

Louisiana Developmental Disabilities Council
Quarterly Meeting

January 20th, 2022

RASHAD BRISTO: All right. Good morning, everyone. The meeting of the Louisiana DD Council come together. It's January 20th at 8:30 a.m. If you will, for those who have not, please turn your cameras on. Just want to say Happy New Year's for those I haven't spoken to. And we're getting ready to get started for another year. That way we can make the best decisions involving the DD Council. With that being said, Ms. Deaville, do we have a quorum?

AMY DEAVILLE: If all council members could turn their cameras on. And then Hannah, could you do a roll call, please?

HANNAH JENKINS: Sure. Ms. Banks.

NICOLE BANKS: Present.

HANNAH JENKINS: Dr. Barovechio. Ms. Basile.

KIM BASILE: Present.

HANNAH JENKINS: Ms. Bayham.

MELISSA BAYHAM: Present.

HANNAH JENKINS: Ms. Cosse. I believe she was here. Ms. Cosse, can you hear us?

ROSLYN HYMEL: I don't know if she's muted or not.

HANNAH JENKINS: She's here. It looks like she's trying to talk, but we can't hear her.

BRENDA COSSE: Good morning.

HANNAH JENKINS: Oh, there she is. Ms. Crain. Mr. Davis.

LOGAN DAVIS: Present.

HANNAH JENKINS: Ms. Egle. Ms. Gonzales. Ms. Guidry.

CHANEY GUIDRY: Present.

HANNAH JENKINS: Ms. Hagan.

JULIE FOSTER HAGAN: Here.

HANNAH JENKINS: Ms. Harmon.

ANGELA HARMON: Present.

HANNAH JENKINS: Ms. Hano.

JILL HANO: Present.

HANNAH JENKINS: Ms. Hogan. Ms. Hymel.

ROSLYN HYMEL: Here.

HANNAH JENKINS: Mr. Iddins. Dr. McKee.

HYACINTH MCKEE: Present.

HANNAH JENKINS: Ms. Polotzola. Mr. Rocca.

TORY ROCCA: Here.

HANNAH JENKINS: Mr. Rovira. Ms. Tarver. Ms. Webb

VIVIENNE WEBB: Here.

HANNAH JENKINS: Ms. White. Dr. Wilson. I see Mr. Rovira. And Mr. Bristo.

RASHAD BRISTO: Here.

HANNAH JENKINS: And Dr. Barovechio is also here.

RASHAD BRISTO: All right. Thank you. We do have a quorum. So at this time, Ms. Deaville, if you will, will you please put the mission statement up.

AMY DEAVILLE: The mission statement for 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. Also, just go over some ground rules and some protocols. This is live Zoom on YouTube so make sure that you're aware that the public is present. Be considerate of those who are speaking. Make sure that you raise your hand first. Wait till you're acknowledged by the chair. Once you're acknowledged by the chair you have three minutes to talk on the topic in which we're talking about. Not only that, make sure you have your camera on at all times. That way we make sure that we continue to have a quorum in case something comes up where we need to have a vote. Make sure that your microphones remain muted. Again, electronically raise your hand. The guests, they may electronically raise their hand or request to comment. Upon being recognized to speak by the chair, unmute your microphone. Once you've spoken,

ask that you mute your microphone again. This is a public meeting, and we will not entertain a person's character. Comments continue after being asked to stop by the chair, council staff will be instructed to end the meeting. So we want to make sure that we continue to stay focused. And the council will seek guidance and determine legal action if appropriate to redact or to share the video.

One thing I do want to add with this council meeting and all other council meetings moving forward, if we're in a discussion about a topic and we've discussed, if you've discussed the topic at least twice, at that point it's going to be taken offline because we want to make sure that we remain considerate of other people's time and there are other agendas that we have to make sure that we can get to. So if you've talked on the topic twice and it's recognized by the chair it's going to be considered as overkill. So it will be taken offline so we can finish the discussion in another timeframe. But we'll make sure that that discussion is followed up within ten administrative business days so we can get to the concern of those anyone may have or by the topic that seems like we left hanging in the midst of the meeting. After that, next item of business is approval of the meeting summary. Draft of the 21st meeting summary was distributed. The summary will not be read unless requested by a member. Are there any corrections to the summary?

LOGAN DAVIS: Can I request it be read?

RASHAD BRISTO: Okay. Mr. Davis, you're requesting that the meeting summary be read?

LOGAN DAVIS: Correct.

RASHAD BRISTO: Ms. Deaville, do you have that available?

AMY DEAVILLE: I do have it available. It is a three-page document. I can share my screen and we can view it. Logan, I can also email it to you right now if you'd like?

LOGAN DAVIS: Okay.

AMY DEAVILLE: Can everyone see the summary on my

screen?

LOGAN DAVIS: Yes.

RASHAD BRISTO: Yes.

AMY DEAVILLE: Okay.

ROSLYN HYMEL: I can.

AMY DEAVILLE: Thank you.

ROSLYN HYMEL: But you see, I did not get both of them at all in my packet. At all.

RASHAD BRISTO: Okay. So since it's been requested by Council Member Logan Davis that the meeting summary been read, I'll go ahead and proceed. If you will, Ms. Deaville, just scroll up for me when I get to that point. So for the meeting Chairperson Rashad Bristo called the meeting to order at 8:35 a.m. The July 2021 meeting summary was approved by unanimous consent. Chairperson's report passed motion by Mitchell Iddins. Seconded by Kim Basile to accept executive committee's proposed legislative agenda on cameras in education classrooms and data and accountability of cameras in special education classrooms. Address the language in Act 456 of the 2021 session. Appendix K exceptions. Particularly family as paid caregiver. Funding of comprehensive dental or adults with IDD, support of LApie's legislation to fund post-secondary programs. Four abstentions. Dr. Barovechio, Brenda Cosse, Julie Foster Hagan, Bambi Polotzola. The motion passed by majority vote. Passed and amended. Amended the motion by Matthew Rovira. Seconded by Michael Billings. Motion to distribute the funds equally to the nine Families Helping Families centers. Seven abstentions were Dr. Barovechio, Kim Basile, Melissa Bayham, Lillian DeJean, Jill Hano, Roslyn Hymel, Steven Nguyen. Motion passed by majority vote. Passed. Motion by Michael Billings. Seconded by Nicole Banks to accept the executive committee's recommendation of the six listed membership applicants to be sent to the governor for appointment. One abstention was Brenda Cosse. Motion passed by majority vote. New council members to be recommended for appointment by Governor Edwards. New council members were Logan Davis, Chaney Guidry,

Vivienne Webb, Kimona Hogan, Christy Gonzales, Angela Harmon. Standing council member reports. Governor's Office of Disability Affairs, Louisiana Rehabilitations Services, Department of Education, Office of Aging and Adult Services, Office for Citizens with Developmental Disabilities, Office of Public Health, Governor's Office of Elderly Affairs, Bureau of Health Services Financing, Medicaid, LSU Health Sciences Center, Human Development Center, Disability Rights Louisiana. By unanimous consent the DD Council quarterly meeting adjourned at 4:03 p.m. So we just read the meeting minutes for the October 21 meeting summary to the pleasure and request of council member Logan Davis.

LOGAN DAVIS: Thank you for reading that, Rashad. And I was just viewing the packet that was mailed to me and I cannot find that meeting summary or meeting minutes. That's the reason why I asked for that reading.

RASHAD BRISTO: Not a problem, Mr. Davis. Are there any corrections to the summary that's just been read? Do we have any comments in the chat box? If there are no objections, the summary is approved as distributed.

HANNAH JENKINS: Jill Hano has her hand raised, Rashad.

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

JILL HANO: Thank you, Hannah and Brenton. I was about to inform our public and our new council members that we no longer provide the meeting summaries in the physical packet, the hard copy packet, that is sent to us. But everything is online. I print everything. I print it out every month if that helps anyone.

RASHAD BRISTO: Thank you for that, Ms. Hano. And do we have other comments? I also see in the chat it was voted a few years back that the summary not be printed in the packets to save paper to be economical. And that was a vote. Okay. Same thing. Does anyone else have any comments? Is there any objections to the summary being approved?

LOGAN DAVIS: I make the motion to approve the summary as read aloud.

RASHAD BRISTO: All right. Seeing there are none in the chat. There are no corrections.

NICOLE BANKS: I second.

RASHAD BRISTO: All right. It's been moved and seconded. I'm sorry?

ROSLYN HYMEL: Somebody already seconded before I did. I was going to second it. So that's all right.

RASHAD BRISTO: Okay. It's been moved by Logan Davis. It's been seconded by Vice Chair Banks that the meeting minutes be moved and second. All in favor?

LOGAN DAVIS: Aye.

RASHAD BRISTO: Okay. No opposition remains. One second. Okay. The next item of business is my report, the chairperson report. I apologize. I spoke to the executive director. Didn't get that to her within the timeframe that it was supposed to be received. I did, as the chair, have opportunity to attend a focus group in DeSoto Parish on behalf of the DD Council with the special education department. It was an opportunity for us to be able to talk about some of the things that were taking place in that particular school system. And there was a lot of public outcry about lack of communication between the educational system and the parents themselves. That was one of the things that had taken place in the focus group.

The other thing was I got an opportunity to talk to my state representative to let him know, Kenny Cox, that I am the DD chair and I live in his district. And he made himself available where if there was anything that he can do to be of assistance to any of the legislative agendas or anything that we have on prospects of trying to move forward with any kind of legal action for the betterment of the DD community, he said he'd be in support of us. So I definitely want to hold him to that. And we'll schedule a follow-up meeting between me and the executive director so we can make sure that he becomes a part of our network of support for the DD Council. Are there any questions

about what I just discussed and presented? Again, I apologize I did not put it in a tangible form so it could be up on the screen.

LOGAN DAVIS: Rashad or Mr. Chair, my hand is raised. Could you please repeat what you stated the lack of communication was between. I missed it.

RASHAD BRISTO: The lack of communication for the DeSoto school board was between the parents and the education system. One of the gaps of the things that they were talking about was the parents did not feel like the school was always being as supportive for their children for the services that they were wanting to provide for them. So that was one of the things that was presented to them. Basically, one of the things that was emphasized was when a parent had a concern for a child for special accommodations, to be more specific, it seemed like they were always put off and it was dragged out until either that academic school year had passed or that student was no longer going to be a student at that school. And it was becoming very visible. So that was one of the main things that was articulated during that focus group.

LOGAN DAVIS: And was there any answers given after the focus group? Because I think doesn't Disability Rights of Louisiana handle the accommodations and the disability services and the education system?

RASHAD BRISTO: Yes, they do. But they had an opportunity, they were supposed to have a follow-up conversation. It hasn't taken place yet. Scheduled for February the 15th to have a conversation with the school board because DeSoto Parish still wanted to kind of handle it internally because they didn't have anything of legal concern as of yet. They were just stressing that they were starting to see a trend and a pattern of dismissal and extension until, again, either that child or that student was either academic year had expired, or they passed onto another school district, or grade, or whatever the case may be. Thank you for that. Ms. Hano, I see your hand. You're recognized by the chair. You have the floor.

JILL HANO: Can you tell us what region you're in, please.

RASHAD BRISTO: I'm in region seven. I'm in Northwest Louisiana. Region seven.

JILL HANO: Is that Shreveport?

RASHAD BRISTO: Yes, ma'am. That's the Shreveport.

JILL HANO: Thank you so much.

RASHAD BRISTO: You're welcome. Do we have any other hands or any inquiries on behalf of my report? Do we have any questions in the chat box?

HANNAH JENKINS: Kathleen Cannino said they try, however there are so many cases they cannot cover all of the cases. And yeah. Mr. Logan Davis said Ms. Hano, I'm also located in region seven.

RASHAD BRISTO: Thank you for that. So no other questions? No other comments? Also, I want to take this time to welcome all the new board members, the council members to the DD Council. We're very appreciative of your desire to be a council member and we're looking forward to working with you. I didn't forget about that at the beginning. I was kind of waiting to put it at the end of my report. So now we're up to executive committee recommendations. Is there a recommendation in regarding the adoption?

AMY DEAVILLE: There were no votes at yesterday's meeting.

RASHAD BRISTO: That's fine. Just very good discussion. So with that being said, we'll move forward to the executive director's report. The next item of business is executive director's report. The chair recognizes Ms. Amy Deaville for her report.

AMY DEAVILLE: Thank you, chair. Here's my report. Over the last quarter we, Ebony and I, continued to attend the walking the walk, prioritizing diversity, equity and inclusion in organizational culture and programming to support people of color with disabilities. It was a peer learning opportunity that was ten sessions long and it ended towards the end of December. So we were able to make it through the entire course. And we got a lot out of it. We were

very happy with our experience so. We also attended OCDD Covid 19 waiver exceptions focus groups. I'm not going to talk a ton about those. Other than to say we participated in all of them. Because I know that Julie is going to talk about them when her report comes up later this afternoon. I was also in the HCR45 workgroup. We just wrapped up a couple of weeks ago with our report. Which is going to be submitted, or probably has already been submitted, to legislators this month. And this was the workgroup that was focused on house concurrent resolution 45 which passed in the 21 regular legislative session that talked about the studying the feasibility of implementing some sort of a system for tracking the location of children with intellectual and developmental disabilities. So the work was done, and the report has been compiled and passed on.

Ebony attended the OCDD 16-hour rule focus group. Which again, that's one of those Covid waiver exception groups that Julie's going to talk about later today. Brenton attended the meeting with-- Brenton and I both had a meeting with a parent advocate regarding cameras in the classroom. That parent advocate is from Maryland, and they were interested in trying to get some legislation passed in their state as well. And so we had a conversation with her about our legislation and how we've gotten to where we are and where we hope to go. He also attended the post Covid 19 waiver exceptions general stakeholder forum. OCDD state advisory committee. We all attended the Louisiana post-secondary inclusive education alliance meeting where we talked about legislation. He had a meeting with Act 378 subcommittee Chair Bambi Polotzola and the executive director of the Jefferson Parish Human Services Authority. And he also attended the GACDA legislative committee.

And then if you scroll all the way down, it's the extremely long list of all the meetings that I attended within a three-month period. So I won't go through each one. It is posted on the website for you to view.

Are there any questions about any of that? Okay. If not, I'll move onto the budget report, chair, if that's okay?

RASHAD BRISTO: Yes. We don't have any questions, no public comment?

AMY DEAVILLE: I see Roslyn has her hand raised.

RASHAD BRISTO: Roslyn, you're recognized by the chair. You have the floor.

ROSLYN HYMEL: Yeah. I only have one question. I'm going to make it kind of quick. All right. For me for what I'm seeing on the second page in that I was reviewing it, is all of this is, is this all of it you had seen? Or you said you attended to it for all of this of what, 2021 totally?

AMY DEAVILLE: No. This report covers from October 1st through the end of December of 2021.

ROSLYN HYMEL: Okay. That's what I meant. So you're going to do a new one for this year?

