairness of everyone else we can just watch it. We have another one but I am not going to show it to you because of time. I just think sometimes seeing what you are supporting to have happen, or in this particular case The Department of Ed supports this. A lot of times you guys support this type of training. It makes a difference in the lives of kids and families. When family members find out their son or daughter just had a conversation with one of their peers and go in and see it, it makes a difference. Any questions or comments, concerns.

HYACINTH MCKEE: I was wondering about the post secondary apprenticeship for you. So awesome. We have seen this on the agenda several times before. Noticing it's only occurring in Orleans and Jefferson. Hoping maybe a goal at some point to expand to other regions and wondering what we can do as a DD Council to help that vision come forth. This is excellent work that is happening with these kids in Orleans and Jefferson.

PHIL WILSON: Thank you very much. It's always a challenge for us being down in the boot, or the toes of the boot to get out to the other parts of the state. 90 percent of what it cost us to do something is to have staff. If you are located in New Orleans and trying to do an intensive program in Shreveport that becomes a challenge. We recognize it's a fair criticism of what we do. We have some colleagues in Shreveport and other places in the state and sometimes we figure out to replicate things. A lot of times it's a matter of we just can't figure out the resources. We are actively thinking about how do we take this to scale. And basically there is probably not any way to do that without a very large grant or buy in from, even then a school district or somebody that wants to pay for staff to go up and replicate it. We do want to do

that. Believe me. And we actually are submitting a grant in two weeks to try to document what the components of this project are so we can create a tool kit so we can give it to other school districts and other states as well. Thank you for your kind words. I will pass that on to the people that do all the real work.

ROSLYN HYMEL: For these grants that you was just mentioning do they have like figures into the grants that you was mentioning in that? Meaning a number like 100 into 156 dollars or.

PHIL WILSON: Typically grants come with a certain budget.

ROSLYN HYMEL: Talking about dollar signs. Because the organization that I am in, Magnolia Community Services, we do that, we are trying to look for grants as well. That's why I am trying to look for like figures, dollars.

PHIL WILSON: You look around the table here most of these people are looking for the same thing. It's part of what we have to figure out to make anything happen.

APRIL DUNN: Julie for Office for Citizens with Developmental Disabilities.

JULIE FOSTER HAGAN: My report is the tan color report. We usually have longest. Not going to read mine. I will touch on a couple high points and follow up from previous meetings and then happy to answer any questions. I was asked to give an update at this meeting from last meeting on where we were with art and music therapy in our children's choice waiver. We did, we were thinking we would not have to do an amendment that we sent to CMS, but we did. That has already been out for public comment. This update is under children's choice on page two. It went out for public comment October to November. And then we have now submitted it. So we are just waiting on final approval. And what we did just had to do some subspecialties. We have already talked with DSC and they have prepared enrollment packets. And so if we have folks that are interested in providing that service we are going ahead and getting the enrollment packets out. If you know folks that are interested they can contact DSC and get the enrollment packet. Also something called a lift, which allows once they are enrolled to be able to bill. So working on that. While we still await CMS approval we don't anticipate there being a lot of questions. Trying to make it

where we are ready to roll as soon as we get that CMS approval. Questions about that?

CRYSTAL WHITE: I see we have linkages and certifications and I am really starting to learn that once this waiver offer goes out from the time you are offered from the time someone is receiving services, including Medicaid or any kind of self direction, PCA services, the timeline is taking over a year. And I am also learning what is happening as that timeline keeps growing and growing longer that they are not even getting statements of approvals yet. The support coordinator agencies are having to do these once a month checks and still checking on the status trying to get them in for their services. There is no statement of approval. And during that time they are not being paid for this whole year. That is becoming a bigger and bigger issue as these timelines are growing longer. And also once the people do get their statement of approval we're kind of retroing (sic) it back some. But I am also learning if they retro it back out of the quarter the support coordination agencies are getting dinged like they didn't go do their home visits. They didn't cause they didn't have a statement of approval. If you retroactive back to a previous quarter. It's

becoming an issue as our timelines keep stretching out longer and longer there are more things happening that are putting burdens on people who don't have the resources to be burdened anymore. I think we need to figure out why our process is taking longer to receive services once the waiver offer goes out. And where those holes are happening so we can get back to that sixth months. Always been told six to nine months. Last year when I received mine, or in 2018 it took about that time. And now we are getting over a year. We just have to figure out where there is holes in that process because there is not enough resources in support coordination to continue to move to a longer timeline.

