RASHAD BRISTO: Good morning, everyone. This is the October 21st DD Council meeting. It's 8:30. We want to go ahead and get started. Do we have a quorum?

AMY DEAVILLE: If all council members could make sure that their cameras are turned on so we can check for a quorum. Yes. Dr. Barovechio just joined us. I believe that gives us a quorum. Give me just a second to check.

RASHAD BRISTO: Amy, you just want to do attendance, that way we can confirm for sure?

AMY DEAVILLE: Yeah. We can do a roll call. I do think that we have a quorum. But, yeah. Let's call roll. Ms. Nicole Banks.

NICOLE BANKS: I'm here.

AMY DEAVILLE: Ms. Kim Basile

KIM BASILE: Present.

AMY DEAVILLE: Michael Billings.

MICHAEL BILLINGS: Here.

AMY DEAVILLE: Carmen Cetnar.

CARMEN CETNAR: Here.

AMY DEAVILLE: Lillian DeJean.

LILLIAN DEJEAN: Here.

AMY DEAVILLE: Julie Foster Hagan.

JULIE FOSTER HAGAN: Morning. I'm here.

AMY DEAVILLE: Ms. Roslyn Hymel.

ROSLYN HYMEL: Good morning. I'm here.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Here.

AMY DEAVILLE: Melissa Bayham.

MELISSA BAYHAM: Here.

AMY DEAVILLE: Rashad Bristo.

RASHAD BRISTO: Here.

AMY DEAVILLE: Cheri Crain.

CHERI CRAIN: Here.

Jill Egle. Jill Hano.
JILL HANO: Present.
AMY DEAVILLE: Mitch Iddins
BRENDA COSSE: Good morning. Present.
AMY DEAVILLE: Mitch Iddins.
HANNA JENKINS: He is here, but switching over to panelist.
AMY DEAVILLE: Steven Nguyen. Matthew Rovira.
MATTHEW ROVIRA: Here.
AMY DEAVILLE: Mary Tarver. Dr. Phil Wilson. Dr. McKee.
HYACINTH MCKEE: Present.
AMY DEAVILLE: Bambi Polotzola.
BAMBI POLOTZOLA: Present.
We do have a quorum. We can proceed.
RASHAD BRISTO: Thank you, Ms. Deaville. Good morning, everyone. Thank you for your time. Busy people understand busy people. So we have business we want to take care of this morning. Want to acknowledge those of who are on Zoom. Just a few housekeeping rules, just want to remind everybody make sure you mute your mike until you're being called upon and recognized by the chair. Please try to make sure you keep your camera on for the most part. We do realize things come up and we have to take it off. But we want to be mindful when there may be time for a vote. Not only that, this is streaming live on YouTube and we just want to make sure that we're able to make the best decisions for those (inaudible). So at this time, Ms. Deaville, if you will, would you read the mission statement and put it on the screen for us.
AMY DEAVILLE: The mission of the Louisiana Developmental Disabilities Council is to increase independence, self-determination, productivity, integration and inclusion for Louisianians with developmental disabilities by engaging in advocacy, capacity building and systems change.
RASHAD BRISTO: Thank you, Ms. Deaville. Now the next item of business is the approval of the minutes.
The draft of the July 22nd meeting summary was distributed. Unless requested the summary will not be read. Are there any corrections to the summary? Do we have any comments in the chat box in regards to the summary, Ms. Deaville, or staff that's assisting?

AMY DEAVILLE: There's nothing in the chat box.

RASHAD BRISTO: Okay. If there's no objection the summary is approved and distributed. Seeing none. Are there no corrections or anything so what we'll do is we'll move forward with the summary. The summary is approved. Do we have any public comment? Also I have another ground rule we want to go over. When we have public comment, or we have any comments I'm going to ask that we try to limit to three minutes per person and be mindful and considerate of the people who are talking at the time. That way we stay in compliance and just be able to give each other a chance to understand.

At this point we're up to the chairperson report. I don't have a report to present at the moment. Tangible report, because I'm 21 days into being the DD chair. But what I did want to say is I did have a chance to contact some of the LaCAN leaders and some of the Families Helping Families directors just to kind of get their take on things they would like to see moving forward with the DD Council and with the State of Louisiana. I got a lot of good feedback. For those on here who I did not get a chance to talk to, don't be distracted by some numbers I did not have that were accurate. So I do plan on reaching out to each and every council member, each and every Families Helping Families director, executive director, as well as LaCAN leaders. Because, like I said, I just want to get an idea of where you stand.

One of the things I want do is I just want to kind of refresh everybody's memory of why we're here at the DD Council. We're all volunteers. Busy people understand busy people, and this is definitely a sacrifice of time. But I want you to refresh your memory on why you're here. What face drove you to want
to be a part of the council. For those of us who are self-advocates maybe it's the face that you saw in the mirror or maybe the face that you kiss goodnight before your child goes to bed. Refresh your memory on why we're here on the council. Refresh that passion. I'm sure everyone came on the council with the intention of having systems change. Now I realize that there have been times that sometimes things may not have been as favorable as you may have thought they should have gone. And that's fine. I just want you to remember, just refresh that face. We're not here for social status. Some things that we do, some things we say we're not even going to be liked. But we're here because we want to make a change. So refresh the face that drove you here. Refresh your memory. Have a new passion. Have a new zeal. That way we're ready to move forward in being the DD Council that the State of Louisiana can be proud of and those who we represent. Don't forget, we're forerunners. We're here to speak for those who are not in a position to do for themselves. With that being said, that's all I have as chairperson. I just want to move forward with the executive director's report at this time. So Ms. Deaville, if you're ready.

AMY DEAVIDELLE: Okay. This is the executive director's report. It's got the wrong date on the top. Sorry. I was doing everything super-fast this time around. Actually, no. This is just wrong. Hold on for a second. That was an incorrect link.

ROSLYN HYMEL: Which link are you trying to go on?

AMY DEAVIDELLE: The executive director report.

RASHAD BRISTO: Amy, Ms. Deaville, while you're doing that, let me digress for just a minute. Right behind the chairperson’s report I wanted to go over the Executive Committee recommendations.

AMY DEAVIDELLE: Okay.


AMY DEAVIDELLE: I'll pull those up on the screen for you.

RASHAD BRISTO: Okay. Thank you. Okay. So the
Executive Committee met yesterday, and these are the recommendations for the legislative agenda. There was a motion, can everyone see this? If you can give me a thumbs up. Okay. Great.

MITCH IDDINS: Can you make it a little larger, Mr. Chairman.

RASHAD BRISTO: Okay.

ROSLYN HYMEL: Thank you, Mitch.

RASHAD BRISTO: So the legislative agenda, that was motioned by Kim Basile and seconded be Jill Hano to move to accept the agenda items. Cameras in special education classrooms and data and accountability of cameras in special education classrooms. Address the language in Act 456 of the 2021 session. Appendix K exception family as paid caregiver. Funding for the comprehensive dental for adults with IDD. Support LAPIE's legislation to fund post-secondary programs. There were no objections, no abstentions and the motions carried. Reallocation of funds. Motion of surplus of federal funds can be distributed to Families Helping Families regional centers then distributed equitably to those impacted by the hurricanes. If not, then the funds would be distributed to existing contractors using percentages based on funding. Just to clarify what that was talking about. It was a question at the time, but it was clarified whether the FHF's could receive federal funds because they are state funded organizations. The Membership Committee, there's a motion to accept six listed candidates for the full council. And the executive director review, it was postponed to special committee session. We ran out of time. The Executive Committee meeting lasted much longer than we actually intended. So at this time, do I have any questions from any council members? Okay. On my screen I see the hand of Mr. Rovira. You're recognized by the chair.

MATTHEW ROVIRA: Thank you, Mr. Chair. Rashad, first, thank you and congratulations on being the chairman of the DD Council. It's a lot of responsibility and a lot of effort. So on behalf of
the colleagues on the council, thank you for doing this and for your leadership. Just a simple question on bullet number two, family as paid caregivers. I know there was, and this may be getting too granular, but there was discussion of capping that at 40 hours a week. And I don't know if this is the appropriate time to discuss that, but, you know, some family members are working 52 hours a week because the plan of care may be above 40. And at the appropriate time I'd just like to have a full discussion regarding that little granular aspect of that. In other words, the number of hours per week a family can work as a caregiver. I think there was sort of a proposal that I saw drafted that they would cap that family member or that household at 40 hours. So when the appropriate time comes if we could discuss that as a full council.

RASHAD BRISTO: Thank you. And it's noted. I don't have a response for you at the moment. I need to check into that myself. The next hand I saw was Ms. Roslyn Hymel. You're recognized by the chair. Roslyn, you're muted.

ROSLYN HYMEL: Did you call on me?

RASHAD BRISTO: Yes. I saw your hand was raised. I was recognizing you. Was it an error?

ROSLYN HYMEL: No. It wasn't. I was looking for what I was seeing in that in here even with the hurricanes for the classes in that or classes in that are they going to really start picking up again? Or are they going to do the classes on Zoom, or how they going to do that and all? Because for what I'm reading and understanding in that even with Families Helping Families, if I'm reading this right, even with Act (inaudible) session in that. What's going to be, how is that going to work along with what the classes and what the hurricanes coming? Cause we had a hurricane not too long ago for us and we had to evacuate to Pineville. And now we can't go (inaudible) on campus. They had some damage, and we can't go back at all until, you know, they get it all, you know, together. So that's my concerns right there. Even when it says
for the hurricanes.

RASHAD BRISTO: Okay. I apologize. On my end you cut out a couple times. I want to make sure I was clarified. You were asking in regards to the funds that were going to be distributed to the Families Helping Families?

ROSLYN HYMEL: Yes.

RASHAD BRISTO: Okay. And the question was?

ROSLYN HYMEL: What it was is for the classrooms with the hurricanes in that how are they going to (inaudible) fund? Are they still going to fund with it, with the Families Helping Families even when they had a hurricane in that going toward the classrooms with Act 456 of the 2021 sessions going toward the hurricanes with Families Helping Families.

AMY DEAVILLE: Roslyn, if I'm understanding you, those are two different things that we're talking about. So the cameras in the classrooms, that's on our legislative advocacy agenda. So we're going to advocate for that this year or next year in the legislative session.

ROSLYN HYMEL: That is my number one. That's one question I had.

AMY DEAVILLE: Yes. So then the second thing, the Families Helping Families regional centers, they will receive, the centers that were impacted by hurricanes will receive some additional funding that we had. That funding will have to be used for programs that they do, that they put together. And so we haven't really figured out exactly what it is that they will do with those funds yet. But we'll be working on that.

ROSLYN HYMEL: Okay. And that one was my second question.

RASHAD BRISTO: Thank you. I see Steven Nguyen's hand.

ROSLYN HYMEL: That's what I wanted to find out because it threw me for a loop.

RASHAD BRISTO: Thank you, Roslyn.

STEVEN NGUYEN: Good morning, everyone. I just had a question. Can somebody confirm what LAPIE stands
for? Thank you.

AMY DEAVILLE: If I remember correctly, it's the Louisiana Alliance for—hold on. I'd have to look it up. They do post-secondary education programs.

STEVEN NGUYEN: Thank you.

RASHAD BRISTO: Thank you, Mr. Nguyen. Ms. Polotzola, I see your hand up. You're recognized by the chair.

BAMBI POLOTZOLA: I think Jill Hano had her hand up before me.

RASHAD BRISTO: Okay. Thank you. Ms. Hano, you're recognized by the chair.

JILL HANO: Okay. Hi, y'all. Oh, the performance report that we're going to go in executive session. I didn't get a chance to write the due date down last night. When is this performance report due?

RASHAD BRISTO: The performance report?

JILL HANO: For the executive director.

RASHAD BRISTO: It's actually due within the first six months. I think we have until, correct me if I'm wrong, January.

AMY DEAVILLE: I make six months in November.

JILL HANO: Oh, okay. Cool.

RASHAD BRISTO: I'm going to circle back around on that as well. I want to get the other comments out the way. Ms. Polotzola, I see your hand. You're recognized.

BAMBI POLOTZOLA: Hi. I actually had a question, and I made some comments yesterday at the Executive Committee meeting. But my question is for the second bullet where it says appendix K exception family as paid caregiver. Does that mean, are we talking about family, any family, siblings or grandma that type of thing or are we talking about legally responsible rep? That's very two different things in my view. Or my opinion.

AMY DEAVILLE: I believe that the intention of LaCAN is legally responsible rep as paid caregiver.

BAMBI POLOTZOLA: Okay. So just some points I brought up at the Executive Committee meeting. I'm
very concerned about this. First off, I don't think that it is aligned with what our mission statement is that was read at the beginning of the meeting. I can see where there's some issues where it could not be moving towards our mission statement. But and also, I've talked to people to try to understand what was going on with this. It seems like we're moving from a system of where we want families to be able to get the supports that they need for their person with a developmental disabilities, which I know very well and personal what that means, to a system of where we are financially giving some financial assistance to families. So I feel like we're setting ourselves up to maybe some political pushback. If we want the legal representative of the person to be paid and not get a caregiver, then maybe we're looking at another system. We're saying families need some financial assistance the same way they get financial assistance through social security or those type of things. My other concern is that while families, I know that families will not intentionally do this, whenever if we start do allow parents or the legally responsible rep to begin to get this income there could be instances where they're making decisions maybe because their family has grown dependent on that income that's coming in. And maybe it's not in promoting the independence of the person with a disability. And I really feel like we will be moving away from that and moving away from independence of, looking at independence and self-direction and those type of things. I mean, self-direction as in the person with a disability making the decisions, being independent in the community. So I'm not totally against it. I'm talking to people trying to figure out what does this mean. But just wanted to throw that out there that I have really concerns for the long-term systemic change that this is addressing. I know there's problems that this is trying to address, and I just am concerned this is not exactly the way to get there. But I also will say, and wrap this up, Kathy Dwyer responded yesterday, and this may be
correct what she is saying that there are some rules from CMS that will alleviate some of the concern that I have because they have some rules that will address some of the things I'm concerned about. So that's it. Thank you, guys.

RASHAD BRISTO: Okay. Thank you, Ms. Polotzola. And your comments are noted. And like you were just saying, it's definitely a two-edged sword. It could be either way based upon the discretion of those individuals. I see Ms. Hagan, your hand is up. You're recognized.

JULIE FOSTER HAGAN: Thank you. And I was going to cover this in my report, but just thought it might be good to share here. So you guys should have all received sort of the invitation to register for one of the focus groups. We're always happy to hear comments of the council as well, but wanted folks to be aware that next week and the following week we are going to have a focus group that will be specifically talking about this. We've had, I think (inaudible) register for this particular focus group. We're going to be looking at a diverse group of cutting it down to 25 people so that we can truly have a working group. But I'm happy to share all of the information because we are, Bambi just mentioned there are CMS regulations related to using legally responsible relatives. There's been a recent CMS power point presentation that really focused on those regulations. So part of what we will be doing in those focus groups is sharing what the regulations are. Where we were before covid, what's happening during covid. Hearing the concerns, as Bambi said. And, you know, sharing all the information. The first meeting will be engaged in sort of a brainstorming. And then the second meeting will be on let's see if we can come to a compromise. Because what like to do is be able to get this information into our waivers and to CMS well before session. Because we don't know how long the public health emergency will be. We know right now that it's extended to January. We know we have six months after
that. We know that the Biden Administration has told us they would give us at least 60 days’ notice before they end the public health emergency so we would have time. But it still takes a long time to get our waivers in place. We are hopeful that from our focus group meetings over the next two weeks and then a large stakeholder meeting that everyone will be invited to on November the tenth. It will be filmed. We will be sharing the outcome of all those focus groups, sharing what our plan is. People will have an opportunity for public comment there that we consider before we finalize decisions. But we are working to try to get the waivers amended and changed before session. Again, that's not because we don't want things vetted in the legislative session, but because we want to make sure that we have them in place. And right now that looks like it would be July. Again, it may be extended so it might extend it longer, but we don't want to risk it. So we are trying to get those amendments ready to go to CMS by at least February or March timeframe. So just wanted to share that with folks.

RASHAD BRISTO: Okay. Thank you, Ms. Hagan. Mr. Iddins, I see your hand. You're recognized by the chair.

MITCH IDDINS: Thank you, Mr. Chair. Jill, would you mind providing some clarity for me and maybe others on the council of a legally responsible caregiver verses some other family paid caregiver.

JULIE FOSTER HAGAN: Was that to me? Is it okay, Rashad, if I respond?

MITCH IDDINS: Yes, ma'am. That was to you, Ms. Hagan.

RASHAD BRISTO: Yes, ma'am. You can respond.

JULIE FOSTER HAGAN: So one of the things that CMS says in the regulations is that a legally responsible relative, they give examples of legally responsible relatives, but they say that it should be identified in your state law what that definition is. We have searched high and low and haven't really been able to find that. So one of the things that we know that we
may have to do is actually work with our legal department to get that in. But typically a legally responsible relative is the parent of a child or a legal guardian. So if you are a parent of an adult with disabilities that would not be a legally responsible relative unless you are their curator. Typically. Again, we still need to do some additional research to make sure that it's not defined somewhere. But it may be that we have to actually define that in statute as well.

MITCH IDDINS: So is Bambi's concern more with the legally responsible person being paid as the caregiver or some other family member, say a brother or a sister who's staying home and caring for a person? Is the concern more about a legally responsible person getting paid to provide that care? Is that what your concern is, Bambi, just for my clarity?

BAMBI POLOTZOLA: Yes.

MITCH IDDINS: Thank you.

RASHAD BRISTO: Thank you, Mr. Iddins. And thank you, Ms. Hagan and Ms. Polotzola. Are you satisfied with the responses, Mr. Iddins?

MITCH IDDINS: Yes, Mr. Chairman.

RASHAD BRISTO: Okay. I saw Vice Chair Nicole Banks hand. Vice Chair Banks, you're recognized by the chair for your comment.

NICOLE BANKS: I'm sorry, guys. I'm just having a lot of technical difficulties. It was an accident. You can move onto the next person. I'm trying to get my computer situated.

RASHAD BRISTO: No problem. Wonderful world of technology. Thank you for that. I see Ms. Roslyn Hymel's hand. You're recognized by the chair.

ROSLYN HYMEL: Thank you on that. For Jill, this is what I want to know in that for my guardians in that is my aunt and uncle, could they be considered as my guardians as well? Could they really help me out with, you know, what I really need in that to help me out with everything that, you know, with the funds that I could use? Or does that mean what you were saying, not
to be found into with what you were saying to Mitch's question?

JULIE FOSTER HAGAN: Is that to me, Roslyn?

ROSLYN HYMEL: Yes. It is.

JULIE FOSTER HAGAN: So my understanding is this wouldn't impact people that are part of your support system who help you do things in your daily life. This isn't a question about that. What we are exploring in the focus groups is when somebody who is your family—now we've never had a prohibition on family being able to be paid to be able to be your direct support worker as long as it's not your legally responsible relative and as long as that family member doesn't live with you.

ROSLYN HYMEL: No. Cause I'm in the group home setting, like I'm in Magnolia. That's why I was saying that because I wasn't even really, you know, sure so even me being in a group home setting, does that mean with the DSPs and a case manager would even step in like that to help me out with everyday living as well? How does that work? How does that go?

JULIE FOSTER HAGAN: To my knowledge, for the ICFs there's not a prohibition from your family member working at that ICF. You know, being whether that's a direct support worker or your case manager or what not. So if they are, for those folks who live in an ICF the exceptions and the changes we're talking about are for people who are receiving home and community-based waiver services. (Inaudible) paid to provide services to them directly.

ROSLYN HYMEL: Yeah. You know, that's what I wanted to find out and I just used it myself as, you know, as an example of it in that. That's how I could find out my answer.

RASHAD BRISTO: Thank you, Ms. Hymel. And thank you, Ms. Hagan. I see Ms. Egle, you have your hand up. You're recognized by the chair.

JILL EGLE: Yes. Ms. Julie Hagan, I have a quick question. So I know I receive state services to go to The Arc of GNO Uptown Community Center and I have a DSP
there. But how could I get a DSP if ever that comes outside of that? I think my concern is if they look at me as leader and highly functioning in the State of Louisiana and all that I do turning me down. Cause I always wonder, I don't have no like anything outside of The Arc as my DSP is through the Uptown Community Center. In terms of a DSP or someone to represent you outside of The Arc of GNO I'm concerned they would turn me down and everything would be taken away.

JULIE FOSTER HAGAN: Well, Jill, what should happen is you should be having conversations with your support coordinator through your person-centered planning meeting to talk about any other services that you might need. If that's not happening, you got my email. Shoot me an email and we can chat offline.

JILL EGLE: Also, cause I know you're familiar with The Arc of Greater New Orleans with your line of work through the Office of Citizens with Developmental Disabilities. When are our plans due at the end of the year? You know for the support coordinator to renew every, services that we get from y'all. When is that due?

RASHAD BRISTO: Excuse me just one minute before you respond, Ms. Hagan. Jill, before we start taking too many (inaudible) across the pasture we want to make sure we stay focused on the legislative agenda.

JILL EGLE: Oh, I'm sorry.

RASHAD BRISTO: No problem. And I just want to remind everybody, it's easy because we're passionate about what we're talking about to get distracted, but we don't want to get too far off of the legislative agenda. We haven't even gone to public comment yet. So we want to make sure we're mindful of that. I don't see any questions from any committee members. Do we have any public comment? Maybe I'm overlooking it. I don't see on my screen. Ms. Deaville, can you assist me?

AMY DEAVILLE: Yes. We have one comment in the chat. Ms. Corhonda Corley says does the option exist for this issue to be tabled, and I believe she was
talking about the Appendix K exceptions, until those meetings take place. And I believe that refers to the OCDD feedback sessions. And the Executive Committee reconvene and make an executive decision regarding this. And then you have one attendee with her hand raised and Dr. McKee just raised her hand.

RASHAD BRISTO: Okay. Who is the attendee? Dr. McKee, I see your hand, but I want to make sure I'm in chronological order.

AMY DEAVILLE: The attendee is Ms. Liz Gary.

RASHAD BRISTO: Okay. Ms. Gary, you're recognized by the chair.

LIZ GARY: Thank you very much. I just wanted to take the opportunity really quick to just remind everyone that we did have these Appendix K exceptions. This was one of several Appendix K exceptions that The Arc of Louisiana had brought forward last year. And there was an enormous amount of support from it from all the legislators and they really were interested in this and working and seeing. And we did not hear any, if at all, against it from the legislators.

But the other thing I do want to say is is that this has been going on for many, many years. I mean, my son is 19 years old, and I can remember back 19 years ago when a family friend who had a daughter with down syndrome told me whatever you do, see what you can do to get on that MRDD waiver. Which is now the NOW waiver, supports waiver, whatever, the ICFDD waiver. Whatever you do make sure you find what you can in other states and fight, fight, fight because other states are letting family members and parents be the caregivers. The goal of all that even 19 years ago was that parents had to work and if they couldn't work because they needed to stay home and take care of their individual then at least they could get paid to be able to stay home and take care of the individual. And this is happening a lot. It's occurring a lot and we see it now even more with covid. It's not something that's new. It's been around forever and many, many states are doing it. And Ashley McReynolds and I were told
two years ago at a conference, Reinventing Quality Conference, that we are the only state with one other state that does not allow this to happen. So I just wanted to share that and make sure that everybody is aware. That it's not something new Louisiana's all of a sudden deciding on and wanting to do. It is something that's important and it's been around for a long, long time in other states.

RASHAD BRISTO: Thank you, Ms. Gary. And also, I want to digress for just a minute to recognize Ms. Corley's question. A lot of that will depend basically, Ms. Corley, on how the council decides to vote on the legislative agenda. That way we'll know what decisions need to be made based upon that. So I didn't want you to think I dismissed what was said. Dr. McKee, I see your hand. You're recognized.

HYACINTH MCKEE: Thank you. And I also wanted to make a comment what you're just saying, Mr. Chair. Thank you for being recognized. The next Executive Committee meeting that will be convened will only discuss the executive director's review. No other issues will be added to that agenda item. To that agenda for discussion. So we will not be able to discuss any issues as it relates to what's the outcome of this until the next executive, standing executive committee meeting or either the next full council meeting. So again, that special executive committee meeting is only being convened to discuss the executive director's review.

RASHAD BRISTO: Thank you, Dr. McKee. Ms. DeJean, I see your hand. You're recognized by the chair.

LILLIAN DEJEAN: Thank you. I'll make this quick cause I know there's been a lot of discussion on this. But I just wanted to say that if the Appendix K exception went through my family would be a family that would utilize this because even a DSP, even if I had a DSP staying with me the DSP wouldn't be able to take care of my entire medical routine. And so if my mom were to go to work, I wouldn't be able to be properly taken care of. And so this would allow my family to be
financially stable and for my medical needs to be taken care of because whenever I have a DSP here, they still can't access my meta port. They still can't mess with my ventilator. They're not even supposed to mess with my feeding tube. And so these are all things that I need assistance with. And so there's really no point if a DSP can't help me with this things, right? Because that's what I need assistance with. And so this is why my family would utilize this because this is something that my mother would be able to help and assist with as well as help financially support my family in that my mother also can't take care of me from work, right? But she can't go to work because I can't necessarily be left home alone for long periods of time. And I think Melinda Elliot also put in the chat that this would address the DSP shortage that we've seen for years and years and years now. So we've seen provider agencies scrambling to get DSPs and yet there's some families like mine who we can't get DSPs. And DSPs aren't enough for my care. So I just wanted to give that 2 cents. Thank you.

RASHAD BRISTO: Thank you for those comments, Ms. DeJean. Mr. Iddins, I see your hand. You're recognized by the chair.