AMY DEAVILLE: Yes. So at the April committee meetings I will have an updated report, excuse me, that will go from January through March of 22.

ROSLYN HYMEL: Okay. Thanks. That's the only thing I had. Thank you.

AMY DEAVILLE: Okay. Thanks.

RASHAD BRISTO: Any other questions? Any council members, any public comment in regard to the executive director's report? Hearing none, then that report requires no action. It will be placed on file. Ms. Deaville, please proceed with the budget report.

AMY DEAVILLE: I'm sorry. Chair, I see that Jill Hano just raised her hand.

RASHAD BRISTO: Okay. Thank you. Cause I don't see anyone else except for the one speaking. Ms. Hano, you're recognized by the chair.

JILL HANO: I'm sorry, y'all. I thought I had my hand raised, but I did not. I missed what you said, Amy. Did you submit the workgroup report or are you going to submit the workgroup report?

AMY DEAVILLE: The HCR45 workgroup?

JILL HANO: Correct.

AMY DEAVILLE: Yes. So one of the staff people with OCDD, Dr. Amy Greer, was heading it up and she was getting that report submitted in January.

JILL HANO: Okay. Thanks.

AMY DEAVILLE: Okay.

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

AMY DEAVILLE: All right. This is the budget report. Let's see. This is our budget report that really goes through everything from the start of the fiscal year through the end of December. As you can see our budget is in good shape. If you look at percentages expended, you would expect that for most areas we're going to be somewhere around 50 percent cause we're right around halfway through our fiscal year with the state. And for most places we are around 50 percent. The one area where we're at 95 percent expended, which is dues and subscriptions, that's because the only thing that comes out of that is our yearly dues to the National Association for the Councils on Developmental Disabilities. And so that's a onetime fee. It's been paid out. There probably won't be anything else coming out of that line item this year. Mr. Chair, I see that Logan Davis has his hand raised.

RASHAD BRISTO: Thank you. Mr. Davis, you're recognized by the chair. You have the floor.

LOGAN DAVIS: Thank you, chair. Just for my notes cause I see that for the FY2022 budget the council meetings in state travel, council members instate travel, staff out of state travel, council member out of state travel. What does the FY2022 cover? Like are there timeframes? Because, to my knowledge, we're not having in-person council meetings. And yeah, that was just wondering what does FY2022 budget cover? Like what are the two dates?

AMY DEAVILLE: So the state fiscal year starts July 1st. It started July 1st of 2021 and it's going to run through the end of June 2022.

LOGAN DAVIS: All right. Can you repeat that again? I'm sorry.

AMY DEAVILLE: It started July 1st of 2021. And it will run through the end of June 2022.

LOGAN DAVIS: End of June?

AMY DEAVILLE: Yes.

LOGAN DAVIS: Okay.

AMY DEAVILLE: Then just to kind of answer what I think your other part of the question was. Which is there was money budgeted in those line items for travel because typically there is, in normal years, non-covid years, there is travel. And so we continued to budget that way because we still don't know when the public health emergency will end and when travel will resume. So we want to make sure that we have money there available in case it opens up sometime within this fiscal year.

LOGAN DAVIS: So it's just sitting in a pool?

AMY DEAVILLE: For now.

LOGAN DAVIS: And nothing is, you don't dip into that pool until the public health crisis is over with, correct?

AMY DEAVILLE: Yes. The only time I would dip into that pool is if I'm running low in some other line item and I see we're not going to spend all of this money. And so I might move some money around at some point if I need to. But we're not in that position right now.

LOGAN DAVIS: Perfect. That's great to hear. And is everything else on this budget report, is it available online as well so I can go into more depth, go into it more? I don't know if I used that word correctly.

AMY DEAVILLE: The budget report as you see it displayed on the screen, this is available on the website. If you have other specific questions after you've looked at it some more, just email me and I'll answer them.

LOGAN DAVIS: Perfect. I don't want to take any more time away from this. And I see Ms. Jill Hano has her hand raised as well. And I turn my time back over to the chair, Mr. Rashad.

RASHAD BRISTO: Thank you. Ms. Hano, you're

recognized by the chair. You have the floor.

JILL HANO: Okay. Can we shrink it just a hair smaller?

AMY DEAVILLE: Like this or a little bit smaller?

JILL HANO: Go down. I'm trying to understand our contracts. Yes. Perfect. I'm trying to understand how the budget fits into the contacts. So is this bottom item line consistent every quarter? Or how does that work? Like I don't really understand this, but do our contractors tend to ask for less money than we plan to allot them? And are they federal money? Fed funds, correct? Okay. I'm sorry.

AMY DEAVILLE: Okay. Let me try to explain as best I can and then if you have questions, let me know. So this first number right here, this 1,682,130. Right there.

JILL HANO: Yes, ma'am.

AMY DEAVILLE: This is the combination of our federal funds that are going towards contracts, but also the state general funds that go towards the Families Helping Families centers. So this is a combination of both in that one line item. Then the next three columns right here, these are expenditures. So this is just what was expended in the month of December. But this is first quarter and then second quarter expenditures.

JILL HANO: Okay. On contracts?

AMY DEAVILLE: On contracts.

JILL HANO: Okay. Perfect.

AMY DEAVILLE: So does that answer all of your questions?

JILL HANO: I think so.

AMY DEAVILLE: Okay.

JILL HANO: All right. Thank you. You shed some light. So thank you.

RASHAD BRISTO: Ms. Deaville, are you through presenting or are you in the middle of your presentation?

AMY DEAVILLE: I'm done.

RASHAD BRISTO: You're done?

AMY DEAVILLE: Uh-huh.

RASHAD BRISTO: Okay. Are there any other council members have questions?

JILL HANO: Thanks, Amy.

RASHAD BRISTO: Is there any public comment in regards to the budget report?

HANNAH JENKINS: No comments or hands raised.

ROSLYN HYMEL: I had something in the chat because I was wondering why in three in the fourth quarter. I kind of read it. I put my question in the chat in that. Why is there in the third in the fourth quarter they have zeros straight down the column? That's what I don't get.

AMY DEAVILLE: Because we haven't gotten to the third and fourth quarter yet of our state fiscal year.

ROSLYN HYMEL: That's what I thought. I wasn't sure on it in that, but I was trying to get to. Thank you.

RASHAD BRISTO: No problem. I don't have a visible. Do we have any more hands raised?

HANNAH JENKINS: No hands raised or comments.

RASHAD BRISTO: Okay. Well, this report requires no action and will be placed on file. We're actually moving way ahead of schedule. We're supposed to be up to recess. If there's no objection by council, I'd like to go ahead and proceed into the committee reports?

LOGAN DAVIS: I second that motion.

RASHAD BRISTO: Okay. So now we'll move into our standing committee reports. Act 378 subcommittee, Ms. Bambi Polotzola.

BAMBI POLOTZOLA: Good morning, everyone.

RASHAD BRISTO: Morning.

BAMBI POLOTZOLA: The Act 378 subcommittee met yesterday, and we do not have any recommendations for the council to consider. We did spend time reviewing the fiscal year 22 second quarter data for programs from the Office for Citizens with Developmental Disabilities and behavioral health and aging and adult services through Arc of Louisiana. And these reports

can be found linked on our committee agenda on the council's meeting web page if you would like to review. As a follow-up to our last meeting we did look over the human service districts and authorities responses to our inquiries regarding how much LGE, our local governing entity determines their budget for consumer care resources and flexible family funds. And what happens to funding that goes unspent. Of the 10 LGEs we received seven responses. And some of the responses received appeared to be targeted towards developmental disability services and not behavioral health which is what our focus was on. In general, it appears that LGEs base their budgets on need in the previous year's usage. Money left unspent remains in the state's general fund and not with the LGE to use in subsequent years. There are some exceptions that you will note in the document linked in our agenda. And just to follow-up, we did receive one more report from one of the LGEs who didn't submit prior to our meeting. And also, we received some information that there may be some confusion in the language. Previously the flexible family funds was known as the cash subsidy and apparently from this source that sometimes OBH calls their flexible funds cash subsidy. So that could have, I guess that's an internal thing. And so we use the appropriate language in our request, but there may have been some confusion in regards to that. So we received that information after our meeting yesterday.

Tanya Murphy with OCDD also informed us she was able to meet with the developmental disability directors with each of our local governing entities to discuss the committee's concerns for discrepancies in spending for the individual and family support funds across regions based on different services. This was a concern that the committee brought up a few times over the last year. Ms. Murphy talked to the LGEs and looked at every request. Talked to the LGEs and they stated that the LGEs look at every request in a person-centered way and make the decisions accordingly. Now each region has unique needs, requests and resources

available for families, so it is difficult to compare one LGE to another. Specific to incontinent supplies, she noted that one LGE has an advocacy group that helps provide diapers for families in needs while other LGEs do not have the same resource. She also noted that some LGEs were not coding specific services accurately which may have skewed the original data the committee looked at. Ms. Murphy also stated that she does not believe the discrepancy exist, that a discrepancy exist, but will continue to research committee concerns if specific areas of discrepancy are identified.

And then lastly, OCDD also provided us update on their analysis to determine what impacts, if any, the passage of Act 73 of 2017 has had on the delivery of individual and family support and flexible family fund services. In general, it appears most LGEs were able to serve more individuals and expended more funds on DD services. Also, after the meeting, since the meeting I received information from the Arc of Louisiana regarding a question in their report in regards to their numbers in regions one and regions ten. And one of those regions reported zero. And this is something that I didn't realize, and I think probably most people don't realize is that the Office of Aging and Adult Services regions doesn't have ten regions. They include region ten, which is just Jefferson Parish, in their region one. So those numbers on that report is inclusive of region one and region ten. And that concludes my report.

RASHAD BRISTO: Thank you, Ms. Polotzola. Are there any questions from council members on the report that's been presented?

HANNAH JENKINS: I do not see any right now.

RASHAD BRISTO: Thank you. Are there any public comment in regards to the report that's presented?

HANNAH JENKINS: No public comment either.

RASHAD BRISTO: Okay. Well, there's no public comment or council member comments, then this report requires no action and will be placed on file. So the next item of business is a report of the education

committee. The chairperson is Dr. Hyacinth McKee for this committee report. Dr. McKee, you have the floor.

HYACINTH MCKEE: Good morning. Greetings, everyone. The education and employment committee meeting convened on Wednesday, January 12th, 2022. We received an update from Louisiana Department of Education, Ms. Meredith Jordan, who has not permanently been appointed to the council as the education representative from DOE. We had a report regarding the teacher recruitment recovery and retention task force that she will probably share more in her report today. But there are some current opportunities that they're working on. Para educator teacher opportunity to incentivize para educators to obtain bachelor's degree at no cost. Optional funding schools can also request for add on certifications such as special education, mild moderate, English as a second language as an additional certification. And if there are any questions, she did provide us with an email. Believeandprepare@la.gov. There's also going to be a Jump Start convention and that happens every year. Currently the Jump Start convention is sold out at this time. It is our understanding that it is an in-person convention, but I think the DOE is looking into seeing if there are some virtual options considering the public health crisis. And then there's also a teacher leader summit that happens annually that they are still asking if individuals are interested in attending to register for that.

Also, we received a report regarding the Individuals with Disabilities Education Improvement Act, which is IDEA, requiring each state to have in place a state performance plan. LDOE is currently setting targets for that state performance plan for the next six-year cycle via the state performance plan report that's also linked to our agenda as well as LDOE's website. LDOE will engage stakeholders in this process by having a fillable PDF survey called the SPPAPR target setting survey. Which should be live and going out shortly. The next Special Education Advisory

Panel meeting is in February and planning for it to be in-person. That will also be adjusted virtual if the governor's emergency order is extended.

We had an in-depth conversation, well, lengthy conversation about cameras in the classroom, bill 86 of the legislative session. Act 456 that requires the development of policies to install, operate and maintain cameras in certain special education classrooms. There was some discussion about LDOE's oversight and even if they have the ability to do so. It was discovered that LDOE, the way the bill has been written, does not have the authority to provide oversight or enforcement on school districts to follow through and adhere to this legislative act. As it stands right now LDOE cannot even give authority to provide technical assistance to school systems as the way it's written. Also there's no funding that's attached to this legislation. There was some discussion about that. As it stands right now, the only thing they could do is just encourage the school districts to seek out their own legal counsel to draft their own policies to align with the law. And again, LDOE does not have any oversight or ability as it relates to the way this bill has been written. This act has been written. Ms. Jordan shared her contact information if anyone needed it.
Meredith.jordan@la.gov.

We received an update from Louisiana Rehabilitation Services from Ms. Melissa Bayham. Which I'm sure she's going to give a report today. Customized employment training from LSU HDC. Vacant counselor positions are posted on civil service website. She was asking to help spread that word cause they're really looking into filling more counselor positions. And I believe she said specifically targeting the need in the Shreveport area. And then they are currently working with the STEMUP. She was very excited about working with STEMUP with Southern University assisting minority students with disabilities in STEM occupations.

We discussed the update on our contractual activities for our fiscal year 22 action plan. Ms. Devika Rao discussed what they're doing as it relates to our seminars on hiring individuals with developmental disabilities. She had a plan of action where they're trying to workout building webinars from a curriculum approach with having one topic per webinar and to go into more of a deeper dive with subject matter experts. So like finding people that really, really know about that particular area and getting them involved. She will be submitting a calendar with all of the plan of activities. Inclusive of big businesses and small businesses as well getting involved. She's hoping to get this webinar off the ground by March. So which is developmental disabilities awareness week.

We also received an update from Dr. Gerlinde Beckers from Louisiana Post-Secondary Inclusive Education Alliance. McNeese is looking forward to starting a LApie program with the support of one of our former council members. Meeting in February with Northwestern State Louisiana is coming up to help start the program there as well. They're still working on getting Grambling University connected with LApie. Ms. Polotzola shared that Senator Boudreaux will look into information regarding LApie and is interested in carrying the bill, but it should not stop advocacy to continue to get other legislators involved. Dr. Beckers continued to work to send information to alliance members that's consistent with what we're trying to do in that area.

Ms. Kelly Monroe gave a report on customized employment training. The class is currently moving pretty slow. But there are eight that are currently in the class. Four have not identified as a learning partner. But they continue to work in that effort. They are planning for a refresher and a start in March with hopes to finish in the contract year. So we did have some more discussion about our action plan, and I believe they're going to put this up just for the council to consider. We discussed activity 3.1.8 and

activity 3.2.5. As well as activity 3. 2.6 asking for the council to allow us to do more research in areas to help support individuals with disabilities as they are moving to the stage of retirement. In having more conversations about future planning and benefits planning and what that would look like. We do have a lot of conversations on K12 and now post-secondary. We have not had many conversations on how to better support individuals with disabilities as they move closer to the retirement age. And so we are asking that the council allow for us to do more research in that area and draft information so that it can be a part of the FY23 plan. And that concludes my report.

