

Five Year Planning Committee
7/2/20

SHAWM FLEMING: Randall, I created a poll for the committee members so y'all could basically just rank, if you want, to put the rankings on the areas of emphasis and it should tally them up. I don't know how it works. I don't know if I release it now and people come later if it would still be available. Just not sure how it works.

RANDALL BROWN: Release it to our emails?

SHAWM FLEMING: No. It's going to be inside zoom. You have a quorum.

RANDALL BROWN: Thank you, sir. Good afternoon everyone. I guess we will go ahead and begin. Let's do a quick roll call. And so, when I call your name please say present. And show us your face on your camera if you can.

TAMESHA: I'm here.

RANDALL BROWN: Kim.

KIM BASILE: Hi guys. I'm here.

RANDALL BROWN: Steven.

STEVEN NGUYEN: Present.

RANDALL BROWN: Lillian.

LILLIAN DEJEAN: Present.

RANDALL BROWN: Brenda. Okay, Bambi.

BAMBI POLOTZOLA: Here.

RANDALL BROWN: Is there anyone else I am missing? Michelle. Is Michelle here today?

SHAWM FLEMING: Michelle was here and now I don't see her. And Brenda is showing up, but she doesn't have her camera or microphone on.

RANDALL BROWN: Okay. We will give her a minute. How about Mary. Is she present today?

SHAWM FLEMING: I do not see Mary.

RANDALL BROWN: Thank you all for being here this afternoon. I would like to take the time, if that's all our members, and I believe it is, I would like to take the time to ask our guests to

introduce themselves if they would like.

JEFF ARCENEUX: Hi everybody. I'm Jeff Arceneaux. I'm here.

RANDALL BROWN: Good afternoon Jeff. Thank you.

KATHLEEN C: Can y'all hear me? This is Kathleen.

RANDALL BROWN: Hi Kathleen.

SUSAN R: Susan R, Families Helping Families Southwest Louisiana.

RANDALL BROWN: Hi. Good afternoon to you.

RANDALL BROWN: Karen.

KAREN: Hello.

RANDALL BROWN: Okay. Do we have anyone else that's joined us Shawn from the committee? Brenda or Michelle?

SHAWM FLEMING: Brenda is showing up, but her video and audio are not on.

RANDALL BROWN: I know she plans on being present today. I don't know if she is having difficulty or what. I do know she was planning to be present today. All right. Well, we will move forward with today's business and hopefully Brenda can join us as we begin. We're going to talk today about the continued talk about the overview of the planning process and the public forum input we have received. So, Shawn, would you like to get us started.

SHAWM FLEMING: Sure. So, we sent y'all that document and I am going to launch a poll. Which is basically allowing y'all to rank areas of emphasis and give you Randall information on where your committee members feel which is most important. I just launched that. It has each areas of emphasis and indicates which is more important, important, or less important.

RANDALL BROWN: That would be nine areas, correct?

SHAWM FLEMING: Yes, sir.

RANDALL BROWN: Is everyone doing that poll now?

Allow some time for us to complete the poll. Has everyone had an opportunity to complete your poll?

SHAWM FLEMING: One problem is we have 11 responses

and you don't have that many people on the committee. Trying to figure out now who has responded. I can't tell. Let me see. Maybe I can see it.

RANDALL BROWN: Kathy was telling us the poll was public and it popped up for everyone.

BAMBI POLOTZOLA: I was just raising my hand. I did the poll.

RANDALL BROWN: Thank you.

SHAWM FLEMING: Just so you know you have both committee members and public responses in the poll. As long as y'all are aware of that.

RANDALL BROWN: Okay. Thank you, sir. Has everyone had an opportunity to complete the poll? Let me ask it a different way, is anyone still working on the poll? Okay. I presume everyone had an opportunity to take it or complete it. Do we have any comments from the public?

COURTNEY RYLAND: Mr. Jeff has a comment. He said I did not take it. If you are going to invite the public, I would like the opportunity.

RANDALL BROWN: It was publicly shared?

SHAWM FLEMING: You have a mix of guests and committee member responses already. Since that has already been opened.

RANDALL BROWN: Trying to make sure Jeff has his poll.

SHAWM FLEMING: I will give y'all a summary score of each one shortly. Jeff, have you finished?

JEFF ARCENEUX: Shawn, I never did see it come up again.

SHAWM FLEMING: I don't know how it works Jeff, just being honest with you. It shows it's still active. Unfortunately, I can't really give you technical assistance.

JEFF ARCENEUX: I was understanding it was council members only. That's okay. Thanks.

RANDALL BROWN: We are glad you are here Jeff and you are certainly welcome to give your feedback throughout the meeting today when you feel the

need, sir. Shawn, are you ready to give us the summary?

SHAWM FLEMING: One second please. Just update these numbers.

RANDALL BROWN: Whenever you're ready you have the floor, sir.

SHAWM FLEMING: Sorry. It's not copying as it should. I apologize for this delay. Well, I am just going to show y'all. Show y'all a different screen. So, I was trying to do a score, but you have different numbers of people responding to each one. This is not going to give you a good indication, so I was going to delete that column. You have different numbers of people who responded to each item which will create unevenness in viewing the responses. For example, on some responses you had 13, some responses you had 14 people.

RANDALL BROWN: I think Bambi is indicating in the chat we could do an average of the scores, maybe.

SHAWM FLEMING: I will try that. The problem with even doing an average say in some of these, like in health, 14 people responded. So, the average is going to pull towards one way or the other. I think what I would do, if I was y'all, just look at the big ones. Healthcare and community supports and employment each have ten or 11 people who rated it as more important. And so those kind of pull to the top if you will. Recreation the only one with nobody. Indicated it was more important. This one is kind of pulling towards this way. Education is slightly higher. Advocacy and leadership. But nobody indicated less important. Whereas advocacy leadership, development quality assurance you have two people indicating it was less important. You have four tiers, to me, is the way I would view it. Without much separation between I guess, three tiers. These are the same. The childcare and recreation are kind of the lowest tiers. That's the way I

view it. If I were to rank order. Does that make sense to everyone?

RANDALL BROWN: I understand it. Do we have any comments from the committee?

BAMBI POLOTZOLA: I agree with the way Shawn. Divided into those three groups. I think a good way to look at it.

SHAWN FLEMING: So, your task is to select which areas of emphasis y'all would like the council to focus on, the five-year plan. You have the option of selecting all. But this gives you an idea of kind of where people see in terms of importance.

RANDALL BROWN: I believe Liz has a comment. I couldn't quite read it all.

COURTNEY RYLAND: Liz's comment is I would imagine it is all based on where people are in their stage of life as to what is the most or least important.

BAMBI POLOTZOLA: I kind of thought that same thing. I looked at the panel, probably most of us don't need childcare. If we have children with disabilities, we probably most of us have waivers. And so, I agree what Liz is saying is accurate. I think we need to maybe look back at what was the response to that survey. Although, I feel like the survey is also skewed based on race and gender possibly, but might give us insight before we completely take it out of the plan. If that is what constituents are saying they need. And also, we have to remember people who need childcare are usually younger and they are just not connected to our kind of system and the council or organizations to get involved and giving their input. We also need to consider that.

RANDALL BROWN: Thank you. I actually agree with you and Liz about it.

COURTNEY RYLAND: You have two people with their hands raised.

RANDALL BROWN: Who?

COURTNEY RYLAND: Ms. Brenda and Ms. Carhonda.

BRENDA COSSE: Good afternoon. We will be as a

committee we will be making recommendations to the full council, correct?

RANDALL BROWN: Yes.

BRENDA COSSE: Okay. Thank you. So, they have the opportunity to give their input and to vote as well?

RANDALL BROWN: Yes. These will come out as our suggestion to the council for the five-year plan. I believe at the October meeting. We still have quite a ways to go before this is final. Just trying to figure out today what our priorities and goals will be to recommend.

CARHONDA: Thank y'all for allowing me the opportunity to speak. I think to response of what Bambi and Liz said, with childcare you have to understand that a lot of our children with disabilities do not receive the waiver until they are like three years of age or older. So, you have children from birth to three that do not actually get a waiver and they do not have access to childcare. As one of the guidelines we have in regard to five-year plan address racial and social economically disparities. And one of the disparities they cannot get their children into the pediatric healthcare. Limited on the pediatric healthcare, especially in rural areas. Another one of the points and population highly recommended according to the DD act for us to address. So, if we are going to address everything that is major as far as for our childcare or for anything, any of the areas of emphasis. We also have to take into consideration with the survey information that we actually have provided on yesterday that a lot of those that are in those minority population were not highly represented. And the reason they may be highly unrepresented is because they may have had limited access during this covid and pre covid to actually let their voices be heard. A lot of our parents right now do not know about the Developmental

Disabilities Council. A lot of them don't know about Early Steps. A lot of them don't know about any of this and neither does their medical team. I think that saying childcare is a three, so that we may not consider that, I think that we have to consider that. This DD Council in our five-year plan will represent our state in its entirety. And representing our state in its entirety means we have to consider those key populations according to our DD act.