JULIE FOSTER HAGAN: A couple things in response. Our office jointly with Office of Aging and Adult Services engaged in a lean six signal project where we actually mapped out from the time a person gets a waiver offer from the time they began receiving services. And then, I can't speak super intelligently to this, but looked at where the bottle necks happened, look at where we can make efficiencies. We have made recommendations we are working to implement. We have looked at that. I do want to clarify, someone wouldn't

get a waiver offer until they had a statement of approvable. Not quite sure I am following that because once they go through eligibility then they get a statement of approval. That statement of approval is what triggers us to then send somebody out to do a SUN assessment. Depending on where that SUN assessment is then triggers the waiver offer being submitted. Wondering if you mean the plan of care.

CRYSTAL WHITE: Yeah. So sorry.

JULIE FOSTER HAGAN: And so the other piece we have had our support coordination agency ask us before about being able to start being paid at the point the waiver offer is made. There is some different federal regulations and guidelines that we have looked at lots of different times in terms of what we can do and there is some limitations about what we can do there. But it is something that we often regularly look at in terms of how we can make sure that we are processing that quicker. We do, and I am not trying to throw our Medicaid friends under the bus, but we did see an increase as well once we had the Lameds implemented. Which we are also working to address those issues. So I am happy, I can kind of share with you guys maybe at the next meeting, or if we want to do an ad hoc or

something, I can share with you what that work process looked like. I can share with you guys where we solve the bottom necks. We can do an update maybe at the committee next time. Plus I should have some data by that next meeting because we did some baseline data in terms of pulling and looking at the length of time. And we do have something we call an aging report that we look regularly people 30 days post waiver 60, 90 days. We then try to work from our central office. Looking at pre, some of the things we put in place in post data. Which I should have by the next meeting that I can share as well in terms of looking at did any of our efficiencies work.

CRYSTAL WHITE: I know you are doing electronically now with the reporting from support coordination, plans of care, so maybe if there's some type of formula that can be built in whenever we are post dating some of these approvals, back dating them, and if happens to trigger a different quarter. So that way you guys would know they couldn't have gone and done their monthly visit. And that's not their fault, they didn't have the approval. But if it's happening in the same quarter I am being told they can still get that first visit in and meet that measure they are

being measured from. I want to make sure we are giving everybody fair shots on what is going on the back and forth of everything. They are trying their best to work through these things.

JILL HANO: You say you need the statement, I have two questions, you said you need the statement of approval in order for people to get the waiver services.

JULIE FOSTER HAGAN: Correct.

JILL HANO: But you gave us like a flow chart of how the process works. Can we get that again.

JULIE FOSTER HAGAN: Sure. I can. When Jen gave her update what we have been doing is we took that flow chart and we added, adding a second page to it that helps also in the same sort of a format, walk through what needs to happen on the Medicaid eligibility side. Hoping those two will help compliment each other. As soon as we have approval on that we're going to make sure we get it out and be probably, I know on the OCDD web page, probably the Medicaid web page as well. Make sure we publish it. Also send it to the DD Council. Before we send it out we usually try to get some family participant feedback so we make sure it's clear. That's what we are in the process of getting that

feedback now.

ROSLYN HYMEL: Reading on here and it was saying something like, the word I want to use like a floor mat y'all need for information. I am reading from page two on the very top. Is that going to really go any higher than that or is it going to be centers.

JULIE FOSTER HAGAN: So that number is the total number of screenings that we have done using our screening of urgency of need. Yes, that number is absolutely going to go up. We continue to do screenings for anyone who becomes newly eligible for OCDD services. Also re-screenings for people who had a lower score on a routine basis. Also do re-screenings regularly for people who call and say my situation has changed and I need to have a rescreening. For people who do live in group homes or community homes if they maybe weren't on the registry before they can call and ask to be screened so they can get a waiver offer to help them move out of that group home if that is the case. That number yes will continue to go up as we continue to conduct more screenings through the years.