RASHAD BRISTO: All right. Thank you, Dr. McKee. Do we have any questions from the council members in regards to the education committee report?

HANNAH JENKINS: Logan Davis has his hand raised.

RASHAD BRISTO: Okay. Mr. Davis, you're recognized by the chair. You have the floor.

LOGAN DAVIS: Thank you, chair. Dr. McKee, thank you so much for your report. I did put in the chat box that-- sorry. My nervous tick. I move that the different activities be read for the public for those with visual, if there are any visual, any blind individuals that cannot read these activities, I move that those activities be read.

HYACINTH MCKEE: Absolutely. I will read them if Mr. Chair will give me the floor?

RASHAD BRISTO: You have the floor, Dr. McKee.

HYACINTH MCKEE: Activity 3.1.8 is conduct outreach with appropriate entities on current services and training opportunities for traditional and special education teachers including ongoing support, high quality ongoing teacher education which may lead to capacity building efforts, and to increase high quality educators. Activity, 3.2.5, share the benefits planning services to a variety of agencies and stakeholders. And then activity 3.2.6, advocate for systems change based on emergent employment issues.

RASHAD BRISTO: Thank you, Dr. McKee.

ROSLYN HYMEL: What packet is that in? Can somebody fill me in on that?

HYACINTH MCKEE: That will be located in our fiscal year 2022.

AMY DEAVILLE: Right. So Roslyn, what's displayed on the screen right now is the five-year plan for the council. And we're just looking at goal three, some of the activities under goal three.

ROSLYN HYMEL: All right. Is that the last packet?

AMY DEAVILLE: The five-year plan probably isn't, I'm not sure if it was in a packet at all because that was ratified back in July, last July. So I don't know that a version of it has been sent out, a physical version of it has been sent out since.

LOGAN DAVIS: It has.

ROSLYN HYMEL: Let me remind everyone to be recognized by the chair before commenting.

LOGAN DAVIS: I'm sorry, chair. I withdraw my comment.

ROSLYN HYMEL: I'm lost in the shuffle. That's why I'm asking for help.

RASHAD BRISTO: Ms. Hymel, has your question been satisfied? Okay. Do we have any more hands raised?

HANNAH JENKINS: No hands raised or comments in the chat.

RASHAD BRISTO: Okay. Thank you, Ms. Jenkins. With no public comment, with no questions from council members, the education committee report will be, requires no action and will be placed on file. So next item of business is report of self-determination community inclusion committee. The chair now recognizes Ms. Kim Basile for her report.

KIM BASILE: Thank you. Happy New Year, everyone. The self-determination community inclusion committee met yesterday and has one recommendation. The motion is the self-determination and community inclusion committee recommends the planning ad hoc committee consider the following activities for inclusion in the fiscal year 23 action plan. And offers this recommendation to the full council for consideration.

Individuals need assistance navigating the tiered waiver system. Possibly contract with someone knowledgeable about all aspects of the tiered waiver system to help individuals in the community and those trying to transition out of intermediate care facilities or ICFs. Get the supports that best fit their needs. Those in ICFs or those with a SUN score of four should have an expedited way to receive waiver services given their level of need or creation of an emergency coordination team at the state level to help individuals navigate the waiver process. Addressing support coordination turnover. Increase activities focused on youth advocacy and involvement. And contract to get youth leadership forum established. I'm sorry. I can't read this morning. We did receive a lot of great updates from the Office of Citizens with Developmental Disabilities or OCDD and Medicaid. A lot of the information shared is included in their agency report and I'm sure they will touch on these topics later today. But I did want to let you know we discussed OCDD's major initiatives for this fiscal year and plan to spend a little time at our April meeting providing feedback for next year's initiatives. So please join us in April if you would like to contribute to that conversation. We also received updates on contractual activities in goals one and two of the council's fiscal year 2020 action plan. I encourage you all to 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. Thank you.

RASHAD BRISTO: Okay. Do we have any council members questions on the report that was presented?

HANNAH JENKINS: Jill Hano has her hand raised.

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

JILL HANO: Okay. Kim, this question, actually Julie could probably answer, but are these, I know Julie was restructuring her report, are the new initiatives that we discussed yesterday from OCDD is

going to be what your standing council member report is going to relate to? Because I've tried to read your report and I got dizzy.

JULIE FOSTER HAGAN: Do I have the floor to respond to that?

KIM BASILE: Absolutely.

JULIE FOSTER HAGAN: Okay.

RASHAD BRISTO: Yes. You have the floor.

JULIE FOSTER HAGAN: Yeah. Jill, we did try, this quarter, to modify the report to make it easier. So sorry if it made you dizzy. So I guess we didn't accomplish what we were trying to do. We were trying to make it more related to those major activities and make the data a little bit easier for folks. But we can definitely take a look at that.

JILL HANO: No.

JULIE FOSTER HAGAN: That was part of what I wanted to talk about when I did my report out this afternoon, is discuss the changes and to get feedback if that was easier for folks to read or if there were any suggestions for us to do it differently.

JILL HANO: No. I really was only trying to make y'all laugh. I promise. I just want to know because once you talk about your report, you know, I'm going to spend the next three months familiarizing. But once I get the hang of it, I'm sure it's going to be amazing. And I do look forward to the whole LDH restructure. But I really was only trying to make a joke. I'm sorry.

JULIE FOSTER HAGAN: No. That's okay. And if you have ideas, Jill, you have my email. If you have ideas as you're trying to familiarize it for things that would make it easier, that's really what we're trying to do is make it easier and not use some of the language that gets confusing for people and make sure that we're using the correct language and structuring it in a way that's easier. So as you review it if you have any suggestions, please email me those suggestions and we'll take those into consideration.

JILL HANO: Perfect. Thank you. And I'm sorry I

kind of derailed the conversation.

RASHAD BRISTO: No problem, Ms. Hano. Mr. Iddins, I see your hand on my screen. We can double back to Ms. Basile real quick before we digress. Ms. Basile, I made a note, the committee was making a recommendation for the council for what to take into consideration?

KIM BASILE: The motion is, and we did this globally so that the planning committee could fit it into the activities and the goals where they saw fit. So we recommend to the planning ad hoc committee consider the following activities. To help individuals that need assistance navigating the tiered waiver system. And this was something that was brought up by Matt Rovira and Crystal White. Specifically when individuals were aging out of intermediate care facilities and it's too confusing for them to figure out how to get the correct waiver that they need and how to navigate that entire system. So one of the possibilities is to contract with someone knowledgeable about all aspects of the tiered waiver system to kind of hold their hand and walk them through it. Also, possibly come up with an expedited system to where anyone in an ICF or those with a SUN score of four could be expedited through the system and not have to go back to step one. Another item was addressing the support coordination turnover. Cause we all know that the turnover is astronomical in the support coordination world. To increase the activities, this was Jill Hano, increase activities focused on the youth advocacy and involvement and to contract to get the youth leadership forum, which I believe Lillian is heading up, established. So the last two were from Jill Hano.

RASHAD BRISTO: Okay. You answered my question. I just wanted to make sure I didn't dismiss anything that was requested to take any action today. But we'll make sure that goes to the planning committee first. Thank you for re-emphasizing that for me. Mr. Iddins, you're recognized by the chair. You have the floor. Then we'll go to the comments in the chat.

MITCH IDDINS: Thank you, Mr. Chair. Kim, this is a question for you. Can you give us an example, or if you guys had any discussion about some examples of support coordination turnover, and what exactly that is and how it's affecting people? And my second comment is I thought there was already an expedited way if someone scores a four or more on the SUN score that a waiver could be expedited for them if they're already in an institution trying to transition out. I thought that was already in place. That that was something that the council worked on to put in place years ago to go along with the SUN score. So I guess my first question would be examples of the support coordination turnover and what that looks like for someone?

KIM BASILE: Okay. Matt, I see you're on the screen so if you can help me out. I believe that we don't have anyone, since the turnover is so high, the support coordinators that are coming in are green. And they may not know the process as well as they should. And they may not be able to help our community navigate the system. Matt, is that, am I saying that correctly?

MATHEW ROVIRA: Mr. Chair, am I recognized to speak?

RASHAD BRISTO: Yes. You're recognized.

MATHEW ROVIRA: Thank you so much. Yeah. Just to echo and build on what Kim was saying and to attempt to answer your question, Mitch. Of course, I am a home and community-based service provider, but it was also echoed by Crystal White as well who I think is a family member of an individual with a developmental disability. It is our experience that individuals that are transitioning out of either an ICF group home, or Pinecrest, are quote unquote having to fight tooth and nail to navigate the system to get the services they need. In other words, it's our experience that they start on the tiered waiver and then have to justify to get additional services. Which our experience is they're tapping out at the ROW. And building on the support coordination turnover. This is unintentionally, in my point of view, and I think it

was in Crystal's point of view too. They're unintentionally not getting the supports they need to live independently in the community. If I look at the mission of the DD Council, this is what we're supposed to be doing is ensuring that people have choices and can live independently. Again, it's unintentional. And providers, and rightfully so, we need to not be part of that process. But we are trying to help these individuals. But it needs to be, they need to be-- it would be great if they could turn to someone, you know. Sort of like a third party that has experience. Because the experience is not there at the support coordination level because of the turnover to help them navigate the system so they can live independently in an expedited manner. So I hope I paraphrased what the discussion was yesterday.

RASHAD BRISTO: Thank you for that clarity, Mr. Rovira. Do we have any questions?

MITCH IDDINS: I'll comment on that, Mr. Chair. You keep mentioning support coordination turnover. Who are the support coordinators? Are these professionals, are these folks on the state level, on the federal level? Who are the support coordinators that are supposed to be working with these individuals as they choose to transition or if they age out of the facility? Who are those support coordinators? Are you talking about family members, Matt? Who are you talking about? Who are the support coordinators?

MATHEW ROVIRA: So, you know, and I'm sure Julie could give the exact definition. But Mitch, each region has several support coordination agencies. And an individual that is assigned a developmental disability waiver gets assigned a support coordination agency which they then assign an individual. And it's my understanding, I don't have the data, but from intuitively there's a lot of turnover in that industry. As well as the DSW industry, by the way, too. But and so therefore we've unintentionally lost a lot of expertise that's needed to help someone navigate the tiered waiver system. So I think when it was created

it was an excellent idea and it reduced the waiting list to zero. But now, and again, this is my intuition, we've lost that expertise because of the turnover in that support coordination responsibility. And therefore, unintentionally, keeping people longer than they need to be in institutional care.

MITCH IDDINS: Is the support turnover something that's, support coordination turnover is something that recent, is that something to do with the pandemic? I mean, you're right. I see this all the time. You have someone that's in an institution that's wanting to transition out. And then there's always all that red tape that's involved to not only meet with that person, assess that person's needs, you know, see what tiered service or waiver they might qualify. And then, once you get to that point, begin to make that transition in the community to coordinate housing, and to coordinate benefits, and to coordinate a multitude of things that need to happen. You're right. There needs to be someone there. I mean, we do, the centers for independent living do that type of coordination when we're asked to be involved. But, you know, there's still a lot of resistance sometimes when someone comes in and tries to assist people. There's still a lot of resistance. Anyway, I'm just wondering where this turnover is coming from and why it's happening.

BAMBI POLOTZOLA: This is Bambi. I have a response for that.

RASHAD BRISTO: You're recognized by the chair. Ms. Polotzola, you have the floor. You muted out.

BAMBI POLOTZOLA: Sorry about that. I'm sorry about that. I've done extensive research into support coordination and looked at the requirements for our support coordination and also the revenue that they're able to bill to be able for these services. The requirements for supported coordination is really high. You have to have master's degree supervision and bachelor's degrees for all of our support coordinators. I'm okay with that, but then they're also limited to the number of cases they can have. Each support

coordinator can have of their caseload. So then that is definitely a ceiling of the amount of revenue that one person can generate. And then that person has to be able to pay that person's salary. You also have to be able to take a portion of that to pay the supervisors who can oversee six support coordinators who have to be a master level person. And I did the numbers and the support coordination agencies, I don't see them, the owners, as some people just, you know, counting their money, you know, and paying people low wages. It's the way it's set up that they have to pay in order to stay without going into the red to be able to stay in business that they cannot pay those support coordinators--

RASHAD BRISTO: Excuse me. Ms. Polotzola. Ms. Egle, if you will, mute your microphone. Please proceed, Ms. Polotzola.

BAMBI POLOTZOLA: So I just wanted to make that point that their ability to be able to pay support coordinators who have bachelor's degrees is not enough to sustain those people in that employment because those people have bachelor's degree. They can go to other jobs and that's why you see turnover. I think it's a function of just economics. And often times I found historically the DD Council has looked at it from what we see what we're delivered as consumers. But there's other things in play. It's not just that provider. Whether it be support coordinator or provider of another service that there's some other things that we need to look at and maybe advocate so then we can hold people accountable. And we pay people enough money to do a job then we can get the quality that we want and hold them accountable to the quality that our people need. So thank you for allowing me to share that.

RASHAD BRISTO: Thank you, Ms. Polotzola. Mr. Iddins, I see your hand. You're recognized by the floor. By the chair. Excuse me.

MITCH IDDINS: A comment that I agree, but I think we just need to look at the qualifications for support

coordination and maybe consider, I don't think it takes, this is my personal opinion, I don't think it takes anybody with a master's degree in education to be able to provide support coordination. There are lots of people that can do that. It takes experience. It takes knowledge. It takes people that have been there and done that sometimes can do a much better job. So we just need to maybe take a look at the qualifications for that and make some recommendations there so we can get more people that would be interested in doing this type of work and keep them employed. Just my comment.

RASHAD BRISTO: Thank you. Do we have any more hands raised from any council members? Do we have any questions or comments in the chat box?

HANNAH JENKINS: We have someone in the public, Ms. Kathy Dwyer, has her hand raised. And we have a couple of comments in the chat.

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

KATHY DWYER: Thank you, Mr. Chair. I also put my comments in the chat for those that needed it. But my question was initially what would prevent the new entity that's being discussed that supposedly will solve the problem of those transitioning in needing the expertise and the services from not having the same high turnover rate and cause the same problem? It seems we need to resolve the turnover problem for support coordinators instead of creating another entity. And as the other people have mentioned, and I agree, that the problem is the low pay. It seems like the support coordinators come in and get the experience and then move onto higher paying jobs. We would keep those support coordinators, especially those who are experienced, if we resolve the turnover. If that means higher pay, then let's work towards that so we keep the experience. We're not going to solve the problem just by creating another entity. Because it seems like that other entity would have to pay the same level that the support coordinators are paying. You know, if you're able to pay more for this new entity, you should be

able to pay more for the support coordinators.

RASHAD BRISTO: Thank you for that, Ms. Dwyer. Do we have any other comments in the chat?