RANDALL BROWN: Thank you.

SHAWM FLEMING: I would also like to I guess echo and add to that. Only 15 self-advocates who responded this time. And historically when we have had more and broken down the data the survey results ranking of importance by different groups self-advocates, particularly adults, tended to indicate housing and transportation were higher than like parents of children. Which makes sense. Just for y'all to consider that when you look through all the data of where it fell.

RANDALL BROWN: Thank you, sir for sharing that point. And thank you Carhonda for your good points. And I believe Jeff has a comment. Can you read the full comment Courtney?

COURTNEY RYLAND: Yes, sir. We actually have a couple ones from Ms. Kathleen. I know schools do not let children in PreK after or before care at schools. Then Mr. Jeff says we need more voices from individuals with DD.

RANDALL BROWN: Thank you both for your sharing of information.

KIM BASILE: I have a question. And Shawn may have to answer this. What is the percent of individuals with disabilities to the total population in Louisiana?

SHAWM FLEMING: Estimated 1.6 percent of the population.

KIM BASILE: And I am not playing any side of the fence on this, just stating what the numbers were

that y'all reported to us. So, if we had 8 percent of self-advocates report then we have over the estimated percent for the total population, am I correct?

SHAWM FLEMING: I don't view it that way. The way I view it the council, and I guess in the DD act, it's designed to be representative of people who receive services. And so even in the membership of the council it doesn't try to get 1.6 percent of the council. It tries to get a balance of. So y'all have to have at least seven system members who are self-advocates.

KIM BASILE: Not what I was trying to get at. I know we only have 8 percent and we would love a hundred percent. But I don't know the numbers are as skewed as we think they might be. And like I said, I am not playing either side of the fence. Just asked a question.

COURTNEY RYLAND: I believe Ms. Lillian has her hand raised.

LILLIAN DEJEAN: I think it's important to keep in mind while we are on the DD Council our mission, purpose is to serve those with developmental disabilities. So, though we are only like 1.6 percent of the general population, we're also not serving the general population. The 8.7 percent of that figure came from the response of the public report I believe. 8.7 percent of people with disabilities. If we are serving people with disabilities, I think it's super important to have their voice be the majority whenever we are taking opinions and perspectives into consideration.

KIM BASILE: I absolutely agree with you, but I guess what I am trying to get at is that my daughter is 12 and she cannot advocate for herself, she never will be able to advocate for herself. And I know there are a lot of people in the state like that. So, I don't want parents' voices discounted because they are not self-advocates. Maybe I am not making any sense here.

But I have to speak for my daughter. I don't want what I feel is important to be less important than self-advocates. Does that make sense. That she needs a voice and I have to be her voice. So, when I fill out surveys like this, I am filling them out as a parent because she can't. That is the only thing I was getting at.

SHAWM FLEMING: If I may try to provide like a prospective. I think it's what Lillian is trying to say cause you asked about the 1.6 percent of the population who are people with developmental disabilities. Well, the entirety of the survey and everything we do is all about that 1.6 percent. And so that stat, in my opinion, not appropriate to use to suggest that we're going to get 1.6 percent of the response from people themselves who have developmental disabilities cause all the responses are related to that 1.6 percent. I guess to Jeff and Lillian's point is desire to have voice of people with developmental disabilities considered equitably in y'all determination.

KIM BASILE: I am not discounting that. Also saying I am a voice of a person with a disability because I am my child's voice. So, don't discount me. That's all I was getting at.

RANDALL BROWN: Thank you Kim. You are not being discounted. We are all in this together. Self-advocates and parent voices alike are all equally important. As a self-advocate I do know we do need to make a much better effort to include more self-advocate opinions and perspectives in our work.

COURTNEY RYLAND: There is a YouTube comment from Ms. Bridget B. I wonder if the public could give strategies on how to fix the deficits they are bringing up. That would be helpful to the council it seems.

RANDALL BROWN: Thank you Bridget for your comment. Does anyone have anything they would like to add

or share? Well, we see our results on the screen.
COURTNEY RYLAND: Ms. Carhonda has another comment.
We should always consider self-advocates voices
before parents' voices.

RANDALL BROWN: Thank you for your comment
Carhonda.

BAMBI POLOTZOLA: Randall, I think, maybe I was
reading into what you were about to say, to decide
on which categories we should move forward with.
Is that correct?

RANDALL BROWN: I was about to suggest that. Do
you have something else we need to discuss?

BAMBI POLOTZOLA: I was going to suggest if maybe
we could move forward with at least the ones that
are in yellow and move forward in making, what is
the next step to be able to set some goals,
correct? So set some goals for those three areas
that got the most votes and then kind of from
there move onto the next section maybe if that's
the will of the committee.

RANDALL BROWN: Okay. So that's Bambi's motion,
correct?

BAMBI POLOTZOLA: Yeah. I guess that is Shawn to
recommend the areas of emphasis with the three
highest scores that we set goals for those at this
time.

BRENDA COSSE: I concur with Ms. Bambi. Thank you.

RANDALL BROWN: Thank you. Can I take your
concurring to be a second to her motion?

BRENDA COSSE: I second her motion.

RANDALL BROWN: Thank you. So, we have a motion
and a second on the floor.

SHAWM FLEMING: I thought she was going to make a
motion to I guess determine the areas of emphasis
to recommend to the council. If y'all are
switching the order on the agenda. Y'all can jump
straight to goals. I think what I would recommend
the motion be is which areas of emphasis y'all
want to focus on for the council. And then y'all
can scale those back or whatever later.

BAMBI POLOTZOLA: I guess, Shawn, my concern is if we select those areas, and let's just say we select everything that is in the yellow and green. So that means leaving two areas out. As an example. What as we go through the process then we decide to make the changes we have already made a motion does that create.

SHAWM FLEMING: It's fine. Y'all can move forward however y'all choose. I don't know if y'all want to separate out recommend this set of areas of emphasis and come back and say let's look at the other ones in green and divide a motion on areas of emphasis. And so, my suggestion is that y'all make a clean motion of let's go after all these areas of emphasis and y'all can change it later as a recommendation to the council. Y'all have two more meetings. That's all. Just let y'all go ahead. I'm sorry.

RANDALL BROWN: No. Thank you for sharing it.

BAMBI POLOTZOLA: So maybe withdrawing that motion and going with that format. Then I would make a recommendation we focus on all of the areas of emphasis except for recreation.

RANDALL BROWN: Do I have a second to Bambi's new motion to focus on all areas?

STEVEN NGUYEN: I just have a comment. I feel like recreation, even though the number doesn't really reflect, it should be included.

BRENDA COSSE: Okay. So, we have a new motion on the floor. And then we had a comment. That changed the motion.

RANDALL BROWN: It has not yet changed the motion. But Steven did share he feels recreation should still be included.

BRENDA COSSE: Then we will second the new motion.

BAMBI POLOTZOLA: I don't think the new motion is correct. Set the goals for, is it seven areas. It would be eight areas I believe.

SHAWM FLEMING: It was seven till Steven recommended recreation.

BAMBI POLOTZOLA: There was nine total.

STEVEN NGUYEN: Can I offer a friendly amendment to add recreation to that list. I will do that.

RANDALL BROWN: Steven offers a friendly amendment. Bambi do you accept?

BAMBI POLOTZOLA: Sure. We do have the issue of can we adequately be able to address all nine areas. We just may want to have more discussion.

RANDALL BROWN: And we still have time for that discussion. We will meet again before we finalize this probably at least one more time, if not twice before these recommendations go to the council for their discussion and consideration. So, we now have a motion on the floor by Bambi and seconded by Brenda with a friendly amendment from Steven. That is to set goals for the seven areas of emphasis with the highest scores of health, employment, community supports, education early intervention, advocacy leadership, development quality assurance, housing and transportation. Any further discussion? Do I have any abstentions from this motion?

SHAWM FLEMING: Technically Randall y'all should vote on the amendment.