ROSLYN HYMEL: I really want to see how it's going to go from here to going upward. See the process of how it's going to really grow. How many people or how

many families are going to really do it. Broaden their minds.

JULIE FOSTER HAGAN: We do continue to have more and more. We're seeing our numbers grow substantially in terms of people coming to OCDD to seek services. About two years ago on average across the state we had about 100 new people per month that were becoming eligible. Since we have changed our priority system 150, 160 statewide becoming eligible. I think more people know those services are out there. More people are seeking services. Because now we don't just say congratulations, you are eligible and you can get on this list and wait for 13 years to get anything. But we do things differently. I think more people are coming. And seeing more and more children. Coming in at the younger ages to be able to determine eligibility for services.

ROSLYN HYMEL: What is the ages is it like 13?

JULIE FOSTER HAGAN: Depending on the program there is different programs. It can start at birth and go to death. Different age limits for different programs within what we have. But we serve people with developmental disabilities from birth to death.

ROSLYN HYMEL: Is it like in different schools or

different parishes or different kind of states where they will learn?

JULIE FOSTER HAGAN: We do have some engagement with the school system. The Department of Education is separate from us as The Department of Health.

TARA SMITH: DSC you said that's where the enrollment packages are for providers?

JULIE FOSTER HAGAN: They need to contact DSC to get that enrollment packet. They then submit it back in.

TARA SMITH: Where is that contact information?

JEN KATZMAN: So it's probably on lamedicaid.com but I can get you the exact. Like you need the link to the enrollment packet.

TARA SMITH: The lift thing is that secondary?

JULIE FOSTER HAGAN: The enrollment packet is something they do. We do something called a lift to get it into the system. The issue was you had to have OT, PT or speech segment so the lift will change to remove that requirement. Sort of an internal process. And I guess my point being we're trying to make sure we have all of that done so that as soon as we have CMS, a lot of times we get CMS approval and then you have a month or two gap before we can implement. We're trying

to get everything ready because we are not anticipating a lot of change. As soon as we have approval we can start having that service available through those therapists.

TARA SMITH: Do we have an ETA on approval?

JULIE FOSTER HAGAN: They start a clock, a 90 day clock. We submitted it in December. If they have questions then they can, quote unquote, take it off the clock. They have sent us informal questions which means we are still on the clock. We would anticipate within 90 days.

TARA SMITH: The public comments, I missed that and the music therapists that come previously, they didn't see it either. Is that something that is going to affect CMS approval or is that just general public comment. I am afraid if I didn't see it and they didn't I wonder how much public comment came in and do you need it to get the ball across the line.

JULIE FOSTER HAGAN: Before we submit any waiver amendment at all we have to put it out for public comment. And so no, usually public comment is usually negative, not positive. So we don't often have letters of support, more or less if we have concerns. Sometimes when we put things out, we have done this

several times, put our waivers out for public comment and highlight the changes that might be significant and we get public comment. And then we might take that public comment and go change something in our waiver application. When we change it we then have to go back out again. When we try to look at our timeframes for waiver approvals we always try to factor in and public comment has to be 30 days. No, we don't anticipate there being any concerns. We just ask for clarification whether it did or didn't require an waiver amendment. Hoping we could do it as a technical amendment, which didn't require that whole process. But we weren't, so we tried to do it as quickly as we could.

TARA SMITH: Is there anything parents need to be doing at this time or in a holding pattern until approval comes through?

JULIE FOSTER HAGAN: Probably just in a holding pattern. And then we can work to figure out how to best make sure we communicate that out so that everybody can be aware once it's available.

TARA SMITH: If they come back and y'all have questions or you need contacts at Louisiana, the group that provides music therapists I am happy to facilitate

that discussion.

JULIE FOSTER HAGAN: May be helpful to reach out once we have the approval. How do we make sure this is communicated in a way folks are aware.

JILL HANO: What is your website? Also for Medicaid too.

JULIE FOSTER HAGAN: We can make sure that we send the link if that is helpful. Probably be easier for us to send that by email through a link.