HANNAH JENKINS: Yes. We have Ms. Melinda Elliot. She says we don't have several support coordination agencies. We have one with lots of turnover. She also said the support coordinators are low paid, especially for all the responsibility they have. They get a little experience and go to a better job. Ms. Kelly Monroe said they are poorly paid just like the providers. With a sad face. And Ms. Corhonda Corley said I sincerely agree with Ms. Dwyer.

RASHAD BRISTO: Sad, but true. Seem like it's hard to maintain quality, passionate people. Especially when there's other extenuating circumstances when it comes down to budgets. Do we have any other comments or questions in regard to the report?

HANNAH JENKINS: Ms. Jill Egle and Ms. Corhonda Corley both have their hands raised.

RASHAD BRISTO: Ms. Egle, you're recognized by the chair. You have the floor.

JILL EGLE: I have a quick question. Why is there such a low turnout for DSPs and providers that don't want to support IDD? I don't understand this crisis.

RASHAD BRISTO: I don't think it's so much anyone that's not initiation of support. A lot of it boils down to what Ms. Polotzola was saying. Some of it is about the academic credentials that are requested and the compensation that goes back with those credentials. And not only that, I believe it was Ms. Dwyer made the comment, once they get their feet in the door then some people start just trying to move up the ladder of success. They pass on to do other opportunities and it just leaves a void because, you know, there's a connection that people make. And once you get someone in a good place, next thing you know that person has a transition to other employment which they consider to be more gainful than the position they were already in. I hope I answered your question.

JILL EGLE: Thank you, Chairman, Mr. Rashad Bristo.

Cause I don't get PCA support, but the people that need it, need it. You know, these people need a good life. We always have to advocate for change.

RASHAD BRISTO: Most definitely. And that's why we're here. Thank you for your comments. Ms. Corhonda Corley, you're recognized by the chair. You have the floor.

CORHONDA CORLEY: Thank you so much, Mr. Chairman. Good morning to you and to the entire DD Council this morning. I would like to piggyback off of what Ms. Dwyer stated. Yes, we are not receiving a lot of support coordinators. In fact, a lot of our support coordinators are additionally not receiving a lot of information to pass on to the families in which they actually serve. A lot of the companies that are actually providing services to our company, they're not doing a good job of actually exhibiting, disseminating information out stating that they're looking for employees also. Maybe it would help if the companies that need support coordinators actually try to reach out to all the universities throughout the state to try to hire some LCSWs, social workers to possibly take the job. But like Ms. Dwyer stated, they would need to increase the benefits and salary for those employees. But the agencies need to do a better job of disseminating information out to the families. What we have right now could actually work, it just has minor hiccups. But creating an entire new entity to try to work with our families would be extremely problematic. And it would cause us other problems where our families will continue to be more unserved and underserved as it is. And a lot of the problems is families in rural areas as well as inner cities just not receiving that information. So I think that we just need to provide a little more training and provide a much better salary and packet, much better packet for the individuals that currently work. As well as a lower ratio of cases per coordinator. That could actually help. Thank you.

KIM BASILE: I'd like to say something.

RASHAD BRISTO: You're recognized by the chair. Go

ahead.

KIM BASILE: I do not believe we stated to motion that we have a new company or new organization. We just wanted to address the support coordination turnover. So this is the discussion that we wanted. Not to try to build a new organization from the ground up to address it.

RASHAD BRISTO: Thank you for bringing the clarification for those interested parties. Do we have any other questions or comments in regard to the self-determination, community inclusion committee report?

HANNAH JENKINS: Ms. Julie Hagan and Ms. Roslyn Hymel both have their hands raised.

RASHAD BRISTO: Okay. Ms. Hagan, you're recognized by the chair. Then I'll recognize you, Ms. Hymel.

JULIE FOSTER HAGAN: Okay. Thank you. I just wanted to make one point of clarification and then provide one piece of information in regards to support coordination. So we do have multiple agencies across the state. But the support coordination agency, similar to the provider agencies, have to enroll as a Medicaid provider and they have to have a license in the region that they serve. And so some regions, we do have some regions that only have one agency in that region. We have other regions who may have two, three, or four agencies in that region. It just kind of depends on the particular region. So I just wanted to clarify that. And you may have one, for example, there's Easterseals and there's MRG. These are companies that have offices in multiple regions. And then you have some who only, I believe Alpha Care may only be in the New Orleans region. So it kind of depends. But they are licensed and certified as Medicaid providers. And they have to have a license in each region. So I just wanted to clarify that information. And then also just wanted to share with the group one of the activities that we've asked for CMS approval on with the additional American Rescue Plan act dollars that we have is to give a 30 percent increase in the rate to support coordination agencies.

Because we do know that that's a challenge. We've yet to get approval for that, but I just wanted to share that that was something that the department had recognized and was attempting to address through that plan. That's all.

RASHAD BRISTO: Thank you for that clarification, Ms. Hagan. Ms. Hymel, you have the floor.

ROSLYN HYMEL: Yeah. I wanted to really find out this because I was listening to what Jill E, I can't really say her last name in that, my best friend. And she really, you know, expressed it for how she feels. And this is what I want to know cause I am agreeing with her in that on one topic that she hit I wanted to, you know, fill in on is LDD in that. Can somebody explain what that really is to me? Because I am a little off balance with it and everything. But yes, I am agreeing with Jill on that what she was expressing in her feelings on that.

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

BAMBI POLOTZOLA: A follow-up question for Julie in regards to the request for support coordination increasing by 30 percent. Was that just for OCDD or was that for OASS? And I know there's also another separate EPSDT. So what does that cover?

JULIE FOSTER HAGAN: It covers OCDD and OAAS. There was a separate ask for EPSDT. And also, I forgot to mention with OCDD and OAAS we had another, a separate activity for bonus payments for people who had worked through the pandemic and would continue working. That applied to the direct support worker agencies. It also applied to the support coordination agencies. So those who've worked through the pandemic and continue there would be a bonus that would be available to them. But yes, it's OCDD and OAAS jointly with that increase in support coordination.

BAMBI POLOTZOLA: Thank you.

RASHAD BRISTO: I see Mr. Matt Rovira, your hand is raised. You're recognized by the chair. You have the floor.

MATHEW ROVIRA: Thank you, Mr. Chair. Julie, just a quick follow-up. Do you have any intuition when CMS may approve this request? Thank you.

JULIE FOSTER HAGAN: The last I heard from Medicaid, Kelly may have more, was quote unquote, any day now. And that's about all we have. Kelly, I don't know if you have more?

KELLY ZIMMERMAN: I'm sorry, you guys. I don't know when CMS might approve it. We have continued to ask and, in fact, just this morning reached out again to CMS and asked for an update.

RASHAD BRISTO: Thank you for that. Vice Chair Banks, I see your hand. You're recognized by the chair.

NICOLE BANKS: Thanks, chair, for recognizing me. I just want to say, cause we do have a lot of new council members, I know everybody's so used to using all the acronyms, OCDD. They don't understand what that is if they don't have the list in front of them of knowing what the agency is. I know it's very quickly for us to say it. But they do have quite, I think four new council members on here. So they don't get confused on what we're talking about and who we're talking about, can you guys just list in full who those acronyms mean so they don't feel lost. Thank you, guys.

RASHAD BRISTO: Thank you. Yes, moving forward, especially for the remainder of this meeting, we do have new council members. And like I said, we're acclimated to many acronyms, but there are some who will probably be lost. So we want to make sure we recognize that. Do we have any more comments or questions in regards to the committee report? Anything in the chat? All right. Not hearing or seeing anything. This report requires no action and will be placed on file. If there's no objection the meeting will recess for ten minutes. Are there any comments in the chat box? Seeing and hearing none, we will recess for ten minutes. We'll be back at 10:10 a.m. We'll reconvene at 10:10 a.m.

All right, everyone. We're returning. The time is now 10:10. We're back to order. If you will, turn your cameras back on and make sure we recognize all protocols in regards to our meetings. We're going to make an adjustment because we know Melissa Bayham has another obligation, so we want to give her an opportunity to do her report. Ms. Bayham, if you're ready, we'll go ahead and accept your report for the Louisiana Rehabilitation Services.

MELISSA BAYHAM: Thank you so much. I really appreciate y'all allowing me to go ahead of schedule. So in my report you will see some statistical information about preemployment transition services and vocational rehabilitation. I am also happy to report that I will be attending the Jump Start convention next week. So I'm looking forward to meeting some new people and making some connections as we try to increase our presence in all school districts in Louisiana so that we can provide preemployment transition services to all students with disabilities. Which is obviously our ultimate goal. You'll see the statistics for vocational rehabilitation for the developmental disability population and it's also provided to you per region so you can see that as well. I'm happy to also report that we now have the REDS position that we discussed before, which is the Rehabilitation Employment Development Specialist. Which is basically an in-house job developer. We now have that position filled in every region except the Houma region. So we will be reposting that soon to hopefully get a qualified applicant for that position in Houma.

ROSLYN HYMEL: Is this in the packet, or no?

MELISSA BAYHAM: It may not be in the packet. And I apologize, I did not get this report to Amy until yesterday.

ROSLYN HYMEL: Oh, okay. Thank you.

MELISSA BAYHAM: But I believe it should be linked now on the website. So I apologize for that. We also, our Louisiana Rehabilitation Council, which is our

advisory council, will be meeting on Thursday January the 27th. If you want to attend that, that will be a Zoom meeting. We will be, I believe we're going to actually see a YouTube video later when Dr. Wilson gives his report on customized employment. But we are in the process of getting some customized employment training to our vendors through LSU Health Sciences Center. So we're excited about that. I received a proposal yesterday, so I have not looked at it yet. But they have been receiving their training through the University of South Florida. And they will be soon ready to certify vendors in customized employment which we are excited about. And also during the education employment committee report it was discussed the STEMUP project, which is a project that we have with Southern University which is through the disability innovation fund. We are about to kick that off. We will be having some informational sessions starting in the next several weeks that many of you will be invited to participate in where you will meet the individuals at LRS who will be handling the project. As well as you'll hear from Southern University, and they will discuss the specific goals and objectives of the project. Which is essentially to assist individuals obviously with disabilities, but in marginalized populations to be able to either obtain, maintain or advance employment in STEM occupations. STEM being science, technology, engineering, mathematics and medicine. That's going to be a five-year project with Southern University, and we are looking forward to that.

I also would like to mention that we do have a new regional manager in our Shreveport region. Her name is Teresa Hefner, and she replaces John Chunk Vaughn as the regional manager. I spent some time there next week and I'll be spending a lot of time in Shreveport for the foreseeable future. Right now we have four full time counselors in Shreveport and eight counselor vacancies. So that kind of tells you the shape that we're kind of in in that particular region. But we are

trying to hire. We do have a continuous job posting. It's a statewide job posting on the civil service website because we are recruiting for counselors in every region except Monroe. Right now Monroe is fully staffed with counselors. But we are looking for qualified rehabilitation counselors statewide. So I do encourage you to have anybody who's interested apply to that statewide continuous job posting. And please be patient and just let me know if you have any constituents in the Shreveport region and are having any difficulty, please feel free to contact me personally. As I'm trying to work through those. We will be having supervisors, starting in February cause there are no district supervisors in the Shreveport region. So we will be having supervisors rotating every week. And I'll be on that rotation to make sure, in addition to the regional manager, we do have other supervisors in the office to help those counselors. So we are working on getting that region back into the shape it needs to be in.

The last thing I want to mention is that we are in the process of updating our state plan. The Workforce Innovation and Opportunity Act requires us to have a unified or combined state plan. Which we have a combined state plan. Which just means it includes our required as well as some other partners in our state plan. All of the programs in the Office of Workforce Development are included as well as the adult education program in our state plan. And that will be available for public comment at some point at the beginning of next month. So you can review that, and we welcome any feedback that you have on our portion. So those are my prepared updates. I see that there are some questions, but I'll wait for the chair to recognize those individuals.

RASHAD BRISTO: Okay. Thank you, Ms. Bayham, for your report. Just quick housing keeping. I want to remind all council members not to interrupt the presenter while they're speaking. Just reserve all questions and comments until the end of the

presentation. Do we have any questions from council members? Do we have any hands raised?

HANNAH JENKINS: Logan Davis and Mitch Iddins both have their hands raised.

RASHAD BRISTO: Okay. Mr. Davis, you're recognized by the chair. You have the floor.

LOGAN DAVIS: Thank you, chair. I also typed my questions in the chat box. My first one is who is replacing Chuck?

MELISSA BAYHAM: Teresa Hefner.

LOGAN DAVIS: Can spell that last name?

MELISSA BAYHAM: It's H-E-F-N-E-R.

LOGAN DAVIS: And Teresa is T-E-R-E-S-S-A.

MELISSA BAYHAM: One S.

LOGAN DAVIS: Okay. T-E-R-E-S-A. And you will be in Shreveport for the foreseeable future? What do you mean by that?

MELISSA BAYHAM: Not physically. Well, last week I was physically there for three days. But we will be rotating supervisors to physically be in that office. And I will be on that rotation. So every six, seven weeks I'll be in Shreveport. Because, and I know I see you typed in the chat a question about, so we have no supervisors there. So I kind of briefly explained to you the organizational structure of LRS. So in a regional office you have a regional manager. You have district supervisors. You have rehabilitation counselors. And you have rehabilitation counselor associates. And the district supervisors, in addition to normal supervisory type responsibilities, they actually assist counselors with challenging cases, and they actually have to review their casework. So right now we do not have anybody in the district supervisor position in Shreveport. We had two and within a very short period of time one resigned and transferred to the Department of Health and one retired. So right now, you know, to be a district supervisor you really have to be a counselor for several years. And right now we just don't have anybody qualified for that position in that area. Which is why I asked for

volunteers, and I will have district supervisors and regional managers from other regions going to that office on a weekly basis to make sure that those counselors are supported.

LOGAN DAVIS: So does that include Dr. York also on that rotation?

MELISSA BAYHAM: So Dr. York is the assistant director, and he is not currently on the rotation.

LOGAN DAVIS: Okay.

RASHAD BRISTO: All right. Thank you, Mr. Davis. Mr. Iddins, you're recognized by the chair. You have the floor.

MITCH IDDINS: Thank you, Mr. Chair. Hi, Melissa. This is just a quick question for you. In regards to Louisiana Rehabilitation Services and their role in making sure that people with disabilities that are utilizing your services, what do you feel like is LRS's role in regards to benefits planning? Are any of those certifications like for customized employment and for hiring new REDS to help with the job development, are any of those required to have a basic knowledge of benefits planning and/or would you agree that maybe some of those certifications, and particularly the REDS who are really working with people individually to help them find the right job, to have a very in-depth understanding of benefits planning? I say that because statewide there's still a huge issue with individuals going to work that haven't had benefits planning that really don't understand what they're getting into because of maybe the benefit they're on, SSI or disability insurance, and how earning income is going to impact not only their benefits, but other services they might be receiving like subsidized housing, reduced transportation costs, food stamps and all those sorts of things. And not only that, I often see, I have people call me all the time saying I got a job, but here I've been working for a year, and I get a letter from social security saying I'm in this overpayment status and I don't understand what that is. But they want me to pay back 10,000-dollars. The

overpayment situation is still the biggest disincentive to people with disabilities in Louisiana to overcome their fears about stepping out and maybe going to work for the first time. Particularly individuals with developmental disabilities that maybe never had a job before are really wanting to work and have all these supports to maybe help them take that next step to diving into employment. But then when they do, they get this letter from social security and it's fearful. It kind of undoes everything that all these individuals have done for people to help them get to that next step. That was a mouthful, but maybe you can kind of give me your input on that and how you feel about that.