MITCH IDDINS: Thank you, Mr. Chair. And I'll be brief. I certainly echo what Lillian DeJean just said. Just recently I was working with an individual on the NOW waiver who went into a nursing facility because of an automobile accident, and we transitioned this person out to come home. And when we got this person home the biggest issue that we had was finding DSPs for this person. Because he needed 24-hour care. Prior to that, he didn't necessarily need 24-hour care because the automobile accident his needs were tremendous. And we worked with his provider agency who said that yes, we can provide 24-hour care. We can find him some workers. The very first day I went to check on him I went over there and knocked on the door, no one came to the door. I could hear this individual inside his home yelling. So I finally just opened the door, and this
DSP was asleep on the couch. Long story short, we had to utilize his family members to come in and be his caregivers because the provider agency could not provide DSPs in his home to provide the care that he needed. This person was lying in bed yelling to the top of his lungs. This person was less than 10 feet away from him sound asleep. I had to physically wake this person up off the couch. She was in a dead sleep. So my point is we had to, right now the only caregivers that they can find are family members that are willing to make the sacrifices for him. His brother actually had to quit his job to come in and provide his care. So I understand the concerns about some family members being paid caregivers, but right now with the crisis that we're in to find direct service care providers and to find good DSPs it's a crisis in our state. And if our family members are willing to step up to the plate and provide the care that we need I don't see any problem with that. And I think it absolutely should be allowed. But that's all I have to say on it. Thank you.

RASHAD BRISTO: Thank you for your comments, Mr. Iddins. I don't see any more hands. Do we have any public comment?

AMY DEAVILLE: Kathy Dwyer and Corhonda Corley have their hand raised.

RASHAD BRISTO: Okay. Ms. Corley, you're recognized by the chair. Ms. Corley, you're recognized by the chair.

CORHONDA CORLEY: Good morning, Mr. Chairman and full council. Thank you. They just provided me to unmute option. I'll be extremely quick. I want to talk about how this is a double edge sword. I'm going to echo the same sentiments that Ms. Polotzola did. As a family member there is a thing called family member fatigue. Just like there is the same term used for caregiver fatigue which can be that family member. This opens up the door and the window for individuals that are vulnerable, such as our people with disabilities, to be abused. So I want us to consider
that. In addition to considering that, I want us to look at if we can push for the Appendix K exemptions, but also push for direct support workers to have a more livable wage. I know that was an agenda item last year and we only was awarded 2-dollars. Let's push for more than 2-dollars or again, another 2-dollars for this year. Because there are many individuals who cannot stay home with their family member, but would actually be able to afford to pay a direct support worker. And if a direct support worker is paid a more livable wage, than they can actually give us the actual care that is necessary and so much highly required. But when you're giving people pennies you cannot anticipate them to give you a fifty-dollar worth. So I'm thinking that maybe we should look at doing both.

And I know that Dr. McKee stated that the next executive session would only be to address the evaluation for our executive director. But I think that maybe we can have another executive session, post that before so that we can give LaCAN the opportunity to actually know what our agenda is before round tables start. Because there is so much dialogue happening with this, but I definitely understand that hesitation that Ms. Polotzola stated. I also understand exactly what Ms. Gary stated and Ms. DeJean. And being a parent of a child with a disability I can tell you how it can go both ways for me. So I just hope that we can really and truly utilize the meetings that OCDD will be having to our advantage to actually be able to get a more broader prospective and look at maybe having the Appendix K exemption with the increase of livable wages for direct support workers. Because I know that that was something that our dearly loved and belated former chairman Ms. April Dunn, that was something that was near and dear to her heart. Was getting our direct support workers a more affordable living wage. So I hope that that can help you, Mr. Chair, and full council with your decision. Thank you so much.

RASHAD BRISTO: Thank you for those comments, Ms. Corley. Ms. Dwyer, your hand is up. You're recognized
KATHY DWYER: Thank you, Mr. Chair. And I apologize if anything I say may be repetitive from what everyone else says because I unfortunately just came on because of other obligations. I want to address the family fatigue issue first. Again, I missed that entire conversation, but I don't think legally responsible relatives should be expected to do all the care. It shouldn't be an all or nothing program. There should be some allowance for the individual to receive services, be it day hab or something else to give families a break. Just as direct support workers are not expected to work more than 16 hours, the same should apply to families. I don't see this being a panacea for families to make tons of money. Children's Choice typically limits hours to 20 hours. So it's not like they're going to be making full-time. Those that get other waivers is because they need the additional support. Adults with developmental disabilities typically do not have caregivers caring for them. So there is no reason not to respect the fact that they should be paid just as the DSWs be paid. Cause in typical families for those without disabilities a parent is expected to care for them, especially all their self-care needs.

In terms of—sorry. I'm losing my train of thought a little bit. I guess I'm confused why there is an objection. Act 378 is the individuals and families community support system. It was started to not only support the individual, but the families too. Because it's recognized that they do have a natural responsibility of taking care of their loved ones through their entire life. Past the childhood age. And to give them support. I don't see it being a conflict of interest in any way to pay a caregiver to do something that's not expected of the average family without a person with a disability. We do have extraordinary responsibilities. And if I offend somebody with this language, I apologize. But I'm just trying to make my point. My daughter was the first of
100. I know I've said this before. When the waiver started, she was just beginning high school. There was no services at that time. I was beginning to have to choose between quitting my job and somehow figuring how I'm going to support us so that I could take care of her after school or go on government assistance. Fortunately, the waiver program was approved right around the same time. And this did allow her to participate in after-school activities while I worked. Because I was a single parent, my choices were few. And although my choices were a little bit better because I was also a state employee, but I also had to use my sick and vacation time whenever I had to take her to the doctor, go to IEP meetings, you know, go to plan of care meetings and so on and so forth. There's always an extra cost on families. So I see no reason why a family who has extraordinary responsibilities that would prevent them from maintaining a typical job be paid to do more than normal caring for an individual, you know, for their loved one. Just to make sure they get the best care. Granted, there are some families that might need more monitoring, or maybe there's not a good situation for a family to do this. There should be a way to then to somehow assess that and weed that out. But the majority of families love and care for their loved ones. I just don't understand these concerns, to be honest. With all respect to everyone that expressed concerns. Thanks.

RASHAD BRISTO: Thank you for your comments, Ms. Dwyer. Mr. Rocca, I see your hand. You're recognized by the chair.

TORY ROCCA: Thank you. I just wanted to address with respect to a pay increase for DSPs. My organization supports that. But I do think if we were to go down that road, not that we are right now, if we were to go down that road, we need to be mindful of what happened last year in this past legislative session with requesting the pay increase for people who are on waiver services, for workers who are providing services, people on waiver services. And the intent
was to have a pay increase for those workers across the board for people who are on DD waivers and adult waivers as well. And that, of course, got messed up in the legislature. Not to the fault of the legislators. The New Opportunities Waiver couldn't fund the adult services pay increase. So we ended up with a large pay disparity now, an increased pay disparity. Pretty large now between workers who are providing DD waiver services and workers who are providing adult waiver services. And LDH is trying to address that as best they can right now. But it's definitely a problem that we have to be mindful as we, or if we think of asking for another pay increase for DSPs because I don't think so we should be doing things that create or increase that disparity that's already there that has to be addressed. And that wasn't the intent of the council last year. It's just how it worked out in the legislature. I just think we should be mindful if we were to think of asking for another pay increase aside from whatever other issues (inaudible). We don't want these exacerbated, the pay disparity (inaudible).

RASHAD BRISTO: Thank you for those comments, Mr. Rocca. Dr. McKee, I see your hand. You're recognized.

HYACINTH MCKEE: Thank you, Mr. Chair, for being recognized. Thank you, Mr. Rocca. You could not have said that better. Of course, you have more of a legal expertise than myself when I vocalize those cause sometimes when I say things comes out as passionate. I want to be clear with the public. The DD Council fully, fully advocated for all of the increases in dollars to go directly to the direct support professionals. We wanted all of the dollars to go there. We received political pushback to go into a compromise to allow for some of the money to go to administrative costs and the rest of the money to go to the DSPs. When we start talking about political pushback, I want the public to know that we stand behind families and caregivers to support them and we hear their needs. So now we're faced with the Appendix K exception. So now we can't get all of our dollars to
go to our DSPs when we know we're not paying them enough. When we know our families can't find consistent caregivers, DSPs or people to work with their family members. So now we're going to go and tell our families again well, no we're going to pull this out because we're afraid that you're going to make money off of the system. I'm just not sure where we are today, folks. I really thought that we were here to support our families and our caregivers and our self-advocates. Political pushback. That is not why I'm here. And I feel strongly that this Appendix K exception should stay as this motion was made by Executive Committee. And it should not be any changes. If those are concerns about whether people are going to misappropriate money, I'm sure they'll be some protective measures in place by CMS, or the departments, or the powers that be to ensure that this may not happen. But again, it just seems to me that every time we start talking about dollars and cents the families and the caregivers are being cut of the discussion. so I fully support the way this proposed motion was made by the executive committee. Thank you for your time.

RASHAD BRISTO: Thank you, Dr. McKee. Ms. Egle, I see your hand. You're recognized.

JILL EGLE: You know, as an advocate for The Arc of Greater New Orleans and as an advocate for the DD Council for all people with intellectual, developmental disabilities with the Appendix K we need more people, PCAs and DSPs to provide the level of support. Maybe I can't get it, but these people, there needs to be a big turnout with the legislative session. You know, because these are my people that I fight for every day and advocate to make sure that they're not living on the streets, and they get the level of support. And it's emotional to see what people have to go through.

RASHAD BRISTO: Thank you for those comments.

JILL EGLE: You're welcome: I'll do anything there is to make that change.

RASHAD BRISTO: Ms. Hano, you had your hand up.
You're recognized by the chair.

JILL HANO: Dr. McKee, I hope you saw in my camera, but in case you missed it, I was giving you a big round of applause. Like that was very well said, Dr. McKee.

RASHAD BRISTO: Thank you, Ms. Hano. Vice Chair Banks, I see your hand. You're recognized.

MITCH IDDINS: I believe she's still muted, Mr. Chairman.

RASHAD BRISTO: Vice Chairman Nicole Banks, you're recognized by the chair. I see your hand. She may be having technical difficulties. She was struggling with that yesterday. Do we have any more comments before we move?

AMY DEAVILLE: Melinda Elliot and Kathy Dwyer have their hand raised.

RASHAD BRISTO: Okay. Ms. Elliot, you're recognized by the chair.

MELINDA ELLIOT: Thank you, Mr. Chair. One of the other things that I wanted to mention is that not all legally responsible-- well, two things. Not all legally responsible adults are going to want to work as their loved one's direct support worker. So I don't think that it's all parents that that we're talking about. And so the parents that work for the providers, DSWs have to do things that every other employee of that provider has to do. They have to have, depending on the plan, weekly meetings with the provider. They have to have quarterly meetings with the support coordinators. They have to turn in information about their insurance, their registration, their inspection sticker, their driver's license. They have to do daily checklist, progress notes, charts. And I'm sure if you give me a while, I can think of some other things that they have to do just like every other employee. I know it's not perfect. I know DSWs can be less than desirable, and parents can be less than desirable. Legally responsible adults can be less than desirable. But I think we're, like by not doing this we're leaving out a whole group of people that are ready and willing to work if we can make it possible. Thank you, Mr.
Chairman.

RASHAD BRISTO: Thank you for those comments. Ms. Deaville, who is the next person that had hair hand up behind Ms. Elliot.

AMY DEAVILLE: Kathy Dwyer.

RASHAD BRISTO: Ms. Dwyer, you're recognized by the chair.

KATHY DWYER: Thank you, Mr. Chair. One other thing I forgot to point out cause I was getting a little passionate there. I noticed during covid 19 since I have been my daughter's legally responsible relative that she has gained a lot of progress in communication and just everyday living skills because of the time I'm spending with her as opposed to the time that some DSWs have spent with her. She knows what our complete routine is. She knows she's learning how to get dressed. She's finally learned how to put her shoe on the right foot. She knows everything that has to happen in order to prepare her breakfast and her lunch. Knows how to do the wash. There's so much I've been able to teach her while we're home. A lot of it because I'm modeling it for her. So the notion that it will not, that parents may not help their loved one reach their maximum potential I think is just unfounded. I've witnessed it myself. Even my daughter's communication has improved significantly because I take the time to talk to her and explain things to her and answer her questions where I've observed some DSWs don't. And I really don't want to bash DSWs. I know there's a lot of good ones out there. But there just aren't enough. And the pay raise is not going to solve the entire problem. There needs to be a pay increase plus competency-based training. Without that competency-based training we are not going to get the quality DSWs our loved ones deserve.

RASHAD BRISTO: Thank you for those comments. Vice Chair Banks, I see your hand. You're recognized.

NICOLE BANKS: Thank you for recognizing me. I'm just apologizing. I'm having a lot of technical
issues. I'm having to switch from my laptop to my phone. From my laptop to my phone. So just bear with me. I hear a lot of, like I heard Mr. Rocca say about the political pushback, Dr. McKee say the political pushback. Can we get some clarification on exactly what kind of political pushback. Is this the language that we're putting in legislation or is it some kind of negotiation that occurs and that's going on where we have to speak to them about different verbiage or the way that we want this or exactly what we want? I just need to know exactly what kind of political pushback because if it is I'm pretty sure that people up on this council that can help us with that political pushback, whatever it is. I just wanted to know what kind of political pushback it is.

RASHAD BRISTO: Thank you for those comments, Ms. Banks. Mr. Rocca, would you like to answer her question for the vice chair. Dr. McKee, are you in a position to answer that question or try to answer that question for the vice chair?

AMY DEAVILLE: I believe Dr. McKee had to step out.

RASHAD BRISTO: She did send an email. Okay. It's a passionate issue. Do we have any other hands that are raised? Let me just say this though. Like anything else, it's just like a car coming off the assembly line. It's never going to be perfect and sometimes we may have what we consider proverbial factory recall. But there's going to be both sides whether it be manipulation from (inaudible) done something that has been unbecoming to make people feel not as impassioned about it or whether it be the fact that there's a burnout. It's evident that many people are passionate about this conversation. Do we have any more comments before we move forward with the legislative agenda?

AMY DEAVILLE: Kelly Monroe has her hand raised. Jill Egle, Mitch Iddins and Nicole Banks. But I'm not sure if that's new or if that was from before.

RASHAD BRISTO: Okay. Ms. Monroe, you're recognized and finally Mr. Iddins and then Ms. Egle.
KELLY MONROE: Can you hear me? Okay. Thank you. So I just wanted to clear something up. There was no political pushback when it came to the exceptions. Where everything kind of fell a part was the department felt like they were going to need to have extra oversight with that exception. And there was a fiscal note put on there that was, I want to say like it was 3 or 4 million dollars. I can't even remember what it was. But it didn't make it because of that it had to go to senate finance. And it didn't have time to go through the process. But we never had any legislator have a problem with any of the exceptions. They were actually all very supportive. So I don't know if that helps. But there was no political pushback at all. And we were the ones who pushed for that legislation. So, you know, I'm not sure where that came from. But that did not happen. Thanks.

RASHAD BRISTO: Thank you for putting that in prospective for us. Mr. Iddins, you're recognized by the chair.

MITCH IDDINS: Thank you, Mr. Chair. Rashad, I just wanted to say, you know, as a person with a disability that receives person care attendant services, I just have a big problem with the state or the federal government trying to tell me what is best for me regarding my care. That should be my decision. It doesn't matter if we have well paid, well stocked DSWs out there in the community that can provide the care. Or if I have a family member that is eligible and able and willing to provide the care, I should have that choice. It should not be up to the state to tell me what's best for me and my home and my care or the federal government to tell me what's best for me and my care and my home. That should be a choice that I should be able to make. That's all I have to say about that.

RASHAD BRISTO: Thank you for those comments. After Ms. Egle—— excuse me. I see Vice Chair Banks. We're going to go ahead and start moving forward and wrap this up for a motion. We've been bogged down on
this for about, passionately for the last hour. I know everyone's still going to want to take a break. So we want to be very mindful of that. Ms. Egle, you're recognized by the chair. Thank you, Mitch, for those comments.

JILL EGLE: The DD Council or somebody explain to me what is it about Appendix K and political pushback. My mind is not all there, and I just want to understand what this means.

RASHAD BRISTO: Let me put that in prospective for you, Jill. Basically what they're saying with political pushback is, just like Mr. Iddins said, we're passionate about it because we're on the frontline of receiving these services and knowing the things we dealt with. And then there are those who have not been, had an opportunity to experience the things that we've experienced so they don't have the same position to be able to relate to understand that. Just like we were saying earlier, if you've been burned by a con artist one time most of the time when you deal with somebody else you think you're going to get burned all the time. There may have been predecessors who've manipulated, who may not have done rightly, and those things are left on those who have political influence mind which will make them have reservations about wanting to listen to what we're trying to say. So that's where they're coming from about that with political pushback. I hope I answered your question.


RASHAD BRISTO: Okay. Vice Chair Banks, you're recognized by the chair. I see your hand up.

NICOLE BANKS: Thank you, chair, for recognizing me. In regards to she said there was no political pushback and she said it was the extra oversight. And because it was the oversight it had to go to the senate finance and for them to make a decision on it. Is that correct? Just wanting to understand, making sure that I understand exactly what happened with the Appendix K the first time.

AMY DEAVILLE: Yes. That's what she said.
NICOLE BANKS: Yeah. Okay. Okay. So that's what she said. So it had nothing to do with them agreeing with anything that had to do with the deal. It just had, now this exception and this oversight, did this have to do with the actual cost that it's going to take to do all of this stuff, or it is something else. Is that where that oversight is coming from, the extra 3, 4-million dollars?

AMY DEAVILLE: Yeah. So LDH attaches a fiscal note to it based off of what they think it will cost for them to provide that service. So whether those costs were solely for oversight or whether there was something else that went into it, I don't know. But it ended up with a large fiscal note which meant that it had to go before the Senate Finance Committee and that's where it ended up kind of dying because it just didn't have time to go through all the channels to get done in time.

NICOLE BANKS: Okay. It didn't have a chance to get to the proper channels how it's supposed to get so it could have been passed how it's supposed to pass. Is that correct? Okay. I was just reading the comment. Sorry. Thank you, Ashley.

RASHAD BRISTO: Mr. Iddins, I see your hand. You're recognized by the chair.

AMY DEAVILLE: I think that was a mistake.

RASHAD BRISTO: That was a mistake. Okay. So we've had very passionate discussion regards to this. And depending on who you ask you can see it from anyway. So now I'm asking what be the pleasure of the council? I'm ready to move forward with the legislative agenda.

MITCH IDDINS: I make a motion that we accept the legislative agenda as it's written.

KIM BASILE: I second it.

RASHAD BRISTO: It's been moved by council member Mitch Iddins and seconded by council member Kim Basile. Do we have any questions? All right. Due to the passion of this I would like to call a roll call vote. That way we're very clear where we stand with this. So
Ms. Deaville, if you will.

AMY DEAVILLE: Sure. When I call your name please say yes, no or if you're abstaining. Ms. Banks.

NICOLE BANKS: Yes. I'm sorry.

AMY DEAVILLE: Okay.

KIM BASILE: Before anyone votes, can you please state if you say yes what it means and no what it means.

AMY DEAVILLE: Sure. Yes. If you say yes you are voting to accept the legislative agenda as recommended by the executive committee. Dr. Barovechio.

ROSelyn HYMEL: Can you let everybody know what no means as well. Can you explain what's going on with yes and no.

AMY DEAVILLE: No means that you do not agree to accept the legislative agenda that the Executive Committee proposed.

ROSelyn HYMEL: Thank you for that clarification, Ms. Deaville. Please proceed.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Abstain.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: Yes.

AMY DEAVILLE: Ms. Bayham.

MELISSA BAYHAM: Yes.

AMY DEAVILLE: Mr. Billings.

MICHAEL BILLINGS: Yes.

AMY DEAVILLE: Ms. Cetnar.

CARMEN CETNAR: Yes.

AMY DEAVILLE: Ms. Cosse. Not hearing her right now, so I'll circle back. Ms. Crain

CHERI CRAIN: Yes.

AMY DEAVILLE: Ms. DeJean.

LILLIAN DEJEAN: Yes.

BRENDA COSSE: Abstain.

AMY DEAVILLE: I didn't see who said abstain. Was that Ms. Cosse?

BRENDA COSSE: Brenda Cosse, abstain.

JILL EGLE: Yes.
AMY DEAVILLE: Ms. Hagan.
JULIE FOSTER HAGAN: Abstain.
AMY DEAVILLE: Ms. Hano.
JILL HANO: Yes.
AMY DEAVILLE: Ms. Hymel.
ROSelyn HYMEL: Yes.
AMY DEAVILLE: Mr. Iddins
MITCH IDDINS: Yes.
AMY DEAVILLE: Dr. McKee. I believe she's absent.

Mr. Nguyen.
STEVEN NGUYEN: I'm sorry. Is that me?
AMY DEAVILLE: That is.
STEVEN NGUYEN: Oh, yes.
AMY DEAVILLE: Ms. Polotzola.
BAMBi POLOTZOLA: I'm sorry. My dogs are barking.
I'm going to abstain, but I would like for the record to say the reason why is because everything is lumped together and each of these items are separate. And so I don't want my vote to look like I support or oppose anything individually.
AMY DEAVILLE: Mr. Rovira.
MATTHEW ROVIRA: Yes.
AMY DEAVILLE: Ms. Tarver.
MARY TARVER: Yes.
AMY DEAVILLE: Ms. Victorian. Ms. White. Dr. Phil Wilson. Sorry. I'm just making sure I recorded everything. We have 14 yeses and four abstentions.
RASHAD BRISTO: Okay. Thank you, council members. The motion is adopted. Now we'll move forward with the executive director's report. Ms. Deaville.
AMY DEAVILLE: Mr. Bristo, you still need to get a vote of acceptance for the reallocation of funds and the membership recommendations.
RASHAD BRISTO: Thank you so much. Definitely forgot about that. Okay. So for reallocation of funds, what be the pleasure of the council for the reallocation of funds?
AMY DEAVILLE: Mr. Rovira has his hand raised.
MATTHEW ROVIRA: Perhaps you could help me on this.
Could you just give me a layman's terms what we're trying to do here? I'm just not that familiar with the extra federal surplus funds. Just kind of explain that a little bit.

AMY DEAVILLE: Yeah. So we had some extra, we were given a reallocation of funds from the Puerto Rico Developmental Disabilities Council. That amount of money combined with money left over from last fiscal year's contracts that went unspent combined to equal a little under 100,000-dollars in total. Somewhere around 97,000. Those surplus of funds were discussed in the Executive Committee meeting and their motion was to distribute those funds in total to the Families Helping Families regional centers that were impacted by the hurricanes. Those centers would take those funds and spend them on programming. If that was not allowable, because at the time I was unsure if it would be allowable, now I feel pretty sure it is, the funds would be distributed to our existing contractors. But like I said, it would be distributed to the Families Helping Families regional centers.

RASHAD BRISTO: Thank you for that clarification. I see Ms. Bambi Polotzola, you have your hand up. You're recognized by the chair.

BAMBI POLOTZOLA: What centers are you referring to that was impacted by the hurricanes? Because we've had many natural disasters that have impacted several of our centers. So just want to get clarification on that.

AMY DEAVILLE: It was not clarified in the Executive Committee meeting. But I take it to mean the centers that were impacted by Ida and Delta and Laura.

BAMBI POLOTZOLA: Okay. Cause I know that also our center up in Monroe got damaged because I think it was a tornado that hit last year. So just want to make sure, I don't know if they've been made whole yet, but don't want them to be left out.

RASHAD BRISTO: Okay. Thank you for that. And that is true taking consideration all (inaudible) depending on which hurricane it was the direction that
it went. Doesn't mean it just stopped at South Louisiana. Also, I see the next hand recognized was Ms. Jill Hano. You're recognized by the chair.

JILL HANO: Well, after Bambi talked it kind of threw my comment for a loop. But I was curious after our Executive Committee meeting and since we still aren't really sure what specific FHFs we are talking about. The public comment was FHF of New Orleans and then I think Southwest FHF. But like were the two that got the damage from Ida, just talking about Ida, not any other. If we are specifically thinking about hurricane Ida, like I said, the public comment led me to believe that FHF NOLA was impacted and then Southwest FHF. So since we don't contract for argument six, if it is this money going to those affected by Ida and we don't have, we're not contracted with regions one and ten. So it is a viable, is it on the table to give all of this? I'm thinking Puerto Rico wanted to give just FHF Southwest or have we not really sat down and mapped that out yet? Because I realize after the meeting last night, I walked away curious about that one. Thank you.

RASHAD BRISTO: Thank you, Ms. Hano. And we'll see what be the pleasure of the council because I see other hands up. So what you just asked may be the same concern. Mr. Billings, I see your hand up. You're recognized by the chair.

MICHAEL BILLINGS: Thank you, Mr. Chair. My concern is the language being very broad and nonspecific as to which centers would be distributed to. I think that needs to be clarified in how that determination is going to be made.

RASHAD BRISTO: Thank you for those comments. Mr. Iddins, I see your hand. You're recognized by the chair.

MITCH IDDINS: Kind of had the same concern. If the motion passes would there be a process, I think there should be a process for any Families Helping Families center that had some impact from a hurricane or some damage or loss of staff or whatever. Maybe
there would be a process for them to apply for this additional funding. And then maybe the committee can determine what that looks like. Maybe we just open it up to any and Families Helping Families centers that have had some type of impact from the hurricane. That might be one way to address it.

RASHAD BRISTO: Okay. Thank you for that input. I also I see Vice Banks' hand. You're recognized by the chair.