RANDALL BROWN: That's right. I'm sorry. So, we're voting on Steven's amendment to Bambi's motion first. Do I have any abstentions to Stevens motion? Any objections to Steven's motion? Hearing none from the committee, this motion has carried. And so now we will consider Bambi's new friendly amended motion. And again, it's seconded by Ms. Brenda and it's to set goals for the seven areas of emphasis with the highest scores health, employment, community supports, education, and early intervention, advocacy leadership development, quality assurance, housing and transportation. That's the motion before us. Do I have any abstentions to this motion? Hearing none, do I have any objections to this motion? And hearing no objections this motion has carried.

And so now, Shawn, do we need to look at the other areas of emphasis or what is your recommendation?

SHAWM FLEMING: So now you should establish desired outcomes for each area of emphasis. What are the outcomes y'all want to achieve? Remember, this is over the course of five years. So, my recommendation would be to look at each area of emphasis and start developing what outcomes. And there was some sheets I could go back and pull some of those related to establishing goals and making them.

RANDALL BROWN: Please do. I think that would be helpful as we discuss our process today. So, this is just writing good goals, which is where you are headed. Have a targeted population that is affected in overall priorities. Let's go down to see what is a good goal. Like using an example for healthcare, one of the things y'all did. Example of language include all those elements people with developmental disabilities and their families increase access to healthcare services that meets their needs and preferences. Y'all could be more specific than that. A lot of information about specific healthcare gaps and services, etc. So y'all can get even more narrow if you want in terms of your focus is for each area. Y'all have questions on that?

RANDALL BROWN: I guess my question to the committee would be, let's pick an area of focus that we voted on and let's decide how specific we would like to be in relation to that area of emphasis.

STEVEN NGUYEN: I would say let's start with health.

RANDALL BROWN: Do you have a suggestion or comment?

STEVEN NGUYEN: I would say let's put that for individuals with developmental disabilities to have access to appropriate and affordable healthcare.

SHAWM FLEMING: Can you repeat that.

STEVEN NGUYEN: Individuals with disabilities to have access to appropriate and affordable healthcare. And I guess preventive health services. If anybody wants to go off of that.

RANDALL BROWN: We had the conversation yesterday someone brought up about the need for dental healthcare. Should we consider adding dental as well?

STEVEN NGUYEN: Absolutely. Just a question, would mental health go under this section also?

RANDALL BROWN: I believe so.

SHAWM FLEMING: It could also go under community supports depending what you are talking about.

LILLIAN DEJEAN: Sorry, I can't quite figure out how to do the virtual hand raise. But with the mental health services maybe we could put it under both health and community supports because it is such a huge concern, we can hit it in both areas.

RANDALL BROWN: Thank you for that suggestion. Do we have any other suggestions in relation to healthcare discussion or discussion of the health area of emphasis?

STEVEN NGUYEN: Under affordable healthcare can I maybe add including primary health services and dental there. Cause I am looking over at the documents that was emailed out yesterday. I want to add that in there.

SHAWM FLEMING: I am just wordsmithing. Y'all can correct me. Trying to combine y'all words together. I feel like you were further defining this in these things. If I didn't do that properly just let me know.

RANDALL BROWN: Thank you Shawn. And thank you Steven for the recommendation.

LILLIAN DEJEAN: Does sexuality training fall under health too. Is that something we want to add?

SHAWM FLEMING: It could.

COURTNEY RYLAND: There is a comment from Ms. Kathy. Thank you so much for adding dental.

RANDALL BROWN: Thank you for that suggestion yesterday. Do we have any other discussion for the area of emphasis of health?

SHAWM FLEMING: Just added a to-do list.

RANDALL BROWN: Thank you. Hearing no more discussion on the issue of health. And of course, we can return to any of these at any time today. Hearing no more discussion on health, how about the area of emphasis of employment.

STEVEN NGUYEN: Sorry. I was thinking out loud. I am going to mute myself. Access to quality.

COURTNEY RYLAND: It sounded like both Steven and Tamesha were trying to say something at the same time.

TAMESHA: I was going to mention in regard to employment that individuals with developmental disabilities will have access to equal and gainful employment. Cause just giving them access to employment is not enough. I think it needs to be gainful employment. When we look at it from a prospective of giving them access and equal employment.

RANDALL BROWN: Thank you for that suggestion.

STEVEN NGUYEN: I would also like to add access to preemployment training services.

RANDALL BROWN: Thank you, sir, for that addition.

BAMBI POLOTZOLA: Did you hear me?

RANDALL BROWN: I did not.

BAMBI POLOTZOLA: I was muted, and I was talking. I said it needs to be competitive integrated individualized employment.

RANDALL BROWN: Thank you.

STEVEN NGUYEN: Shawn, I don't know if I said free, but I mean preemployment training services. Access to pre.

SHAWM FLEMING: Say it again.

STEVEN NGUYEN: I don't know if I said free or pre. But I meant preemployment. PRE.

SHAWM FLEMING: I got it. Yes, sir.

STEVEN NGUYEN: I don't know if anybody would do it

for free.

SHAWM FLEMING: Glad to clarify.

LILLIAN DEJEAN: Can we also add the phrase self-determined in there as well.

SHAWM FLEMING: Where would you put that?

LILLIAN DEJEAN: Access to competitive self-determined and competitive. Kind of that phrasing. Thank you.

RANDALL BROWN: Do we have a comment.

COURTNEY RYLAND: From Ms. Kathy. In regard to the health goal, sorry, for the delayed response, but is it okay I suggest specialists be added to the health goal.

RANDALL BROWN: Yes. Thank you for the suggestion.

BAMBI POLOTZOLA: So, whenever we say competitive that to me a definition, I have always learned is a living wage, right?

RANDALL BROWN: The way I understand it.

BAMBI POLOTZOLA: Not subminimum wage, at least competitive. What people without disabilities would make doing that job, right?

RANDALL BROWN: I would agree with you in terms of the definition of competitive being that, yes.

BAMBI POLOTZOLA: And the other issue, I don't know if maybe an objective, I think one of the key issues in regard to employment is having those supported employment providers that are trained. And I think goes back to maybe Lillian's point that often times what I hear people when they go to these employment specialists or employment support providers that are told a few jobs they can fit into. And we need people with disabilities to have an opportunity to kind of, to be self-determined in what they want to do in their careers.

RANDALL BROWN: Agreed.

STEVEN NGUYEN: So customized.

BAMBI POLOTZOLA: I think Shawn is right, including customized employment. That would be appropriate. Can you make the screen bigger maybe?

SHAWM FLEMING: I will make my font bigger which might mess up some other things. If I make my screen too big then I can't see where I am. So, I will blow up the font a little bit and keep it to one goal at a time.

COURTNEY RYLAND: Mr. Jeff has a comment. We are not going to move the needle if we don't put equal focus on educating employers about working with individuals with developmental disabilities.

RANDALL BROWN: Very good point, sir. Thank you.

STEVEN NGUYEN: That would be another one under employment.

RANDALL BROWN: I think it should, yes.

STEVEN NGUYEN: Anybody want to wordsmith that?

RANDALL BROWN: Is that language acceptable?

STEVEN NGUYEN: Educating employers on. I would say interact with people with disabilities. To be inclusive for all.

SHAWM FLEMING: Where would you slide that last statement. I am getting kind of lost. That do it Steven?

STEVEN NGUYEN: Yeah. I think that is where I was getting at. Thank you.

RANDALL BROWN: We have any other comments, suggestions for the employment area of emphasis?

STEVEN NGUYEN: Shawn, can you maybe put that in a separate bullet.

SHAWM FLEMING: Truthfully, I think in bullets, so I am going to put all these in bullets. That is how my brain thinks.

RANDALL BROWN: I think Ashley has a recommendation.

COURTNEY RYLAND: Instead of interact I would recommend the word support.

RANDALL BROWN: Thank you for that suggestion Ashley. Do we have any other questions or comments from the public?

COURTNEY RYLAND: I do not see any other chats in zoom, and I do not see any hands raised. Wait, I spoke too soon.

TAMESHA: Sorry. I would like to go back to healthcare And I think I would like to recommend adding prevention of chronic diseases since we already know we have a lot of our people with developmental disabilities already have co morbidities and different things like that. I think we need to also add prevention of chronic diseases.

RANDALL BROWN: Very good point. Thank you. Do we have any other goals we would like to add?

COURTNEY RYLAND: Mr. Jeff had a comment, but I am not able to read it so I asked if he could raise his hand so he can say it.