MELISSA BAYHAM: Absolutely.

RASHAD BRISTO: Real quick. Melissa, before you go any further, I saw something in the comment, will you give what the acronym for REDS stands for for clarity.

MELISSA BAYHAM: Yes. I'm sorry. I did both, but you can miss it. So REDS is Rehabilitation Employment Development Specialist. Which is basically an in-house job developer for Louisiana Rehab Services. So Mr. Iddins, absolutely, benefits planning is very important. We actually, there are, and I don't know them off the top of my head, but I know Dr. Wilson has his hand raised so he's probably going to tell us. But we do have two entities that cover the state for benefits planning. And so our counselors have brochures to give to all of our social security recipients to be able to contact those benefits planners. So they are given that information and it's been a really long time since I've been a counselor, but I can tell you that when I was a counselor, and I was a counselor for individuals with developmental disabilities, I think sometimes people are very hesitant to contact benefits planners because they feel like they're talking to social security. Even though we try to tell them that they're not talking to social security. But just to kind of throw that in there. But also, I'm happy to report that we do have an individual at state office who is actually in training

to become a CWIC. Which I think that's a Certified Work Incentive Planner. I'm sorry. I don't know the acronym off the top of my head. Basically it's a benefits planner. So she is in the process of doing that. Now as far as other individuals getting certified in that, we did look at that. But the issue is it's a very labor-intensive process. And so we just didn't have staff who had the time to dedicate to that. So counselors, I always encourage counselors not to give in-depth information because you don't want to mess with somebody's social security and their other benefits. But we always encourage our individuals to contact benefits planning, but at the end of the day we can't make them. So just to kind of let you know, sometimes there is that hesitancy for individuals to actually call them.

MITCH IDDINS: Well, I certainly understand that. But the problem with that that I see and have seen for a long time is there's just not enough certified individuals to go around. You know, statewide there are thousands of people that are considering employment on a daily basis and if you don't have that information upfront, if you don't have some basic understanding upfront more often than not, you get a job and you start working and then you start seeing all these negative effects of that. Now earning income is a good thing. We all agree to that. But when you're on SSI or disability insurance if you don't have the right information and you don't have a plan and you don't know what you're getting into when you go to work it starts having a negative impact on you. And what happens is people give up. They just say this is too complicated. I don't understand this. Nobody told me about these things before I got a job. So I've always felt like a great place for people to get information is with the state folks, LRS, because you're the guys that are working with these individuals to help them get a job. So I always felt like if the REDS could have some-- and the certification process is complicated and there's a reason for that. Because

there is so much involved when you talk about benefits planning. Because I'm talking about everything from insurance, and how that's going to impact your insurance, and how that's going to impact your subsidized housing, and that subsidy you're getting to help pay your rent. And just a multitude of things. And so what happens is people get a job without getting benefits planning and it becomes a disincentive for them to continue working because all these negative things begin to happen. And then getting help to revolve those things is even way more complicated because I'm personally experiencing that right now. And I've been doing this for 20 years. And so, I don't know. I guess I've always felt like benefits planning should be easily accessible. You shouldn't have to talk to somebody way over in Baton Rouge who you call and maybe don't get back to you for three or four months cause they're overloaded with the numbers of calls they're getting. I don't know. I've just always felt the REDS or maybe LRS could have a monthly class where individuals that are coming there and getting a case open and maybe beginning to think about employment could get some very basic understanding of what work incentives are and what benefits planning is. And then maybe give them a little bit more information so they could make an informed choice. I've always felt that should be where it starts is on a local level. You shouldn't have to go through all this red tape to get benefits planning. It should be more readily accessible for people.

MELISSA BAYHAM: I understand. And I'll definitely make sure our counselors are referring individuals to benefits planning. But like I said before, I don't like our staff giving very detailed information.

MITCH IDDINS: Yeah. And I agree with that unless you've got the training and you've got the knowledge. Absolutely. And that's what I'm saying, I felt like maybe those REDS or the folks that are working directly with people to help them find a job. Maybe in the future if there could be more emphasis on maybe

considering that, considering the REDS getting certified in benefits planning and making sure that they're giving people the right information. But yeah, you're right. I went through the training years ago through Cornell University and it's very, very in-depth. But like I said, there's a reason for that. Because there's so many issues you have to consider before going to work. I even heard somebody recently, I even heard a benefits planner, a certified benefits planner recently say oh, well, you know I don't even want to work with anybody until they're already working, until they take that next step and get a job. Well, that presents a big problem. You should have benefits planning. It's called planning for a reason. You should have benefits planning before you ever take that next step to go to work. Because once you start working and earning money over a period of time, again, you're going to create a lot of issues for yourself if you don't understand what you're getting into. And so I see it happen. I have people call me all the time. I got a job, and I don't know what to do. I got this letter saying I owe social security 20,000-dollars because I made too much money. What's up with that. But that can be prevented if you've got the information on the front end and not on the back end. So, anyway.

MELISSA BAYHAM: I understand.

RASHAD BRISTO: All right. Thank you for that, Mitch.

MITCH IDDINS: Thank you, Mr. Chair.

RASHAD BRISTO: You're welcome. I see I have about three hands up. I see Ms. Jill Hano, and I see Dr. Wilson, and I see Mr. Davis. So, Ms. Hano, we'll go in that order. You have the floor.

JILL HANO: Can you, cause I've noticed that, and I know that y'all's regions are slightly tweaked from LDH. And today I noticed that y'all had eight regions as opposed to ten. Can you kind of brief us on what region is what in comparison to the LDH regions? And then y'all have eight as opposed to our ten. I'm assuming there is a merge on regions. Can you go into

that a little bit for us?

MELISSA BAYHAM: Sure. So we use the workforce development regions. So we use the Department of Labor Regions as to opposed to the Department of Health. And the best way to figure out which region you're in, if you're looking specifically, if you go to the laworks.net website there's a tab for Louisiana Rehab Services. And it will list out our regional offices and which parish covers each office. But just briefly, region one is New Orleans, and it encompasses what LDH or Department of Health considers one and ten.

JILL HANO: Okay.

MELISSA BAYHAM: Okay. And I think that's the major difference. Region two is Baton Rouge. Region three is Houma. Four, Lafayette. Five, Lake Charles. Six, Alexandria. Seven, Shreveport. And eight, Monroe.

JILL HANO: Okay.

MELISSA BAYHAM: I think it's pretty consistent.

JILL HANO: Y'all said y'all are under the Department of Labor?

MELISSA BAYHAM: Correct. We're under the Louisiana Workforce Commission and we are under their same eight regions.

RASHAD BRISTO: Thank you, Ms. Bayham. Dr. Wilson, you're recognized by the chair. You have the floor.

PHIL WILSON: Okay. So I just wanted to circle back and not say a whole lot in regard to the issue Mitch raised. I'm sorry. I use a standing desk, but I got lazy, so I sat down. So Tory and Disability Rights Louisiana group is the other grantee for the benefits planning. I have to totally say that Melissa, you had it exactly right in terms of Mitch, if we can come up with a different name so we don't sound like state government or something, that might help. But I will tell you that probably, and I'm just spit balling this, but I would say 2/3s, 3/4s of our referrals come from rehab counselors. So, you know, I think that LRS counselors are getting the word out. Now if there's somebody who has not gone to a rehab counselor yet and

they're thinking about work, and I'm sure there's a lot of people that might fall in that category, that is kind of a gray area. How do you get to somebody that you don't know exist. So I think, and unfortunately, Social Security Administration decided they didn't want CWICs spending time doing outreach. So I think what they intended, but never quite made clear the plan, is that Social Security Administration, bad choice for the reasons that Mitch and others raised about people being nervous about social security, they already have people whose jobs solely are to do that outreach. So what I would suggest the ultimate solution might be closer to we get with REDS or, case, not case managers, but support coordinators, whomever, give them sort of 101 training. But say look, you guys, you are the front door. You've got to get these people to contact us. And I will say I'm shocked to hear that you talked-- I don't want no names or anything. If you want to talk to me offline, that would be fine. But I am shocked to hear a benefits specialist or a CWIC saying I'm not going to work with you until you actually have a job. That's totally untypical to the purpose of the grant. So I don't know where that happened.

RASHAD BRISTO: Real quick. Define CWIC.

PHIL WILSON: Well, we've been talking about that. That's all right. Community Work-- Certified Work Incentive Counselor is what CWIC stands for. And not only do these guys do like the training that Mitch alluded to, it's about six months, you work real cases, you get real feedback from Social Security Administration people and their contractor which is Virginia Commonwealth University. You have to demonstrate not just you can take a test. You actually have to be able to work these very complicated cases. So I do think, although I understand the logic of saying hey, let's get more people doing this, I think that opens up a lot of tricky doors. I would say to you that if you, anybody in this group or in the entire state says hey, I contacted my CWIC and it's been two days and I haven't heard back, I can tell you that

would not fly at our program. You have 48 hours to actually send that response back. Now there's a lot of back-and-forth information and so on. So I just want to put out that we are wide open to how to do we get the word out better. But I think it would be really kind of not the best practice to have a lot of people providing that sort of detailed information. So I think there's a solution in there, Mitch and others, that, you know, if you can get with, I don't know, Tory, who would be at Disability Rights Louisiana that's like over that grant. But I know that Sue Killam here and Donald Lejeay and Dr. Angelosi are our CWICs, and they are fabulous. And would be very open to, you know, trying to figure out how to make this more accessible to people. And I know, I just don't work directly with the CWICs at Disability Rights Louisiana, but I know they're really well trained and very professional. So I think there's a solution. It's just getting the right people at the table and be creative. That's all I wanted to say.

RASHAD BRISTO: Thank you, Dr. Wilson. Next hand I saw was Ms. Roslyn Hymel. Ms. Hymel, you have the floor. You're recognized by the chair.

ROSLYN HYMEL: Yeah. Thank you. I'm going to shoot my question a little bit differently. I'm going to get to the point. What I want to know is this. You know, I'm trying to get back over at Cafe Du Monde in that. And what I really want to do is this, I know I have to go back to LRS, but do I have to do all the paperwork again to get back to Cafe Du Monde? That's what I'm hearing.

MELISSA BAYHAM: So Roslyn, and I don't want to-- do you want to discuss your case privately?

ROSLYN HYMEL: How can I get in touch with you about that?

MELISSA BAYHAM: I'll put my email in the chat and we can schedule a call. Cause I just don't want to discuss--

ROSLYN HYMEL: I just, you know, yeah.

RASHAD BRISTO: This is a public platform, and I

don't want it to become where someone's--

ROSLYN HYMEL: Does anybody else see any other cases is what I'm trying to say?

MELISSA BAYHAM: But I will say just generally, you cut out a little bit, so if I don't answer this correctly, please tell me. But if individuals do not currently have a case with LRS, but they previously had cases with LRS, you do have to apply for services again. And depending on how long ago your case was closed determines whether or not we still have medical documentation to determine your eligibility. So that will determine how quickly the process will go. And if we'll have to get medical records. If that helps answer your question.

RASHAD BRISTO: Thank you, Ms. Bayham. Mr. Davis, I see your hand. You're recognized by the chair. You have the floor.

LOGAN DAVIS: Thank you, chair. Thank you, chair. Ms. Bayham, my first question is on the LADD Council FFY 2022 action plan. Do you have that in front of you?

MELISSA BAYHAM: I do not have that in front of me.

LOGAN DAVIS: Okay. Well, I will read it. So activity 3.2.4, advocate for employment providers to have access to financial incentives to support unserved and underserved populations, including people with the most substantial employment support needs in competitive, integrated, individualized employment. Now my question is in regard to the employment providers. So I'm guessing those are actual employers, correct?

MELISSA BAYHAM: My understanding when we talk about employment providers are what we call Community Rehabilitation Programs. Which we use the acronym CRP. Those are the vendors that we send our consumers to to help them to identify competitive integrated employment.

LOGAN DAVIS: So they are the employer vendors, correct?

MELISSA BAYHAM: Correct.

LOGAN DAVIS: Okay. Is there a vetting process that y'all do on your level, LRS's level, for those employer vendors?

MELISSA BAYHAM: Yes. We have policy and procedure in place of what qualifications a vendor has to have and there's insurance requirements and things like that. They have to do background checks, for example. That the vendors have to provide to us in a vetting process before they are actually an approved vendor for LRS.

LOGAN DAVIS: And Ms. Bayham, I have read LRS's policy handbook, and I didn't see where that was. Can you please email me a copy? And I'll provide you my email address. Would you like it right now?

RASHAD BRISTO: If you will, put it in the chat.

LOGAN DAVIS: Will do.

RASHAD BRISTO: That way it's documented if anything is misspelled it will be in place. Mr. Iddins, I see your hand. You're recognized--

LOGAN DAVIS: I wasn't done, Mr. Chair.

RASHAD BRISTO: Okay. I apologize.

LOGAN DAVIS: It's okay.

RASHAD BRISTO: Just for housekeeping purposes, we're limited to three minutes for questions because we want to be considerate because I'm looking at, we have hands raised, and this is not towards any individual, I see beaucoup questions in the chat. So I'll go ahead and permit this other question. Go ahead.

LOGAN DAVIS: Okay. In regards to medical documentation when you apply to LRS you provide the medical documents. Initially you're made to sign a medical release HIPPA. You're made to. And so you do that. And how from what source does LRS receive medical documentation?

MELISSA BAYHAM: That's going to depend on the individual's disability. So that's kind of a hard question to answer. Just to give you some examples, like if an individual's receiving services through one of the local governing entities we would do a release form to get their medical records from them if they're

receiving services from the Office of Behavioral Health. If the individual has a physical disability. Say they receive services through a neurologist, just as an example, then we would do a release for us to get their medical records from their neurologist. Because we have to have, basically, the most up to date medical records that basically whatever your present functioning is we need the medical records that reflect that. And that's simply to determine eligibility for services because federally we are required to document that an individual has a disability to receive services.

LOGAN DAVIS: Okay. Say a person has a traumatic brain injury as I have. I went to my provider's office, and I said I don't want my medical documents to be shared with LRS anymore. And they looked at my history and my cases and they were like, they never were listed as authorized. And yet I went to a meeting and y'all laid it all out for me. And I was like this does-- but I was just curious like where you go to obtain those documents? Because it's not through the hospital system.

RASHAD BRISTO: Okay. Let me interject. I'm going to request this conversation be taken offline. Please exchange email addresses.