NICOLE BANKS: Thank you for recognizing me. So I was in this meeting last night and I'm just going to state what I feel in regards to the allocated funds with the centers being impacted, that were impacted by Hurricane Ida. And when we're talking impacted, we're talking about the centers that were directly affected. Whether it was losing staff, or their programs couldn't be able to be up and running. These are the centers that we talk about. Three for sure is Jefferson, Houma Thibodaux and New Orleans location. All these of those sites were significantly damaged from our discussion yesterday. So I'm not in full agreeance of all the funds going to just the FHF centers. I feel like we all should bring this to the council, let the council decide where the funds should actually go to because they do have other places that were affected. We know of three for sure that were really damaged by Hurricane Ida. And I hear all the rest of the other council members saying they need clarification in regards to the centers that was impacted and what is all going to be covered in that. Because that does need to, it is a little broad for us to just go and make a motion. So if we can maybe change the language in it. I think it would be better for everybody to clearly understand what we're allocating the funds to.

RASHAD BRISTO: Thank you for that, Vice Chair Banks. Go ahead, Ms. Deaville. I apologize.

AMY DEAVILLE: No worries. I just wanted to make sure that everybody was aware this was discussed yesterday, but the money that goes to the Families Helping Families centers, if it's allocated to them,
will not be used to help repair the centers. That money has to be passed on in some programmatic way for the benefit of the families. So they will have to have some sort of a programmatic thing in mind to use the money on. It can't go to operations of the Families Helping Families centers. Like day-to-day operations costs.

RASHAD BRISTO: Thank you for that clarity. Ms. Polotzola, I see your hand. You're recognized by the chair.

BAMBI POLOTZOLA: Yeah. So I just wanted to go back. I find that sometimes in disasters if people aren't directly in the impacted areas, they don't realize what's going on in other areas. And I've worked with EMDAC, Emergency Management Disability and Aging Collation, and I can tell you from our office Families Helping Families centers have been tremendous in their being boots on the ground. Helping through the pandemic, whether it was giving out masks. During the disasters. Even the ones that were in the impacted areas, they would do what they can. The others ones would help out, you know. In Pineville Jim Sprinkle yesterday on our EMDAC meeting reported he had given out 200,000-dollars' worth of supplies across state and he has done that. Everyone, all of our centers have been exceptional. They've all been impacted over the past couple years in some way shape or form, their areas. And so I don't want to, if there's some center that was really needs more to be able to do more, I'm okay with some type of other, you know, however we want to distribute it. But I just don't want anyone to think that there's some center who hasn't been impacted or hasn't served the community. Whether it be in their region, or they stepped in and helped in other regions. They've all been incredible and I'm glad we'll be able to perhaps give them some money to help with this.

RASHAD BRISTO: Thank you for those comments, Ms. Polotzola. And I see Mr. Iddins' hand. I also see Ms. Hano. Before I recognize you guys, I just want to state this. That we are open to a motion for specific
language change following off of what Vice Chair Banks said. Just want to make sure I put that out there. Mr. Iddins.

MITCH IDDINS: Thank you, Mr. Chair. Is there some reason why funds cannot be used if a Families Helping Families center has experienced a lot of damage. Because look, it's hard to provide services if you don't have internet service. It's hard to continue with programs if you don't have phone service. It's hard to continue with programs and services if you have water leaking in the building. Is there some reason why those funds cannot be used to restore services like that. Turn you phones back on, your internet service, repairs to your building. I mean it's hard to have programs and services if you don't have those things in place. Is there some reason? Is there some regulation regarding those funds being used in that capacity?

AMY DEAVILLE: Yeah. Susan could probably explain it better than me. She explained it yesterday. This is way prior to my time. But it's my understanding the Families Helping Families centers used to be funded through our grant and at some point, our grant source came in and said that we could no longer support their day-to-day operations that way. Which is how they got moved over to state general funds. So the state general funds are to pay for those types of things. So federal funds cannot be used to continuously support their day-to-day operations.

MITCH IDDINS: I wonder if state general funds are adequate to allow those centers that have had a direct impact in those southern areas to recover? I mean, because I know some of those have had a lot of damage to their offices and the locations. Again, it's really hard to continue. I don't know the extent of the impact to some of those Families Helping Families centers down there. But I would assume that some of them have had a lot of physical damage down there. And maybe by now they've had phone service and internet service and those types of things restored where they can continue with services. But I don't know, maybe
Bambi would know more about that. But I'm just wondering if state general funds are adequate to help them recover in that regard.

RASHAD BRISTO: Thank you for those comments. Mr. Rovira, I see your hand. You're recognized by the chair.

MATTHEW ROVIRA: Yes. Thank you, Mr. Chair. I would like to make a motion to use these funds just to divide them up equally amongst the nine Families Helping Families centers. That way we don't unintentionally leave one of these centers out just because at this point in time we didn't realize that they were impacted in one way or the other. Along the lines of what Bambi was saying, you know, everyone's been impacted by something over this last year whether it be the ice storm, the flooding, the hurricanes unfortunately which were extremely devastating to a lot of the state, both Laura and Ida and Delta. So again, I guess my point is I just don't want to be too prescriptive in this narrow, the way it's read now I'd just like to open it up to every Families Helping Families center. That way we don't unintentionally leave someone out that could use these funds. So that would be my motion just to evenly divide it amongst all the centers in the state.

RASHAD BRISTO: Thank you, Mr. Rovira. So we have a motion on the floor. We're going to have to hold comments for a moment just to address the motion to evenly divide those funds to the Families Helping Families across the state. Do I have a second?

MICHAEL BILLINGS: This is Mike Billings. I second.

RASHAD BRISTO: Okay. It's been moved by Mr. Rovira. It's been seconded by Mr. Mike Billings. Now we're up for questions.

BRENTON ANDRUS: I'm sorry, Rashad. Real quick. Were y'all not discussing the motion that was already on the floor about the federal funds? So would this motion by Matt then be an amended motion?

RASHAD BRISTO: Correct. Thank you for asking.
Amended motion.

BRENDA COSSE: Okay. We needed to have that clarity before you proceeded.

RASHAD BRISTO: Yes, sir. I interjected that I was open for language change in it. So that's where, I believe, Mr. Rovira came in with that. But thank you for that clarification. So now we have a motion. We have a second. Now I call for question. Mr. Nguyen, you're recognized by the chair.

STEVEN NGUYEN: I just want to put for the record that I abstain. Thank you.

RASHAD BRISTO: Thank you for making that for the record. Mr. Iddins, I see your hand. You're recognized by the chair.

MITCH IDDINS: I think in doing that, and respect to Mr. Rovira's motion, we're getting too far away from the original motion. The original motion was to have those funds go to the Families Helping Families Centers that had a direct impact by the hurricanes. That's what the language says. I think we need to stay in that direction. Now what we could do is like I said earlier, for those centers that claim that they've had a direct impact by one of the hurricanes or some other disaster, could there be a process for them to apply for those funds. That they say look, we were impacted and here's how we were impacted. And this is the additional funds that we feel like we need that could help us. And just keep it to those centers in the south that had a direct impact because there are lots of Families Helping Families centers that haven't had any impact of these hurricanes. The original motion was to help those centers that had a direct impact from the hurricane. I think we need to continue in that direction and not not consider equally dividing it amongst all Families Helping Families centers. Although the Families Helping Families centers, I agree, could all use some additional funding. But this motion was to help those centers of the south that had a direct impact from the hurricanes.

RASHAD BRISTO: Thank you for that, Mr. Iddins.
And you're right. That's why at this point after we have questions we'll see if the motion, we'll have to go through the process and see whether it passes or if it dies on the floor. Vice Chair Banks, you're recognized by the chair.

NICOLE BANKS: Yeah. Exactly what he had just finished saying. Our original one was to use the money that was impacted, use the money that was impacted by Hurricane Ida and if that were not feasible, then we were to distribute all of the existing funds to the other contractors. So with the amendment it kind of throws away all the rest of the second part of the allocated funds. So are we going to go for our vote with this or we're going to go back to this?

RASHAD BRISTO: Unless I'm wrong on parliamentarian procedure, Ms. Learson you're welcome to interject. We still would have to entertain Mr. Rovira's motion, but if it dies then we digress back to the original motion on the floor.

NICOLE LEARSON: Correct.

RASHAD BRISTO: Okay. Just for the sake of clarity for everyone who may have questions about this. Here's where we are now. We have an amended motion on the floor about the reallocation of the funds. Those funds whether they be for the distributed, the original motion is to be distributed amongst those FHFs that have been directly impacted by the hurricane. The amended motion is to distribute those funds evenly amongst all, I believe, nine or 10 FHFs in the state. So based upon this vote will determine how we proceed further. So at this point I'm going to ask do we have any, Mr. Nguyen has already stated he's abstaining. Do we have any other council members that are abstaining?

KIM BASILE: Kim Basile abstains.

PATTI BAROVECHIO: Patti Barovechio abstains.

LILLIAN DEJEAN: Lillian DeJean abstains.

MITCH IDDINS: Mr. Chairman, should we vote on this amended motion?

RASHAD BRISTO: Yes. I just wanted to go ahead and make sure I was recognizing those that abstained. If
they had any kind of conflicts of interest and things along those lines. Ms. Deaville, we'll go ahead and do a vote.

AMY DEAVILLE: Ms. Banks.

BAMBI POLOTZOLA: Point of order. We have to allow public comment before we can vote, and I see many public's hands raised.

RASHAD BRISTO: Okay. Thank you, Ms. Polotzola. I'm not able to see the public comment. Who do we have for public comment, Ms. Deaville?

HANNA JENKINS: We have Mr. Charles Michel with his hand raised.

RASHAD BRISTO: Ms. Michel, you're recognized by the chair.

CHARLES MICHEL: All right. Thank you. Just real briefly, all I wanted to say is that while many of the centers were directly impacted either through Ida, or any of the other, the freezes, the tornado, the hurricanes last year. While y'all are discussing whatever you decided on I want you to understand that those of us that were physically impacted, the other centers came to our rescue and helped us. When we had Ida, we had Southwest— not Southwest. Acadiana come over, brought us truckloads of supplies to give out to our community so that we could do our job. So if y'all decide to split it among all the centers or not, but if y'all do decide to, please know that everyone has incurred extra expenses so that we can all work as a united team to meet the needs throughout the state. And that's all I wanted to say. I appreciate the discussion. I appreciate whatever decision y'all make. But I want y'all to see the big picture of how we operate as a network in spite of the fact that we're independently operated centers. Thank y'all very much and I appreciate y'all discussion.

RASHAD BRISTO: Thank you for your comments. Do we have any more?

HANNA JENKINS: Yes. Ms. Kathy Dwyer has her hand raised.

RASHAD BRISTO: Ms. Dwyer, you're recognized by the
KATHY DWYER: Thank you, Mr. Chair. I also listened to the Executive Committee yesterday and I wanted to point out that I believe the discussion after it was made clear that these funds could not be used for operating cost, including any fiscal damage the FHF centers had from any of the hurricanes. That it would be a programmatic issue. But that the program would be to support families in those areas. So I think the motion needs to include to support families impacted by the hurricanes. And they did discuss Hurricane Laura and the others from a few years ago because those areas are still trying to recover. Those families are still suffering and still needing support. So it's not just Ida this year. It's the ones a few years ago. I'm sorry. I can't remember all of them. But thank you for the opportunity to speak.

RASHAD BRISTO: Thank you, Ms. Dwyer. Whose hand do we have up next?

HANNA JENKINS: Ms. Corhonda Corley.

RASHAD BRISTO: Ms. Corley, you're recognized.

CORHONDA CORLEY: Mr. Chairman and full council. I'm going to piggyback off of what Dr. Michel and Ms. Dwyer stated. Yesterday when I made this recommendation for the Executive Committee to consider it was due to each Families Helping Families center has a direct impact. Many of our families of individuals with disabilities evacuated to some of the areas that were not directly hit by many of these hurricanes or tornadoes. And that gave them a larger population of families to assist until those families were able to migrate back to their homes. As I stated yesterday during the Executive Committee, our Families Helping Families centers is an extremely large asset to our families of individuals with disabilities. And during storms such as Hurricane Ida, Laura, Delta and the tornadoes that came along with them, we still have many of our families including myself who has connectivity issues. Our centers are not able to meet their deliverables in the programmatic way in which they need
to because the connectivity does not exist. And we do know that our state still have hundreds of contractors assisting to get many individuals electricity turned back on as well as their internet. So I do believe that the pot is almost 100,000-dollars which would if we break that down would give each Families Helping Families center approximately 20,000-dollars each to use in some programmatic way to assist our families that have been displaced or impacted in some negative connotation. And that is what we have to always consider is helping our families of individuals with disabilities that are sometimes not at the forefront when it comes to the state in a time of need. And that's what Families Helping Families has always made sure that they do as part of their mission each and every single day. And so I just want us to, I do agree with Mr. Rovira's amended motion. And that was why yesterday the motion stated those that were impacted because each and every Families Helping Families center was impacted whether it was directly or indirectly. Thank you so much.

RASHAD BRISTO: Thank you, Ms. Corley. Ms. Hymel, you're recognized by the chair. I see your hand.

ROSLYN HYMEL: Yes. If I may ask, is this something new in that that we are discussing for one? Because I already stepped out a couple of times because of my housemates really wanted me. But can somebody fill me in on that. And also with the Hurricane Ida I was in Pineville. So is all the families, even from Ida in that, how are they coming even, you know, to start their lives over again. I'm hearing a lot of people saying with their homes how can they, you know, start over again. I'm, you know, I understand. And I am agreeing for what I'm hearing from, you know, with a lot of the members are saying. So what can we do as committee in that to make people feel better about their homes, about their lives and everything? So how can we give back to the community?

RASHAD BRISTO: Okay. Thank you for your comments. To answer your question what we have is we have an
amended motion on the floor. The initial motion was to distribute some funds from Puerto Rico to the Families Helping Families that were impacted by the hurricanes. And while you were out, there was an amended motion by Mr. Rovira and seconded by Mr. Billings to distribute those funds evenly. Now we're at the public comment where they stand as far as they're feeling about it. And that's where we are. We haven't actually talked about individual households and their families because we're actually trying to make a determination on how to move forward with the allocation of these funds. Whether we're going to go with the initial motion or the amended motion. That's where we stand at this moment. I hope I answered your question.

ROSSLYN HYMEL: That does. I didn't want to be stepped out for a very long period of time. But I wanted to catch up.

RASHAD BRISTO: It's no problem. I understand busy people. Mr. Iddins' I see your hand. You're recognized by the chair.

ROSSLYN HYMEL: And also, thank you, Mr. Chairman.

MITCH IDDINS: Thank you, Mr. Chair. Before we move forward with the vote, I guess I just wanted some clarity on the language in here. I guess I just misunderstood. Ms. Corley said that yesterday in the meeting that this language was intended to when you say, you know, Families Helping Families centers have been impacted by the hurricanes that meant all centers in some capacity have been impacted by these hurricanes. Be it that those centers from the north came to the rescue and helped with those centers in the south. So everybody in some way was affected. Is that what the language means, or does it specifically mean that we were talking about those centers in those areas that had a direct impact be it physically or some other way by the hurricanes? So I'm a little confused about what original motion intended to do. Can somebody clarify?

RASHAD BRISTO: I'll try to clarify for you. It's a good question. The original motion in the Executive
Committee meeting, it was in regards to those hurricane affected Families Helping Families. I think at the time it was more thinking about the geographical location of those impacted by the storms. However, council person Polotzola made a very good point. And, you know, by assumption we're always just thinking about South Louisiana. But, you know, it did go up north where that would affect Monroe. Which would have been Families Helping Families Northeast Louisiana. I don't think it was as thoroughly thought out in Executive Committee meeting as it is being discussed now in the council meeting. And that's why we're here so we can discuss it. I hope I answered your question.

MITCH IDDINS: Well, my understanding is that the language is more broad than it states. So with that said, I'm not opposed to Mr. Rovira's amended motion that if everybody's in agreement that hey, in some way all these regional Families Helping Families centers have been impacted by the hurricanes in some way. And if everybody feels that it's fair that they should all be able to share these additional funds if they become available, then I'm certainly okay with the amended motion. Thank you.

RASHAD BRISTO: Thank you for your comment. And like I said, it's been pointed out that those that may have been geographically affected there were those that play second string to assist their sister agencies. Mr. Wilson, your hand is raised. You're recognized by the chair.

PHIL WILSON: Thank you, Mr. Chair. I go back to, I think something maybe Kathy brought up, or somebody in the group brought up about are these funds for the center or are they funds to be used only for the families those centers serve? That's my question.

AMY DEAVILLE: The funds are not for the centers themselves. They are to be passed on programmatically to the families that they serve.

PHIL WILSON: Thank you.

RASHAD BRISTO: Ms. Hano, I see your hand. You're recognized by the chair.
JILL HANO: You're talking about federal funding, correct?

AMY DEAVILLE: Correct. I believe there are two attendees with their hands raised. James Sprinkle and Julie Folse.

RASHAD BRISTO: Mr. Sprinkle, you're recognized by the chair.

JAMES SPRINKLE: Okay. Can you hear me?

AMY DEAVILLE: Yes. We can.

JAMES SPRINKLE: I just wanted to make a brief statement. This affects, all the centers did indeed chip in. Our center obtained 200,000-dollars' worth of things from Wal-Greens. A semi-truckload. We also bought new oversized wheelchairs and had them shipped down there. And using-- we had two of the centers directly that assisted in distributing these goods down to the affected area. And we're talking about 24 pallets that went through our center to other centers. Ended up going down to that direction. And out of our own funds, and this is not saying anything derogatory, but it was out of our own funds that we actually brought oversized wheelchairs and transferred them to LATAN who in turn gave them to the people in the affected areas. So the other centers are deeply entrenched in what happens in any affected area. So I think the disbursement equally probably would be a good thing. Because basically if it's not for the centers' used for their personal things, but that would enable me to buy more wheelchairs for the next crisis, for example. Whatever may happen. So it's been a very interesting experience. I talked to Bambi about this in the past and LATAN. I just wanted to put my 2 cents in there.

RASHAD BRISTO: Thank you, Mr. Sprinkle, for your comments. And it's noted. Whose hand do we have next, Ms. Deaville?

AMY DEAVILLE: Ms. Julie Folse.

RASHAD BRISTO: Ms. Folse, you're recognized by the chair.

JULIE FOLSE: Hi. Thank you, Mr. Chair. I would
just like to say I'm out of Bayou Land region three and I put a comment in the chat that we absolutely could not have been able to help our families at the magnitude that we did without our sister centers coming and bringing us supplies. We did a supply drive and we helped over 300 families. We still have families calling us, looking for help. I know for us, our center, this money will definitely be used to help our families in the months to come cause as we have seen in the Lake Charles area, this isn't a quick fix. Our families will be impacted for a very long time. And we as Families Helping Families want to make sure that we are able to help them for the long-term and not just short-term. So I just wanted to kind of express what that money would have been used, what that money would be used for at our center.

RASHAD BRISTO: Thank you, Ms. Folse. Do we have any more public comment?

AMY DEAVILLE: Let me check the chat. No one else has their hand raised.

RASHAD BRISTO: Okay.

BRENDA COSSE: You do have two council members with their hand raised. Mitch Iddins. I think Mike just put his hand down. His hand just went up. So Mitch and Mike.

RASHAD BRISTO: Okay. Mr. Iddins, you're recognized by the chair.

MITCH IDDINS: Thank you, Mr. Chair. Just one last question for me. Does anybody know if there are any of those Families Helping Families centers in the south that are currently not operational because of a lot of damage from the hurricanes? And are those and have had their services delayed or stopped because of damage to the building and not having, you know, electricity? Have all those things been restored? Does anybody have any idea are there any centers that are not operational at this point in the south?

AMY DEAVILLE: I believe even the ones that sustained a lot of damage worked through as best they could even without phones and things like that. So
they truly were amazing troopers and even in time of distress were still trying to help families as much as possible even with their resources down.

MITCH IDDINS: Are all those centers operational? Do they have a fiscal location? Do they have electricity, do they have internet service? All those centers up and running at this point?

AMY DEAVILLE: Ebony or Brenton, do you know the answer to that?

BRENDA COSSE: Yes. I know, like for instance, the FHF center in southwest they actually had to find another location. But Susan did have her hand raised. I don't know maybe what I just said covered what she was going to say. But their center flooded, had to be gutted. So they actually had to move out and find another location until those repairs could be made. But it's my understanding the others, their centers are intact currently.

MICHAEL BILLINGS: Thank you.

RASHAD BRISTO: Mr. Billings, you're recognized by the chair.

MICHAEL BILLINGS: Thank you, Mr. Chairman. I just wanted to call the question and bring this to a vote.

RASHAD BRISTO: Okay. It's been called to the question. Ready for a vote.

MITCH IDDINS: Can you clarify what we're voting on, Mr. Chairman?

RASHAD BRISTO: Yes. Let me clarify. We're currently voting on the amended, we're currently voting on the amended. My computer went bad.

AMY DEAVILLE: I'll get it. We're currently voting on the amended motion to distribute the funds equally to the nine funded Families Helping Families centers.

RASHAD BRISTO: Thank you.

NICOLE LEARSON: Point of order, Mr. Chair, if I could. Just when someone calls the question that is considered a required 2/3rds vote. Because what they're saying is I want to cut off members' ability to discuss. Which is a right. So that being said, when someone calls the question, you take a vote on the call
of the question which is a 2/3rd's vote in the affirmative. If it does receive a 2/3rd's vote in the affirmative, then you immediately go back to the pending amended motion and take a vote without any further discussion.

RASHAD BRISTO: Okay. Thank you for that clarification, Ms. Learson. So do we have any objection? Ms. Deaville, if you will, let's proceed.


NICOLE BANKS: Yes.
AMY DEAVILLE: Ms. Bayham.
MELISSA BAYHAM: Abstain.
AMY DEAVILLE: Mr. Billings.
MICHAEL BILLINGS: Yes.
AMY DEAVILLE: Ms. Cetnar.
CARMEN CETNAR: Yes.
AMY DEAVILLE: Ms. Cosse
BRENDA COSSE: Yes.
AMY DEAVILLE: Ms. Crain.
CHERI CRAIN: Yes.
AMY DEAVILLE: Ms. Egle.
JILL EGLE: Yes.
AMY DEAVILLE: Ms. Hagan.
JULIE FOSTER HAGAN: Yes.
AMY DEAVILLE: Ms. Hano.
JILL HANO: Abstain.
AMY DEAVILLE: Ms. Hymel. Mr. Iddins.
MITCH IDDINS: Yes.
AMY DEAVILLE: Dr. McKee.
ROSLYN HYMEL: Abstain.
AMY DEAVILLE: Ms. Polotzola.
BAMBI POLOTZOLA: Yes.
AMY DEAVILLE: Mr. Rovira.
MATTHEW ROVIRA: Yes.
AMY DEAVILLE: Ms. Tarver.
MARY TARVER: Yes.

PHIL WILSON: Couldn't find my mute button. Yes.
AMY DEAVILLE: Ms. Roslyn. I have 12 yeses and six
abstentions.

RASHAD BRISTO: Okay. So do I need to make the tiebreaker? I'm sorry. Motion passes. Okay. Thank you very much. Now we're moving to the Membership Committee. Mr. Nguyen.

STEVEN NGUYEN: I don't believe my name was called. I'm sorry.

AMY DEAVILLE: Right. You earlier said that you wanted to abstain.

STEVEN NGUYEN: Oh, okay. That's fine. Thank you.

NICOLE LEARSON: Okay. Mr. Chair, so you all voted on calling the question so it is the will of the body to no longer discuss the pending amended motion. So that now is what you vote on to distribute funds equally to the nine FHF centers without any further discussion.

RASHAD BRISTO: Okay. So now we're at the amended motion. Okay. Ms. Deaville.

AMY DEAVILLE: All right. One more time. Ms. Banks.

NICOLE BANKS: Yes.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Abstain.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: Abstain.

AMY DEAVILLE: Ms. Bayham.

MELISSA BAYHAM: Abstain.

AMY DEAVILLE: Mr. Billings.

MICHAEL BILLINGS: Yes.

AMY DEAVILLE: Ms. Cetnar.

CARMEN CETNAR: Yes.

AMY DEAVILLE: Ms. Cosse

BRENDA COSSE: Yes.

AMY DEAVILLE: Ms. Crain

CHERI CRAIN: Yes.

AMY DEAVILLE: Ms. DeJean.

LILLIAN DEJEAN: Abstain.

AMY DEAVILLE: Ms. Egle.

JILL EGLE: Yes.

AMY DEAVILLE: Ms. Hagan.
JULIE FOSTER HAGAN: Yes.
AMY DEAVILLE: Ms. Hano.
JILL HANO: Out of utter confusion.
AMY DEAVILLE: You're voting on the amended motion.
JILL HANO: I abstain.
ROSelyn HYMEL: Abstain.
AMY DEAVILLE: Mr. Iddins
MITCH IDDINS: Yes.
AMY DEAVILLE: Dr. McKee. Mr. Nguyen.
STEVEN NGUYEN: Abstain.
AMY DEAVILLE: Ms. Polotzola.
BAMBI POLOTZOLA: Yes.
AMY DEAVILLE: Mr. Rovira.
MATTHEW ROVIRA: Yes.
AMY DEAVILLE: Ms. Tarver.
MARY TARVER: Yes.
PHIL WILSON: Yes.
AMY DEAVILLE: We have 12 yeses and seven abstentions.
RASHAD BRISTO: Okay. Motion passes. All right. Thank you very much. Now we'll proceed to membership recommendations. Ms. Deaville.
AMY DEAVILLE: Yes, sir. So the Membership Committee convened September 30th, I believe, and discussed for consideration a number of candidates for the six open positions that we have. Four are currently open and two will be opened quite soon at the beginning of November. All people interviewed were rated. Everyone rated had a perfect score. So six candidates were chosen. Three self-advocates because we had three open self-advocate seats. And the other three people who were chosen were people of color. Because we had some diversity needs on our council membership per the DD Act requirements. So the six people that were, I don't have them listed here. Let me pull up my agenda. The six people that the membership committee recommended were Angela Harmon,
Chaney Guidry, Christi Gonzales, Kimona Hogan, Logan Davis and Vivienne Webb.