RANDALL BROWN: We will give him a moment to do that if he would like.

JEFF ARCENEUX: I just wanted to comment. Shawn asked me if that captured my thoughts and one thought in my mind is get out there and begin talking to the chambers of commerce, the rotaries and the businesses that work across Louisiana. That's it.

RANDALL BROWN: Thank you for that. Certainly, is a good way we can think about starting to achieve that goal. Does anyone else have anything they would like to add to the employment section?

COURTNEY RYLAND: Ms. Brenda has her hand raised.

BRENDA COSSE: Yes, for health would that be behavioral health also?

RANDALL BROWN: Very good point.

SHAWM FLEMING: It was recommended a targeted disparity be addressed, the population of people with mental health needs. So yes. Although you could further specify it in the language here. It was captured in the statement in terms of the targeted disparity.

RANDALL BROWN: Ms. Brenda, would you like to further specify it or does that language work for you as written?

BRENDA COSSE: Thank you chairman. Could we please further specify behavioral health.

BAMBI POLOTZOLA: I don't know why I am doing that today. I raised my hand before Brenda had spoke and I agree. I think that really needs to be a focus around behavioral health because I think all of us are very aware of the issues that we have in regard to people receiving quality behavioral health services. Particularly people who have developmental disabilities.

RANDALL BROWN: Thank you. So, our next emphasis, area of community supports. Do we have any suggestions with relation to the emphasis of community supports?

STEVEN NGUYEN: Access to qualified direct support professionals.

RANDALL BROWN: Thank you, sir, for that suggestion.

SHAWM FLEMING: Qualifiers relative to direct support professionals.

STEVEN NGUYEN: Yes. Unless somebody else has a better word.

SHAWM FLEMING: Sometimes it's access.

SPEAKER: Quality or qualified.

SHAWM FLEMING: Right.

COURTNEY RYLAND: Ms. Carolyn has her hand raised.

CAROLIN: As a direct service professional I am self-direction. I would like to emphasize the emphasis be put on staff being trained with CPR and trained in the diagnoses of individuals they working with.

RANDALL BROWN: Thank you for that suggestion.

BAMBI POLOTZOLA: It's my understanding, at least I know people, DSPs employed through provider agencies, and almost sure this is for all DSPs, there is a requirement to be trained in CPR.

BAMBI POLOTZOLA: If people are not trained in that I don't know where that is falling through the cracks. I don't know if we need to add that to our plan because that is already in rules that they are supposed to be trained in that. And the other point I wanted to make when we said

individuals with developmental disabilities access to qualified and trained DSPs, I don't know if that's redundant. I guess trained is okay. I was thinking sometimes if you say qualified that may not require as much training. Some people are qualified based on other things besides training. I don't know if that is just semantics. Just wanted to throw that out there.

RANDALL BROWN: Thank you.

COURTNEY RYLAND: Ms. Lillian has electronically raised her hand.

LILLIAN DEJEAN: I am just as excited as you are. I just wanted to ask for point of clarification with the diagnosis of the individual, can we elaborate on that. I am not sure I understand.

RANDALL BROWN: Ms. Carolyn would you like to elaborate on your suggestion.

CAROLIN: Yes. So as a self-directive person I talk with individuals. I interview them and inform them of the possible behavioral diagnosis that they may incur. I provide them with the information about the diagnosis. And so, I implore them to read and also question them at some point during their first initial training with the individual to make sure they understand the exceptionality that person has. And then CPR have fallen through the cracks because some people are not required to have CPR in order to work with certain individuals.

LILLIAN DEJEAN: That's super important. Thank you for elaborating.

RANDALL BROWN: Thank you.

COURTNEY RYLAND: Ms. Tamesha has her hand raised and also a comment from Ms. Carhonda.

TAMESHA: I am not sure if I can put this in the right, how y'all say, word, or if I am overlapping something, but I just remember coming into the process of having a child with a developmental disability and being extremely overwhelmed with trying to find community supports. And I feel

like at times it's still like that. Things that are so scattered. And we have several different databases and directories. And with having individuals and family, having to go to different areas I would recommend that we, I guess you could say, eventually move into the direction to have a better inclusive database of community supports. Not so hard for them to navigate and get access to a lot of the community supports they need. Basically, promote full community support access and being able to access those community supports in one area.

RANDALL BROWN: Thank you.

SHAWM FLEMING: When you say one area, you are speaking geographically?

TAMESHA: I follow several things on Facebook, on Louisiana Department of Health. A bunch of different systems. I am having to go to get access to all those different support systems. Put it that way. And I know something we have had to do over the years. Just come with the territory. Especially with new family, they are very overwhelmed. Some of us become used of it and that in itself can be a hinderance. Some families I am having to learn a lot of one time, plus hunt down support is just not having inclusive database of delivery systems. The best way I can put it.

SHAWM FLEMING: Does this capture it?

TAMESHA: Yes.

COURTNEY RYLAND: Mr. Randall, we have multiple chats and multiple people with hands raised now.

RANDALL BROWN: Let's go with a few of the chats first and then back to the hands.

COURTNEY RYLAND: Actually Ms. Carhonda had a chat, but also her hand is raised.

CARHONDA: Good evening. I want to elaborate on what Ms. Tameca was actually saying, and the lady that spoke prior to her, in regard to the CPR and the direct support professionals. A lot of

parents of children with developmental disabilities are not actually getting access to community supports. Especially in rural areas. I live on the outskirts of Baton Rouge and I cannot get access to those services due to the amount of wages that the community support providers are actually being paid. As well as because they said there is not enough companies that are willing to offer those services to our areas. So, having a waiver you actually have a lot of the community support providers that do not accept the children's choice waiver. So, it basically put us in another position where we cannot get access to these supports. Even with trying to do self-direction like the speaker before me stated, I would have to provide the CPR training to that individual. But not only do I have to provide the training to them, I also have to complete the 90L paperwork and I have to create that care plan. That is a lot on a parent. Especially if that parent doesn't know what all is supposed to entail. So I think that with creating the five year plan for that on this topic that we also have to take into consideration that one of the things that April spoke about a lot was our care support workers actually receiving a livable wage. Because that is another hinderance why we cannot receive support workers because they are not receiving livable wages to want to work with our children or persons in the DD community.

RANDALL BROWN: Thank you for that reminder and prospective.

COURTNEY RYLAND: Mr. Jeff has a quick comment, then Ms. Bambi has her hand raised. And Mr. Steven has his hand raised. Mr. Jeff, I think providers would benefit from empathy training. And then Ms. Bambi and Mr. Steven.

BAMBI POLOTZOLA: So, my comment was in line with what Carhonda said. And I have said this for many years. We have created a system within our home

and community-based service of have and have nots. Many people who get, who move to self-direction the reason that they report they do so is to pay their worker more. The reason why providers can't pay the workers more because there are so many rules and restrictions. Just like the CPR training providers you cannot have someone in your home that doesn't go through this very intense amount of training. And those people that can access self-direction and those people who can't. And there are many people in our state who do not have the education, do not have the resources or the information in order to do self-direction. And we really shouldn't have two systems to where if you are in one system you can pay staff more. If you are in another system they're paid less. What is happening is we are having haves and have nots. A key thing talking about addressing the issues of people who, I am using the word marginalized groups, where particularly my experience people that live in poverty, people of color, people who live in rural areas. And I have worked with these populations before in different areas of the state. And so, I really think that we need to look at the different systems we have which gives different access to different pay scales to workers. To our direct support workers.

RANDALL BROWN: Okay. Thank you.

SHAWM FLEMING: I am trying to capture it. Welcome any feedback if I am not putting what y'all are saying in the right area.

RANDALL BROWN: Does that so far capture what your intent is?

BAMBI POLOTZOLA: I don't think it's clear. I am talking about whenever we get home and community-based services the disparity between rates that can be paid to the workers when people go through self-direction and people going through providers and reasons why that exist. And we need to address that.

SPEAKER: Should that be a targeted area for us.

BAMBI POLOTZOLA: It directly affects people who are poor, limited education, who live in rural areas from my experience and knowledge with it.

SHAWM FLEMING: You have Steven and Kelly.

STEVEN NGUYEN: My comment was just based on what Bambi said earlier. So, to go back to the top take out qualified and trained and put quality direct support professionals. Take out and train. If you leave it at that.

SHAWM FLEMING: Thank you.

RANDALL BROWN: Thank you, sir. Kelly.