LOGAN DAVIS: Okay.

MELISSA BAYHAM: Thank you. Mr. Davis, I have put my email in the chat.

LOGAN DAVIS: Okay. And I have two and I just messaged it to you.

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

MITCH IDDINS: Thank you, Mr. Chair. Melissa, just one last thing. Would it be possible if LRS could consider that when a REDS is at the point where they're ready to work with someone for job placement or at some point in time during the development of a person's individualized employment plan, that there could be some clause in their plan that states that they're required to meet with the benefits planner and that

they sign off on that prior to getting a job? And if that could be done, if a benefit planner meets with a client, then a copy of that benefits plan with the client's permission could go into their case record stating that they have met with a benefits planner, that they understand these rules, work incentives, and that they've got a good understanding of them prior to being placed in a job.

MELISSA BAYHAM: So Mr. Iddins, our rehabilitation counselors who are the one who meet with our clients for individualized plans for employment are required to give benefits planning information to their consumers. But I can't make a consumer go to a benefits planner. That's their choice.

MITCH IDDINS: Well, I understand it's their choice. But I'm just wondering because, you know, I'm hearing a lot of this well, making sure there's adequate benefits planning to go around and making sure that there are people that understand benefits planning. I just think it might be helpful and it might be if we could maybe consider a policy that look, if you're going to have a case with LRS and we're going to help you get a job, we want to make sure that you know what you're getting into, that you have an understanding of how working and earning income is going to impact your benefits. I think that little step right there would help resolve a lot of the problems that people get into. I don't know if LRS has the authority to do that, but maybe there's more emphasis put on it. Maybe that it's part of an individualized plan. Maybe you even get them to say do you want to do benefits planning, yes or no. I don't know. Just give them more opportunity and encourage them maybe to do that. Because I tell you, there's this huge, I'll make this brief, there's a huge disconnect between the state and the federal agencies, the folks at Social Security Administration. A lot of those folks even on the local level have no idea about benefits planning, have no idea what those incentives are. So I don't know. I just see this being a chronic

issue statewide. And until we put more emphasis on making sure people understand what they're getting into it's going to continue to be a disincentive to people going back to work. That's all I have to say. Thank you, Mr. Chair.

RASHAD BRISTO: You're welcome, Mr. Iddins. Vice Chair Banks, you're recognized by the chair. You have the floor.

MELISSA BAYHAM: Nicole, you're on mute.

NICOLE BANKS: I'm sorry. I was just talking. Thank you, vice chair, for recognizing me. But I do want to point out it is not only a Louisiana state thing. My sisters live all the way in Portland Oregon and they're going through the same thing. They wanted to work. My sister got degrees and everything else. Because they're blind, you know, they don't get the kind of jobs that they need because they need assistance in reading, you know, the stuff. And not all companies are equipped to handle all that. But Mr. Mitch is right (inaudible) long time. You're overpaying it for like 15 years. Like we do have to have somewhere. And it's not just a Louisiana thing, y'all. It is a whole United States thing. I know we can't just, you know, pinpoint these things, but collectively all these agencies really need to sit back and have a meeting together, all of those things, so that they can see the big picture of it. Because it's like we're going in circles. We're pushing for these people to have jobs, then when they get the jobs then they lose all their services. Then they have to pay money back. It goes into that cycle of a discouraging thing. Like all right, you put me up here, but then you're going to knock me off down there. So, you know, maybe that can be brought up to all of the agencies that's on this call so they can collectively see how this is a systematic problem, you know. You have to change the system or the operations on how we're doing this because it's not working out for anyone and we're spinning our wheels going through this bill, going through that bill, getting this amended, that amended

and for what. And we're all just going to end up back in the same place. So I think we probably need to just bring that into, attention, just bring it up so they can start discussing that. I mean, like within the next year or so. Not four or five years from now. Like right now. Because this is a problem with a lot of people. It's not just Louisiana. It's a whole bunch. So just if we can do that, if we can come up with something, even if we have to do an executive meeting or something like that and come up with something to where we can get these entities a meeting. Hey, guys. This is what's going on with our people. This is what's going on. We do want to help them, but this is what happens when we help them. I think that does need to happen. Whoever want to head it up or suggest. I mean, you guys or those in positions that's already talking to the big people. Hey, make the conversation so that we can really make progress and really system change things like we're here to do. And that's all. I yield the floor.

MELISSA BAYHAM: Thank you.

RASHAD BRISTO: Thank you, Vice Chair Banks. Very much the whole purpose we're here is for systems change. And I'm going to have a follow-up conversation with you on that, Vice Chair Banks. That way we can go ahead and see what components we can get in place so we're not just talking, we're able to execute something effectively. Because there's so many people who are victims of vicious cycles. I don't see any more hands raised. Do we have any more comments or questions in the chat?

HANNAH JENKINS: Yes, sir. We have a good bit. I'm not sure what is still relevant. But I guess I can go through and read them. So about 30 minutes. Would you like me to start from the beginning and work my way down?

RASHAD BRISTO: Yes. That way we don't overlook anything that anybody said. Anything that's relevant to the conversation that was in topic.

HANNAH JENKINS: Okay. And you also have Ms. Kathy

Dwyer with her hand raised.

RASHAD BRISTO: Okay. Ms. Dwyer, I'll recognize just as soon as the comments.

HANNAH JENKINS: Okay. Mr. Harlin Cowser said the program that provides benefits counseling is transferring to a new contractor and is not helpful at the moment. Mr. Charles Michel said my son was caught in the whole benefits thing. He provided all info requested for four years and for each of those four years he was determined eligible for benefits and those monthly benefits were adjusted based on the info provided. One day he got a certified letter which started quote the people of the United States of America verses insert my son's name here. It was determined he had to pay back all of the previous four years benefits even though SSA qualified him every step of the way. He is now paying back a monthly payment which will take longer than his life expectancy. When I contacted Steve Scalise's office his assistant told me that quote well, you know, Medicaid really doesn't like it when people with disabilities work unquote. I'll stop now because my response was loud and very direct.

RASHAD BRISTO: Dually noted.

HANNAH JENKINS: Mr. Iddins said I hear these stories often and that is why I'm trying to help get more access to the right information and still believe it begins on the local level with LRS. Dr. McKee says thank you for the comments on benefits planning. This reinforces the education and employment recommendation to conduct more research to develop ways to support our community. The research will support what direction we should advocate for to be put into practice. Mr. Harlin Cowser says Disability Rights Louisiana no longer has the contract to do the benefits counseling. The Lighthouse is the new contractor. Scrolling down. Dr. Wilson responded to Mr. Michel. But I believe that was just a personal response. Charles Michel says I feel compelled to say that LRS has been a lifeline to our family over the past 25 years. Helped with

employment, transportation, education. For us their system worked in the best possible way. It is SSA who has demonstrated a lack of efficiency, accuracy and compassion. Thank you to LRS. Mr. Mitch Iddins says I agree. Me as well. Dr. McKee says our education employment committee has recommended to the full council to permit more research be conducted on the subject to determine how to best proceed to support our community. Ms. Roslyn Hymel agrees. Dr. McKee says and to be considered in our FY23 planning. Ms. Kathy Dwyer says thank you. And wow, Charlie, unbelievable. And that is it. And then Ms. Kathy Dwyer has her hand raised.

RASHAD BRISTO: Thank you for those comments. Ms. Dwyer, you're recognized by the chair.

KATHY DWYER: Thank you, Mr. Chair. Just to make sure I understand the issue is that we've currently been discussing is making sure those who apply for rehabilitation services are made aware of benefits planning. Am I correct?

MELISSA BAYHAM: That's correct as I understand it. Yes, Ms. Dwyer.

KATHY DWYER: Okay. And I haven't been through the process with my daughter, but unless you already do this, wouldn't it be as simple as including a piece of paper in the packet even if it's in a bright color about benefits planning saying this is an important service to make sure you don't lose your benefits and list examples. And then have them sign they receive it, but also have contact information for benefits planning offices?

MELISSA BAYHAM: Right. So at planning, at the planning stage we do give this information to all of our individuals who are receiving services. Now I can't tell you 100 percent of the time it's done, but and I think Dr. Wilson alluded to they receive many referrals from us. Which tells me that our counselors are doing what they're supposed to do as far as giving that information. Which includes the contact information for the benefits planners when they are

doing their individualized plans for employment.

KATHY DWYER: Well, that's good to know. And maybe just another follow-up handing out the same piece of paper making sure they contacted asking and getting a yes or a no.

MELISSA BAYHAM: Sure.

RASHAD BRISTO: All right. Thank you, Ms. Dwyer. Ms. Bayham, thank you very much.

MELISSA BAYHAM: Thank you.

RASHAD BRISTO: Do we have any more comments or questions or public comment in regard to the presentation, the report by LRS, Louisiana Rehabilitation Services?

HANNAH JENKINS: There was one more comment. Ms. Nicole Flores says we do need more education for families on benefits planning/processes. And that is all.

RASHAD BRISTO: Thank you for that. And, you know, one thing to say is Ms. Bayham is a wealth of knowledge and she's been very accessible to all of us as council members. And she's opened minded. She's very easy to work with. Very easy to talk to. Very approachable. And for that we thank you, Ms. Bayham. And she's made her information available. I realize that we're not going to be able to solve all our problems in our council meetings, but if we can have those conversations, which are the tough conversations, that we can initiate to move forward. Because just like Vice Chair Banks said, it's not just a Louisiana problem, this a whole systems change problem across the country. We're on the front lines so we're going to have to be vigilant. But feel free to contact Ms. Bayham. She's opened minded and willing assist in anyway. Not just because of her position, because of her character and her personality. Ms. Bayham, thank you for your report. If we have no other question, no other public comment your report will be placed on file. And there's no other action needs to be taken. At this point we will receive the report from the Office of Aging and Adult Services.

AMY DEAVILLE: I'm not sure that we have a representative from OAAS on.

RASHAD BRISTO: Okay.

AMY DEAVILLE: The report is online though for anyone to view.

RASHAD BRISTO: Okay. So no representation from Office of Aging and Adult Services. That report is online. So that report requires no action and be placed on file for those who want to review it. Looks like it's already been uploaded into the chat. The next report is from LSU Health Science Center Human Development Center.

BAMBI POLOTZOLA: Excuse me. This is Bambi. I do have a comment on the Office of Aging report.

RASHAD BRISTO: Okay. I apologize. I didn't see the hands. Ms. Polotzola, you're recognized by the chair. And Mr. Davis, I see your hand. You're recognized after Ms. Polotzola.

BAMBI POLOTZOLA: My question was, and I don't know if someone's going to be on later from the Office of Aging, but I think it's important for us to get information in regards to the rates for our community choice waivers. And I think it's also long-term personal care. We've spoke about this before in regards to kind of discrepancies in our home and community-based services amongst systems. And as I understand it now LDH made the request to CMS to get those rates raised for OAAS and long-term personal care, but they haven't got a response. So since October 1st our OCDD waivers have had a higher rate, but not the aging. So that's just an update I think we all need to have.

RASHAD BRISTO: We thank you, Ms. Polotzola. Mr. Davis, I see your hand. You're recognized by the chair. You have the floor.

LOGAN DAVIS: Thank you, chair. I just wanted to say because Ms. Bayham gave her report early that I don't want to go into it any further in this public setting, but what's the words, she can email me directly and we can discuss this offline if that's okay

with her. Okay. And I saw her nod her head. So that's good. Okay. All right.

RASHAD BRISTO: Thank you, Mr. Davis.

LOGAN DAVIS: Yes, sir. And thank you for stopping me when you did because, yeah.

RASHAD BRISTO: We just want to recognize Robert Rules protocols. That's all. When the floor is yielded to you by the chair you have actually three minutes to articulate whatever it is you want to. Ms. Hagan, I see your hand. You have the floor.

JULIE FOSTER HAGAN: Okay. And maybe someone from the council actually texted Elizabeth Adkins who's the interim assist secretary for the Office of Aging. We had a conflict this morning and so she did say she was joining. So I'm not sure if she's on yet or not. But I was going to respond to Bambi on the rates. But I see Hannah just saying she's moved to panelist. So she can-- I'll defer to her to answer if I let her know that they had a question about the rates. Although, I guess I can get started and then let Elizabeth join since she may not have heard what the question was.

RASHAD BRISTO: Please proceed.

JULIE FOSTER HAGAN: The question was about the rates for the OAAS waiver services. And it is accurate as part of the American Rescue Plan Act that I mentioned earlier in the meeting in relation to support coordination. Another ask that we had was that we increase the rates for personal care services in the OAAS waivers to be commensurate with the OCDD waivers. So right now-- or the adult waivers. In adult waivers it equates to \$18.50 per hour for the in-home service via direct support worker. And the OAAS rates, if approved, would be that same amount. Also with the requirement of the 9-dollar per hour direct care wage floor similar to what we have in OCDD. That was a part of our American Rescue Plan Act. And we are still awaiting approval. As we mentioned this morning, we don't have a definitive date other than any day now. So that was the question. And then I yield the floor to Elizabeth if she wants to add more. I just wanted

to make sure she had the background.

ELIZABETH ATKINS: Hi, everyone. Nice to see you all today. And Julie is correct. OAAS, to ensure a quality across our waivers, we have built in for both long-term personal care services and for our community choices waiver personal assistant services. We have requested rate increases up to 18.50 an hour. We have the same increases for our support coordination services. We've also requested the funding to increase rates for adult day healthcare. So we were really looking to be very intentional and comprehensive. Is there any other specific information, I'd be happy to provide.

RASHAD BRISTO: Thank you for that, Ms. Atkins. Let me check. Do we have any questions? I don't see any hands raised. Do we have any questions or any comments from any of our council members? Not seeing any. Do we have any comments or questions in the chat?

HANNAH JENKINS: Mr. Rovira and Mr. Iddins both raised their hands.

RASHAD BRISTO: Okay. Mr. Rovira, you're recognized by the chair. You have the floor.

MATHEW ROVIRA: Yeah. Elizabeth, just to add just a little color with the elderly programs being disproportionate to the DD programs as far as rate reimbursement. I just received a text last week from a provider down in the New Orleans area that they were going to start discharging some of their long-term PCS clients because of difficulty in staffing. So anyway, I know you know that story, but I wanted to share a little bit of color with you on that in the event CMS would call you. You know, you could sort of have a sense of urgency in the phone call. So thank you for all you're doing, and I appreciate the information today.

ELIZABETH ATKINS: Sure. Absolutely. And thank you. And I do appreciate receiving notification of this occurring. We have, internally, across our community choices waiver, adult day healthcare and state plan LTPCS, we've been tracking the incident and

frequency that this is occurring. And actually this morning we were having more conversation about digging into the data to very clearly illustrate the impact to our delivery system. So while we know it's present, I really wanted to quantify it. And to provide further information. So those are activities in process at Office of Aging.