JEN KATZMAN: We have some easy ones. Healthy.la.gov. Our main page if you want information about Medicaid and eligibility. If you need to go into the online system for eligibility that Crystal was talking about it's mymedicaid.la.gov. Provider resources typically is lamedicaid.com. We have short things. If you start getting into the weeds.

JULIE FOSTER HAGAN: If you Google Louisiana Office for Citizens with Developmental Disabilities. We can make sure we have those links out. I think this was mentioned too in Shawn's report we have had some cyber issues following a cyber event that has impacted access to some of that information. Our OCDD website is back up and running.

BRANDON: I'm brand new so this is all amazing. I

think this is what you are talking about trying to make sure people have access to horseback riding, music therapy, art therapy without having to go to OT PTST. Personally my little sister never experienced any of that stuff. I appreciate the efforts trying to make it easier. Are y'all's vision to get these services out to everybody who wants them? That is ultimately the vision.

JULIE FOSTER HAGAN: For us it's in our children's choices waiver.

BRANDON: I love those ideas. I am a new provider. Having clients, patients I am taking care of people like my sister. However, there is nothing for them to do. We are in region three, nothing there. Just a lot of land, a lot of levies. My team is really interested in the horseback riding thing. I want to clarify something, is it a possibility providers that are not into horses partner with someone, call them bomb proof horses, anybody can ride them. I believe in the therapy. Is that what y'all are wanting to do or power more people to have horses. I don't really see that happening, people that own horses.

JULIE FOSTER HAGAN: In order to be able to bill for these services you still have to be an enrolled

Medicaid provider. For those services before what was brought to our attention folks who are art therapists or music therapists, even though art therapy and music in our children's choice package as a service they weren't able to do that because it was originally set up that only occupational, physical and speech therapists could do those services. What we are doing is opening it up to art therapists and music therapists to be able to then provide those services if it's something the child needs and then bill Medicaid for those services. No, just anybody who had a horse or different things like that, no you would still have to go through an enrolled Medicaid provider to be able to bill for the services.

BRANDON: If I can find someone that wants to partner now it's possible for them.

JULIE FOSTER HAGAN: They will still have to have some credentials.

BRANDON: Is the vision tolerated where I can partner up. Right now I am with DSC trying to get a Medicaid provider number. If there is more services I can put under our LLC to serve the community.

JULIE FOSTER HAGAN: Through the personal care attendant. No, you will still have to be a licensed

clinician to be able to bill for those services.

BRANDON: Any plans to try to get more providers?

JULIE FOSTER HAGAN: We had families who came to us and said their child would benefit from art therapy or music therapy and even though it had been added as a service in children's choice they couldn't access it because the art therapists and music therapists weren't able to bill. That is our first step. Always open to thoughts and suggestions and concerns if there is needs in the community that we need to do, within our federal guidelines, we're always open to continuing to improve our services.

BRANDON: Just trying to expand the list of the things I can offer the community. This is a great step. There is people excited about this, but they don't know where to start.

JILL HANO: Do you have a date this amendment was amended to CMS?

JULIE FOSTER HAGAN: I don't. But we typically do it, very short turn around. I imagine we did it first week of December. I can verify that.

APRIL DUNN: Kristi Jo from The Department of Education.

KRISTI JO PRESTON: Good afternoon. I want to

update you on three things that are happening in the department or happened recently. The special school district has launched a training event in October that convened about 140 educators from across the state for a day of professional development focused on curriculum accessibility, supporting students with low incidence disabilities including blindness, deafness, autism, as well as limited communication access. In the report, which is on this pinkish paper, a link to the press release. The week after next we will be holding our annual jump start convention. This year is called jump start 2.0 modern pathways to a prosperous future. January 28th at the Raising Canes River Center. The focus of that convention is on the latest trends and career and technical information and taking a deep dive into the new streamline jump start 2.0 pathways that will be considered for adoption by our BESE board. Third thing is that the dates for the teacher leader summit for 2020 have been announced. The teacher leader summit, which brings together over 6,000 educators from across the state, is the largest event the department host each year will take place May 27 and May 29 at the convention center in New Orleans. Registration will occur in three phases. Early bird

registration is occurring now. Regular registration and online registration. If any of you are involved in school systems a change this year is that school systems will not receive a certain number of designated spots or an allotment of spots. First come, first serve basis. If you are familiar with that process be aware of that change there.