RASHAD BRISTO: Okay. Council members, those are the recommended by the Membership Committee for council membership. I see a hand raised. Ms. Hymel, you're recognized by the chair.

ROSelyn HYMEL: Thank you, chairman. For me, this is what I want to know in that if your time is up, I'm seeing the names in that could you ever return after your time is up and, you know, in that? Could you ever return as a member in that, or you go back on this again on the council?

AMY DEAVILLE: Yes. Once your time has ended you have to sit out for a year and then you can reapply to possibly be a member the next time there's an open seat.

ROSelyn HYMEL: So how does that work besides the one year? So how can I redo that after my one year is up? Is there a form in that or do I have to do it online? How can I go about that?

AMY DEAVILLE: Whenever we get closer to that time, Roslyn, why don't you call me, and we'll talk about it.

ROSelyn HYMEL: How can I get in touch with you up on that?

AMY DEAVILLE: I'll send you an email with my phone number, okay.

ROSelyn HYMEL: Okay. That will work for me.

AMY DEAVILLE: Okay.

ROSelyn HYMEL: All right. Thank you.

RASHAD BRISTO: Thank you. Mr. Billings, I see your hand. You're recognized.

MICHAEL BILLINGS: Thank you, Mr. Chair. I would like to make a motion that we accept the membership committee recommendations as presented.

RASHAD BRISTO: We have a motion on the floor by Mr. Billings.

NICOLE BANKS: I'll second it.

RASHAD BRISTO: And it's been seconded by Vice Chair Banks. Question. Do we have any questions?

AMY DEAVILLE: Jill Hano has her hand raised.
RASHAD BRISTO: Ms. Hano, you're recognized by the chair. Ms. Hano you're recognized by the chair.

JILL HANO: Ms. Nicole Learson, I need help, but I had my hand raised to ask questions, but now the motion is made and seconded and passed. So I can't ask all my questions.

NICOLE LEARSON: Mr. Chair, if I may. The motion was made, but y'all haven't voted yet. So this is the time for discussion.

JILL HANO: Okay. Cause I know on your agenda last meeting we reviewed membership. But is Dr. McKee going to-- no. Is this the potential membership like summary or is this part of your summary? Because I have a lot of membership questions and is Dr. McKee on here?

AMY DEAVILLE: I don't believe Dr. McKee is on.

HYACINTH MCKEE: I am on.

AMY DEAVILLE: Oh, okay. Great.

HYACINTH MCKEE: I was able to return back.

AMY DEAVILLE: Oh, good.

JILL HANO: Hey. I watched the meeting online. Could you clarify why there were two different agendas because I didn't understand why there were two separate agendas. And I want to get all my two or three questions out. Cause y'all dyslexia ain't no joke. I still can't heads or tails as to are these meetings open or closed. And then to stray a little, I know that this is a little off topic, but I think if I'm on the right track, these membership meetings are open meetings. Follow open meetings laws. Props on your protocols, Dr. McKee. And these, the membership committee meetings I think are open meetings. However, and I really compare council membership to PIP membership. And I know that, or from my experience, a PIP membership selection committee is not an open meeting. And I just never understood what is the difference between the issues that are being discussed and PIP selection verses DDC selection. Thank you. And I don't know if I'm out of order, but I've been holding this in for like weeks.

HYACINTH MCKEE: Mr. Chair, if I can be recognized
to try to answer some of Ms. Hano's questions.

RASHAD BRISTO: Yes, Dr. McKee. You're recognized to respond.

HYACINTH MCKEE: Thank you, Ms. Hano. I just actually joined right back. I had to step away for a brief moment and I've gotten back. So I'm not sure if any dialogue took place regarding the Membership Committee meeting's report. I believe you were asking, Ms. Hano, about is the Membership Committee meeting open? Is it an open meeting? So it is. So the Membership Committee meeting cause conducted live via Zoom and YouTube. And it was open to the public. So I hope I answered that first question. And I believe you also asked the question, I'm assuming, on how is the Membership Committee selected. I think that's what I heard you say.

AMY DEAVILLE: She asked why the Membership Committee is public and the Partners in Policymaking selection committee is not.

HYACINTH MCKEE: Oh, so Ms. Hano, I can't speak to why the Partners in Policymaking. I can't speak to that.

JILL HANO: If you want to shoot me a text, feel free.

HYACINTH MCKEE: Yeah. I can't speak to Partners in Policymaking and their process and protocols. I just can't speak to that. I can only speak to Membership Committee meetings and those are open meetings law. And I think you asked the question about the agenda. The Membership Committee was actually scheduled to meet, I believe, August 25th, but then Hurricane Ida came and there were some committee members that could not meet because they needed to evacuate due to safety. And so therefore the meeting needed to be rescheduled to a time in which people were able to get back— August 27th. Thank you. August 27. So the meeting needed to be rescheduled in order for people to attend to have a quorum and to recover from Hurricane Ida. So the agenda, the meeting is, of course, public. But I will state it because the
question was there. We had to make sure that the agenda that was in front of us for September 30th had the actual date and time and Zoom information because the agenda that was posted had a different date and time and Zoom information and all of that. So we needed to make sure that agenda reflected the actual meeting that was taking place on September 30th. I hope I covered all the questions. Did I miss anything, Ms. Hano?

JILL HANO: Not to my knowledge. I thought there was something more. I thought when you changed the agenda it was something a little more than logistics. But I could be wrong.

RASHAD BRISTO: Okay. Thank you for the clarification, Dr. McKee. And thank you, Ms. Hano.

JILL HANO: Thank you so much.

RASHAD BRISTO: You're welcome. I want to remind everybody we have a motion on the floor. It's been seconded. We were calling the question. I do want to emphasize when we have questions, we're going to questions that are in regard to the motion on the floor. General questions, we're going to have to kind of take those offline if we have a question for something that's really not relevant for what's on the floor. My concern is people get distracted. They'll forget about what we're voting about. And then we have to rehearse ten more minutes of time to refresh everybody's memory where we stand. At this point moving forward, we have the motion on the floor. It's been seconded. I'm ready to call for a vote. Ms. Deaville, if you will.

NICOLE BANKS: Yes.
AMY DEAVILLE: Dr. Barovechio.
PATTI BAROVECHIO: Yes.
AMY DEAVILLE: Ms. Basile.
KIM BASILE: Yea.
AMY DEAVILLE: Ms. Bayham.
MELISSA BAYHAM: Yes.
AMY DEAVILLE: Mr. Billings.
MICHAEL BILLINGS: Yes.
AMY DEAVILLE: I'm sorry. Was that a yes?
MICHAEL BILLINGS: Yes.
AMY DEAVILLE: Okay. Ms. Cetnar.
CARMEN CETNAR: Yes.
AMY DEAVILLE: Ms. Cosse.
BRENDA COSSE: Abstain.
AMY DEAVILLE: Ms. Crain. She actually might have stepped away for a minute. Ms. DeJean.
LILLIAN DEJEAN: Yes.
AMY DEAVILLE: Ms. Egle.
JILL EGLE: Yes.
AMY DEAVILLE: Ms. Hagan.
JULIE FOSTER HAGAN: Yes.
AMY DEAVILLE: Ms. Hano.
JILL HANO: Yes.
ROSelyn Hymel: Yes.
AMY DEAVILLE: Mr. Iddins.
MITCH IDDINS: Yes.
AMY DEAVILLE: Dr. McKee.
HYACINTH MCKEE: Yes.
AMY DEAVILLE: Mr. Nguyen. Ms. Polotzola.
BAMBI POLOTZOLA: Yes.
AMY DEAVILLE: Mr. Rovira.
MATTHEW ROVIRA: Yes.
AMY DEAVILLE: Ms. Tarver.
MARY TARVER: Yes.
PHIL WILSON: Yes.
AMY DEAVILLE: Okay. That was 17 yeses and one abstention.
RASHAD BRISTO: All right. Thank you, everyone. Members, motion passes. Listen, before we get into the executive director's report, I'm going to call a break. If everyone can be back to your computer, let's do ten minutes. That way we can try to catch up on time. I don't think we'll have many more votes at this point. So we'll be able to move forward a little bit faster,
expeditiously. So I'm going to ask everyone to be back in front of your computer by, we'll do 15 minutes. Ten minutes after ten. That way you can get you some coffee, stretch your legs. And have your camera back on so we can have a quorum. At this time we're going to have a break.

All right, ladies and gentlemen. I hope you had a refreshing break. If you will, go ahead and turn your cameras back on. Just refresh over a few meeting protocols. Make sure you have your camera on. Make sure that you raise your hand electronically and be recognized by the chair for any comments. Keep those comments brief to about three minutes. And from this point we're going to proceed with our executive director's report. So the chair recognizes Ms. Deaville. Did you have a chance to come back yet? Might be premature.

AMY DEAVILLE: I'm here. Sorry.

RASHAD BRISTO: No problem. So the chair recognizes Ms. Deaville for the executive director's report.

AMY DEAVILLE: Okay. Here's the executive director's report. Let me see. I'll try to make it a little bigger on the screen. And I'll just run through it quickly. Basically the executive director's report pretty much just talks about the different things that I've been involved in over the last three months. Different meetings. So the Administration on Disabilities offered an opportunity for grantee networks to participate in walking the walk. Which is a diversity, equity and inclusion seminar. It's a ten-session long learning opportunity where we work on these different issues and organizational culture. And then also in programming. Myself and Ebony have been participating in that. We've had three sessions so far and it will last through December.

Federal reporting, there has been a ton of federal reporting since July. We were given the month of July to submit the federal fiscal year 2020 program performance report in a modified version because OIDD
didn't have their system up and running yet. And then we were given the month of September to enter the five-year plan. Which we're currently in. It started October 1. In two years of annual work plans. And they finally got their system up and running. So I spent September doing that.

RASHAD BRISTO: I apologize, Ms. Deaville, for just a moment. A comment in the chat. The question is are we still live streaming to YouTube?

AMY DEAVILLE: Staff, can one of you answer that for me?

BRENDA COSSE: It appears that it has stopped. We're trying to figure out why.

RASHAD BRISTO: Thank you for the clarification. Proceed.

AMY DEAVILLE: Thanks. I've been involved in the HCR45 work group. That was a resolution that passed in last year's legislative session. Or this year's legislative session. And it asked the Department of Health to conduct a study concerning the feasibility and desirability of implementing a system for tracking the location of children with intellectual and developmental disabilities. We've had a number of sessions about that, and we continue to have that. In fact, we've spent a lot of time developing a survey to determine desirability for that type of device. And that survey, I believe, just became available. And so we'll push it out through social media and the FHF centers are also going to help distribute that too.

My council staff also attended a lot of meetings. Brenton attended the OCDD State Advisory Committee. And they had updates from the 21 legislative session and discussed continuing advocacy needs. A number of us attended the Governor's Office on Disability Affairs Conference which was a really good conference if you weren't able to attend. The Emergency Management Disability and Aging Coalition. EMDAC meetings. Brenton also attended the Governor's Advisory Council on Disability Affairs Legislative Committee. And the LDH enhanced F map spending feedback session. A number
of us attended that as well. And the Office for Citizens with Developmental Disabilities waiver rate increase provider meeting. Julie just posted in the chat that a link to the HCR45 survey is also available on the OCDD website. Ebony attended the NACDD Diversity, Inclusion and Cultural Linguistic Competence Workgroup. She's been attending that workgroup for a few months now. And then these are all of the other meetings that I attended through, or most of them, through July. From July through September. And they're all available for you to look at in the report. Can we update the link on the agenda for this update? Kim, would you mind turning your mike on and explaining what link.

KIM BASILE: When I click on the agenda online, I get the July 2021 council meeting.

AMY DEAVILLE: Yeah. I had that same problem. I think Hannah just posted it in the chat. I had the same problem and right before hopping back on, clicked on the links again and it pulled up October. You might refresh the website and that might help. Okay. So that's my executive director's report. I believe I also have the budget report next.

BRENDA COSSE: Amy, real quick. Just to clarify. I think the question is the link within the agenda that you're looking at was off. The link on the page is fine, but on the meeting agenda it's linked to the July information.

KIM BASILE: Yes. Thank you.

AMY DEAVILLE: Okay. Thank you. We will update that, Kim. We'll get that updated.

RASHAD BRISTO: Thanks for that clarification. Go ahead with the budget report. If we have any questions, we'll ask questions whether it be about both the director's report and the budget report, please.

AMY DEAVILLE: Sure. So this is the budget report. We are, this budget report only has first quarter expenditures. We run on the state fiscal year. So we started a new fiscal year in July. So this has just first quarter expenditures is all that's in there for
now. We do not have—everything looks good. Cause like I said, we only have a few months into this budget. So I don't know if anyone has any specific questions, but we're doing well so far in our budget. As of right now I don't anticipate any issues.

RASHAD BRISTO: Okay. Thank you, Ms. Deaville. So we have the budget report, and we also have the director's report. So we have any questions about the director's report or the budget report? I see your hand, Ms. Polotzola. You're recognized.

BAMBI POLOTZOLA: Yeah. I have a question in regards to hiring. I know that the council has had less staff than this past year. And I know that that's, I appreciate everyone's hard work and doing extra during that time we had limited staff. As far as I know, I think we still have some vacancies. So my question is two parts in regards to the budget. Do we have budgeted enough for hires in the vacant positions? And I guess I should have said this other question first. We still have vacant positions, right? And can you tell us the status on those?

AMY DEAVILLE: We do still have vacant positions. Those positions being filled is in the budget, so we shouldn't have any issues with that. The status is I have, I did put the deputy director position out for application. So I do have applications and I have been interviewing. No decisions have been made yet. And I will keep you updated as the process continues.

BAMBI POLOTZOLA: Just one last thing. Is there something that you need in regards to that, like the council can support you in ensuring that you have the appropriate staff?

AMY DEAVILLE: The issue that I have right now is about it has to do with salary structure. And that issue will need to be worked out before I'm really able to hire a deputy director. So I'm working with Mr. Chair and the executive committee to start working on that.

BAMBI POLOTZOLA: Thank you.

AMY DEAVILLE: Sure.
RASHAD BRISTO: Thank you, Ms. Polotzola. Ms. Basile, you're recognized by the chair.

KIM BASILE: Thank you. Two questions. How many people have been interviewed for the deputy director position so far?

AMY DEAVILLE: Off the top of my head, I don't know. I'm going to say five to seven.

KIM BASILE: Okay. Also, are y'all working in the office now? And if not, when are plans for all of y'all to be back in the office working as one cohesive group?

AMY DEAVILLE: We are currently still working from home. We, as of right now, we will return when LDH advises us to return. There was an original plan in place with the state for a return back in August, I believe. And then the fourth wave hit. And we were told to stay at home. And that we would be advised when it was time to go back.

KIM BASILE: Okay. And one more question. I'm sorry. And I don't know if I'm overstepping and if you can't say, that's fine. But what, and I don't need specifics, but what kind of budget issues are y'all trying to work through or budget structure or salary structure?

AMY DEAVILLE: My current salary is set too close to one of my existing employee's salaries. And it does not leave enough room for--.

RASHAD BRISTO: Let me interject for just a moment. To answer that question, that's one of the things that we're going to have that executive discussion about. Because one of the things that we find ourselves having is there's a gap in that. In order for us to be competitive, we're going to have to revisit that to make it competitive. Otherwise, we're finding ourselves with employees and then we'll lose them due to the fact (inaudible). So there's some reassessments we have to do. Just kind of answer that question, put it back in prospective for you.

KIM BASILE: Thank you.

RASHAD BRISTO: You're welcome. Ms. Hano, your
hand is up. You're recognized by the chair.

JILL HANO: How many openings do we have in our staff?

RASHAD BRISTO: We currently have two openings. And I then have two staff that are out on leave. One who is back intermittently and one who is still out on leave.

JILL HANO: Okay.

AMY DEAVILLE: But I do have a temporary program monitor in place for one of those vacancies.

JILL HANO: All right. Thank you.

RASHAD BRISTO: Do we have any more questions from the council members in regards to the executive director's report or the budget report? Jill, I see your hand up. Is it an accident. Okay. It's down. Do we have any public comment in regards to the executive director's report or the budget report?

ROSLYN HYMEL: Excuse me, Mr. Chairman.

RASHAD BRISTO: You're recognized.

ROSLYN HYMEL: Hannah, this question is going for Hannah in that.

RASHAD BRISTO: Question, is it in regards to the budget? We're still on the budget report and executive director's report.

ROSLYN HYMEL: No. I was going to say about the links. Are these two links the same or are they different? That's what I wanted to know. That's why I'm trying to ask Hannah on.

RASHAD BRISTO: Ms. Hannah, can you respond.

AMY DEAVILLE: I'm sorry. I can answer it. It's two different links.

ROSLYN HYMEL: Thank you. That's what I wanted to know. You can proceed now, Mr. Chairman.

RASHAD BRISTO: All right. So where are we on our agenda. We initially supposed to take a recess, but at this point.

AMY DEAVILLE: Standing committee reports, I believe.

RASHAD BRISTO: Standing committee report. Okay. So now we have our standing committee reports.
AMY DEAVILLE: Ms. Polotzola, would you like to give your report for Act 378 Subcommittee?

BAMBI POLOTZOLA: Yes. I apologize. I was totally off. Let me just pull that up. Okay. Assume you guys can hear me.

RASHAD BRISTO: Yes. We can hear you.

BAMBI POLOTZOLA: Okay. I apologize for the delay. Okay. The Act 378 Subcommittee met yesterday. And we do not have any recommendations for the council to consider. We did spend time reviewing fiscal year 21 end of the year data and fiscal year, the first quarter of fiscal year 22 for programs for Office for Citizens with Developmental Disabilities, and Office of Behavioral Health and Office of Aging and Adult Services. Which is through the Arc of Louisiana. These reports can be found on the council's website under the council meeting section if you would like to review.

Looking over the OBH end of the year reports we noticed quite a few of the local governing entities or LGEs didn't expend at least 90 percent of their consumer care resources funding. Ninety-five percent is the performance indicator set by OBH and those that missed it will have to submit a corrective action plan. This resulted in a lot of discussion about what happens to the funding if it's not used and how the LGEs set their budgets for their behavioral health programs. We sent a request to OBH asking the LGEs to answer the following questions at the next meeting. The first one is how does each LGE determine how much will be budgeted for their consumer care resources and their flexible family fund program? The next question is, is there a percentage of their funding that goes towards the CCR and/or that FFF programs? And then what happens to any of the funds allocated that goes unspent? Now if you recall at the last meeting, we had asked OCDD if they could provide us with information to determine what impacts, if any, the passage of Act 73 of 2017. What it has had on the delivery of our individual family supports and flexible family fund
services. Tanya Murphy with OCCD stated she has requested the business analytics unit study data from 2005 through now. I guess 2020 or 2021. That end of the year. And compile a report that will hopefully be ready for the committee by our January meeting. A preliminary look at the data indicates more families have been served since the legislation, which is Act 73, was passed.

We also discussed ongoing concerns for equitable funding for the LGEs. And Julie Hagan with OCDD mentioned that LDH, as part of their business plan, is looking at this and possible funding formulas to address inequity. If you can remember correctly, we've had legislative agenda items addressed in this in prior years. We also looked at the fiscal year end 2021 IFS requests and expenditures by service which provides a regional breakdown of the requests by priority in addition to the types of services and goods provided in the cost. And that's a big sentence. And if you look at that report it's a pretty extensive report. And so at the July meeting we discussed discrepancies in spending for the IFS funds across the region based on different services. And asked Ms. Murphy to address this with the LGEs. She did provide this information to all the developmental disabilities directors at each of our regional LGEs. But they were unable to meet this past quarter. She plans to meet with the directors prior to the January meeting and share her findings at the January meeting. Ms. Murphy also shared with the committee that the LGEs are continually looking at individuals utilizing IFS dollars to determine if their needs would be better met through a waiver. And that concludes my report. I'll take any questions.

RASHAD BRISTO: Thank you, Ms. Polotzola. Do we have any questions in regards to that Act 378 Subcommittee report? All right. Thank you again. So now--.

AMY DEAVILLE: Ms. Banks has her hand raised.

RASHAD BRISTO: I apologize. I didn't see it.
What's the name again? I still didn't see it.

AMY DEAVILLE: Ms. Banks.

RASHAD BRISTO: Vice Chair Banks, you're recognized by the chair.

NICOLE BANKS: And thank you, chair. Ms. Bambi, I wanted to ask, did we give them kind of like a timeline to get that done in regards to those reports and the discrepancies and stuff like that? Did we give them a timeline to have that done or are they supposed to have that done by our next January meeting?

BAMBI POLOTZOLA: I think it's by our next meeting, but Brenton has already sent out the email, as I said, the questions about OBH. So I think that is for our next meeting. And then for the OCDD questions in regards to Tanya meeting with the DD directors, with the LGEs, that I know for sure, that's going to be a report given in January. You know, unless there's some other unforeseen circumstances that delays it.

NICOLE BANKS: Okay. All right. Thank you.

RASHAD BRISTO: Any more questions from council members in regards to the Act 378 Subcommittee report? Do we have any questions from the public?

AMY DEAVILLE: No, sir.

RASHAD BRISTO: Okay. We'll proceed. Thank you again, Ms. Polotzola. Now we'll move to Dr. McKee for education and employment report.

HYACINTH MCKEE: Thank you, Mr. Chair. The Education and Employment Committee meeting was held yesterday. We had a lengthy discussion from Louisiana Department of Education in response to a letter that our former chairperson sent with some concerns regarding the safe reopening protocols for our students with disabilities. The response letter was a response received from Dr. Brumley as it relates to the operational guidelines with some links inside the letter stating what the Department of Education is going to do, or has done, or have put in place for those safe reopening of schools.

Ms. Jordan was also there, and she discussed that there was some information related to parent, family
engagement. And she provided a link to the report from the District Management Group. And the District Management Group was a group of individuals that was contracted by LDOE to conduct a survey and to ask and identify different strengths from stakeholders and to get some opinions and feedback as it relates to how special education services and diverse learners supports needed. It was a heated discussion amongst the public with some concerns as it relates to the way the dollars were spent in terms of-- and the report that was provided by the District Management Group as it not being as extensive as it could have been or should have been. So there was some concerns about that. And the reporting from the surveys.

Mr. Jordan also provided a report on how Department of Education is working to work with Families Helping Families. Ways that parents and families can support students with disabilities during the 2021-22 school year. High-cost services and some changes as it relates to alternate assessment. Information, more information regarding Ms. Jordan's report will be made public in the EE committee minutes.

Ms. Marbs also from Louisiana Rehabilitation Services spoke on some of the work they've been doing in terms of the new employment transition program. They are in contact with schools to increase the number of applicants. There is a pilot program being held in three of the eight regions. Baton Rouge, Lafayette and Houma that allows the vendors to make connections with students during the study skills classes. There were some concerns from family members and as it relates to the outreach and making sure that families have the information about the options that are afforded to them and their children as it relates to how they themselves can get access to these programs. They are looking, LRS is looking to increase the number of sessions with this programming from 64 to 108 per student. And they are targeting 800 students within 27 schools between three parishes. Again, the concern was more outreach is needed. The program is approximately a month old.
And there's another meeting that's going to be scheduled Friday, October 22nd between the vendors and the three regional managers to discuss the numbers.

We also discussed the DD contractual activities for FY22 action plan. Ms. Devica Rao from O'Neill Communications talked a lot about the employment webinars that were concluded in September. She talked about the campaign that was created, working together webinars. And different partnerships with local chambers and how to continue to do that. She did an extensive report on what they've been working on and how they develop the curriculum as part of the 28-page booklet. Again, some concerns of how people are getting access to this 28-page booklet and it's information were noted.

The Louisiana Post-Secondary Inclusive Education Alliance, Dr. Gerlinde Beckers spoke about that. Certainly it was established in fall of 2019. They are currently receiving funding. And as it stands right now, they have a collective body of universities inclusive of HBCUs as well as community colleges. And she had some good news regarding two community colleges. Well, good news that BRCC received accreditation from DOE. And they are working really hard to get more funding to certify more programs for students access to post-secondary education opportunities. There was some dialogue about ensuring that there is a collaboration and a cohesiveness, or as well as a partnership between LDOE and LRS to ensure cause there's some gaps in terms of when it comes to transition services from students going from high school to college.

We only had one motion that came out of the meeting that was presented earlier today for the council's consideration. And that was to advocate for more funding for LAPIE. I believe that that motion was already discussed earlier.

And then lastly, we did have a report from Ms. Monroe regarding the customized employment training as it relates to The Arc. It seems like a really robust,
certified, scripted training. And so often times that will leave some challenges for people to fully stick through with the program. But she did mention that there are people that are participating and they're working to increase those numbers. And so all of the information on the report, the full report will be posted for view. And so that concludes my report.

RASHAD BRISTO: Thank you, Dr. McKee, for that report. Do we have any council members with any questions?

AMY DEAVILLE: No hands are raised.

RASHAD BRISTO: Do we have any questions for public comment or the chat box?

AMY DEAVILLE: I'm not seeing any.

RASHAD BRISTO: Okay. Thank you, again, Dr. McKee, for the education and Employment Committee report. Now we'll move to the report-- there will be no action taken. We will place it on file. Now we'll move to our Self Determination Committee-- and Inclusion Committee report. So Ms. Basile.

KIM BASILE: Yes. Thank you. Y'all please bear with me. I'm having vision issues today.

RASHAD BRISTO: No problem.