KELLY MONROE: I agree with Bambi. But, well I just lost it. To make sure they had adequate pay level for community support providers. So, are we talking to Ensure the DSP receives a living wage? All of those training and all the insurance and all auto insurance and everything else that self-direction does not have to have the providers do. So, I don't think it's really about making sure providers have empathy training. I think it's more legislative work towards getting these services pay levels higher so that you can hire quality employees.

RANDALL BROWN: Thank you for that prospective and feedback. Do I have any other questions or comments?

COURTNEY RYLAND: There is a comment from Ms. Kathy, but she has requested to hold that until the conversation regarding direct support workers has completed.

RANDALL BROWN: Thank you. Do we have any other discussion on the issues related to community supports and direct support workers in particular?

COURTNEY RYLAND: Would you like for me to read Ms. Kathy's comment now. Seems to be several laws passed addressing developmental disability training of law enforcement officers. I think training is important and think a comprehensive list of recommended/best practices for law

enforcement training on developmental disability needs to be developed as required training.

RANDALL BROWN: Thank you for that suggestion Ms. Kathy.

LILLIAN DEJEAN: Regarding the law enforcement officer training, I think it's super important. I think we are missing a piece. I think we may want to think about also offering trainings specifically for people with developmental disabilities on how to act with law enforcement officers as well.

RANDALL BROWN: Great point Lillian. Thank you. So, is everyone happy with the language as we see it for community supports section so far?

BAMBI POLOTZOLA: Does this, in regard to the law enforcement, does this like limit the scope of what we're doing. I am hearing, I have heard conversations or maybe news reports about the role of law enforcement and how basically often times law enforcement is tasked with doing many roles that they really should not be doing. It really is more about having more access, community access to mental health. People with mental health professionals or social workers. A bigger conversation. That impact. I think we would support that and may limit the necessity to have law enforcement interact so often with people with behavioral health needs.

RANDALL BROWN: Good point.

SHAWM FLEMING: If I may, I agree Bambi that seems to be, just hearing the conversations. I don't think, some people are like defund the police, and I actually disagree. I believe police need resources. Part of my recommendation is to have the resources within the police because they are called as first responders and expected to handle cases disproportionately in terms of rate of cases of people with disabilities. And so my thinking they need, if they are going to be part of the service provision, the way I view it for people

with disabilities they should have the resources built into that system to do it using best practices. Instead of arrest and incarceration and going through a judicial system. Which is what is happening now. That is my suggestion.

COURTNEY RYLAND: From Ms. Kathy. Can we add school resource officers?

RANDALL BROWN: Thank you. And we have another comment now from Ms. Kathy.

COURTNEY RYLAND: Yes, sir. Maybe a DD emergency response plan that could be adopted by all local governments. Which would include referring some emergency calls to the human services districts and authorities. Also Ms. Annie has her hand raised.

RANDALL BROWN: Let's get to our committee members next and get to Ms. Annie next. It was Tamesha first, right?

TAMESHA: Thank you. I just want to say in reference to the training of law enforcement officers, I think sometimes we get confused with to piggyback off of what Shawn said with the defunding and things like that. And utilizing certain services as a front-line worker and a service provider it is important that someone working with the community of very diverse groups is properly trained. Not saying they are taking on the role of a certain individual or certain healthcare service. But it is important for them to, from my prospective, to be trained on how to handle someone who has, say a developmental disability. Cause if not, then the response, the breakdown of communication is often from that point on. And that's all I want to say. Just add I feel like that is important. I feel it's important to law enforcement officers for them to be able to know how to protect that person when they are responding to matters. And also, to piggyback off of what Lillian said, training for the people with developmental disabilities on how

to interact so they too are able to understand situational awareness. I think that's important. Thank y'all.

RANDALL BROWN: Thank you. And Ms. Brenda I believe is next.

BRENDA COSSE: Thank you chairman. I did want to add, I know that we had talked about first responders when we did the first-year plan and the concept proposals. Can we add first responders in the community supports please.

RANDALL BROWN: We certainly can. Thank you. Now Ms. Annie, you have the floor.

ANNIE: I just wanted to make a quick comment. Having a child with very, sometimes, often times severe behavior who I also try to train how to interact with the public. I do think it's very important to have first responder training that is statewide and uniform in what we are doing. Because I can picture my son being maybe 16 years old and someone would think that he was on drugs with the way he behaves. If police officers cannot understand what that child is doing, that he can't help it, then he is going to assume he is on drugs. I strongly support as a person in the disability community training all first responders, not just police officers, but EMTs and fireman. And also training individuals with disabilities on how to respond to these community supports. Thank you for letting me speak.

RANDALL BROWN: Thank you for sharing.

BRENDA COSSE: Yes. I did want to piggyback on the situational awareness training for individuals with developmental disabilities as it relates to first responders. As a parent I am training my child based on the trainings that I receive as a parent. Regional trainings and national trainings. And then I have found over the years as a parent figure out how to train my child in various situations. Sometimes I can get things added into his IEP, but most of the time I have

had to do it. It's just a little different because my child has developmental disabilities and I believe I echo a lot of parents. When I ask my siblings how they train their children. It's a little different than what I have to do. When I talk to parents who have children who are not diagnosed with developmental disabilities it's always different. You have language barriers. You have sensory processing barriers. So, I did want to emphasize that the situational awareness training for people with developmental disabilities is important with regard to first responders. In closing, I think that if we start with the youth, excuse me, getting a little emotional, if we start with the youth, if we train our children, they need training in the community. We need programs. I said this in the first-year plan. There are many entities, first responders related who would like to help. They need support. They need funding. Thank you.

RANDALL BROWN: Thank you very much. Do I have any other comments or suggestions related to community supports?

BAMBI POLOTZOLA: In relation to Brenda's comment I think what I am hearing her say is part of the component, people with developmental disabilities be included in their communities. And I think she is right. Whenever you are part of your community and the people in the community, including law enforcement officers and first responders know that person. Or the people at your grocery stores. And they know those individuals with developmental disabilities. And not just know, not just your own communities, often times people build relationships. They can sense when they meet a stranger who has developmental disabilities. That point of that we need to, inclusion matters in how people responded in people having relationships with people with developmental disabilities and their families.

How that could be a component of this. It is throughout. One of our principals. That is a key component to making this successful. Interactions with law enforcement successful.

RANDALL BROWN: Thank you. Any other comments or suggestions for community supports? I guess I should pose the question, should we have the inclusion listed as a targeted disparity we would like to see under community supports? Community inclusion.

BRENDA COSSE: Yes, chairman. Thank you.

SHAWM FLEMING: Populations or areas that are listed in the DD act relative to targeted disparities. I think we should consider among those when you are looking at targeted disparities.

BAMBI POLOTZOLA: I think talking about in regards to law enforcement that we can't not think about the thing that is recently been brought up in the media going on for decades and centuries people of color or more likely to have bad experiences with law enforcement. And so, I think that needs to be a part of the law enforcement training. I know many of my friends who are, and I am going to get emotional like Brenda was, who are parents of children of color and they have, as I may have, some fear of my son interacting with law enforcement. I have the security of the color of his skin. And they don't. I think that is something we need to include as a targeted group in regard to law enforcement.

BRENDA COSSE: Can we put targeted disparities up again. I want to make sure I word it correctly.

SHAWM FLEMING: Can you see them Brenda?

BRENDA COSSE: Yes. Okay. Ms. Bambi addressed, I think she just said racial and ethnic. She said people of color. But I would also like to include people who use English as a second language.

RANDALL BROWN: Very good point. Do we have any or comments or suggestions as it relates to community

support area of emphasis? Do we have any other public comments?

KAREN: Acknowledge the people who have to use assistant devices.

RANDALL BROWN: Thank you. Very good point.

COURTNEY RYLAND: Ms. Kathleen has her hand raised.

KATHLEEN C: Can y'all hear me? I don't know if it's too specific, but my son he cannot say what happened or what interaction with, say the school resource officer. So, I don't know if nonverbal.

RANDALL BROWN: Thank you Kathleen.

SHAWM FLEMING: Does that capture y'all sentiments. I think where Brenda was going as well. I added this qualifier, specified among six highlighted populations.

RANDALL BROWN: Is everyone satisfied as it is written here?

KATHLEEN C: I was going to say I see you put require communication supports. But even if he had supports, he is not going to be able to tell me because he doesn't have the recall, I guess.

RANDALL BROWN: Would you suggest more training for school resource officers maybe in relation to working with our nonverbal population?

KATHLEEN C: Yeah, I guess I was thinking. Yeah, I guess more training. I don't know, not a way for parents to know. That will work.