MARY TARVER: I wondered in the leader summit were there topics that would be for children that have developmental disabilities? Is there any a track for that how would that be part of the summit?

KRISTI JO PRESTON: The focus here is on educators, traditionally. This year actually expanding, also special education directors and teachers are typically involved. This year we have a number of special education specific offerings focused on specific needs of students with disabilities, including developmental disabilities. Aligned to our vendor guide including communication, functional skills, executive functioning, sensory environment and I know I am forgetting one. We are bringing vendors in who can provide sessions on each of those specifically. And I believe our partners at Lasard are going to be involved as well. And then we are also looking to,

although still firming up presenters, do a daylong session focused on evaluation and reevaluation for service for students with disabilities targeting pupil appraisal personnel. Hearing a lot from the field is having more support from the department and professional development in that space. Trying to address that this year. All of that is sort of new and in addition to the suite of academic focus, including special education teachers, focused on deep dives into academic content, accessibility. And we are really thoughtful and intentional about incorporating aspects of things like ODL, differentiation, scaffolding, reaching diverse learners through that process and continuing to build that up this year and expand that.

HYACINTH MCKEE: You mentioned the jump start. What is the time for that?

KRISTI JO PRESTON: It is all day. I don't know the start a time. We have a press release about it on our website that has the registration link and additional information.

HYACINTH MCKEE: My second question about the teacher leader summit, are ancillary and support staff involved in this teacher leader summit? In particular individuals trained and working with behavior

strategies and techniques that teachers interface with involved in this teacher leader summit?

KRISTI JO PRESTON: A great question. It is open to any professionals in the school system. Absolutely. That is at the discretion of the school system. But we try to have sessions, I think you mentioned behavior specifically, always try to have sessions targeting school, behavior discipline supports, early intervention as well there so that folks are getting the support in that area as well.

HYACINTH MCKEE: Can individuals that are not hired by a school district also attend? Maybe family members, parents, advocates, just asking. That may not be.

KRISTI JO PRESTON: That is a great question. I am going to have to follow up on that and get back to you. I was thinking as I was coming up that might be a question. I am not certain.

JILL HANO: What did you say is going to include training towards SPED teachers the summit?

KRISTI JO PRESTON: Teacher leader summit definitely. And also jump start 2.0 convention.

APRIL DUNN: Bambi for The Governor's Office of Disability Affairs.

BAMBI POLOTZOLA: I have a 45 minute presentation. You don't have a report and since I can only use this excuse once, I had surgery and I don't have it. Just a few things I want to let y'all know about. Our Governor's Advisory Council on Disability Affairs we're going to redo our executive order and reappoint a membership so in our latest newsletter there's a link for people to be able to apply. And so I encourage you to apply or to get other people to apply. One of the things that we are going to really focus on doing this term is around housing and we have a housing committee through GACDA, which Sharon Hennessey with People First she is our chair person. Also assigned a staff person to staff that, to move that along within our office. And so I am glad the council is also going to be focusing on housing so maybe we can move that forward over the next few years. In regards to our initiative on employment, for the state as a model employer we are moving forward with that and continuing with that. We have our task force. There are a few openings on that task force. It's primarily people who are HR at state agencies and some of our agencies that provide services for people with disabilities. So like OCDD or LRS are part of that. A couple spots. If anyone is like

really interested in that and would be interested in appointments for that task force we can see what is available. We received a technical assistance grant again for the third time from the US Office of Disability Employment Policy. We will be getting 200 hours of technical assistance. Hundred hours to state as model employer initiative. And the other 100 hours I think Melissa might talk about that with OBH and LRS, some partnership work they are doing. Tomorrow morning at 9:30 I don't know how long it will last, have the GACDA legislative committee will be meeting in the press room and the capitol on the fourth floor. Anyone can attend. If you have legislative agenda items if you would like the committee to consider. The governor policy staff there to hear out what are some of the disability related issues that people or organizations want to push forward. You are all welcome to attend. Open to anyone. We still send out our monthly newsletter. And so try to put as much information there as possible. If you have information you would like for us to include please send it to us. Over the past couple months have a feature article like someone sharing a story about themselves. If you have anything that you want to submit that you want to be included in

our newsletter highlighting a person with a disability or something that is going on let us know so we will include that. And I think that's it. Any questions for me.