KIM BASILE: The Self Determination and Community Inclusion Committee met Monday. We have no recommendations. But we did get a lot of great updates from OCDD and Medicaid. A lot of the information is included already in their report, so I won't go over all of it. Julie did share an expansive list of initiatives OCDD plans to address in the coming year. The department has not finalized their public comment yet listing all the initiatives, but she will share it with the council once it becomes available.

We also briefly spoke about the recent home and community-based services rate increases and the four DD waivers and the direct support worker wage floor. The department agreed to provide our committee with a DSW turnover report at our quarterly meetings so we can see if the increased rates in pay have positively impacted that workforce. Regarding the Appendix K waiver
exceptions Julie shared that there are some upcoming focus groups, I believe she mentioned that earlier, to discuss a continuation of the three exceptions. In particular, legally responsible caregivers residing in the home serving as paid caregivers. Which we've already discussed at length. Suspension of the 16-hour rule for DSWs and virtual visits for some services. The department's goal is to have waiver amendments submitted to the centers for Medicaid and Medicare services or CMS for approval by February in preparation for the eventual end of the exceptions.

Kelly Zimmerman with Medicaid who is taking the place of Jen Katzman shared with us the department was no longer seeking to implement the Act 421 children Medicaid option program, or what we used to call TEFRA, as an 1115 demonstration waiver. This is a very good thing. Rather the program will be part of Medicaid's state plan option which will ensure everyone who is eligible for the program will be able to participate. No waiting. In previous updates we shared that a waiting list for the program was a possibility due to it being implemented as a waiver. She also shared that Medicaid is working closely with CMS and OCDD on drafting waiver amendments to include dental services for adults and hopes to have those amendments submitted to CMS in January. We received a lot of good contractual updates in goals one and two of the council's FY21 action plan. I encourage you to all review the status update document that we receive quarterly for specific updates on each activity. And any of the documents linked in our committee agenda. That's all we have.

RASHAD BRISTO: So do we have any council members with any questions regarding the Self Determination and Community Inclusion Committee report?

AMY DEAVILLE: I'm not seeing any. There's nothing in the chat and no attendees have their hands raised either.

RASHAD BRISTO: Okay. Thank you for that report. We will make sure that's recorded to file. We're
actually ahead of schedule for lunch. The next thing we have, I'm going to see, GODA, are you in a position to go ahead, do your report before lunch, Ms. Polotzola. Unless I'm missing something. Ms. Deaville, feel free to interject.

AMY DEAVILLE: No. You're on track. We would be to agency reports now.

BAMBI POLOTZOLA: So, yeah. I'm the first one on the agenda?

RASHAD BRISTO: Yes. Please.

AMY DEAVILLE: Do you want for me to share your report?

BAMBI POLOTZOLA: Yeah. That would be great. I was pulling it up. I should have studied the agenda better.

RASHAD BRISTO: No problem. Gives us enough time to call Uber eats.

BAMBI POLOTZOLA: Okay. So as Amy had shared in her report, we had the GODA conference, and I hope many of you were able to attend. But if you were not, you can see we had over 700 attendees. I think all our response that we received that it was really great. It was over four days. And just thankful to everyone. Many of you were presenters or, you know, all of our presenters volunteer their time and talent and knowledge to the conference, so we really appreciate that. The link to the-- the conference was recorded in multiple formats. So the link there will bring you to those sessions if you ever need to use those sessions, you know, just to learn something or share, you're welcome to look at those recordings.

You can kind of just scroll through. I'll talk a little bit about our councils. GACDA, just to let you know, we had our meetings. Big thing was that we sent letters to our congressional delegation in support of the Able Age Adjustment Act, the Build Back Better Act, and the Better Care Better Jobs Act and asking for their support and explaining the impact it will have on people with disabilities. And then for our Statewide Independent Living Council they have been housed within
the Governor's Office for many years, the Governor's Office of Disability Affairs. But they have went through the process to become an independent body outside of a government entity. And so they're like in the final stages of that and ready to hire an executive director. And they will no longer be within the Governor's Office. So we're really excited about that and glad that they were able to make that transition.

And then our Emergency Management and Disability and Aging Coalition has been meeting regularly. It seems nonstop. This has been a really big issue currently dealing with Ida, of course, dealing with the pandemic. Anytime there's disasters like we talked about earlier. We have over 100 people that are actively engaged with EMDAC. All of our state agencies, federal partners, community organizations and advocates. Really am proud to be able to collaborate with everyone with EMDAC. Wish we didn't have to do it as often. But can't do anything about that. Our state as model employer task force, we had our survey, annual survey. We had a great participation for our state employees in that survey. We did some promotional videos. I should have linked that in here, but I didn't. But we had some promotional videos done by the governor, some of the secretaries of our departments, Jay Dardenne, our Division of Administration talking about state as a model employer. And our state agencies are working on their reports for this year, what they've done in regards to making employment available for people with disabilities as well as what they're plans are for next year. And I would add in with this that -- you can scroll a little bit more. I would just add that in regards to the state as a model employer that, and this is not in our report, we passed a law this year to create the state office of ADA, the Americans with Disabilities Act. Ricky David is the coordinator, the state ADA coordinator. And she has been really doing a lot of work in gathering information and attending meetings and meeting people. She has a background in human resources so she will,
we're planning on putting forth some legislation to kind of strengthen up that law in creating the ADA office that really makes the state agencies more accountable for some data so that we can have some data on what's going on in regards to the ADA as well as putting in some of the things we've done with state as a model employer underneath the purview of the ADA office in regards to collecting data and that type of thing. And so I think that's moving in a really great direction. Our gold awards and inclusive art contest will be, they're coming up. The deadline is November 1st to make your nominations for the gold awards and submit the art. And this year the art is not only visual art, you know, paintings or drawings, but we also have a written art, a written component. So you can see there that, you know, it's a 300 word or less written expression or literary works.

And then our voting, have to give a lot of credit to Lillian, she's been leading our efforts in regards to accessible voting. I think she's met with people on every level in government and community organizations and national organizations that work around voting accessibility. We have a couple of legislative proposals regarding voting accessibility. And so we're looking forward to hopefully making some progress there. And, of course, this month is disability employment awareness month. And then I think that's it. Is that the end of our-- yep. That's it. Sorry.

RASHAD BRISTO: Okay. Thank you, Ms. Polotzola, for that report. Do we have any questions from the council members on the report of the Governor's Office of Disability Affairs? Do we have any public comment?

AMY DEAVILLE: Jill Hano just raised her hand.

RASHAD BRISTO: Okay. Thank you. Ms. Hano, you're recognized by the chair.

JILL HANO: Sorry. I was racing against the clock. I raised my hand barely in the nick of time. Questions. What act, the ADA coordinator office? Was that in your report? No. But what act was passed in the session at something?
BAMBI POLOTZOLA: Yeah. I forgot. I could look it up.

JILL HANO: I'll look it up.

BAMBI POLOTZOLA: The bill number. We had so many bills I forget. But it was a really barebones type structure and so that's why I was saying we want to go forward with more. Yeah.

JILL HANO: Say if it's Act 2557 like your office is trying to like expand on that like particular bill kind of?

BAMBI POLOTZOLA: Yes. It would be, yeah, updates or revisions to that law.

JILL HANO: Okay.

BAMBI POLOTZOLA: That was enacted this year.

JILL HANO: Perfect. And then, okay. The Able Age Adjustments Act. All these acts, can I Google and read more information about these four specific acts?

BAMBI POLOTZOLA: Yes.

JILL HANO: Thank you. I think that was it. Shoot out to Lil, good job on the voting stuff.

RASHAD BRISTO: Okay. Thank you for that, Ms. Hano.

BAMBI POLOTZOLA: Mr. Chairman, one last thing. Why I kind of hesitated, I was getting verification that I could share. But our Melanie Washington is our director of, executive director for the SICC for early steps and yesterday she found out that she would be promoted to the position of executive director of the children's cabinet. And so we're really excited for that opportunity for her. And I'm announcing it to you guys first. I wanted to get her permission. So we're just excited to have her background will be in the children's cabinet and looking at, you know, more broader issues around children. So just wanted to share with you guys.

RASHAD BRISTO: Okay. Well, thank you for that notification. Congratulations to her. Do we have any more council members with any questions?

AMY DEAVILLE: There are no other hands raised.

RASHAD BRISTO: Do we have any comments in the
public from the chat box?

AMY DEAVILLE: No, sir.

RASHAD BRISTO: Okay. Well, this report requires no action. It will be placed on file. If there's no objection the meeting will recess for lunch. Are we sure there's no comments in the comment box?

AMY DEAVILLE: Yes. There's no comments.

RASHAD BRISTO: Okay. Seeing and hearing none, we'll recess for lunch and return at 1:00 p.m.

All right. Thank y'all. It's now 1:03 p.m. The meeting is called back to order. I hope everyone had a great lunch. So the next item on the agenda is the report of the Louisiana Rehabilitation Services. So the chair recognizes Ms. Melissa Bayham for her report.

ROSLYN HYMEL: Excuse me, for one thing, Mr. Chairman. I know I'm speaking out of turn. I'm getting my covid testing at 1:45. I’ll be leaving. Would I be excused at that time?

RASHAD BRISTO: Yes. Thank you for making us aware. That way if by some reason we end up having to vote or something we'll know what your position is.

ROSLYN HYMEL: Thank you.

RASHAD BRISTO: Okay. Thank you okay. Ms. Bayham, please proceed.

MELISSA BAYHAM: Thank you so much. I'll go over some highlights of my report and a couple extra things that I want to let you all know. Then I can, obviously, take any questions. The beginning of my report I always, we provide statistics on our different programs, the first program being preemployment transition services. Which is our services for students with disabilities. And then we have our statistics for vocational rehabilitation including some information that the council has requested which includes DD open cases in vocational rehabilitation. So we have those statistics for you by region as usual. As well as how many closures we had for the population and how many referrals and closures we had for our rehabilitation employment development specialists.
Which are our in-house job developers. I want to note under administrative services Louisiana Rehabilitation Council, that section was inadvertently not updated. The next meeting is actually next Thursday, October the 28th. It's typically the Thursday after this meeting. So it does take place next Thursday and the agenda will be posted on the boards and commissions website. We also have some information about our rehabilitation employment development specialists and just some different training that we've had over the past quarter. Couple things I just wanted to highlight. We have implemented a vendor portal. It has gone live. This is for our vendors that we do business with, and it's supposed to help us to receive invoices and documents electronically so that if you are a vendor for LRS that has been implemented and we're trying to get that off the ground. It's just one of our many things that we're trying to do to make processes more efficient.

I also want to, and I don't think this is in the report, but I want to thank the DD Council and other various organizations that have help us to get out, every three years we have a needs assessment. And that was posted on the DD Council, I know definitely their Facebook page. So thank you to everyone who has completed that and if you have not done so already, I encourage you to do so. We want to hear from you what needs individuals with disabilities have. One update on offices. All of our offices are reopened with the exception of our Houma office. We are seeing clients and our staff is doing a great job figuring that out. All the damage has been repaired to the office. But prior to the storm the air conditioning was on the brink and now it's completely out. So we're working through the procurement process to get the air conditioning working back in that office. So most of the staff are teleworking, some staff are coming to the office.

And the last thing that I wanted to report, and this is very new, and I may have mentioned this in
previous meetings that we had applied for this, but we actually applied with Michigan Rehabilitation Services for a five-year discretionary grant. And Michigan, who is the actual grant holder, we did receive that grant. So we are a sub-recipient and we will also be sub-awarding some of those funds to Southern University. And the goal of that project is to develop and use career pathways that assist VR eligible individuals with disabilities from racial, ethic, minority and other marginalized groups into competitive, integrated employment and demand jobs in science, technology, engineering, mathematics and medicine. So we were just awarded that a couple weeks ago. So we're definitely still in the development process. But through this project we're going to use different methods including social, cognitive career theory to be able to better assist individuals with disabilities in those marginalized groups so they can either enter into or advance in STEM occupations. So that's all I have prepared. But I would be happy to take any questions.

RASHAD BRISTO: All right. Thank you, Ms. Bayham. Do we have any questions from any council members? Jill, I see your hand. You're recognized by the chair.

JILL HANO: A question. My brain is tired. Sorry. When you say open offices back up, that's a tricky phrase these days. Do you mean from the storm, or do you mean from the hurricane?

MELISSA BAYHAM: I'm sorry, Jill. That is a great question. And I think because I've repeated myself so much, but then y'all obviously don't work here so it's probably not repeated for y'all. Our offices have been open for a really long time. So I was actually referring to the after hurricane because, and I don't know the specific time period, but our offices have been reopened from covid for quite a while. Typically we're by appointment only or you call. You'll see a note to call on the door just so we can make sure that we maintain social distancing. But when I refer to the Houma office not being reopen yet, that is simply
because of the air conditioning which was after the hurricane. But yes, does that answer that? Great.

JILL HANO: Cause I know after covid everything was by appointment only. And I think I somehow associated that with the word reopening. But that's all clear now. Thank you, Melissa.

MELISSA BAYHAM: Thank you.

RASHAD BRISTO: Thank you, Ms. Hano and thank you Ms. Bayham. Do we have any more questions from the council members in regards to the report from Louisiana Rehabilitation Services, LRS? I don't see any hands. Do we have any questions in the chat?

AMY DEAVILLE: There's nothing in the chat and no attendees hands are raised.

RASHAD BRISTO: All right. Thank you, again, Ms. Bayham. The report will be placed in the file. So next item up for business is Department of Education. So now we have our education report.

AMY DEAVILLE: Is Meredith Jordan listed as an attendee or has she been moved over to a panelist?

BRENDA COSSE: She's in the process of being moved over to panelist.

AMY DEAVILLE: Thank you, Brenton.

RASHAD BRISTO: Thank you, Brenton.

MEREDITH JORDAN: Hey, everyone. Meredith here. It's great to be here. Thanks, Amy, for joining me into the panel. So I'll start. I heard some of the questions earlier around the letter. And I apologize, those should be active links. But I'm working on getting those into an email to Amy now so those can be shared. Likely when it was scanned or transmitted those links somehow did not get translated to live links. So I apologize to that, for that. But we'll get those links to you. And so just to kind of recap the letter response to the previous chair. Really was meant to answer two key questions that were posed to Dr. Brumley and the department around our safe reopening guidelines which were linked in the letter, and you'll get a link too. And then second addressing continuous learning and ensuring that we're supporting
our educators and our students with disabilities who may still be learning in various modalities, including possible virtual learning this year. And so how will we address those challenges and support our educators and support our students and families across the state? So there were several links in there with ways that we are currently doing that, but, of course, welcome input and feedback and know that we'll constantly be evaluating that situation and supporting our educators, supporting our students in every way that we can for years to come to try to address some of the challenges as the result of school closures from the pandemic. So I just wanted to kind of recap that letter and address the issues around the live links. I apologize. We'll get those to you.

So to kind of go through the remainder of my report I wanted to bring to this council a lot of ways that we are, and just do kind of a general parent, family engagement update. The first item there was the requested report from District Management Group from the July meeting. Of course you all know I was coming into this role in July and so did get my hands on that report. And so you'll see here, and this is part of a larger consultancy with DMG. So this report was part of that. And so you'll see here around the process the focus groups, the interviews that were conducted with key stakeholders. And the report should be linked there, Amy. If that one that you have pulled up is not showing that that's a live link either. But we have that report that you can really go into and take a look at who were the stakeholders represented, what districts, what stakeholders, what key groups. For example, this council was included. And then the report includes four strengths that were identified by the stakeholders. And so the report kind of took all of those focus groups and summarized all of that feedback into these four strengths. And so those are listed here. The report gives a little bit more detail around each of those and then there were eight key opportunities identified. We did have a lively
discussion yesterday and the committee received a lot of feedback around this. The opportunities that were identified and so those eight are listed here. I won't go through all of those again. But definitely will field some questions at the end around this report if there are any.

The second update around parent and family engagement yesterday centered around our Families Helping Families overview. Our Families Helping Families centers are a critical partnership for us. We're working with all ten of those centers. And I'll also mention I know we heard the LRS report, but on our monthly calls I communicate to our SPED leaders communications for our Families Helping Families centers, so they have those contact information, the contact information how to reach out to our centers as well as our LRS regional centers. So we're communicating those resources to our school districts. We know that Families Helping Families is a critical resource for our districts in supporting our families and our students. And so these staff are uniquely positioned to provide support. They will go out and provide training even in our school systems to educators. They train our families. And so we really wanted to highlight that partnership here. They are working on work plans with us. We are in constant communication with them doing check-ins around their activities, how can we help them, how do they help us. So it's a really two-way partnership with them.

And then I also included here the many ways that our parents and families can support their students with disabilities during the school year. There are some key resources there that I linked to. We have a family support toolbox on the department's website. We also have back to school parent guides for-- this was the first year that we separated those into pre-K through second grade. And then our 3 through 12 parent guides. We also, I linked to also our 2021 back to school parent guide for students with disabilities. And I also linked to our literacy landing page that is
constantly being updated, but there are some resources there for parents and families to support literacy at home.

The next update on my report is around high-cost services. I know we bring this to this group annually and kind of provide an update around this program. We established this grant to support our schools and our systems with our students that have some of those very costly needs. And so this particular grant provides additional funding. Our school systems are in the process of submitting their round one applications now. So we released this in two rounds. The main reason we do that is we're catching our current students right now. We'll do another round in a few months and that will catch any students maybe that were mobile during this period and allow systems who have new students coming in maybe that they didn't request funds for in round one, they're able to request those funds for those students in round two.

And then the last update here was around our alternate assessment participation waiver. This is something that annually we have to submit a waiver to the US Department of Ed around our alternate assessment participation rate. So the ESA, Every Student Succeeds Act requires that school systems not exceed 1 percent. As a state our preliminary results from last year are that we're at 1.4 percent. We're going in the right direction here. But we also want to provide those students access to the appropriate assessment. And so we apply each year for a waiver for that federal requirement. And so we're seeking a waiver extension. We already have an approved waiver. We need to extend it for this school year to cover alternate assessments that begin in February. We are also, we have our public comment. The public, parents, our educators can submit public comment after this intent to our specialeducation@la.gov email. I can drop that in the chat if that's appropriate. But just to repeat that, you can submit public comment on this intent to specialeducation@la.gov. But I definitely wanted to
bring this intent to apply for this waiver to this committee because I know it's a piece that this committee is certainly used to hearing about. And that concludes all of my items.

RASHAD BRISTO: Thank you, Ms. Jordan, for that report. Do we have any council members with any questions in regards to the report from Department of Education? Ms. Hymel, I see your hand. You're recognized by the chair.

ROSLYN HYMEL: Hi. For one a little bit you have to catch me up on it, but I was following you. Is there anything new into your report that is different from the last report that you had from yesterday when I was online and everything or is this still the same report?

MEREDITH JORDAN: This is the same information, Ms. Hymel.

ROSLYN HYMEL: So the IDEA, what is that kind of help out with the students and the disability kind of thing in what states are there? Are they included in the State of Louisiana or just in the State of Louisiana alone in the countries? I mean little cities.

MEREDITH JORDAN: I'm not sure, Ms. Hymel, I completely understand your question. But IDEA covers, those are federal requirements that are regulations that apply to all students with disabilities across our country.

ROSLYN HYMEL: All right. That's what I wanted to know because if it was in different all the states or just in our state alone.

MEREDITH JORDAN: Right.

ROSLYN HYMEL: I wanted to really find out.

MEREDITH JORDAN: Yes, ma'am.

ROSLYN HYMEL: Thanks.

RASHAD BRISTO: Thank you very much. Do we have any other council members with any questions in regards to the report from Department of Education? I don't see any hands up. Do we have any public comment or any questions in regards to the Department of Education
report, Ms. Deaville?

AMY DEAVILLE: Mr. Charles Michel has his hand raised.

RASHAD BRISTO: Mr. Michel, you're recognized by the chair.

CHARLES MICHEL: Thank you, sir. Meredith, I just have a couple questions. When you're talking about the high-cost services in the program I remember when it first started it was on a cost reimbursement basis based on three times the amount it would typically cost to educate a child. They would give you some money over that amount. However, it subsequently changed way before you got here. It subsequently changed into more of a predictive thing. If we have a student that we predict how much it's going to cost, and we would get that money based on those predictions regardless of the actual expenditures. We asked for years to get it put back to cost reimbursement. And I was wondering if y'all are looking into at that, if that's a possibility? Because to me from an accountability standpoint, its accountability is much more easily accessed (inaudible) because it's actual cost expended, not what we think. That's the first question.

Okay. I guess I'll go with the second question. The alternate assessment. Again, back in the day, well before you got here, the criteria to be eligible for the alternate assessment back then called LAone was expanded from three standard deviations to two and a half in certain circumstances and two in certain circumstances. That by design increased the number of students eligible to participate in that alternate assessment. That drove many districts above the 1 percent cap that was allowed. There was quite a bit of discussion about that, some for, and some against. But because of the change in criteria, have y'all done any kind of study to see how many more students are participating in the alternate assessment now than they were before y'all opened up the criteria? Because to me that would be some good information to see if that's the reason solely that we are above our 1 percent
mandate. That's it.

RASHAD BRISTO: Ms. Jordan, you're on mute. Thank you, Dr. Michel.

MEREDITH JORDAN: Yeah. Thank you for that. Yes. We're moving in the right direction. So from what I can tell diving in this past school year our participation rate was 1.4 percent. Of course, we had 19-20 where we didn't administer assessments due to covid. But the previous year before that was 1.5 percent and then 1.6 percent. So we are steadily declining and getting closer to that 1 percent. However, we know that it's an IEP team decision in looking at a preponderance of all the data, all of the evidence around each individual student what assessment is most appropriate. Which is why, of course, we apply for this waiver every year. And you're right, so the criteria change, I believe, is helping us to get closer to that federal requirement. Because now the latest criteria change, I think maybe over a year ago, two years ago, they're now you have to have both the adaptative criteria and a cognitive. Whereas before that criteria was an and/or statement. So you're right. So the criteria has gotten a little bit tighter to make sure that only students with the most significant cognitive challenges are those participating in alternate assessment. And because once you're participating in alternate assessment it drastically kind of narrows, right, your pathway and your exit from high school and the opportunities. So you have very, very good questions. And again, that's exactly why we have to apply for this waiver. Because we know and we can predict based on our past few years of performance that we know this year we will remain over 1 percent. And I'm not sure exactly how many years we've been applying for this waiver. But it's been quite a number of years in our state that we've had to apply for this waiver. The positive side, as I'm on calls with other states and state special ed leaders, is actually last year even through a pandemic we met the other part of this federal requirement,
which is that 95 percent of our students, including students with disabilities, must participate in our statewide assessments. And we exceeded that. We met that federal requirement. That's a federal requirement that we've always been meeting. So we do a good job, our systems do a good job of ensuring that our students are participating in these assessments and have access to these assessments.

And to answer your high-cost question, I can also link you to our state plan. But you are correct that, so the fund is made up of, part of it is funded through our IDEA allocation, IDEA funds, part of high-cost services grant and then the MFP formula also funds a part of that. And it is based on an average per pupil expenditure. And then, you know, and they can apply for, it's a total cost in excess of a certain amount of dollars. We have that spelled out in a plan. If it's appropriate for me to drop that link in the chat I can certainly do that, chair, to that state plan that really explains how that's funded.

RASHAD BRISTO: Please do. That way it will be available in case anyone else has any questions. If one person has a question, there may be several with the same one. They just didn't have the opportunity to ask.

MEREDITH JORDAN: Sure. I'm dropping it now.

RASHAD BRISTO: Do we have any other questions, council members?

AMY DEAVILLE: No one else has their hand raised.

RASHAD BRISTO: Okay. Do we have any public comment?

AMY DEAVILLE: No comments in the chat.

RASHAD BRISTO: Okay. Again. Thank you for your report, Ms. Jordan. It will be reported. I see you made the comment, dropped the link. It will be recorded to file. Now we're moving forward. Next item of business for the report is Office of Aging and Adult Services. Do we have a representative? Do we have a representative from the Office of Aging and Adult Services to present a report?
AMY DEAVILLE: It's likely that we don't have a representative on the call. They did submit a written report.

RASHAD BRISTO: The written report was made available prior to the meeting, correct?

AMY DEAVILLE: Yes. It was.

RASHAD BRISTO: For the sake of council members, unless you see differently, if it be the pleasure of the council, we'll move to the next agenda item for business. So now we'll be down to-- make sure that we record that to file. And now we'll be down to the report for the Office of Citizens with Developmental Disabilities. Do we have a representative?

JULIE FOSTER HAGAN: Hello. This is Julie. Can y'all hear me?

RASHAD BRISTO: Yes.

JULIE FOSTER HAGAN: I've had internet issues and I am almost to a location where I'm back to Wi-Fi. Would it be possible for the next person to go and then come back to me at the end? I apologize.

RASHAD BRISTO: No problem, Julie. Thank you for making your situation known. Do we have a representative from the Office of Public Health.

PATTI BAROVECHIO: You do.

RASHAD BRISTO: Okay. Ms. Barovechio, you have the floor.

PATTI BAROVECHIO: Thank you so much. So my name is Patti Barovechio. I'm from the Bureau of Family Health which is housed under the Office of Public Health. We house the title five children and youth with special healthcare needs program. As you can see by my very lengthy report, we support many programs that serve the community of individuals with developmental disabilities. We have children special health services which includes direct service clinics in areas of the state where subspecialty providers are not available, or the service is inadequate at this present time. We also sponsor a family resource center which is now transitioned to a statewide virtual resource. So this resource center can provide supports
for any pediatric family medicine provider in the state and/or any family of a child or youth with special healthcare needs that needs any type of resource linkage support. And that would include anything that would touch that child. It can be housing. It can be food insecurity. It can be provider linkage, service linkage. It does not have to be health specific. And so OBH is also a partner with Families Helping Families. We have the Bureau Family Health Families Helping Families project. Which again, we're working to ensure that all children and youth with special healthcare needs and their families have access to community level resource and referral services. The bureau also administers the genetics program which does that newborn heel stick on every baby born in Louisiana. You can see updates for that program contained in our report. We also conduct the newborn hearing screens also in the newborn population. In addition to that, the Commission for the Deaf sits under the Bureau of Family Health and along with the Louisiana Birth Defects Monitoring Network. All updates for those programs you'll find contained in that report.