STEVEN NGUYEN: I was thinking maybe put it as a separate bullet point. Those who are nonverbal or have nonverbal learning disorders. Or somehow squeeze it in there.

SHAWM FLEMING: The reason I put limited communication someone who is nonverbal can potentially communicate very effectively. Trying to be more specific to when their communication is not being met.

BAMBI POLOTZOLA: Under the bullet of targeted disparities so that is in line with that other form where it lists the six different targeted areas. So those three are all under those

targeted areas, correct?

SHAWM FLEMING: Well, it says, yes.

BAMBI POLOTZOLA: One that is a catchall, right.

SHAWM FLEMING: Racial and ethnic minority.

English as second language. Other groups within the population of people with DD. And so that is where the limited communication, I mean might be a better way I can research and figure out a better way to say that. And people who require technology to participate and contribute to community life. I believe all of the ones that y'all have listed are captured or identified here among this list.

COURTNEY RYLAND: There is a comment from Ms. Carhonda. Can you please include those using American Sign Language?

RANDALL BROWN: Thank you for that suggestion.

BAMBI POLOTZOLA: I was about to respond. I feel like those last two bullets, if Shawn goes back to the other page, would be inclusive of the needs of people with ASL. Maybe it's not specifically stating it. But I feel like its talking about communication differences and language differences. I feel like that would encompass that.

SHAWM FLEMING: So y'all do not want to include?

BAMBI POLOTZOLA: You are still showing.

SHAWM FLEMING: Sorry. I can't tell. Is this it?

BAMBI POLOTZOLA: That is fine for me. I am okay with it.

SHAWM FLEMING: Remind y'all, y'all are going to come back in a month and refine these. This isn't the end. Y'all do have, what, five other areas to cover. If y'all want to move on I will scroll down.

SHAWM FLEMING: Yeah, let's move on to education and early intervention. Do we have any suggestions for this area of emphasis, education, early intervention?

STEVEN NGUYEN: Transitional supports to adulthood.

Opportunities to post-secondary education.
Including vocational training.

LILLIAN DEJEAN: Access to positive behavior interventions.

COURTNEY RYLAND: Comment from Ms. Kathleen is inclusion in the classrooms. Ms. Tamesha has her hand raised. Also, there's a YouTube comment. The comment is from Rebecca White, students with significant disabilities can be educated in general education classrooms for 80 percent or more of the day. But they usually are not.

RANDALL BROWN: Thank you for that comment.

COURTNEY RYLAND: She has also says this is especially true as the student reaches high school.

TAMESHA: I would like to also add to piggyback off of the inclusion and appropriate education as well. Also involve and highlight those students who require access to technology. Especially at a time like this due to distance learning. When it's required and outside of their control that needs to be addressed. Cause we have several students, especially those who are in areas of rural communities and disadvantaged areas where they have no access to any kind of internet service. Which puts them behind, so I think there needs to be addressed as well.

RANDALL BROWN: Thank you.

BAMBI POLOTZOLA: I think a part of this has to be qualified teachers and staff. I am sure there is a better way to phrase that. But that is the best I can come up with right now.

RANDALL BROWN: And we will be revisiting these in our next meeting. So, if we don't have everything or exactly as we would like today, we would be revisiting these to review at our next meeting of the committee as well.

BAMBI POLOTZOLA: I think that through my experience as a teacher and as a parent that when you see the best outcomes is whenever you have

collaborative teams including the parents, and the administrators, support staff, regular ed and special education working together and using evidence based practices. I am not sure how we can put that within our plan. But Shawn is going to do a great job of wording that for me. And I wanted to make sure Shawn it has evidence-based practices.

RANDALL BROWN: Thank you Bambi. Thank you, Shawn. We have another YouTube comment from Ms. White.

COURTNEY RYLAND: No dumping in inclusion and then say it didn't work. Totally agree with you Bambi.

TAMESHA: I would like to also add, in relation to early intervention, I know several parents in the communities had great bit of difference in getting access to care as it relates to early diagnosis. Which also delayed intervention steps for having the best outcomes for the child because it took too long to get an appointment. Not sure really have to do with access to healthcare. Cause in this area we don't have a whole lot of people all the time that are available for families to get a diagnosis. Some travel to Shreveport and it takes months and months for that diagnosis. In the interim I feel like there is also some early intervention, getting parents access to those, I guess you could say, local resources until early diagnosis can be made. Some kind of way to include that.

RANDALL BROWN: Thank you. I am very interested to hear parental prospective on the early intervention topics. Thank you for sharing that.

BAMBI POLOTZOLA: One of the issues that we have in regard to teacher preparation, we have probably the past decade tremendous decline people who are going to college to become teachers. Also seen programs in universities completely close. For instance, kids, teachers of students who are Deaf or blind. Really need to focus on building our capacity to educate students by building teacher

education programs. And the other issue, while I have the mike, is in regard to early intervention. Which our early intervention program is early steps. And I know there is, I often hear from families who have problems, I will let Shawn finish typing.

SHAWM FLEMING: Keep talking Bambi.

BAMBI POLOTZOLA: In regard to early steps, particularly families who live in more rural areas have more problems getting access to early steps intervention. I think an important thing to keep on our radar.

SPEAKER: It is just early steps.

BAMBI POLOTZOLA: Another area is providers of early steps often have problems going into areas they deem might be unsafe areas in our inner cities. And so, I don't know if it's actually unsafe or perceptions, but those kids sometimes do not get services.

SHAWM FLEMING: Just to clarify, you brought up rural areas for one reason and urban relative to poverty.

BAMBI POLOTZOLA: Yeah. Generally, in areas in inner city that are high poverty areas.

TAMESHA: I wanted to piggyback off of what you said and add to the target disparity is racial and ethnic minority backgrounds cause that is one area.

COURTNEY RYLAND: Would you like for me to read the comment from Ms. Kathleen. Randall, if you said something, I believe you are still muted.

RANDALL BROWN: Sorry. Yes, I would like to have her comment read.

COURTNEY RYLAND: Education to school staff about what least restrictive environment is and the rights children or students have. Ms. Carhonda also submitted a comment. And Ms. Brenda has her hand raised. Ms. Carhonda writes access and inclusion to the school specialized programs including performing arts, extracurricular

activities, including sports and clubs and being photographed in the yearbook and published.

STEVEN NGUYEN: Thank you for those suggestions.

Ms. Brenda you have the floor.

BRENDA COSSE: Thank you. Under the early intervention early steps can we also target English as a second language?

RANDALL BROWN: Thank you.

SHAWM FLEMING: Based on the comments I added I started putting under qualified teachers the teachers train least restrictive environment and student rights. Added activities and members of school community. I did not include yet Carhonda's recommendation related to elimination labeling of classrooms according to exceptionalities. Struggling how to put that in a positive framework.

RANDALL BROWN: Do we have any other questions or comments as it relates to education and early intervention segment? Does everyone so far agree with the language as written for this area of emphasis?

SHAWM FLEMING: Sorry, y'all. My fingers are too sensitive. Trying to back up so y'all can see the whole thing.

RANDALL BROWN: So, on the area of emphasis for advocacy leadership. What are my suggestions for this area? Should I say what are your suggestions as a committee and as a public for this area?

STEVEN NGUYEN: Voter awareness and rights. Or voting.

LILLIAN DEJEAN: Youth with disabilities having access to age appropriate advocacy training.

RANDALL BROWN: Very good point. Thank you.

STEVEN NGUYEN: I would say autonomy, decision making and supported decision making.

RANDALL BROWN: Do I have any other suggestions for this area of emphasis, advocacy and leadership?

STEVEN NGUYEN: Sexual abuse and exploitation training.

COURTNEY RYLAND: Ms. Kathleen has a comment.
Parental training and students' rights.

LILLIAN DEJEAN: I am going to be nit-picky for just one moment. Can we say youth with disabilities having access, age appropriate accessibility so we can specifically target them? And maybe we can also have people with disabilities having access to legal rights as well. I think parents having that knowledge is super important, but I think advocates can also use that knowledge as well.

RANDALL BROWN: Agreed. Thank you. Do I have any other questions or comments with regard to advocacy leadership area of emphasis?

STEVEN NGUYEN: Can we include something along the lines of financial. Financial stability and responsibility. Or literacy I think you are on the right track.

RANDALL BROWN: Tamesha says she has to leave us. Thank you for your participation today. Do we have any other issues we would like to add to this area of emphasis? Hearing none, we can move to our next area. And we're on the housing area of emphasis. So, what are our thoughts on the issue of the housing area of emphasis?