RASHAD BRISTO: Thank you, Ms. Atkins. Mr. Iddins, I see your hand raised. You're recognized by the chair. You have the floor.

MITCH IDDINS: Thank you, Mr. Chair. Ms. Atkins, good day. A quick question about the community choice waiver or LTPCS supports service. If an individual is in a nursing facility and desires to transition back into the community and calls the 800 long-term number and request a waiver, do they still have priority for those waivers, and can those waivers be expedited? And if yes, tell me what that process looks like if you have a moment.

ELIZABETH ATKINS: Absolutely. So yes. Yes. We're very committed to supporting people who they choose to live somewhere else other than a facility. So yes. The step a person could take is to call our 1-800-546-1116 number and get them on the registry. What we do at very, very regular intervals is we pull that registry, and we pull the complete listing of every nursing home resident in the state, and we bump those two lists together. And when we have a match, we immediately move to offer that person community choices waiver. All of those offers are delivered by OAAS transition coordinators verses mailing them like other offers are done. And that's done just to ensure the individual has an opportunity to ask questions and such. A person may also call our OAAS helpline and also request services. So the long-term care number OAAS helpline will align the person the same path. There's also a federally mandated section queue referral process. And that is where nursing facilities have responsibility to notify Office of Aging anytime a resident informs them they're interested in knowing

more about how to move to the community. And so we do actively receive section queue referrals from nursing homes, and we do, we pull everyone from those three streams all follow the same process where we align them with waiver services and a transition coordinator delivers and begins that process. And yes, I can put the number in the chat to our helpline.

MITCH IDDINS: Okay. I'm glad you explained that process. And I've been working with a client in a nursing facility in North Louisiana that we went through that process, I met with this individual and the social worker there at the nursing facility and requested that she assist him to apply for the community choice waiver. And this has been about a month or so ago. And the last time he called me was to say he was told he was just being added to a list. Is there any way that you could assist me in finding out if someone's-- let me ask you this. Let me back up. If he's called and requested it and he's talked to someone, will a case manager or who is going to come out to the facility and assess his needs and determine if he qualifies for the waiver? Is that the next step?

ELIZABETH ATKINS: Yes. Yes. So our OAAS regional offices, so our OAAS medical certification specialist will review to see if a person's eligible. That review with Covid, it may be a desk review. If they're unable to gather the information via desk review, then they will go out on site and do a face-to-face assessment. And once we can validate if it appears level of care is met, then we do a transition coordinator will meet with that person. A person's not strictly added to a list. I've added my email in the chat. Please feel free to email me about this specific case and I'll look at where that person is in the process.

MITCH IDDINS: Thank you very much. That would be very helpful. Thank you.

ELIZABETH ATKINS: Absolutely. Thank you.

RASHAD BRISTO: Thank you, Mr. Iddins. Ms. Polotzola, I see your hand. You're recognized. You have the floor.

BAMBI POLOTZOLA: I just wanted to reiterate what Mitch described that that situation, in my experience, is not just something that's a one off. Like that is what the experience is for people across the state. And I know you said that the nursing facilities are federally mandated if someone ask to move back into the community. I think the issue is our people don't know that they even have an option, so they don't ask. And so often I hear people saying that, you know, that they would like to be able to come home. They have the natural supports to compliment the home and community-based supports, but they don't know. And our nursing facilities, unfortunately, my experience is they don't have any reason or motivation to necessarily share that. And unfortunately, we have a culture in our country and, I guess, in the world where we just put people when they age into facilities. And so this has been a real problem. I know that the staff at Office of Aging really try to help out. But I think it's just kind of a culture and a systems issue that really affects me.

ELIZABETH ATKINS: It is. And we see the same as well. With the agreement that LDH has with the US Department of Justice one of the strategies we've undertaken by that agreement, but it really has a much bigger purpose is, we, beginning in April of 2021, we've committed to visiting every single member that's identified as being part of the target population just to talk with them and educate them on their options, their rights and how they can exercise their options. Thus far we've seen about 1,400 people. We've worked with our technical assistance advisers that we have access to via the agreement. And we worked with a couple other stakeholders to refine the materials we give the person. And we have countless examples of people who when we talk about and educate people on what their rights are, they're sometimes surprised. So that's an activity we're engaged in now. We have about 490 people left to see. And then once we see those 490, we'll have seen everyone on the master list that

we've identified as a member of that target population. That's just a fraction of the overall nursing home population. I will share this discussion with our money follows the person staff. Those are also an OAAS team of transition coordinators. That team, since 2009, transitioned a little over 3,000 people. They're also in nursing facilities. So I'll reiterate with both of our transition coordination efforts this discussion and how important it is to be sure when they are in facilities to talk with as many people as possible. Just so people know what their options are. If you want to live in a nursing home that's okay. You don't have to go. But if you are interested in doing something else with your life and your living situation, then we want that person to know. So thank you. I appreciate that.

RASHAD BRISTO: Okay. Thank you for that. I don't see any hands raised. Do we have any comments in the chat?

AMY DEAVILLE: Two people have their hands raised, chair. Mitch Iddins and Matthew Rovira.

RASHAD BRISTO: Okay. I apologize. They're on a different screen for mine. Mr. Iddins, your recognized by the chair. You have the floor.

MITCH IDDINS: Thank you, Mr. Chair. Bambi, thank you for that. Cause you're absolutely right. You guys, I've been doing this job for 18 years. I've been going into nursing homes when people call here and ask for information about transition services for 18 years. I've never been in a nursing home where I was welcomed. I've never been in a nursing home where I was not threatened by the staff there or made to feel like I was a threatening entity coming in there. This particular situation when I went out to see this guy in a nursing home in North Louisiana, the social worker absolutely did not want to sit down and talk with us. She made me feel absolutely uncomfortable. She wanted to know what I was doing there, why I was there. And when I explained to her what my role was and why I was there because this person called me, and it was my job

to respond to him wanting more information about community choices. I asked her if she knew about how to apply for a community choice waiver. She said what is that. I said you know how to call this number. And have you ever called this number to apply for long-term care services for anybody. No. I don't even know what that is. That's a social worker working in a nursing facility. And this has been my experience for the past 18 years. I've even been accused of coming into nursing homes and soliciting. Coming into the nursing homes and asking people hey, I'm here to get you out. I mean, you wouldn't believe what I've been up against just when I go into a nursing facility in North Louisiana just to provide information. It's ridiculous.

So Bambi, you are absolutely right. There is such a disconnect between the state offices, and the nursing facilities, and these social workers that have a bias of the facility. You know, their bias is to the employer that employs them. Not to the residents who live there. And when you talk about community options verses long-term care facilities, it's only an option when it's readily accessible, when people truly know about it and when you don't have to jump through a bunch of red tape to actually move from the facility into the community. Which still exist. There's still all these extreme barriers to make that transition. Oh, well, we have coordinators. And we have people that, you know, are trained to do that. My experience on a daily basis is bologna. There is still so much red tape and so many things you have to do to get somebody out of the nursing home, back into the community. It's a tremendous amount of work. But it all starts with educating those folks in the nursing facilities to be able to inform these residents what their options really truly are. And that it's a viable option that you can actually access it when you're ready to move out. You know, you wouldn't believe the things that I encounter going into these nursing facilities. So thank you for saying that, Bambi, cause

you're absolutely right. That's all I have to say.
Thank you.

RASHAD BRISTO: Thank you, Mr. Iddins. Mr. Rovira, you have the floor.

MATHEW ROVIRA: Thank you, Mr. Chair. Elizabeth, I know Julie shared with us some exemptions that she's seeking approval for such as the 16-hour rule and family members being able to work in the home. Is that a similar, are you also seeking out similar exemptions?

ELIZABETH ATKINS: We are at Office of Aging seeking out exemptions. They do differ. Community choices waiver doesn't have a 24-hour care option and we don't see things like 16 hours worked in a given shift. So there are some differences stemming from differences of the program. But I can get, I wasn't prepared for that, but I will pull right now what we are looking at doing.

MATHEW ROVIRA: You can share it in the chat, or you can share it with Brenton. And he can send that later. So thank you so much.

ELIZABETH ATKINS: Thank you. Uh-huh.

RASHAD BRISTO: Thank you, Mr. Rovira. Do we have any more hands raised? Do we have any comments in the chat?

HANNAH JENKINS: Yes. One comment in the chat from Ms. Corhonda Corley. She says that's right. Additionally, those facilities make the individual sign over their property, moneys, et cetera when they move into those facilities leaving them nothing to go back to.

RASHAD BRISTO: That is true. The barriers you have to stay, then you have private investors. And that's where the big wall really comes up. Do we have any other comments or any questions?

HANNAH JENKINS: Ms. Corhonda Corley has her hand raised.

RASHAD BRISTO: Ms. Corley, you're recognized by the chair. You have the floor.

CORHONDA CORLEY: Thank you, Mr. Chair. First and foremost, I would like to thank Mr. Iddins and Ms.

Polotzola for actually commenting. Because their comments were very much on point. And yes, the staff does not know. Many of the staff don't know. They have no clue. They don't even know what the ombudsman is supposed to do. They don't know anything about being inspected. They know nothing about state coming in to do the inspections, et cetera. It is so problematic that a lot of the staff in those facilities don't know anything. And the care that the actual people in there receive is deplorable. The families, before a family submit, have their individual put in that facility, they have to sign over everything, including if they're receiving social security. And when they receive social security amount from the actual facility it's only 40, 42-dollars a month that that person is supposed to live off of and buy their supplies. It's a problem. It's a problem. And if we want them to be able to come back to the home then that mean OCDD, you're going to have a lot of work to do. Because these nursing home facilities you just need to look at what happened with Hurricane Ida. That was proof of what they do. That's nothing that just started happening. That is something that has been going on for years. Years and years and years. And our state has just been turning a blind eye to it. They are human beings too. And a lot of them are people in our community, but their family are told different things about what's going on to them. If you don't believe me, read the newspaper where they showed how a lot of people with disabilities, their families were told that their family was safe and in safe conditions. And it wasn't until after their family member died that they learned everything that their family member was subjected to. So we definitely have to do something as the DD Council instead of just siting quiet by the wayside. Thank you.

RASHAD BRISTO: Thank you, Ms. Corley. And again, one of those gray lines when we have that gray area where sometimes the nursing home was more interested in making sure they appease investors as opposed to the

public service they're actually supposed to be providing. It's definitely something that needs to be addressed. Ms. Egle, I see your hand. You're recognized by the chair. You have the floor.

JILL EGLE: Can somebody explain to me what Ms. Corley was saying? I'm just trying to understand the big picture.

RASHAD BRISTO: The big picture what Ms. Corley was saying, Ms. Corley, if you don't mind me giving a summation of it, one of the things is that, the thing that's been echoed the most is that based upon some exposure that's come on the news and especially in light of Hurricane Ida that the best interest of those who are in those nursing homes have not received the care they should be receiving. Unfortunately, it's something that's been going on. It's just something that got exposed in the highlight of the hurricane with all the different transitions. So the question is how can we as a DD Council, with our network of community partners and agencies, have an intervention to make sure that this is not something that continues to go on as opposed to make sure that we're just not standing on the sidelines looking at these injustices happen to these families and to those who are recipients of the care. That's supposed to be quality care that's not being received. I hope I answered your question.

JILL EGLE: Oh, so they would need supported care. Like from Hurricane Ida from August of last year. They would need round the support and care from the state.

RASHAD BRISTO: Somewhat. But more so the quality care. When you put someone in a nursing home you're entrusting where you can go to sleep at night knowing my loved one's going to be taken care of.

JILL EGLE: I got you.

RASHAD BRISTO: It's showing that's not. It's been exposed daily around the country that that's not really what's happening. So that's what we're addressing about that now.

JILL EGLE: Okay.

RASHAD BRISTO: Ms. Hymel, I see your hand. You're

recognized by the chair. You have the floor. I saw Ms. Hymel. Looks like she went off my screen.

ROSLYN HYMEL: I'm sorry.

RASHAD BRISTO: You're recognized by the chair.

ROSLYN HYMEL: Thank you, Mr. Chairman. For me for what I'm understanding about nursing homes in that, so this is what I want to know as well from the nursing homes, and this is what I want to know is it also the group home--

RASHAD BRISTO: On my end Ms. Hymel just froze.

ROSLYN HYMEL: No matter which way you are.

RASHAD BRISTO: Ms. Hymel, you are freezing. I wasn't quite able to make out what your question was.

ROSLYN HYMEL: What I wanted to know was in that was is it two different things between the home and group home settings? You know, I understand the nursing homes in that because my uncle was in that kind of setting. And also is it the same as a group home between like Ida because when we got back everything had changed? So is it the same between the two or is it different in the two? Can somebody explain that.

RASHAD BRISTO: They're different, to answer your question. I'm not sure if I'm one that can answer. Unless someone else would like to interject. The nursing homes usually going to provide care for individuals who have either some kind of health or ailing situation. Sometimes residential group homes may just be providing, may be just providing residency for individuals who may not have as severe issues as the others. Anyone else?

ROSLYN HYMEL: Yeah. I wasn't really sure if it was the same as a group home or not.

RASHAD BRISTO: I tell you what we'll do, we'll table this one and we'll take it offline. And I'll find out if we can get a good answer for you. Cause I don't want to throw anything hypothetical at you. That way we have an effective answer for you. Because I don't think we have anyone that's able to answer that that's part of this council meeting on today.

ROSLYN HYMEL: Oh, okay. And I don't know, but

hey, I want to, you know, find out.

RASHAD BRISTO: Definitely a good question. Did we have any other comments or questions in the chat?

HANNAH JENKINS: No, sir.

RASHAD BRISTO: Okay. Not seeing or hearing any. For this report it will require no action. So it will be placed on file. The next item of business is a report from LSU Health Science Center Human Development Center. So the chair recognizes Dr. Phil Wilson. You have the floor for your report.

PHIL WILSON: Thank you, Rashad. Okay. So I'm going to just give you a few highlights and then hopefully Amy or somebody at the council will be able to show you a little video of some work we've been doing lately. So you have the report. I'm not going to read it to you in its entirety, but I did want to highlight a couple areas that we have been making some progress in this past quarter. So in the area of early childhood one of our big goals for the center is to enhance our collaboration. So some partners that we've been working with over the last quarter include New Orleans Early Education Network. And here's some alphabet soup for you. We call that NOEEN. We've been working the Tulane University Tykes Program which is basically a childcare center. And we've also been working with 22 individual childcare centers in and around greater New Orleans and sometimes a little further out.

We also are working with New Orleans Ready Start Network. Which one of the four main goals for a grant that New Orleans Ready Start Network has is on a grant that's called a transformation grant is to improve the quality of special education services in early childhood settings for kids from six weeks to five years of age. So Maria Blanco and her team of about ten or so staff have been doing a lot of work in that area along with Katie Rambos, another shaker and mover in that area. In the area of school age programs Julie Riley is our director of that area. And we've been able to add six additional school districts to what we

now call LASARD. But hang on. I'm going to tell you what that means. But we're in the process of kind of re-brand or rename this program and I'll explain in just a second why. So LASARD now is Louisiana Autism Spectrum and Related Disabilities. So basically significant disabilities, severe disabilities, cognitive and intellectual and physical disabilities is what LASARD kind of addresses head-on. Okay.