And just to also note that we also administer two family support and coaching models which is the nurse family partnership and the parents as teachers. We also administer school-based health centers in the state. Those that are under the direction of the Office of Public Health. I'm happy to take any questions. You will find specific program information within that report.

RASHAD BRISTO: All right. Thank you for your report. Do we have any questions from any council members? I'm not seeing any hands. Do we have any public comment or any questions?

AMY DEAVILLE: No attendees have their hand raised and there's nothing in the chat.

RASHAD BRISTO: Okay. Thank you for your report. Your report will be placed on file. Now we're up to the report from the Governor's Office of Elderly
CHERI CRAIN: Yes. This is Cheri. Good afternoon.
RASHAD BRISTO: Please proceed.
CHERI CRAIN: I have made some edits to the report. So GOEA is the designated state unit on aging, and we administer the Older Americans Act program services. So the services that we provide are listed below. I'm not going to go into each one of them specifically. Other services that we provide are by partnerships with the senior RX prescription assistance, national family caregiver support. Also the Louisiana Medicare Improvements for Patients and Provider Acts well known as MIPPA. And the senior employment program. We also handle the long-term care ombudsman program. Just a little bit of information there and a number. We also have elderly protective services. We have, since covid we have opened 6,246 cases. Currently we have 2,594 open cases since July 1st. 1,541 of those cases have been closed with 144 cases being classified as high priority. The types of reports of abuse that we do receive includes caregiver neglect, emotional abuse, physical abuse, sexual abuse, self-neglect. And there's a couple other that we receive as well. Due to covid restrictions we are not able to do the face-to-face interviews for medium cases or the high priority. So we kind of get law enforcement involved if we have to on those high priority cases.

We have our aging and disability resource center where it's kind of a clearing house for an array of long-term care options. Prescription assistance, other resources available. Especially with covid we had some assistance for the blue tarp program and a couple other programs that all funnel through our ADRC. If anybody called looking for those types of services. We have Louisiana Answers which handles our senior RX program to help with the prescriptions. We also have them to help with the SNAP, D SNAP, FEMA, utility assistance, food supplemental programs. All that can be found on our louisianaanswers.com portal as well as our ADRC locations. Our MIPPA program, our open enrollment
started October 15th and it will run through December 7th. That program helps with enrollment assistance for low-income subsidy programs, Medicare savings programs. They also conduct a Medicare Part D counseling and enrollment assistance as well with those.

GOEA continues to work with EMDAC, feeding task force and other response recovery support function groups. These activities are structured to plan and implement activities prior to an emergency, during an emergency and post emergency for recovery for the constituents of the state through most of our Councils on Aging. We serve as an effective and visual advocate for the elderly population of Louisiana ensuring seniors in need receive appropriate services from providers and the agency network. We submitted a disaster grant for Hurricane Laura back in February of this year. We did receive the grant finally on September 27th in the amount of 100,000. However, the grant was to end on September 30th. So GOEA had to really turn around and submit a no cost extension on September 29th and we were granted that extension which allows the grant to now go through September 30th of 2022. We're currently working on those contracts to help Cameron and Calcasieu Parish to provide 50,000-dollar to each one of those parishes to help those constituents with those items such as toiletry items which would include blankets, towels, sheets. Normal things that would not necessarily be covered by insurance. So they're going to be able to help those constituents regain some of those toiletry items. Also, if they have a need to replace shelf stable meals that were given out during that time, they can also use that as part of replacement to replace those meals. We have now moved from our current location, well, our last location on Florida Boulevard. We have now moved as of October 11th to 602 North Fifth Street which is known as the Galvez Building. Right next to LDH. We have implemented an auto attendant for our main line so now when you call, you'll get those automated prompts to press one for this unit, two for this unit. We
believe that will help streamline some of the calls that we get and alleviate callers being transferred from person to person if no one does answer the phone line. And I think that covers everything in the report. And I will send the updated report to you so that you have it.

RASHAD BRISTO: Thanks for your report, Ms. Crain. Do we have any questions from the council members in regard to the report that was just presented?

AMY DEAVILLE: I'm not seeing any hands raised. Roslyn just raised her hand.

RASHAD BRISTO: Ms. Roslyn, you have the floor.

ROSLYN HYMEL: Thank you, Mr. Chairman. What I wanted to know are y'all still in the State of Louisiana for one? And where is y'all's location? Once again, I was trying to understand where y'all's location. Is it like across the river or y'all on this side? And how can we get in touch with you or any other people in your office or whatever case maybe with other clients that you mentioned in Part D in that?

CHERI CRAIN: Yes, ma'am. So we are located Downtown Baton Rouge. We were on Florid Boulevard, but we are now on the corner of North and Fifth Street. So we're still downtown. We're like two blocks from the capitol. So our phone number to our main line is (225)342-7100. Most all of our Councils on Aging, which we have one in every single parish, you can contact that parish Council on Aging, and they can help you with any questions that you have with your Medicaid Part D enrollment, or we also have a toll-free number. That number is 1-877-340-9100.

ROSLYN HYMEL: Can you give me the other one you had please?

CHERI CRAIN: I'm sorry?

ROSLYN HYMEL: Can you give me the first number you were saying?

CHERI CRAIN: Yes, ma'am. It's (225)342-7100.

ROSLYN HYMEL: What was after the one?

CHERI CRAIN: Zero, zero.

ROSLYN HYMEL: Two zeros.
CHERI CRAIN: Yes, ma'am. I think I answered everything. Did I, Roslyn?
ROSLYN HYMEL: Yes. You did.
RASHAD BRISTO: Thank you for that. Ms. Hano, I see your hand. You're recognized by the chair.
ROSLYN HYMEL: I'm sorry. I didn't lower it. I'm sorry.
JILL HANO: Yes. I heard a bunch of agencies talk about EMDAC. Especially with covid and all the hurricanes. What does the council do besides the Governor's Office of Disabilities. Who else is associated with EMDAC?
CHERI CRAIN: Yes, ma'am, Ms. Jill. What we do is we do partner up with EMDAC, so we are also a presence on that board with Bambi Polotzola. I'm sorry I can't ever say her name right. I apologize, Bambi. But we also handle any type of services that the elderly 60 and older needs whether it is homemaker services where we provide services to come out, help you clean your house, you know, help you take a bath, whatever you may need. They help with groceries, they provide transportation to doctor visits, dental visits, stuff like that. Does that answer your question, Ms. Jill?
JILL HANO: I'm sorry. It did not. Like other than y'all and Bambi's office, who on the council, what agencies on the DD Council partner up with EMDAC?
CHERI CRAIN: So you want to know what other agencies partner up with EMDAC other than me and Bambi?
JILL HANO: Yes.
CHERI CRAIN: Okay. And I think Bambi can answer that more readily than I can. I know that OBH, LDH is presented. GOSEHP is presented. I'm trying to think. But I think Bambi can answer it more readily available than I can what other agencies participate on that.
RASHAD BRISTO: Ms. Polotzola, you're recognized by the chair to give that response.
ROSLYN HYMEL: Excuse me, Mr. Chairman. I'm getting ready to leave now. I should be back in three minutes. Three to four minutes.
RASHAD BRISTO: Thank you. One second. Before we
JILL HANO: Bambi will you send me a direct message in the chat please.

BAMBI POLOTZOLA: What I'll do is we have a Google doc with the list of everyone. I can drop that link in the chat, and you can see like the names, the organizations of everybody who works with EMDAC. Will that work?

RASHAD BRISTO: That will be fine. And if we have any more questions, we know exactly who to contact. Do we have any more questions from council members with regards to the report that was presented?

CHERI CRAIN: Thank you, Bambi.

BRENDA COSSE: I think Jill still has a question, Jill Hano. And then Jill Egle also has her hand raised.

RASHAD BRISTO: Okay. Jill Hano, you're recognized by the chair. You're muted Jill.

JILL HANO: Can I save documents onto this laptop, Ms. Amy? Cause I've been saving documents all day. Like can I do that if I delete them when I turn in my loan?

AMY DEAVILLE: Yeah. You can do that. Before you turn in your loan, you'll just get all the documents off of it.

JILL HANO: Okay. I've been doing that the whole time. I think this is okay. But thanks. All right. Sorry.

RASHAD BRISTO: Thank you for that. Chair recognizes Ms. Jill Egle.

JILL EGLE: Chairman, Mr. Rashad Bristo, I have something that I have to deal with so I'm going to have to log off. But I have a quick question in terms of I know effective October the 1st of this year the rates went into effect. What does that mean? Is that the State of Louisiana or the government?

CHERI CRAIN: So which rates are you referring to?

JILL EGLE: Through the Arc of Greater New Orleans.

CHERI CRAIN: That's a good question. I'm not sure
on that one. I will have to look and see and get back with you.

JILL EGLE: Okay.

CHERI CRAIN: I'll put an email in the chat, if you want to write it down and you can send it to me. And I will gladly look it up for you.

JILL EGLE: And I just want to make sure, and Ms. Deaville this goes to everybody, DD Council staff and all the DD Council, the members and the panelists and everybody. I know that this time next year I have to end off. But if you could send me the application, you know, or whatever I have to do to get back. Because without the DD Council I felt like I had nothing. And I want to always represent the DD Council to the fullest extent so all people with developmental disabilities can have the best life ever. So I don't want to lose this connection. I don't know, I hope that y'all all look up to me, but I've been through a lot, and I always want to represent anything I can to my fullest extent.

RASHAD BRISTO: Thank you. I'll make sure we get with Ms. Deaville. It's that kind of passion that keeps the DD Council focused on what's important. Do we have any more comments from council members? Questions from council members with regard to the report? I didn't see any more hands. Do we have any public questions or comments with regards to the report that was presented by the Governor's Office of Elderly Affairs.

CHERI CRAIN: Mr. Chairman, Julie Hagan did respond saying the rate increase was for home and community-based waiver services.

RASHAD BRISTO: Okay. Thank you for that, Ms. Hagan. And we haven't forgotten about your presentation. Just trying to give you a chance to be stationary in a fixated place. So hearing no more public comments, we're going to file the report that was given by Governor's Office of Elderly Affairs. And now we'll move forward to the Bureau of Health Services and Finances. Ms. Zimmerman.
KELLY ZIMMERMAN: Hi, everybody. I'm Kelly Zimmerman. And if you haven't already heard, Jen Katzman who served in this role has accepted another position. So she is now working in Shreveport. And so I am sitting in for her and will share the report from Medicaid. And so we did share the report in advance, and it is here on the screen. And so I will go over the highlights. And so the first item in the report is about the American Rescue Plan Act. And so this is the act that is allowing us to take advantage of a temporary 10 percentage point increase to the F map for certain Medicaid expenditures for home and community-based services. And so the Department of Health has been working really closely with CMS along with all of our internal program offices within the agency to develop a spending plan that we could propose to CMS. So we have now submitted our HCBS spending plan. It looks at all the different ways we can really utilize this enhanced 10 percent increase in the F map. And to share that to help enhance HCBS services. So that has been submitted to CMS. It was submitted October 12th, I believe. So last week. And we are now waiting on CMS approval for that plan. So that is exciting news coming and we're just waiting to hear back from CMS at this point.

The next update is about our children's Medicaid option, TEFRA. And you heard a little bit about this earlier. We were pursuing the 1115 waiver route and have now since changed that over to a state plan. And so that is with CMS pending review and their approval. We have been working with CMS on some questions and answering every question that we have. And we do plan to implement this for January 1. And so just waiting for our final CMS approval so we can go ahead and move forward on that. We have an update on permanent supportive housing services. There are currently 4,801 individuals being served in 2,869 households providing permanent supportive housing.

On Money Follows the Person, so far 183 individuals have transitioned in calendar year 2021,
this calendar year. Transitioned through the Money Follows the Person program in the OAAS and OCDD qualified institutions. Let's see. We have an update in our report on self-direction. So this says that just, we have just about 1800 individuals participating in our self-direction program. And so you can read a little bit, a summary here in the report. And then same for electronic visit verification. So our contractor, SRI continues to train and work with providers for in-home electronic visit verification just to make sure that Louisiana complies with the requirements of the CARES Act. And at this time approximately 93 percent of providers are meeting the state benchmark of 80 percent electronic visit verification. And I think that's the highlights of the report. I'm happy to take questions.

RASHAD BRISTO: Thanks for your report. Do we have any comments or any questions from any council members in regard to the report that was just presented?

AMY DEAVILLE: Nothing from the council. There is a comment in the chat.

RASHAD BRISTO: What is that?

AMY DEAVILLE: What is the application process for Act 421? Where do we direct families who may be eligible for this option?

KELLY ZIMMERMAN: So now that it is through our state plan it will just be like through the regular process to apply for Medicaid. And so we do have a web address, a web page for this program. And we continue to update this website with the most relevant information. So right now that web address www.ldh.la.gov/act 421. And there you can see it on the screen. But again, it's just like any normal application in the Medicaid program.

RASHAD BRISTO: All right. Thank you for that. Do we have any more questions or public comment?

AMY DEAVILLE: I don't see any more. Oh, Bambi has her hand raised.

RASHAD BRISTO: Okay. Ms. Polotzola you're recognized by the chair.
BAMBI POLOTZOLA: Yeah. So you said it's just like any normal application for Medicaid. But it's not. You know, it's a special class of people who qualify for this. And I know most Medicaid programs are a special class of people. So can you just go into a little bit more of that process? So those listening, I know a lot of people, support people will be, you know, trying to get this type of Medicaid for their child.

KELLY ZIMMERMAN: So, right. And I may need to come back in and fill in some of the blanks. But as I understand it, and Julie may need to chime in here as well, but a person would go through the application process in our Medicaid program. And then the analyst would help direct them to this appropriate option. And then the local governing entities will help us with sort of the evaluation and to make sure the members are in the appropriate program. And Julie, please fill in if I've missed something.

BAMBI POLOTZOLA: If I could, just one more comment. I think, I know what's happened in the past in regards to like Family Opportunity Act, which is also an option for this population. That sometimes that was not, families weren't being made aware that that might be another option for their child's eligibility from Medicaid. So I guess, you know, my concern is to make sure those people that are doing the Medicaid applications are really well versed and there's some way to be able to catch that and make sure people are accessing Medicaid if they qualify. Or those kids can access Medicaid.

AMY DEAVILLE: Julie Hagan has her hand raised and that might be to help fill in some blanks.

RASHAD BRISTO: Ms. Hagan, you're recognized by the chair.

JULIE FOSTER HAGAN: Okay. So, yeah. Everything Kelly said was correct. And we are, you know, working to make sure on the intake side that folks understand. I did just want to provide a little bit more clarity in terms of who, which children would qualify for this in terms of what the assessment that the local governing
entities will do for us. There are three levels or three different criteria that make somebody eligible for the TEFRA program here. It is that they meet ICFDD level of care. And for now basically anyone, any child who has an OCDD statement of approval would then, we would have to do what we call a 90L. But the majority, if not all of the people who have an OCDD statement of approval, are noted to meet ICFDD level of care. So that's one entry way. And then there are two other entry ways into the program. And that is nursing home or nursing facility level of care and hospital level of care. And we worked with a stakeholder group to develop this assessment for here in Louisiana. And so if we have children who don't have an OCDD statement of approval, but their families feel they may qualify through that nursing home or hospital assessment process then they would, the local governing entity. And that's what Kelly said when you register, that will trigger the local governing entities reaching out and seeing if they meet that level of care. We do think that there will be a lot of children or there may be some children, you know, from three years of age to 18, but we do anticipate because our children in the birth to three-year-old population don't always, there's not a clear path to get into OCDD with a statement of approval. We anticipate that the birth to three-year-old population will be the largest number of children we see who become eligible for Medicaid. And so what this program does if you're eligible for Medicaid in the traditional manner based on, you know, salary that you become eligible then this is really no different. With this program is for children of families whose income doesn't make them eligible for Medicaid services, but they have a higher level of need. And so some of the things that private insurance, you know, or private pay can't take care of this allows those children to become Medicaid eligible and then therefore receive services through our EPSDT state plan service. So just thought that might help make it a little bit clearer.
RASHAD BRISTO: Thank you for the explanation. Very good. I see Ms. Carmen Cetnar. I hope I pronounced your last name correctly. I hope I didn't butcher it. You're recognized by the chair.

CARMEN CETNAR: So I don't think that families will have trouble figuring out they're finally eligible for something. But I guess I'm very concerned about the implementation process. Because if we tell families who have never applied for Medicaid, have never even applied because they knew they were not eligible, or they don't deal with Medicaid on a daily basis. We tell them to go to the Medicaid website and apply, like do that long application, there will be a few things that will happen. Number one, they'll just get like a denial letter automatically and they won't know to continue on because they're used to being denied services because of their income. And then they'll say oh, well. I was denied and won't move forward. The second thing that could happen is they won't kind of know how to navigate the Medicaid application towards the TEFRA population application part. Is there some kind of, I don't want to say like safeguard or backup, that like these families will be directed to Families Helping Families or to a specific department. Cause I'll give you an example. During our lunch break I spent an hour on the phone with Medicaid getting transferred four times for my son's waiver. So, you know, I just feel like these families are going to get stuck in a phone tree because they're not used to having to jump through all the hoops to get what they need. And they're going to be like oh, well. I was denied and they're going to move on. And these children won't get these services that we have fought so hard to get put in place and we finally have a program and it's fully funded. So it's so exciting and it's like my passion project. So I'm just kind of concerned about those families that get that automatic denial letter because of income, or they wrote the wrong thing, or they filled it out wrong or they put the income and they were automatically denied. I'm
just very concerned on the back end how those families will be pushed through entire program system implementation.

KELLY ZIMMERMAN: Carmen, I'm sorry. I don't know that answer right now on this call. But I did make a note and it is something that I am going to bring back to our team who is working on the implementation to make sure that they hear this concern and can make sure that we have some mechanisms in place to help.

RASHAD BRISTO: Okay. Thank you for those comments, Ms. Carmen, as well. Because it does get to be kind of stressful when you're going through these hoops. And a lot of people don't know once they get the denial at that point they give up and they walk away discouraged. Have to be real tenacious. And that's another reason we're here as a council to let them know just because you were turned down the first down doesn't meant that you can't get (inaudible). I was always told the empty wagon gets the grease. But then again, I was raised by old folks, so I have a lot of clichés. Do we have any more questions or comments?

AMY DEAVILLE: Liz Gary has her hand raised.

RASHAD BRISTO: Ms. Gary, you're recognized by the chair.

LIZ GARY: Thank you so much. The only other thing I wanted to ask was when the family-- no. I'm sorry. When the Family Opportunity Act came out that was a Medicaid also for, I think it was 350 percent above poverty. Which opened it up for a lot of families who had kids with disabilities. I guess I don't understand that that one I don't remember having to meet the level of care nursing home 90L. I know that when we were talking about all that during the whole conversation and Act 421 one of the reasons we were lining all that up because of the 1115 waiver. So I guess my question would be is why does it still have to have those same criteria if it's the state plan and the Family Opportunities Act didn't have to have that same type of requirements?

KELLY ZIMMERMAN: And I'm sorry. I apologize. I
do not know the answer to that question either. And I am not familiar with the Family Opportunity Act. And so that is, again, something I can bring back to our team and ask.

JULIE FOSTER HAGAN: This is Julie. And Liz, I don't have the details either, but the level of care is typically those, the establishment of meeting a level of care threshold is typically in a TEFRA program. And one of the requirements in terms of just looking at that it's for children with extraordinary needs. And so that's sort of where it derived from. But yeah, Kelly and I can work together to make sure we have the right details on that.

LIZ GARY: I appreciate that. Thank you. Thank you, Mr. Chair.

RASHAD BRISTO: Thank you, Ms. Gary. I don't see any more hands raised or any more public comment. Your report will be added to the file. And Ms. Hagan, it looks like you're situated. You've been answering several questions. So we'll go ahead and get your report from OCDD out the way.

JULIE FOSTER HAGAN: Okay. Thank you. And I apologize. I'm in an area that was hit by Ida, and it seems like every day is a new day in terms of whether we will have services or not. So thank you for allowing me to be a little bit delayed in my report. There are some things I was going to cover with you guys that we've already talked about a lot, so I won't revisit those. There are a couple things I wanted to make sure that folks were aware of though. We have talked a little bit about this. On October 1st we did implement for our developmental disability waiver services that are provided by a direct support professional, there is a 2.50 per hour rate increase. So that's our in-home services, our day services. There is a list on our website that tells the specific services in each of the waivers. But it's either 2.50 or somewhere close to that or an equal increase. Like for day habilitation services, those are done a little bit differently so it's not exactly that. It had to be
calculated differently for things that were a per diem than an hourly rate. And so, but there is, there was the increase. It did start on October the 1st. We had all of our programming in place, so providers began to receive that. We did hear that there were a handful of providers, there was some issues because of the way it was billed, but those are in the process of being cleaned up. So that reimbursement can make sure that it took place. With that increase of 2.50, or approximately 2.50, there is an expectation that direct support workers be paid a minimum of 9-dollars per hour. And so starting early next year OCDD will be going in to do some auditing of payroll records and things just to make sure that the direct support professionals are being paid that minimum of 9-dollars per hour. And we did some rule making associated with that to allow us to be able to go in.

I know earlier in the council meeting today there was discussion about the discrepancy with OAAS. And Kelly just advised you guys on the American Rescue Plan Act. And one of the, we did hear from you guys about the concerns about those potential inequities. So one of the activities in our American Rescue Plan Act is to also give a rate increase to our Office of Aging and Adult Services providers. Our rate in the New Opportunities Waiver and the Residential Options Waiver for in-home services starting October 1 is now 18.50 per hour. And so in the American Rescue Plan Act we're asking for funds to increase the OAAS direct care services and long-term personal care services to the same 18.50. We are not able to implement any of those activities until we have CMS approval of our plan. And we haven't gotten approval yet. But once we do, then those, I should say if, CMS approves us to use the funds for that rate increase for the Office of Aging and Adult services then we would plan to retroactively pay that to October 1st to be consistent with what we did in our OCDD waivers.

So we also know that, and the American Rescue Plan Act will be placed on the CMS website. So folks can
see what our spending plan is as well as all state spending plans, they're going to be putting that on their website. But I do know, and I just wanted to highlight I know in previous council meetings there's also been a concern about not only our direct support workforce, but our nursing workforce when it comes to providing, you know, skilled nursing services and extended home health services. So the American Rescue Plan Act also has a proposal to do some bonus or incentive payments to try to help us address that gap that we know is also out there. And then I won't get into all the details, but there are some other initiatives that we are trying to do. Again, trying to help address the workforce crisis. You know, hearing from folks that that's a big issue. Not only with DSWs, but with other professionals. And then trying to also look at ways that we can use those funds cause they are there to help enhance home and community-based services. So there are some other activities that we are looking at using those funds for that we think will enhance our services.

I also wanted to point out that within the next couple of weeks there will be published the Louisiana Department of Health business plan. I will make sure to share that link with council staff to share with everyone. And I was really excited that there are some things that you'll see a lot of really great initiatives that we have in there. You know, this is Secretary Phillips way of ensuring that the public knows about the commitments that we have as a department to engaging in activities to support all citizens of Louisiana. Some of the things that are specifically there that I thought might be of interest to the council is a commitment to continuing the work that was started to get comprehensive dental services for adults with intellectual and developmental disabilities. So you'll see a commitment to continue the work there. And I know that was mentioned as a legislative agenda item as well. So you will see a commitment in the business plan to that.
We also have had a lot of talk about the rates and needing to just come together and figure out a way that we have a rate that makes sense. So we do, there is also a commitment from Secretary Phillips there that what our office will do, because it's not only our home and community-based rates, but it's Medicaid rates across the board. So the business plan will include an initiative that will require that all Medicaid rates for all services in Medicaid go through a rate review. And that process is being worked out right now, but it will go through a rate review on a three-year cycle. So we'll have rates that we review in year one, year two, year three and then it will be an ongoing cycle. So that we're engaging in dialogue and discussion ongoingly about what the updated needs are. And we do know when we do get to the point where we're looking at our home and community-based rates, we'll need to engage stakeholders in that. Especially some of the conversations you guys have had about how do we make sure, or how do we include a living wage for our direct support workers in there. And then some other factors that we know need to be considered, having nurse consultants and what not. And what are all the things that need to go in the rate. That way when we go to the legislature, we can make sure that we know how the rate was developed and we maybe can have a more consistent message in terms of what the needs are to get us to a rate and then sustain us as at a rate that makes sense for folks. So there is that commitment in the business plan.

And then also you will see a commitment to begin, this is a long-term strategy. We know this will take a long time. But there is a commitment to begin the conversation about how do we start to tackle the workforce crisis that we have for our direct support professionals and other, you know, like I mentioned earlier, the nurses and things like that. But how do we really begin to engage in a conversation. Because rate is part of the discussion. But it's also bigger than that. And so what activities do we need to start
engaging in to come up with strategies to truly address the workforce crisis that we know is present here in Louisiana. And quite honestly just nationally.