APRIL DUNN: Melissa for Louisiana Rehabilitation Services.

MELISSA BAYHAM: Good afternoon. Just to kind of piggy back first on the grant that Bambi was talking about from The Office of Disability Employment Policy. We had a previous grant last year where LRS and The Office of Behavioral Health worked on a memorandum of understanding to increase and approve the services for individuals with serious mental illness. Their employment services. So that MOU is in the works, it's with legal. So that should be in place soon. But this particular grant will help us to continue that work and implement the work we talk about in the memorandum of understanding. As far as our order of selection right now we still continue to have one through four groups open. Order of selection group five closed. However, we don't have a waiting list. As individuals are put on the waiting list we typically within that quarter usually our funding has been such we can take those individuals off and provide them services. Just some

staff changes, we had five retirements this month. Lots of changes. Lots of vacancies. Lots of vacancies on the civil service website. Also our regional manager from the Alexandria office is one of the retirements, Christy McGraw. So Karen Barrett who was the regional manager in Lake Charles, but previously a long term district supervisor in Alexandria, we have reassigned her to Alexandria. We will soon have a vacancy for the regional manager in the Lake Charles office. One other update I wanted to give y'all, some exciting news, this fall LRS will have our first project search site. For individuals who don't know what project search is, basically a program where a school district, a provider and employer team up together to provide internships and employment services for individuals with developmental disabilities. And our project search site is at Dow in Plaquemine. Have six interns there next fall. The school district will provide an individual. A provider who will provide services to these individuals at Dow Chemical. Do y'all have any questions?

HYACINTH MCKEE: Is it only, what parish what school districts?

MELISSA BAYHAM: Iberville Parish. Hopefully,

project search is in most states. We're one of the last ones to have a project search site. Hopefully over time maybe we can increase that.

MITCH IDDINS: Where did you say the job opportunities for LRS would be listed?

MELISSA BAYHAM: On the Louisiana civil service website. We have lots of vacancies. Counselor, in Lafayette a rehabilitation employment development specialist, which is like a job developer. That's kind of a unique job opportunity in Lafayette. I know we do have some things in Shreveport definitely.

ROSLYN HYMEL: Through y'all, and yes I am proud to say I got a job through y'all, LRS. And I am not saying I am not because I am. If it wasn't for LRS I would never have Cafe Du Mond to be working. Also, again I have to work up to getting another day or two days on my schedule to get there. With y'all with the program y'all have I wouldn't even be here today.

MELISSA BAYHAM: Anything else? Thank you.

APRIL DUNN: Michelle Governor Office Elderly Affairs.

MICHELL GUILLORY: Good afternoon. I will be very brief. I just wanted to say our report is the yellow sheet, which is my favorite color. I do have one

announcement. Our Executive Director Karen Rider, who served on this board a few years back, is retiring. She has been at the helm for 20 plus years. So we will have some staffing changes as well. Also the Louisiana Executive Board on Aging's annual report has been approved and it is published on our website. It has information about our services, the funding service units. It has definition of the services. If you would like to go and take a look it's on our website. Numbers of service units are predominately for the last quarter. Some for the last fiscal year because that is how they are captured. If you have any question please reach out. If you have anyone that needs services I am available for that as well. Any questions?

APRIL DUNN: Halie, do we have any public comment? All right, our announcements. Our next council meeting will be April.

CRYSTAL WHITE: Before we adjourn Tara had mentioned it's your last council meeting. I just want to say thank you so much for your service. It's been a joy and a pleasure to learn next to you and I hope that we can continue to advocate together even though you are rolling off. And I appreciate your service in the community.

APRIL DUNN: Our next council meeting will be April 15th and 16th. We will be at the Marriott hotel in Baton Rouge. And don't forget, please complete your evaluation forms. Do I have a motion to adjourn? Mitch and Roslyn. We're adjourned.