STEVEN NGUYEN: Access to safe, affordable and accessible housing.

BAMBI POLOTZOLA: I think a component of that is advocacy so that people with developmental disabilities I guess understand the housing system and how to advocate for their housing needs.

RANDALL BROWN: Would we want that as a targeted disparity under this topic?

BAMBI POLOTZOLA: It's all individuals with developmental disabilities. I feel like there is such a huge housing need.

RANDALL BROWN: Kind of what I was getting at. But I get what you are saying. An enormous need.

BAMBI POLOTZOLA: No matter urban, rural.

RANDALL BROWN: An enormous need for housing people

with DD.

SHAWM FLEMING: Does that capture what you were thinking? I am losing track. Trying to interpret what you said.

BAMBI POLOTZOLA: Yeah. That's good.

RANDALL BROWN: Any other areas of emphasis on the topic of housing?

BAMBI POLOTZOLA: I feel like in the area of housing to go back to the discussion we had yesterday, and maybe a little bit this morning, about the participation in our survey. We had such a low number of people with developmental disabilities actually participating. I feel like this is an issue that people with developmental disabilities can speak to the best. I feel like as a parent my natural instinct is to keep my child near me, so I don't think about housing as much. Times when I think I want him to live in his own house. But I feel like this is really an issue whereas we go through this process we need to solicit more input from people with developmental disabilities is really is about self-determination and self-advocacy. That is my suggestion as we move forward.

COURTNEY RYLAND: A comment from Ms. Kathy. And Brenda and Lillian's hands are raised. Ms. Kathy writes, adopting universal design in all building codes for new construction and major renovation. This will help individuals without disabilities as they age. She may have meant to write with disabilities.

BRENDA COSSE: Yes. I am thinking under the housing area this would be a good opportunity to collaborate with real estate professionals. I know that we have been talking about the chamber of commerce included in the first-year plan and some concept proposals. I think this would be a good opportunity to collaborate with real estate professionals.

RANDALL BROWN: Thank you for that suggestion.

SHAWM FLEMING: Not sure how to write that as a goal.

COURTNEY RYLAND: Ms. Lillian still has her hand raised.

LILLIAN DEJEAN: Not sure if this would fall under housing. I think one thing is really important is training those independent living skills. How to upkeep the house, grocery shopping. Maybe having trainings for people with developmental disabilities. Again, not sure if it falls under housing.

BAMBI POLOTZOLA: I didn't realize I raised my hand. I was going to responded to Kathy. Her thing about adopting universal design in all building codes. I know Louisiana Housing Corp has a requirement for anyone who gets construction, that gets funding through Louisiana Housing Corporation. That is not for all buildings, but I think we have something to build on to advocate for the universal design.

RANDALL BROWN: Thank you Bambi.

SHAWM FLEMING: Also, on that point the Americans' with Disabilities Act revised in 2010 had language requiring accessible design for any new construction. The problem is older construction doesn't have to come into code unless it's been renovated. And even amounts of renovation that have to kick in before they are required to bring it up to the full accessible design features.

STEVEN NGUYEN: I would like to maybe add to continue supporting those who live in a congregate setting or interested in transitioning into a home of their own.

BRENDA COSSE: Yes. Mr. Shawn said he wasn't sure how to word collaborate with real estate professionals. Do we need to say training? I am just thinking about some young adults that I know who don't necessarily, they should be able to go and get their own apartment or apply for their house for a home. Whether they want it built or

not. But often they will say well, I am going to need somebody to come with me because whatever their DD is, I am trying to say this, they don't understand why the entities don't know how to communicate with them. Or something to that effect.

SHAWM FLEMING: If you look at the second, I guess area of outcome that is here, I think captures that. What you are bringing up I am interrupting as a strategy, an implementation strategy to maybe get there. Is it a goal? It could be a goal and I just need it rephrased in terms of increased collaboration.

SPEAKER: Training maybe.

SHAWM FLEMING: Training for realtors how to guide and support people with developmental disabilities through the process. Don't want to over interpret what your outcome is. Do you want as a goal to have realtors targeted? If this is the outcome there could be an activity related to that as a mechanism to achieve this goal, I guess. But the goal in my opinion should target what is the outcome for the individual we want to have. I guess where I am struggling with where to put it or how to phrase it. I appreciate you helping me understand it better.

BRENDA COSSE: Yes. Mr. Shawn could we put a pin there as an activity mechanism for future discussion. I appreciate that.

STEVEN NGUYEN: Shawn, can you add just under the point that I made about congregate settings can you add if and when requested.

COURTNEY RYLAND: Ms. Kathy has a point of clarification for her previous comment. Her previous comment was adopting universal design in building codes for new construction and major renovation. It will be beneficial for all with and without disabilities, particularly without disabilities as they age. As a goal make accessible housing more available through adoption

of universal design in building codes.

RANDALL BROWN: Thank you for that suggestion. Do I have any other suggestions for this area of emphasis?

SHAWM FLEMING: I added that last bullet. I believe the ADA already requires certain levels of universal design in new construction. I think we would have to get clarity on the direction of that if that is a goal.

COURTNEY RYLAND: Now a YouTube comment from Ms. Cody Wilson under housing. Could we get building codes to include changing rooms like airports now do for larger individuals and wheelchairs who need someone to change them.

SHAWM FLEMING: I believe that would not be housing. I think in community supports. You are speaking with public facilities. Building code is just different, not a house, not a residential code.

RANDALL BROWN: I can add that to community support section, correct?

STEVEN NGUYEN: Can we edit that to take out wheelchairs and include those with mobility needs. Thinking about others who use other durable medical equipment.

RANDALL BROWN: Thank you Steven. Thank you, Cody, for your suggestion. Do we have any suggestions for our area of emphasis on transportation?

STEVEN NGUYEN: Access to accessible public transportation.

SHAWM FLEMING: Say it again Steven.

STEVEN NGUYEN: Access to public transportation, IE buses, accessible taxis, etc. Ride sharing.

SHAWM FLEMING: You said public transportation, but not all ride sharing services are public.

STEVEN NGUYEN: That might have to be a separate bullet.

BAMBI POLOTZOLA: I think in addition to access it needs to be affordable and accessible public transportation. Just thinking about with public

transportation. I mean most of our state there is no public transportation. And people with disabilities, so people without disabilities drive their own vehicle. Which it's not an option often times for people with developmental disabilities. Maybe another point. Needs to be more than access to public transportation. To me it just needs to be access to transportation.

RANDALL BROWN: Thank you Bambi. Any other suggestions for this area?

STEVEN NGUYEN: Maybe easier access to personal vehicle modifications.

COURTNEY RYLAND: There is a comment from Ms. Carhonda. Can you please add access to accessible and affordable transportation in rural areas?

RANDALL BROWN: Yes. Thank you for that suggestion. Do we have anything else we would like to add to this area of emphasis?

STEVEN NGUYEN: Can we maybe put training, what do you call bus drivers?

SHAWM FLEMING: Joe, Bob, Mary. Sorry.

STEVEN NGUYEN: I think they need awareness training and empathy training for those individuals that drive buses.

KIM BASILE: Public vehicle operators.

COURTNEY RYLAND: There is another comment from Ms. Kathy and Ms. Carhonda. Ms. Kathleen writes training for transportation staff. Ms. Carhonda writes, can we please add education to transportation workers on how to aid individuals with disabilities while providing transportation.

RANDALL BROWN: Thank you both for your suggestions.

STEVEN NGUYEN: Yes. Where I was getting.

RANDALL BROWN: Any other suggestions for the transportation areas of emphasis of our plan?

COURTNEY RYLAND: There is a YouTube comment from Ms. Cody Wilson. Public transportation operators includes street cars, etc.

RANDALL BROWN: Thank you.

COURTNEY RYLAND: Ms. Carhonda has a question. Can we include CPR training for public transportation operators.

RANDALL BROWN: Very good point. Thank you. Any more discussion of this area of emphasis? Hearing none, let's move to recreation section. Do I have any suggestions?

STEVEN NGUYEN: Inclusive opportunities in recreation and community.

RANDALL BROWN: Activities?

STEVEN NGUYEN: There you go. Do we have any other areas of suggestions?

BAMBI POLOTZOLA: I raised my hand before Steven spoke. He said what I was going to say.

LILLIAN DEJEAN: Also put individuals with developmental disabilities will have access to integrated community recreational activities. I hope that makes sense.