I will also point out, I think Brenton shared earlier or during our Community and Self Inclusion Meeting, we talked about OCDD is working to identify, you know, every year we kind of highlight our major activities, but we're trying to be much more transparent with that whole process. So I will definitely share with you we're working on finalizing an external facing document now so that everyone is aware what are the major activities that OCDD is working on. And then on a quarterly basis, kind of giving the public information on what progress did we make. If we ran into barriers, what those barriers are. And then, you know, just looking to have that conversation. And so based on that I did want to share we are, you know, our report is always very lengthy to the Developmental Disabilities Council. And we want to make sure that we're giving folks the information that they need. So we are going to be looking at, you know, how we structure our report that's up there to be able to have the information that folks need to have in the easiest and best way to reformat. Probably trying to restructure it a little bit more around sort of our major activities so that it's easier to read. And then we have identified some issues with the data and the way the data is being reported. Especially as it relates to like our request for services registry and some of the activities with our SUN screenings. So we want to make sure that that data is clean and that it's clear. Because some of the numbers when we drill down, I don't know that they're being presented in the most accurate way. So we want to be able to do that. So if anybody has suggestions on ways that we can modify our report, please don't hesitate to reach out to me at julie.hagan.la.gov because for the next quarter we want to work on that.

One other thing I forgot to say about data, we know that it's important to the council that we, you
know, continue to have the funding that we need so that we wouldn't have to reinstitute a waiting list for, or a list where people who are screened as having urgent or emergent needs don't get a waiver slot. And there's been a commitment to keep money in a million dollars in the NOW fund should we ever need to have additional funds for additional waiver opportunities. And so I'm also not clear that that data is laid out in the best way. Cause I know one of the things in the past the council had said it's important to them to be able to know that if we're getting close to the point where we may have to institute a waiting list or not being able to give offers to people with a three or four, the council wants to be able to know how to trigger that. And so we're trying to rethink how we present that data to make sure that what we're giving you guys would help be able to see those trends or see what those patterns are. Again, we're more than happy to take any suggestions from the council on how we can make this most efficient and transparent and the information that you guys need to see. I'll stop there and I'm happy to take any questions.

RASHAD BRISTO: Thank you, Ms. Hagan. Are there any questions from the council members in regard to the OCDD report?
BRENTON ANDRUS: I believe Jill Hano had her hand raised.
RASHAD BRISTO: Jill, you're recognized by the chair.
JILL HANO: Thank you. Hold on. Hold on, Julie. You know, I can never let you get off scot-free.
JULIE FOSTER HAGAN: I wouldn't expect it any other way, Jill.
JILL HANO: Okay. Back to the rate increase. I know that was what my question was about. With the legislature with the 2-dollar rate increase for the caveat to go to the DSPs. But what did you say, like so now with the increases in place what did you say the base rate was?
JULIE FOSTER HAGAN: Nine-dollars an hour.
JILL HANO: So, okay. Then I don't know what base rate is. The other number like 18 something.

JULIE FOSTER HAGAN: Oh, so the rate that is billed is $18.50.

JILL HANO: Why do I always try to do math on you two. So if the worker is getting the 9-dollars an hour, if the total rate increase is 18.50 and the worker is getting the 9-dollars, and I'm going to look like a fool, so is the remaining money which would be some figure, does that go to the provider itself?

JULIE FOSTER HAGAN: So let me--.

JILL HANO: For operational cost.

JULIE FOSTER HAGAN: So when I mentioned that one of the things I would really like for us to do is to try to get together a group to take a look at all of the things that go into the rate. So when providers bill, they don't have, they don't get paid any other way. Most of our home and community-based waiver providers they only are billing for Medicaid services. They may have, you know, fundraising if they're a nonprofit and the other ways that they get money that come in. But most of what has to happen is when they bill for the services, they provide that what they bill has to go to pay their direct support workers, pay workers' compensation, pay, they have to have, usually have a nurse consultant and depending on the level of need of folks that's different. They have to have an actual facility building that they have to operate out of. It's complicated because that rate is what they bill and it includes paying staff, but it includes a whole lot of other things.

JILL HANO: Okay.

JULIE FOSTER HAGAN: Go ahead.

JILL HANO: So, okay. I don't know. Continue.

JULIE FOSTER HAGAN: So what I would like to do because some of those things when we develop the rate are considered and some are not. And so what we would really like to do is work with a group of people that crosses providers and families and self-advocates to say these are the things that we understand are
included in part of the rate. Now there might be
different percentages. For example, overhead is what
you call the cost of the building and stuff. So what
percentage of that rate should go to overhead. What
percentage should go to profit. Those things we might
need to tweak as we go. But if we could come to at
least an agreement on all of the things that that rate
is supposed be able to cover then I think we would be
able to have the conversation a little bit more, a
little better in terms of, you know, what if we do
increases, than where are we increasing and what does
that need to be. So the rate before October 1st was
16-dollars an hour that they billed. On October 1st it
became $18.50 an hour. So there was $2.50 an hour more
that was given. During discussion, and here's math
that I can't tell you, if you take $2.50 cents and then
you take 70 percent of that. So we said 70 percent
would go to the worker and 30 percent would go to the
provider for the other associated costs. And then so
you get 70 percent of $2.50, which in my head, I can't
remember. I think $1.75. And you take 7.25 which is
the current minimum wage, and you add $1.75 on top of
that that's where we got the 9-dollars an hour. So 70
percent of the additional $2.50 goes to the worker
because it raised the minimum wage up by that dollar
75.

JILL HANO: Okay. I want to get this in the
transcript, Ms. Julie. But it's all coming together.
But I do have another question that I don't think was
in your report. But just general curiosity. I know
that since covid our big issue like now everyone on the
council that attends the council meetings should have,
so there's three main Appendix K exceptions that we've
been talking about since covid. And we talk about the
big three, is this making y'all dizzy, every quarter.
But are there other, like I know we're focused on the
main three, but how many Appendix K exceptions total
are there?

JULIE FOSTER HAGAN: I don't remember the number
off the top of my head, Jill. But at the big, so I
mentioned earlier we're having focus group meetings on the big three in the next two weeks. At the meeting we have on November 10th, the webinar for everybody to come and then be able to give us public comment, we're going to share the outcome of the focus groups for the big three, as you called them. But we are also at that time we're going to go through a list of every single exception that was in place-- excuse me. And what the plan is kind of moving forward after the public health emergency for each one of those. And so you will have a clear, and we'll get the power point to everybody, but we're clearly going to delineate every single Appendix K and emergency rule that we've done under covid. And we're calling it in the department the (inaudible). So what the plan is post public health emergency. And folks will have an opportunity to provide us feedback and public comment on all of those. So we'll be sharing all of those at that November 10th meeting.

RASHAD BRISTO: Okay. Thank you for that, Ms. Hagan.

JILL HANO: Thank you, y'all.

RASHAD BRISTO: I see Mr. Rovira, you have your hand. You're recognized by the chair.

MATTHEW ROVIRA: Thank you so much. There's a lot around the rates for home and community-based services and we had a lot of discussion about family members potentially continuing to be staff today. But I just wanted to express-- well, first of all Julie, thank you guys, and thank the DD Council for using the funds out of the New Opportunities Waiver trust fund to go to increase these rates that Julie just talked about. I am a provider of home and community-based services here in Louisiana. And I can tell you it's made a big difference. We increased our rates. This rate increase on September 26th, which I think was a Sunday. And already are noticing a big difference in our operation. So thank you.

And my point being, it's just more of a statement and something for the DD Council to consider moving
forward as based on Julie's comments how we want to get to a minimum wage for direct service workers, how we want to ensure that this money is going to the workers (inaudible) is also just letting this body know the importance of the New Opportunity Waiver trust fund. And the role that this body plays in advising the department on its utilization. I think it was created in 2016 by John Alario. I was (inaudible) back in those days. And it never really got much money because we were going through deficits. But the way the trust fund works now is when there's a budget surplus a certain percentage of that goes into the trust fund. And again, we have a surplus this year. Point being is the department is going to really depend on that trust fund. It plays a major role in the New Opportunities Waiver fund and how that program gets money. So I guess my point to the board is we should consider having a subcommittee or maybe putting that discussion in one of the committees that are currently formed as an ongoing discussion so that way when we get asked to utilize that fund or get for our advice what to do with it, we're not on the back of our heels trying to figure this out. Cause we all want it to be utilized and utilized properly. So again, I guess my thought process, Mr. Chairman, is just keeping your mind that how can we sort of have an ongoing discussion about this trust fund so when the complicated question gets ask to us in about six months, or maybe even three months from now, we've had a full, full discussion with this body and not just a quick reaction. Thank you.

RASHAD BRISTO: Thank you for that, Mr. Rovira. And to answer your question, what we'll do is the last thing I want to do is commit to making another committee because we already have those. I'll get with the Executive Committee, and we'll definitely take that into consideration to see what would be the best course of action to take place. Cause we don't want to exhaust anybody more by making another committee. The problem we run into is not so much about the topic, it's the quorum. If we don't have the quorum then it's
hard for us to proceed. But it's definitely noted, and I'll definitely follow back up with you. I'll get with Ms. Deaville and the vice chair about that one. I see Ms. Hymel, your hand is up, and you're recognized by the chair.

ROSLYN HYMEL: Yes. Thank you for noticing, Mr. Chairman. I wanted to do like a little catch up in that cause I know I missed a lot. Also with this one right here with this form that we are talking about, is there something all of us is going to do special with an MFP program in that? And how is that going to work especially in, with the program, are we going to pay for the program or how is this going with the money as follows, or what, or how is that going to go?

JULIE FOSTER HAGAN: Sure, Roslyn. So the Money Follows the Person rebalancing demonstration or My Place Louisiana, that is actually a federal grant. And it's been in place for several years now. It was supposed to end a couple years ago. And they did some temporary extensions to the program, but it made it very difficult for states to know exactly what federal money was going to be there to help us. They have given a longer-term extension to Money Follows the Person now and they actually did some additional grants. I wasn't ready to present at this council meeting in advance of that. But we do have some exciting opportunities with MFP coming up. So at the council meeting in January I will make sure that our report includes a status update of those activities with MFP. You know, what we're thinking. What funding is now available and do a much better detail information related to the MFP program.

ROSLYN HYMEL: And also can I at least have a copy of that one as well? You know, the updates on it because, you know, I want to, you know, have like more info on this one and the updates and how it's going to really, you know, go and how, you know, the progress is really going. Because I am linking up with Pineville up there a little bit because I'm kind of trying to reach out with Oklahoma in that and Pineville as well.
Because I'm trying to emerge a little bit, so I rather get all the information. I don't know if that's, you know, that way I can have that kind of help in that paperwork.

JULIE FOSTER HAGAN: Okay.

RASHAD BRISTO: Thank you for that. Mr. Rovira, I see your hand is up. Did you still have a question or was that just unintentional? Okay. Not a problem. Just wanted to make sure. Do we have any more questions regarding the presentation that was presented by the OCDD? Just a few housekeeping rules. Let's be mindful to three minutes. Not only that we still have other presenters that are somewhat on a time crunch. Do we have any comments from the public?

BRENTON ANDRUS: Kelly Monroe has her hand raised and there was also something in the chat.

RASHAD BRISTO: Okay. Ms. Monroe, you're recognized by the chair.

KELLY MONROE: Thank you. Julie, I had a quick question. When you were talk about the F map and the increase that was going to be given for OAS, the 18.50. Is that just the CCW or is that the CCW, LTPCS and ADHC?

JULIE FOSTER HAGAN: It is the CCW and LTPCS. And then there is also, ADHC is a per diem. So that includes a re-basing for ADHC.

KELLY MONROE: Okay. So now there may be a difference between, now OAS is higher than OCDD services or will they be the same?

JULIE FOSTER HAGAN: They will all be at 18. Well, in Children's Choice we're at 17.50. So they will be at 18.50 for in-home personal care services.

KELLY MONROE: And the day services for OCDD is a lot lower too, right?

JULIE FOSTER HAGAN: I don't know the comparison there.

KELLY MONROE: Okay. Thanks.

RASHAD BRISTO: All right. Thank you. Did you say we had public comment?

BRENTON ANDRUS: Yes. We do. From Mary Jacobs.
She said if a provider was already paying a DSW 9-dollars an hour before the rate increase, is there any requirement to give them a raise? We are hearing about upset workers because they are expecting an hourly increase.

JULIE FOSTER HAGAN: So the requirement and what we will be auditing is that they have the floor of the 9-dollars an hour. We do know that many providers have told us that they are, you know, are already considering, you know, increasing. But what will be audited and what is actually required is the 9-dollars, the 9-dollars an hour. One of the things we did share on our provider call too when we did a presentation on this is that we'll likely be looking to kind of like what was average payroll before and after. And that would include, you know, things like your direct support supervisors, any nursing consultants that you have and things like that. All that would be included because the other piece of that is that there may need, with some of that money what we heard from some folks, is that while they do want to get it to the direct support workers there's some inequities because it's almost like your direct support worker supervisor and your direct support workers’ pay were getting to be pretty close if you didn’t increase both. So while we are looking strictly at the DSW rate of pay at 9-dollars there will be, again, when we say other associated costs, it's other associated costs that go with that direct support worker. But there's also other associated costs with providing care that are, you know, not related to profit, not related to overhead. But the other staff that you have to have. And so we also know that some providers are looking to use that additional funding to reinvest in the system as a whole for those folks.

The other thing we know is that there were providers who did have to go begin paying more than the minimum wage and pay more. Some of them had loans that they had to be able to take out and things. So, again, it was intended to be flexible. The intent is that it
goes to the worker. But we do know there may be some other associated costs. There was a lot of debate and discussion during the Joint Legislative Committee on Budget as well as the Joint Medicaid Oversight Committee. And hearing the issues and concerns from everyone that's where we landed on the 9-dollars as the flat fee for now. Again, I think as we continue to have ongoing conversations it will help, it will help inform us and help better map out what kinds of things we need to be able to look at and consider to make sure that things are getting to the workforce. Whether that's the DSWs, or the nurses, or those supervises, or those kind of all your boots on the ground.

RASHAD BRISTO: Thank you, for that, Ms. Hagan. Any more public comment?

BRENTON ANDRUS: Yeah. Ms. Monroe still has her hand raised and Jill Hano has her hand raised as well.

RASHAD BRISTO: Okay. Ms. Monroe, you're recognized by the chair.

KELLY MONROE: Sorry. That was a mistake.

RASHAD BRISTO: Okay. Thank you. Ms. Hano, you're recognized by the chair. Ms. Hano, you're muted.

JILL HANO: Ms. Julie, I'm going to ask this every quarter till your no becomes a yes. Is there a consolidated specific Louisiana summary of ARP? Not to be confused with AARP.

JULIE FOSTER HAGAN: You talking about the American Rescue Plan Act?

JILL HANO: Yes.

JULIE FOSTER HAGAN: Yes. The spending plan that we have to submit to CMS actually is a summary that includes an Excel spread sheet of all of the activities that we're planning do. I don't know if Kelly's still on. But that, folks will be able to find it there.

JILL HANO: Can you email that to me?

KELLY ZIMMERMAN: I have a link. CMS has just made it available on their website. I will post it in the chat, if that's okay?

RASHAD BRISTO: Yes. That will be fine.

JILL HANO: Like Christmas.
JULIE FOSTER HAGAN: So I don't remember saying no to that before, Jill.

JILL HANO: Oh, I swear I thought like every time I would ask either you or Jen. I can never find it. My bad. I'm sorry.

RASHAD BRISTO: Not a problem. So listen, we don't have any more public comment or public chat. I don't see anything, unless I'm missing anything, Mr. Andrus?

BRENTON ANDRUS: No. I don't see any hands raised.

RASHAD BRISTO: Okay. So Ms. Hagan, thank you for your report. Your report will be filed. Council members, it's actually 5:50. We're on time for a break. When we come back, Dr. Wilson, we'll start with you. So the time now 2:50 p.m. We'll return at 3:00 p.m. That way we can finish up on the standing council member reports and we can draw to an adjournment. See you at 3:00.

It's now 3:00. The meeting will come to order from recess. The next item of business is the report from the Human Development Center. Dr. Wilson, you have the floor.

PHIL WILSON: Thank you. Let me just do something real quick here. Thank you. Sorry about that. Thank you, Mr. Chair. So I'm going to try to go quickly. I wanted to say a couple quick things. And then as is our tradition over the last year or so, rather than have a really long report, normally you would see it in advance. I made a mistake. I failed to forward the report after getting it back from our person who puts our reports together, Laura. So I'm hoping that if it's not available today that the council can forward that onto you. I just want to say three or four real quick things and then I want to show a video. I'm not sure if you guys received it at the council. I just put it in the chat box. So after I say my little piece perhaps you could start the video at that point. It's about three and a half minutes long. I just want to say real quickly that in the area of employment we continue to have great support and collaboration with LRS in a number of school districts and have expanded
to, actually, to the North Shore to St. Tammany where we're working with St. Paul's. Which is, as you might know, if you know St. Paul's, is not a public school. It's a catholic school. So that's our first foray into nonpublic school to the work in the area of transition.

We're also expanding to another partner, again, with support from LRS. We're not sure which school districts in particular we'll be working with. But we're going to start working with Ochsner at their main campus location and then eventually other campuses, we believe. That's the plan with them to implement a project search program. Which I'm not going to talk about today because of our time limitation. But it will be very similar to the work we're currently doing in Jefferson and a couple other school districts.

Other things, I do want to make this announcement, I guess would be the right word, that through one of our federal grants which is through Maternal Child Health we have a workforce grant called LEND Leadership Education and Neuro Developmental and Related Disabilities. It's an interdisciplinary grant. So we train people from all kinds of different disciplines and include self-advocates and family members. And sometimes early career professionals who haven't begun. I just went mute, didn't I. Okay. So we're going to have a focus in our LEND project on fetal alcohol spectrum disorders. Fetal alcohol spectrum disorders are the largest cause, I guess, of developmental disabilities in the world. And yet if you look in the DSM5, the diagnostic manual for determining whether an individual has a disability or one sort or another it's not listed in the DSM. It's very strange and troubling. It cost about 2 million-dollars a year to support a person with fetal alcohol. Not a year, excuse me, across their lifespan. And it currently cost the federal government, according to the CDC, in excess of 6 billion-dollars a year to support individuals with fetal alcohol spectrum disorders. A lot of them end up in the justice system and the average age of contact with the justice system is
around 14. And there are lifelong mental health and other challenges that these folks face. Very high suicide rate. And the average lifespan of an individual who is on the fetal alcohol spectrum is about 34. Cause of death is typically not directly related to their disability. It's typically problems that they have with other things in their life. So we're going to try to raise awareness about this very prevalent and very debilitating and very expensive disability over the next five years. And hope the council will help us kind of in that work begin to map out a roadmap to try to address some of these issues.

The other thing, I guess, I'm excited about at this moment and want to share is we also are opening or planning or collaborating with some partners in childcare to open a community health and information and resource center. And probably in Algiers for the initial one. Algiers Louisiana, that is, across the river here in New Orleans. And to serve families who have low incomes and have, you know, a lot of health disparities and other issues that they're dealing with. Our opening (inaudible) will be to open with, you know, hopefully we're going to have a vaccine for 5-to-12-year old’s soon. And people who are in childcare typically, not typically, but often have older children that will need vaccines. So sort of a way to get kids in, families in. We want to expand this to all the other types of concerns that these families have. Opioid crisis, other vaccines, if they're not getting and so on. Many other things. So it expands. We look at disability and poverty as really a disabling condition. We feel like while it may or may not meet a functional definition in a DSM or something, but it truly is a significant and high prevalent disability that really impacts a lot of lives.

Last thing I want to say is our LASRD project, Louisiana Autism Spectrum and Related Disabilities project is really expanding quite dramatically, especially in the northern part of the state. We're working in about eight or ten parishes up in the
northern tier of parishes. I think the only two that we don't hit, Lincoln and, can't think, but the East and West Carroll. We really are in a lot of schools up north, which is great. Gets us a different footprint in terms of trying to reach people. With that said, I'm hoping whoever is pulling the levers, I don't know if that's Brenton or somebody else. I put the link if you don't already have it in the chat box. And if you could show this little video. I think it shows an example of how we try to train the philosophies that we use around the interdisciplinary and family centered will be illustrated through this little video. And that's probably all I need to say. I will be quiet and hopefully we can see the video and I'll stay here for any questions or comments afterwards.

BRENDA COSSE: I don't see that we have a video link in the chat.

ROSLYN HYMEL: Yeah. That's what I was going to say too.

PHIL WILSON: On my screen we do. It was sent earlier. Oh, I didn't hit return, apparently. Sorry. Now it's there.

RASHAD BRISTO: Are we able to make the video viewable?

AMY DEAVILLE: I'm trying to launch it right now. I'll share my screen as soon as I get it up.

PHIL WILSON: Thanks, Amy.

RASHAD BRISTO: Thank you. Seeing like you're not having any luck so what I'm going to do I'm going to see do we have any questions in regards to the report that was presented by the Human Development Center? I don't see any hands. Do we have any public comment? Ms. Hymel, I see your hand. You're recognized by the chair.

ROSLYN HYMEL: Can somebody lower the link again from Mr. Paul. I was trying to write the messages kind of brought it up. Please. And for my question now. I'm sorry. I'm speaking out of turn in that. How many centers, especially for the drinking ones and that, how many are there that you have for it?
PHIL WILSON: I'm not sure what you're asking me, Roslyn. How many centers, our fetal alcohol spectrum focus, is that what you're asking?

ROSLYN HYMEL: Yes.

PHIL WILSON: We don't have any specific centers. Unfortunately, the state doesn't even keep a registry that we can find of any sort because seven years ago the birth defects folks decided that not very many kids get diagnosed before the age of three. Which is true. And so I'm still searching. If anybody can help me find any sort of registry or any sort of prevalence type information for Louisiana, that would be very helpful. We really are starting at ground zero, pretty much. I know there's two or three support groups in the state but, you know. We asked physicians here and medical students here what FAS is and a lot of them just look at us and go, I don't know. What is that. It's a huge void that's not being addressed. And so, Mr. Chair, if this won't load, I know everyone's had a long day here. Maybe we can just put it on the agenda for our next meeting. Cause I feel like everyone's getting almost braindead at this point.

RASHAD BRISTO: No problem. My request was going to be to ask Ms. Deaville to just send it out in an email. That way everyone have an opportunity to watch it at their own discretion. If they have any questions and want to reach out to you, they know how to contact you.

PHIL WILSON: Sure. Mr. Chair, can I just ask the council, you all have all the emails and what not. Would you mind sending the link. It's in the chat. And I think what happened it got emailed to Courtney. So that might not have worked out so well for today's meeting.

RASHAD BRISTO: Not a problem. Wonderful world of technology. Do we have any comments from or questions?

ROSLYN HYMEL: Let me lower down my hand.

RASHAD BRISTO: Not seeing any questions. Do we have any public comment in regards to the report that was presented by Dr. Wilson?
AMY DEAVILLE: Mary Jacobs has her hand raised.
RASHAD BRISTO: Ms. Jacobs, you're recognized by
the chair.
MARY JACOBS: Thank you, Mr. Chair. I just wanted
to mention to Phil, I had a conversation with the
graduate student, I believe it is, that's working on
this project. And in our database, we have a little
over 30,000 names and of all of them we had one person
that was tied to fetal alcohol syndrome. That was it.
One in 30,000 names. Which listening to what you're
reporting is astounding to me. Because you would think
that there would be at least a couple other names with
it, right. I'm wondering if people aren't getting
these diagnosis at all, or where the breakdown is.
PHIL WILSON: I think they're largely not getting
diagnosed. And I do believe if you look at the
national studies and international studies that have
been done on prevalence it's pretty similar to the
prevalence of autism. I don't think there's probably
anybody in our group here today who doesn't know
somebody with autism. So if you think about it like
that it's kind of, we have a big-- and it's not just
Louisiana. It's a lot of states have a big void in
terms of this is a population of kids that get, a lot
of them get, you know, they are looked at like they
have attention deficit, or behavior problem, or
whatever and they never get treated. They actually
have neurological issues that interfere with their
executive functioning, their memory, their ability to
understand cause and effect. And a lot of them get in
trouble with the prison system and the juvenile
justice. And before you know it, it's a life down the
drain. It's something big that we need to, as a
society, kind of rally around.
MARY JACOBS: Is there's anything we can do at the
PTI to help spread that word, just let us know. Be
happy to jump on that campaign with y'all.
PHIL WILSON: Excellent. Thank you, Mary.
MARY JACOBS: You're welcome.
RASHAD BRISTO: Thank you, for those comments, Ms.
Jacobs. I don't see any other hands or any comments in the public chat. Unless I'm overlooking anything. So with that being said, the report will be placed on file. And now we're next in line with business is the report of the Disability Rights Louisiana. So Mr. Rocca, you're recognized by the chair for your report.

TORY ROCCA: Hi. Tory with Disability Rights of Louisiana. So as most of you know our organization does different types of work. The three main areas are legal work for people with disabilities. (Inaudible) moderating folks who are in congregate settings and HCBS. (Inaudible) and also public policy. So just to go over the highlights of the report. It has been a long day. So we do have (inaudible) right now we're trying to get more into health services for kids who are in HCBS right now to keep them from being institutionalized. Again, focusing the few main cases that we're working on relates to the fact, part of it is a big (inaudible) services. So to try to get services to make sure (inaudible). Just recently (inaudible) class action status to represent a lot more people.

We also have a settlement with State Department of Health (inaudible) care for medically fragile kids. (Inaudible) a number of the hours and services.

RASHAD BRISTO: Excuse me, one minute, Mr. Rocca. I apologize for interrupting you. But I'm getting some comments in the chat where they're having trouble hearing you.

TORY ROCCA: I'm sorry. Probably my fault.

ROSLYN HYMEL: Yeah. Mr. Chairman, he's like breaking up a little bit. It sounds choppy.