COURTNEY RYLAND: There are two comments in the chat. From Ms. Kathleen, inclusion in or access to camps. From Ms. Kathy, more accessible venues such as playgrounds with accessible equipment and activities.

RANDALL BROWN: Very good points from you both. Thank you. Do we have any other areas or things we want to discuss about this area of emphasis?

STEVEN NGUYEN: Maybe add awareness to these types of recreational opportunities.

SHAWM FLEMING: Please repeat that Steven.

STEVEN NGUYEN: More awareness on these opportunities, recreational opportunities.

RANDALL BROWN: Do we have any or comments or questions about this area of emphasis?

COURTNEY RYLAND: Ms. Kathy would like to add to her comment. More enforcement of ADA, especially public playgrounds and venues.

RANDALL BROWN: Thank you Ms. Kathy.

BRENDA COSSE: All of these suggestions are good, but as a parent I am still thinking about I may be able to afford the camp, may have access to the

camp, and I shouldn't just point out camps. But who is trained there? Who is trained? And often we have to train the people on the spot. We have to come in in advance and say this is how you can work with my child. Sometimes they will say don't pay your fee, let's just do some pretraining. You come in and show us what to do. If it works out, then your child can sign up. Speaking about other parents I know too. Mr. Shawn, do you see how we can put any kind of training, maybe a strategy, maybe target some training?

SHAWM FLEMING: I think that goes along what Steven was bringing up.

RANDALL BROWN: Thank you Brenda for that comment.

SHAWM FLEMING: Does that capture it Brenda? Kind of incorporated yours into Stevens.

BRENDA COSSE: Yes. Can you read which one.

SHAWM FLEMING: Well, this is a combination of yours and Stevens now. He said individuals will have increased awareness of integrated inclusive recreation opportunities. What I put in there training in house to access these options. The way some of these things are written, and I think y'all have done great. Getting towards 4:00. These the way they are worded a lot of people have training and access to certain activities. And I will recommend, as we go back and review the checklist, is it a well stated goal. The outcome is really going, to me, will be worded something like people with developmental disabilities will have information related to opportunities on integrated inclusive recreational opportunities and how to access them. How we get there will probably be training. A couple strategies to implement to make people informed and aware of those things. There is going to be some wordsmithing between now and the next time y'all meet. But I think y'all have done great highlighting what you think is important in terms of big outcomes. Kind of how the conversation

started yesterday. Really trying to back up to write a goal. I don't want y'all to get caught up right now, the language, is it the activity, objective or goal. We are going to have to clean that up. But I think y'all have done great with putting all that down. My suggestion, unless y'all have more to add, is to take these and we will be sending these out to y'all and evaluate them against those standards of a goal and we will provide language recommendations on how to craft these. And even work, if we think it's an activity or objective, we will help try and craft some language for y'all consideration for the next time y'all meet. If that is permissible.

RANDALL BROWN: Yes. Thank you, sir. Appreciate it.

SHAWM FLEMING: To make a motion to adopt these as the intent of the direction and maybe to direct staff to, y'all can send us feedback on it and we can have some other language recommendations for how to maybe fit it into the five year plan format in terms of goals, objectives for y'all.

RANDALL BROWN: If the committee has no objection, I certainly take your suggestion there, sir. Look forward to seeing those suggestions and our edits at the next meeting.

COURTNEY RYLAND: Ms. Carhonda writes, can you please include training on working with individuals with developmental disabilities. I am inquiring due to Baton Rouge Zoo under the recreational park.

RANDALL BROWN: Yes. Thank you.

BAMBI POLOTZOLA: So, I make that motion that Shawn just stated in regards to approving what we just did for the past three hours. And having staff, Shawn you want to just type it out. Have staff put it in the format it needs to be for the plan.

BRENDA COSSE: Sorry, I thought Mr. Shawn had started typing what Ms. Carhonda had said. My screen is smaller. It was regarding training.

And she said something about Baton Rouge. But that is what I was trying to emphasize. We can pay for it, we can get them to the facilities. But when we get there if the staff isn't trained then it doesn't work out. It leads to frustration and melt downs.

SHAWM FLEMING: So, I perceive training to be a specific activity. When you look at your current plans and the goals if you think about it, people informed, staff who understand or qualify to do certain things. And then the training is how you get, you reach that goal. And so, if y'all will at this stage of the game in terms of the five-year planning. Let me just say each year y'all are a custom to putting in activities to achieve the goals and objectives. And so, I think it's okay that y'all wrote some things like this is what y'all see and my interpretation of that y'all expect for the parks and recreational staff to have certain competencies in serving people with disabilities. And so, in my mind I am already putting that to a different goal. I would like to present y'all and y'all will get there by providing training to reach that goal. Does that help y'all?

LILLIAN DEJEAN: A quick point of clarification, will we be developing specific objectives at our next five-year planning committee since we didn't complete that today?

RANDALL BROWN: I believe the answer to that is yes. We have a long process here. We have just begun. We are giving the staff areas of emphasis to work on. Once they come back with the recommendations they have and the language edits then we will begin to look at how we put that into action in terms of our goals and objectives. I believe the short answer to your question is yes.

SHAWM FLEMING: So, what I encourage y'all to do in the first handout or hyperlink of this meeting is sort of like an orientation package. This process

was approved by the council last April at the April meeting and the whole council approved it in July. This might give you a snapshot of where we are going Lillian and everyone else. So right now, we have done all these things. We are a little behind schedule, but not too much. Because in July, we're in June. This is your first meeting right here. You have not developed objectives. I would actually argue your goals we will need to polished up a little bit. But don't worry about that. There is some other activities. We're going to get with, the council is supposed to get with Human Development Center and Disability Rights Louisiana to review the public survey and discuss how we can collaborate together. We are going to develop a report for the five-year plan. And August when you meet again. So, we will be sending out of set of dates to schedule another meeting. You will review all this stuff again and we are going to give you what you created today and I am going to have some cleaned up language trying to capture what you said in goals and objectives. And then y'all will make a recommendation in October to the full council with that. With that plan of goals and objectives. Does that help you?

RANDALL BROWN: Anyone else have any questions or comments?

BRENDA COSSE: Yes, I thought we had a motion on the floor. Was there a second?

RANDALL BROWN: We do not have a second. The motion is there before us on the screen and it reads do adopt the goals as discussed and direct staff to create language to assign with the, can you help me with that acronym Shawn. What does it stand for? Evaluation of goals for the committee's consideration at the next meeting.

SHAWM FLEMING: Sorry, my mike was muted.

RANDALL BROWN: I was asking Shawn was does the acronym ITACC actually stand for if you know.

SHAWM FLEMING: Information Technical Assistance Center for Councils on Developmental Disabilities.

RANDALL BROWN: All right. So, the motion as Bambi has presented to adopt the goals as discussed and direct staff to create language to align with the ITACC informational evaluation of goals for the committee's consideration at our next meeting. Do I have a second to Bambi's motion?

LILLIAN DEJEAN: Second.

RANDALL BROWN: Bambi made the motion. Lillian seconded. Do I have any abstentions to this motion? Do I have any objections to this motion? Hearing none, this motion has carried. I want to thank you all on the committee for your work today. Thank you for your service during this whole process. I know it's a lot of work and I appreciate the work and input you have given today and yesterday as we began this process. Thank the public for your participation. You are invaluable to us and helping us to start our process. And so, thank you all for your participation and help today as well.

BAMBI POLOTZOLA: I just want to reiterate what you are saying. Been on the council many years over the past decade and this is a lot of work and I hope the public is able to see throughout that we're doing the best that we can to include everything that we know based on our knowledge. I know that inevitably we have left out needs in the development disability community, but we will continue to work through the process. Thanks everyone for participating and allowing me to participate. And the last thing I want to say is I don't know if everyone is like me, but I think I'm going to hear Courtney's voice over the weekend like coming like it's an angel from the sky talking to me. So, I appreciate Courtney's leadership and throughout the meeting and preparing for it as well as the rest of the staff. Thank y'all.

RANDALL BROWN: Thank you Courtney and Shawn. Thank you to the staff for all your assistance today and yesterday. Again, I want to thank everyone for your participation and echo what Bambi said. This is a long process. Certainly, whatever we unintentionally left out or forgot today, we are open to hearing all suggestions and all perspectives at all times. I thank you all for your participation. Do I have a motion to adjourn?

COURTNEY RYLAND: I think we just lost quorum.

RANDALL BROWN: We are adjourned.