RASHAD BRISTO: Okay. It's been addressed. Thank you for that. Okay. You can proceed, Mr. Rocca.

TORY ROCCA: I apologize. The internet service in our office is often very bad. So anyhow. Back in about 18 or 19 worked on a claim to try and get medically fragile children (inaudible) with nursing services they were supposed to get. They were not receiving the hours they were supposed to get. We do
have a settlement with Department of Health on that that goes back to about 2019. Again, providers (inaudible) resulting in the challenge (inaudible) Department of Health. So monitoring that (inaudible) be sure we enforce this, but also (inaudible) and Department of Health to get that settlement enforced. But there are challenges and (inaudible) right now. We also recently granted class action status for litigation (inaudible) a lot of our organization's time. Back in 18 we filed suit against the Department of Corrections for incarcerated people, particularly David Wade Correctional Institution that (inaudible) some people who have serious mental illness are being placed in solitary confinement and not being treated. There was some abuses going on there. I've read a lot of the other work and seen a lot of the work (inaudible).

Solitary confinement. (Inaudible). So we have litigation against department of Corrections trying to resolve that issue. It has been granted class action status. Our organization is also a plaintiff in that because under federal law we have (inaudible). We have class action status that will allow us to represent hundreds of people. We do have early on some named plaintiffs, (inaudible) represented. Some have dropped out for various reasons (inaudible)--

LYNSEY HEBERT: Tory, excuse me. Can you just talk a little slower and try to be a little more clear. I'm having a really hard time hearing and making out everything.

TORY ROCCA: I am sorry. Is it more of I'm talking too fast or more that my connection is choppy?

ROSLYN HYMEL: You're speaking a little fast and I'm trying to understand, but it sounds like it's a little choppy. Just this much choppy.

TORY ROCCA: That's a problem with me. Anyway. We have a class action ligation against David Wade Correctional Institution over their treatment of incarcerated people with mental illness. Particularly solitary confinement of those people. This has been
going on for a few years. It has taken a lot our resources. Trial is scheduled for January. There is a damages phase scheduled for this summer. I think, July. (Inaudible) a plaintiff in the lawsuit. We also were granted the class action status which allows us to represent a lot more people. So far litigation seems to be going fairly well. Our legal team is doing well. (Inaudible) spent a lot of resources on it. A significant part of our (inaudible) grant. Which is a grant to help folks with mental illness and advocacy for individuals with mental illness grant. A lot of resources from that grant to this litigation because these conditions that some people were being kept in, solitary confinement because (inaudible) were not very good. That is ongoing. Hopefully, that trial date will stick, and we will be at least through the trial phase of that in January or February if everything holds up. We have, of course, reached out to settle this on a number of occasions and not been met with a good response.

Our community efficacy department which advocates for people who are in congregate facilities and HCBS has filed several complaints recently. We monitor all the 519 group homes in Louisiana. We do have a limited capacity on (inaudible). We've filed nine complaints since August. Those complaints include things like physical abuse of patients, not notifying the family of evacuations, of physical injuries to people. (Inaudible). There's a list here. (Inaudible). We filed complaints with health standards (inaudible) and we'll follow-up on that. Legislatively we are currently working, actually tomorrow scheduled (inaudible) there was legislation introduced last legislative session that would have banned the abortion sterilization of interdicted individuals. The current process in the State of Louisiana is largely a rubber stamp process to where people who are interdicted, they can have somebody (inaudible) guardian can go to court and pretty easily have an abortion or sterilization approved without due process. It's (inaudible)
unconstitutional process. Really no process except for a rubber stamp more or less. State rep last term introduced legislation that would ban the process entirely. Which also (inaudible) individuals interdicted. We worked with state rep (inaudible) corrective language for an amendment to eventually make what he's doing constitutional and also respect the wishes of the people interdicted in these matters. The state rep who was doing it didn't want to change things on the fly. (Inaudible). It's a challenging piece of legislation. So instead it was kicked over to the Law Institute. And the Law Institute is having its first meeting in a while tomorrow and I will be in that meeting to discuss this. And one of our attorneys who is working on that will be in that meeting as well to discuss this. That's a brief summary of the high points of the report.

RASHAD BRISTO: Okay. Thank you, Mr. Rocca. Do we have any council members with any questions in regards to the report that was just presented by Disability Rights Louisiana? I don't see any hands. Do we have any public questions or comment in regards to the presentation that was given by Disability Rights Louisiana?

BRENTON ANDRUS: I was going to say Roslyn has her hand raised.

RASHAD BRISTO: Ms. Hymel, you're recognized by the chair for your comments.

ROSLYN HYMEL: Yes. Thank you for recognizing me. The question is to you is there other states like you mentioned? And also in the state you mentioned Louisiana in that, is there other states you said that, you know, you try to get like information from if I'm understanding you right?

TORY ROCCA: You cut out a little bit, but if you're asking me if there are other states that we're trying to get information from, we do sometimes work through our sister organizations in other states to get information about things just to see where Louisiana is relative to other states. There is one of us in every
state. Every populated US territory, DC and there's one of us for Native Americans. In terms of requesting records using the authority that we have to request records from public authorities, we do have federal authority to request public records due to investigations. We don't use that in other states because there is one of us in every state territory, etc. Our sister organizations in the various states would be doing that work. So if something comes up in say Georgia, we don't do that kind of work. There's one of us in Georgia that does that work separately, but part of our national (inaudible).

RASHAD BRISTO: Thank you, Mr. Rocca. Do we have any other comments, questions from any other council members? Do we have any public comments or questions in the chat? Not seeing any. Your report is recognized and will be placed on file. At this point we're almost at the conclusion of the meeting.

AMY DEAVILLE: Excuse me, Mr. Chair. Ms. Corhonda Corley has her hand raised.

RASHAD BRISTO: I apologize, Ms. Corley. You have the floor.

CORHONDA CORLEY: Thank you, so much, Mr. Chairman and full council. Due to the internet access I could not understand exactly what Mr. Rocca was saying in regards to the lawsuit that will be going to trial in January. And I was hoping that he could give us some information since now we can hear him a lot clearer in regards to that lawsuit without compromising the lawsuit, if he can. And if he will also, if that will also be included in the report that will be made accessible to the public before January.

TORY ROCCA: Sure. So there is a summary of that included in the report that I submitted to the council. So there's a summary available. And in terms of the litigation, so this goes back to before I started working here, I think about 2018. Our organization did an investigation into conditions at David Wade. People with mental illness were being incarcerated in solitary confinement. Sometimes as effectively as punishment
for having mental illness. Sometimes when they told the authorities in the prison that they were having a mental health issue and wanted to get treatment sometimes they would be placed in solitary confinement just for that. The conditions in those cells were not good. They could have all their stuff taken away. Sometimes restrained to a chair for hours at a time left in nothing but a hospital type gown. Sometimes with the window open when the weather was very cold outside. We investigated that years ago. (Inaudible) and decided to file a class action lawsuit. With our lawsuit we initially had some named plaintiffs. I think all of them may be gone now. Again, some of them had various reasons for leaving. Some of them were transferred by the Department of Corrections to other institutions. Some of them (inaudible) indicated they were offered better accommodations if they would not be part of the litigation anymore. Fortunately, under federal law we actually have authority to serve as a plaintiff in litigation like this. So we actually did go through the necessary steps to (inaudible) plaintiff ourselves. So our organization is the plaintiff in that lawsuit. And fortunately, we were just certified as a class action litigation, was just certified as a class action which allows us to represent hundreds of individuals at the prison. And that litigation will be going to trial as long as everything goes according to schedule in January. And there will be a damages phase, I think, happening in about July.

RASHAD BRISTO: Okay. Thank you for that. I see Ms. Hymel, your hand is raised. You're recognized by the chair.

ROSLYN HYMEL: Yes. You mentioned about like the different cases especially with the courtroom in that. How many are there with that and all with the cases in January that y'all get?

TORY ROCCA: I don't know that we have any other trials scheduled in January. I don't know of any that we have scheduled. Most times when we file litigation you don't have a lot of trials. A lot of things settle
out of court. So a lot of things that when we file litigation they don't even go to trial. So I don't know of any other litigation that we filed that is coming to trial in January. If I had to guess, I would say probably none. In terms of outstanding litigation my report doesn't detail everything we have that was filed. I don't know the number, exactly the number of court cases we have ongoing right now. Again, a lot of them result in settlements beforehand. And that's ideally what you want to do. You want to try to settle things beforehand and not litigate and not go to court. But sometimes that is just not feasible.

ROSLYN HYMEM: Thank you. That's what I was looking for.

RASHAD BRISTO: Vice Chair Banks, I see your hand. You're recognized.

NICOLE BANKS: Thanks, chair, for recognizing me. Since you guys have got that status class action—excuse me. I'm just picking up my kids. Since you guys have gotten that class action, do you guys seek out those individuals to represent or you are getting them to come to you? Like how does that go because I know a lot of inmates probably don't know, you know, what's going on. So how are you guys filtering out which cases and which individuals you guys are going to be representing? How are you doing that?

TORY ROCCA: So initially when we filed litigation, we sought out individual plaintiffs to represent. And we did. We had individual plaintiffs and we interviewed them (inaudible). And all or most of them for various reasons decided to no longer be plaintiffs in the litigation. Again, in some cases they were moved from the prison to a different institution. Sometimes, in our opinion, they were offered better treatment or better accommodations by prison authorities in order to no longer be plaintiffs in the litigation. So we initially did, based upon investigation, seek out individual plaintiffs and represent them. Most or all of them are gone now. I don't know if it's all. I'll have to double check on that. But most or all of them
have left for one reason or another. The class action allows us to represent hundreds of people as a group. So we're actually representing a group of people, representing their interests based upon the documents we've received from discovery that tell us what's going on in terms of people not being medicated, people not being treated properly, people not being treated at all, people being placed in solitary confinement when they shouldn't have been. All sorts of things like that. A lot of evidence over three years or so of gathering evidence, documents, and testimony, and depositions from various people who have been involved with the lawsuit. We can move forward as a class representing just hundreds of people now, so we don't need to have a plaintiff when we have a class.

NICOLE BANKS: The ones that you guys have basically right now, that's ones you represented and anyone that falls into it can also qualify for anything that, you know, is gained from the lawsuit, correct?

TORY ROCCA: (Inaudible) the judge says that we can represent, represent. So that's the class.

NICOLE BANKS: Okay.

RASHAD BRISTO: Thank you for that clarification. Do we have any other questions, council members or the public?

AMY DEAVILLE: There are no hands raised and nothing in the chat.

RASHAD BRISTO: Thank you, again, for your report. There is no action needed. It will be placed on file. At this time do we have any announcements?

AMY DEAVILLE: Lillian DeJean has her hand raised.

RASHAD BRISTO: Ms. DeJean, you're recognized by the chair.

LILLIAN DEJEAN: Thank you. I have no announcements, but just a comment. I'll be rolling off the council very, very soon and I just want to point out that after I roll off, we will have zero youth or zero young adults on the council. And this is obviously a big issue because we know that the DD service system also impacts young adults and youth. We understand
that they're actually greatly impacted. In Oklahoma they actually have three young adults on their council. And I understand that we're making strides forward here by trying to plan a YLF, but we're looking at a two-year timeline on that. So I would just really, really encourage the council moving forward to really, really make an effort to start recruiting young people to be on the council. Because we really need that prospective that we really haven't had. So I just wanted to thank you guys for your time and also for embracing me for the time that I've been here. So thank you.

RASHAD BRISTO: Thank you for those comments. And that is something that, one of the things that we are pressing forward to address with the DD Council is to make sure to have it as broad as possible. That way no one can accuse us of being one dimensional. And I also encourage everyone if you know any people or any individuals that may be interested that may be across a broad span, please let them know. Because the only way we're going to see changes and improvements based upon the people that we're able to connect with. I see Ms. Jill Hano's hand.

JILL HANO: Again, Dr. McKee isn't here, but I know I saw Bambi and Rashad at the membership. I thought last night I was reading all the bios for the incoming or the membership committee recommendations and I thought I saw one that was for a youth.

AMY DEAVIDLE: You did, Jill. There is one self-advocate that is under 18.

JILL HANO: Okay. And I should know this, but is there an age limit or how old do you have to be to join the council?

LILLIAN DEJEAN: I can actually answer that, if that's okay, Mr. Chair?

RASHAD BRISTO: Yes, Ms. DeJean. You're recognized.

LILLIAN DEJEAN: It's actually very convenient. There doesn't really seem to be an age requirement. The senate does get a little bit irritated because you
haven't filed tax returns, but once you explain that you're a dependent they're very understanding.

JILL HANO: Okay. Sorry to see you leaving. Keep in touch.

RASHAD BRISTO: Yes. Indeed. Okay. Ms. Hymel, I see your hand raised. You're recognized by the chair.

ROSLYN HYMEL: Yes. Actually, I'm going to answer Jill's question as well. It's okay, Jill. It doesn't matter on age. I'm answering your question. To me to join age doesn't really. You could stop me though, Mr. Chairman, if I'm wrong or right. I thought age itself doesn't really matter when you join up with a council. And also too, I'm also agreeing with Lillian. Lillian, I hate to see you go with that. I wish you could stay another year. I keep up with you, but I do have to say she's been inspiring me to go on. And if y'all need any help I've been with Oklahoma and also, I went up to Lafayette. Not Lafayette. Another one besides Lafayette to Pineville. They had a very pretty thing over there I would like to really speak about and all but, it's really pretty. But I would like to get with Ms. Mary with that, it's in Alexandria. And I would like to really join up with that and find all the information if I may, Mr. Chairman, on that. I wanted to bring it to you and all and see what can I really do on that. I wanted to bring it up to you.

RASHAD BRISTO: Okay. I'll follow up with you offline. There's definitely some things that we can discuss to see how we're able to make it as advantageous as possible for you and also the public for which we serve. Do we have any other questions or announcements from the council members? I'm not seeing any hands. Ms. Polotzola, I see your hand. You're recognized by the chair.

BAMBI POLOTZOLA: Yeah. We have several people who I believe is their last meeting. So I think it would be appropriate just to honor or just to recognize them and thank them for their service to the council.

RASHAD BRISTO: Please do.

BAMBI POLOTZOLA: I don't know who they all are.
Lillian just said--

RASHAD BRISTO: Do we know exactly who is rolling off? I tell you what, simple. You know who you are. Raise your hand electronically that way we can recognize you by name. Okay. We have Ms. DeJean. Who else? She's the only one I see on my screen.

AMY DEAVILLE: Ms. Carmen Cetnar is rolling off. Mr. Michael Billings who's already left the meeting. He's rolling off. And Mr. Steven Nguyen will be rolling off as well. Ms. Temisha Victorian who I don't believe is on the call, but she is also rolling off. And Mr. Randall Brown, previous chair.

RASHAD BRISTO: (Inaudible), I see your hand as well. Okay. So on behalf of the council we definitely want to say thank you for your service. Thank you for your contributions to bring the DD Council to the point where it is now. Had it not been for you doing what you did then we wouldn't be where we are now. Thank you so much for your service. Please do not be a stranger. Just because you don't sit on the council doesn't mean you cannot be part of the public chat. Many hands lighten the load. So thank you so much for your service. Hopefully, you're leaving the council refreshed, not with regret. But if you do have regret, please come back. Because we definitely, like the Motel 6, we'll leave the light on for you. Do we have anyone that is rolling off would like to say anything? (Inaudible) rob you of giving you the opportunity of this being the last time. Remain time conscious I'm going to ask within the next five minutes that you give what you have to say. That way we can remain compliant with the time.

BRENTON ANDRUS: I believe Carmen and Steven have their hands raised.

RASHAD BRISTO: Mr. Nguyen, you're recognized.

STEVEN NGUYEN: I would say ladies first. So I yield the floor.

RASHAD BRISTO: Ms. Carmen, you're recognized. Mr. Nguyen's being a gentleman.

CARMEN CETNAR: I really don't have anything to
say. Thank you to all of you for being such good advocates. I enjoyed my time. Thank you.

RASHAD BRISTO: Thank you. Mr. Nguyen.

STEVEN NGUYEN: I just wanted to take the time and thank you, Mr. Chairman. And thank you, council members, council staff. The last four years has been quite an amazing ride and I've met some amazing people on the way. And I consider you all very dear friends and colleagues. So keep up the good work. And I know we have a lot of work to do as a state. But I think with the people in place we will go far. But let's make it count. Thank you.

RASHAD BRISTO: Thank you. Anyone else? Do we have any comments in the chat? Ms. Hymel, I see your hand. You're recognized.

ROSILYN HYMEL: Yes. I really want to say something really nice about one of my members here on council. And I really want to say that she is really best friend to me. I'm glad to really know her, get to really spend my time in her four years. And that's Lillian DeJean. She gave me the biggest helping hand of the four years she was here. I appreciate it. And I wanted to really take my time to really leave her a note and to really say it, thanks for all the things that you really did for me on the council. And I really appreciate having you as the best friend ever. Thank you, Lillian DeJean.

LILLIAN DEJEAN: Thanks, Roslyn. We're going to be friends for a long time.

ROSILYN HYMEL: I do appreciate it. And that's coming from the bottom of my heart. I'm going to miss you and I will keep up with you.

ROSILYN HYMEL: You better.

RASHAD BRISTO: Yes. Indeed. Do I see any more hands, any more comments?

AMY DEAVILLE: No more comments. No more hands raised.

RASHAD BRISTO: Okay. So as the chair I just want to say again to those who are rolling off and to all of the council members present, thank you for being a
light in the midst of breaking a dark cloud. We're really moving forward. I just thank you for all your contributions and all your service. Since there's no further business and if there's no objection, I move to adjourn the meeting.

BRENTON ANDRUS: Rashad, I believe you do have a hand raised. Katie Crows

RASHAD BRISTO: I'm sorry. Repeat the name again.

BRENTON ANDRUS: Katie Crows.

RASHAD BRISTO: Okay. You have the floor, Ms. Crows.

KATIE CROWS: Hey. Can you hear me?

RASHAD BRISTO: Yes. We can hear you.

KATIE CROWS: Okay. Thank you, Mr. Chairman. Yes, I'm region two LaCAN team leader and my question is when might we see a return to in-person activities and events. Thank you very much.

RASHAD BRISTO: That's a good question. I'll answer that one as the chair. In the first part of my comments I made a call to several of the LaCAN leaders. It's really going to be a judgement call based upon if you feel it's going to be safe for you to do such. Because we're not going to make, at the moment the council's not going to make that imposition because there's to many extenuating circumstances. So many dynamics out there. If there's something you would like to see within your region and you feel that you have the support, I'm talking to all LaCAN leaders, reach out to us and let us know. We'll try to make an informed decision to support you. But we're not going to make that imposition at the moment. It's going to be based upon so many different dynamics. Hopefully, that answered your question.

BRENTON ANDRUS: You also have Ms. Kelly Monroe has her hand raised.

RASHAD BRISTO: Ms. Monroe, you're recognized.

KELLY MONROE: Hey. I'm sorry. Would that be the same for the other, for the contracts that we hold? Like for some of our training, some of the people are ready to get back in-person. So would that also be for
some of trainings that we do?

RASHAD BRISTO: Like I said, it will be a judgement call based upon the individuals and the regions because there's mixed signals when I talk to them. There's a certain element that's eager to get back out there and there's a certain element that has reservations. So it's just something that we would have to really just look at, in my opinion as chair, as a personal, individual basis. But I don't want to make that imposition on the entire entity based upon the fact there's so many different dynamics. Hopefully, that answered your question.

KELLY MONROE: Is that something the whole council has to vote on or is that just something we can kind of do? I just want to make sure that if we do go in-person that we're still following y'all's expectations.

RASHAD BRISTO: I would prefer it be something that we have a discussion with the entire council. I think by January that would be a good time, when we have our meeting on January 19th, the 20th I think that would be the best time to have that conversation. Because at that point we'll know exactly what direction our state is moving in. And at that point we'll know exactly how to do it. At this point of the year there's really not much that can be done based upon the fact we're moving into a holiday season. I know a lot of agencies are just starting to somewhat coast until the first of January. But it's definitely something that we bring to the council if that's something the supporting agencies would like to know about.

KELLY MONROE: Okay. Thanks.

BRENTON ANDRUS: So, Rashad. Sorry. This is Brenton. Just trying to get some clarity since I'm over LaCAN. So is this something the council's going to address in January? Cause the logistics of a judgment call per leader, honestly, is really not going to work. We either have to do it or not do it. So I didn't know if this is something y'all plan on addressing in January? So we're still not in person
until then. Or if we were opening up. I'm kind of confused here.

RASHAD BRISTO: Okay. Well, let me bring some clarification. At this state we'll remain as we are. Now if this is something that, Brenton, they would like to be brought up on the agenda for the next council meeting, we'll do that. That way we can bring before the full council.

BRENTON ANDRUS: I mean, I think that makes sense. I do think as long as things are suspended or modified it should probably be something that's addressed quarterly. That's just my opinion. And I do know that some do want to get back in-person, some are still uncomfortable. We've also heard that feedback from some of the LaCAN members. So I think just doing as we are and then putting it on Executive Committee's agenda for January is probably a smart thing.

RASHAD BRISTO: That was going to be the next thing. It would be something we would bring before the Executive Committee that way we could bring it before the council. As of this, we're going to continue to retain where we are until a formal decision is made.

BRENTON ANDRUS: Okay. Thank you for that clarification. You do have hands raised for the council. Roslyn, Bambi and Jill Hano. And I see Kelly Monroe also has her hand raised. I don't know if that's a follow-up. It went down. I guess that was a mistake. So just Roslyn, Bambi and Jill.

RASHAD BRISTO: Okay. I do want to emphasize this. The governor's order has not been lifted as well. So we got to make sure we remain compliant. Okay. Ms. Hymel, you're recognized by the chair.

ROSLYN HYMEL: Yes. Thank you. This is what I want to know, are we going to continue with three meetings like this like we had this week? Because for me is there a way, because I really feel bad about it, because I missed Monday's meeting. And I read my paperwork and I didn't think about it for my region and all. And I really, or it is just going to be like Wednesday and Thursday? How many meetings going to be,
RASHAD BRISTO: Well, the Executive Committee meeting would be the one the 19th. Just for clarification. And the full council meeting would be the one on the 20th. That's what I was referring to when I have those two dates. Now to answer your question, that's just based upon whoever the chairman is of the committee that you're sitting on.

ROSLYN HYMEL: All right. Because for me I totally missed it and everything. And I don't know what was said in that in mine and it was on the 18th. So does that really going to stay that way, or no, or what?

RASHAD BRISTO: Ms. Deaville, was that meeting that she's referring to, was it recorded to YouTube?

AMY DEAVILLE: It was recorded and available on YouTube. Also, our meetings every quarter, as long as they're virtual, the scheduling of them changes a little bit based off of the Doodle polls that we do and availability. It's all within that week. And each individual committee meeting changes a little bit. The Executive Committee stays the most the same. And the full council always stays the same.

RASHAD BRISTO: Thank you for that. So to answer your question, even though you did miss out on Monday's meeting, you can still be informed by going to the YouTube channel and get caught up to speed by looking at the previously recorded video for that date. That way when you move forward, you're moving forward fully aware what's transpired in your absence.

RASHAD BRISTO: Thank you. Because for me I rather catch up on that for that one particular day cause I want to know what was said in that. That way I won't feel so bad.

RASHAD BRISTO: You're more than welcome. Ms. Polotzola, I think you were next in line. You're recognized by the chair.

BAMBI POLOTZOLA: Yeah. Can you hear me?

RASHAD BRISTO: Yes.

BAMBI POLOTZOLA: Okay. So I know that we have to stay within the guidelines of the governor and also
CDC. But I also know that people are, you know, just for mental health and a lot of other reasons that people are looking forward to the continued progress, hopefully, of us doing well with the pandemic. And our numbers staying low. So is there anyway, and I don't know the timeline of getting things organized, but is there any way that we potentially could have an in-person meeting in January? Or is the timeline too advanced to be able to get that done?

AMY DEAVILLE: We might not be able to do it at this point cause it would take us a while to organize the hotels and the room and everything.

RASHAD BRISTO: A lot of logistics at the moment.

BRENTON ANDRUS: And I was also going to say it would be difficult to default to our typical hotels if we have to do the spacing option, they might not be able to accommodate us due to the size room that we would then need. I don't know where we would go from there.

RASHAD BRISTO: Ms. Hano, I see your hand. You're recognized by the chair.

JILL HANO: I feel like this is probably a more passive approach. But we can't even think about this until we know if he's going to lift the PHE. And at the rate we're going I had to guess because for two years every time he gets a chance to lift it, which showed (inaudible) he's amazing. Every time it comes up for renewal to suspend the PHE circumstances say oh, it's in place for 90 days. And that has been going on for two years. And again, like this is probably a more passive approach, but like aren't we, or how can we not know the other options. But aren't we at a standstill until we know in January if the answer's yes or no to extending the PHE?

RASHAD BRISTO: Correct. Now listen, I don't want to get too distracted on chasing the fat rabbit whether we're going to adjourn or not. Like I said, that's a logistical issue. The best thing to do, like I said, we'll bring it to the Executive Council. And then the executive meeting bring it to the full council. But I
don't want anyone to get premature conceived notion that there's going to be any kind of action taking place before January. Like I said, there's a lot of logistics to work out. I can pretty much tell you the answer's going to be no. Just due to the fact there's so many dynamics and so many moving parts. Do we have any more questions? What about in the chat box?

BRENTON ANDRUS: The only thing in the chat it was related to the discussion of in-person from Susan Riehn said shouldn't we be following CDC guidelines and LDH.

RASHAD BRISTO: So if there's no further business and there's no objection, I move to adjourn the meeting.

AMY DEAVILLE: Yes. You can adjourn.

RASHAD BRISTO: Move to adjourn. Thank you so much for your time.