So we now have 31 school districts across the state. And actually for the first time in about almost 15 years, I guess it's been, going on the 16th year that we've been implementing this project. We have more programs in the central and northern part of the state than we do in the south part of the state. Which I know for a lot of people who watch us carefully is like it's hard for us to do projects at a distance because it's a long ways between New Orleans and Shreveport and Monroe or whatever. So anyhow, that program has really made an impact in our state. And I know the DD Council has helped us on several occasions to kind of get that word to the Department of Education that this is an important project. We do appreciate that.

Couple other things. The Louisiana Death Blind Project is a grant that Dr. Michael Norman is the director of. He works very closely with Children's Hospital, ambulatory care services at children's. And one of the projects he works on, believe it or not, is cancer survivor late affects clinic. So a lot of the children who had pediatric cancer acquired disabilities. That if they were born with those disabilities, you would say oh, this child has a developmental delay or a developmental disability. But in the case of a lot of pediatric cancer survivors, they acquire those sometimes as a result of a treatment that saved their life. So some go blind or have intellectual challenges or other types of challenges. So Michael's doing some really important work in collaboration with children's hospital.

I would be remised to say on the tech side we have

St. Tammany schools and St. Bernard schools are in the process of coming onboard with what we currently are doing with Jefferson Parish schools. Which is we call PAYcheck. Which stands for paid apprenticeship for youth program. We take students who are 18 to 22 and we have them go to community college and teach them to ride the bus, use their smart phones, to be safe and get around and do those kind of things. And we support them as they acquire the knowledge and skills to actually be pretty much independent on the campus. And then once that's in place we place them in a paid apprenticeship where they all make a minimum of approximately 10-dollars an hour for the time that they are working. So that when they leave high school, they leave high school with, you know, experience and work and something on their resume. So we're real proud of that program.

And I think the other kind of things we're working with Ochsner Hospital and LRS to start a Project Search program at main campus in Jefferson Parish down on River Road at the hospital there. And I won't attempt to tell you what Project Search is right now, but let's just say it's somewhat similar, but different from the PAYcheck program if that helps. But I know for time reasons I can't go into much detail there. The other big thing in the area of collaboration right now would be, I guess that covers most. Well, also doing something with Belle Chasse YMCA and Plaquemines Parish school board and St. Bernard school Board trying to create an inclusive recreational program that includes individuals who are blind. And primarily children and young adults. I could go on, but I'm thinking that in the interest of time, I think we're a little behind, that you have this report. We try to put it in plain English. Give us feedback if it sounds like it's too technical or whatever and we'll keep revising how we present this. And here's what I'll do. I'll ask Amy or Hannah, if somebody could try to show that little video. It's less than five minutes, I believe. And that will be my report and I will stay on for any

questions after the video.

RASHAD BRISTO: Thank you, Dr. Wilson. Do we have the video available for play?

PHIL WILSON: You should just be able to click the link and it should play.

AMY DEAVILLE: Yeah. Just give me a second to share it. Can people hear it? Are people able to hear the video?

PHIL WILSON: I could hear it.

SPEAKER: I could hear it before it stopped.

AMY DEAVILLE: All right. Good.

PHIL WILSON: Could you go back to the beginning? Thank you.

>> >>: Meet Sam. She works at That's Amore Pizzeria. Hi. My name is Samantha. And my job at That's Amore is busser and greeter at the door. Sam succeeds at her job because it was created just for her based on her unique strengths. This process is called customized employment. A process used to create jobs for persons who have traditionally been left out of the workforce. Customized employment identifies a job seeker's interest, talents and conditions for employment then uses that information to develop a job for them that's a perfect match. It's a great opportunity because the position is customized specifically for them so it definitely highlights their strengths, and they don't have to focus on the things that they cannot do. But it's more so about what they can do. The first step of customized employment is a discovery stage where the job specialist meets with the job seeker, their family and community members to create a vocational profile of the job seeker. I'm a hard worker. I like to help people and I like to get the job done. From the vocational profile a customized plan is developed that identifies the pathway forward to employment. The customized plan bridges a gap from discovery to job placement. Me and my mom used to come here all the time and I would watch people and how they would help and make sure everything is good. So that's what I like to do. It was customized initially just by

this location. This location was very familiar to Sam and so she already felt comfortable in this location. And then we worked with the manager to customize a position. During job development and negotiation the customized employment specialist turns their attention to employers to identify unmet business needs that can be fulfilled by the job seeker and then negotiates a unique role for that job seeker. In the beginning Sam said she wasn't very comfortable speaking with other people. Basically we just had her making drinks. But as it went on, she kind of got stronger in that aspect and now she's able to greet people at the door, sit people and get their drinks and everything else. Once the job placement is secured the customized employment specialist works with the new employee to provide job training and any additional needed accommodations and supports. Sam is very great at following directions. I noticed that. So she had no issue with being trained on how to exactly take the orders and how to exactly fix the drinks. So her following directions, that was one of her strengths that she was able to bring to the position. So the restaurant does definitely run a lot more efficiently now that Sam is here. She makes sure that everybody's doing what they need to be doing. She's on top of her game and she makes sure that everything always falls in place. Dining in, you can sit wherever. I think lot of times employers don't understand how they let certain little, small details when it comes to their businesses and those small details can be filled by customized positions. I like my job cause I get to help people. Comprehensive customized employment trainings are coming to Louisiana in spring 2022. HDC partnered with LRS to receive train the trainer trainings from USF, University of South Florida. These new comprehensive trainings include online learning modules, weekly facilitated meetings, technical assistance, training and mentoring, study cases and more. Customized employment works. Visit www.HDC.LSUHSC.edu for updates.

RASHAD BRISTO: Excellent video. Do we have any

council members with any questions on the report as presented by Dr. Wilson? I see, Dr. McKee, your hand is raised. You're recognized by the chair. You have the floor.

HYACINTH MCKEE: Thank you, Mr. Chair. I really don't have a question. I just wanted to say how refreshing it was to see this video and how there's a sense of meaningfulness and purpose on both ends, right. So you have the individual who's working, who feels like she's a part of something. That she's a part of this whole process. But then you have the employer saying how valuable she is to their team and how she's bringing more to them. And this is the kind of work that we need to continue to get behind and highlight and let the public know what we're doing. This is exceptional. I was so engaged, so impressed. It was visually appealing. Everyone that could see it could see what's happening in the grant work. So I want to just applaud all of the work that you all have been doing and just continue to support it. Thank you.

PHIL WILSON: Thank you very much.

RASHAD BRISTO: Totally agree.

PHIL WILSON: I'll pass that down to the people that do all the real work around here. Thank you, Dr. McKee.

RASHAD BRISTO: Thank you. Do we have any other questions or comments from council members before we move to the chat? Okay. I see Ms. Hymel. You have the floor. You're recognized by the chair.

ROSLYN HYMEL: It's more like I'm glad to really see for what I, you know, improvement. And where people can see going forward. And I'm hoping that will continue of going forward with. And I'm glad there was a video. I'm glad that there will be a lot more people could reach. He is reaching out more. And I'm hoping we can have that more and more in the future.

RASHAD BRISTO: Agreed. A reminder we're all members of this council. Ms. Hano, I see your hand. You're recognized by the chair. Then Ms. Jordan.

JILL HANO: Okay. I don't typically share personal

stories in public forum, but this video kind of triggered me. Because like other than craving pizza now, I work as a host/bus boy and get the drinks, whatever they need me. And I wanted to say that I was with LRS until the Covid, until the pandemic. Then my mom this year, last year my mom was like okay, you need just a job. So she went through, so we kind of went around town just her and I to local restaurants cause I have physical issues, just in case y'all were wondering. But I was like I can be a hostess. So we went from restaurant to restaurant and this video inspired me to share because again, I did it by myself. And then so I went on a Friday to I guess I would call it a mom-and-pop shop to drop off my resume and she interviewed me like right on the spot. Then we talked for like ten minutes. She was like she commented on the fact that I was looking for-- this isn't two minutes, sorry. Looking for work when people were doing just the opposite. So she interviewed me on the spot. Hired me on the spot. And then it was 1:00 and she said all right, dinner's at five. You free. And, of course, I was. But I just what the purpose is customized, the fact that she wanted, the staff that I saw on the video with people that the lady was doing with the customized employment are relatively similar to the steps my boss takes upon herself to do because we always like have our this isn't working, let's do this talks. So I just wanted to say that it's hard. People suck. But there are good people out there.

RASHAD BRISTO: And thank you for that, Ms. Hano

JILL HANO: Sorry. I'm done.

RASHAD BRISTO: You're absolutely right. There are good people out there. And that's a good example of that, of that video. Ms. Jordan, I see your hand. You're recognized by the chair.

JILL HANO: Sorry.

RASHAD BRISTO: No problem. It's hard not to get emotional.

MEREDITH JORDAN: Thank you, chairman. Yeah. And thanks, Dr. Wilson. I appreciate that update. Very

thorough. Love the work you're doing alongside our early childhood networks. Which is work very much needed. Love the PAYcheck program as well. My only question in all of that was is do you have the ability to expand and partner with more of our districts? I saw you're working with some really great districts who are very forward thinking in inclusive education. Just wondering if you have the ability to expand to some additional districts?

PHIL WILSON: Yes and no. So without taking a lot of the council's time here I think maybe we can talk offline. I did put my email in the chat box. So hopefully that will work. Anyhow, Meredith, when we first envisioned the PAYcheck project, we went to Jefferson Parish, and we asked them if they would identify some of their staff who are involved in secondary transition for students with disabilities. And they said sure. And so we went through the process of teaching those folks the same things we teach that Sue Killam and Laura Stazio do in their supported employment training. Eventually, like in the spring, summer at the latest we hope to be doing similar type trainings with customized employment. So, you know, we don't see our job as meeting the service needs of the state. If you look at our little website, you know, logo kind of thing, our mission is to build capacity and to inspire change. Sometimes you have to do something and demonstrate it in order to either build the capacity or to inspire the change. What we desperately need is for the Department of Ed and/or individual school districts to reconceptualize what teachers do and where they do it. We didn't want to be, we don't want to be a supported employment agency. In fact, in order to do the work we're doing that's sort of we had to become a vendor because there wasn't another way to get staff and pay our staff to do this work. So what would work and what we are dying to do is find a school district that's willing to convert three or four teacher positions or one or two teacher positions and one or two paraprofessional positions.

We could train them. We can support them. We can be on site from time to time. Unfortunately, most of our staff live in greater New Orleans. So if we go to Shreveport, it's a long commute, you know. So we need to have those boots on the ground. And we really want to hand these programs over. Establish them. Be available to problem solve in the future. So if you can help us figure out a district that wants to do something like that, boy, we're right on board. And please, let's talk offline, Meredith.

MEREDITH JORDAN: Yes. Absolutely. Absolutely. And I was thinking the same thing, Dr. Wilson. You said it's a model. We can help highlight that as a model so other school systems know this is how it can be done. Because sometimes I think our school systems, they want to do what's best, but, you know, help showing them or modeling for them the how. Wonderful. Thank you.

RASHAD BRISTO: Thank you. I see Mr. Davis. Your hand is raised. You're recognized. You have the floor.

LOGAN DAVIS: Thank you, chair. I don't know who was speaking. Was it Mr. Matthew Rovira?

RASHAD BRISTO: The previous presenter?

LOGAN DAVIS: Yes. Talking about education and all that stuff.

RASHAD BRISTO: That was Dr. Phil Wilson. He was the previous presenter.

LOGAN DAVIS: I'm so sorry, Dr. Phil Wilson. My bad. My question is, I hear this term a lot during this meeting, but I've always been, you know, I didn't want to sound like that guy who didn't know what he was-- I didn't want to be the one to ask the question. But, you know, you mentioned a paraprofessional, para teacher. What exactly is that?

PHIL WILSON: Sure.

LOGAN DAVIS: Is that like a substitute teacher?

PHIL WILSON: Not quite. Logan, first off, I've got to compliment you on your bow tie. It's really awesome. But to answer your question, a

paraprofessional in any sort of field whether it's a paralegal who works for a lawyer or, you know, an OT assistant or an educator paraprofessional, it's just somebody who doesn't have quite as much training and experience as somebody who maybe has gone through years and years of graduate school and worked longer in that profession. And so might have a deeper understanding. I hope that that-- that's sort of the best I can do in a short sentence or two. Does that work? Does that make you understand? What if you said an assistant teacher, or an assistant OT, or an assistant, would that work?

LOGAN DAVIS: That makes a lot more sense.

PHIL WILSON: Okay. Perfect.

LOGAN DAVIS: And are you located in the Shreveport area?

PHIL WILSON: No. We're in Downtown New Orleans.

LOGAN DAVIS: Oh, I just saw the anagram or whatever and I thought that was in Shreveport. But my bad. Thank you for answering my question. And I yield my time back to you, chair.

ROSLYN HYMEL: What part of--

RASHAD BRISTO: Thank you for that. Give me one minute, Ms. Hymel. We have about five minutes till we're ready to break for lunch. So I see your hand, Ms. Hano. I'm going to make you the last one. Do we have any questions or any comments in the chat?

HANNAH JENKINS: Nothing in the chat.

RASHAD BRISTO: Ms. Hymel, you can go ahead with your question. Then we'll go ahead with Ms. Hano.

ROSLYN HYMEL: Yeah. Ask Phillip what part of New Orleans is he in?

PHIL WILSON: So Jill, I'm pretty sure you're from New Orleans, right?

ROSLYN HYMEL: Yeah.

PHIL WILSON: So do you know where the new University Hospital is and the VA?

ROSLYN HYMEL: Which hospital?

PHIL WILSON: University Hospital.

ROSLYN HYMEL: I think. Because right now I'm in

Jefferson right now. That's why.

PHIL WILSON: So basically if you think about Canal Boulevard and Tulane Avenue and Claiborne, the street that runs underneath I10 as it runs through downtown, we're in that general area.

ROSLYN HYMEL: Oh, okay. That's, you know, the background I wanted to ask.

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

JILL HANO: Okay. Dr. Wilson, I don't want to beat a dead horse. And if you already said this or are done, just let me know. But do you have anything more from HDC in your quarterly report to add to our benefits training discussion from earlier? Cause if I remember correctly, that is one of your initiatives.

PHIL WILSON: That's right, Jill. So let me just say with great embarrassment that Tory was very discreet to remind me that actually the benefits planning or the CWIC kind of grant project moved to Lighthouse from Disability Rights. Now HDC, we have had a benefits planning grant since 2000. So with one exception where we worked with LRS to maintain it for a year and then it got reauthorized the following year. But let me just say the one thing that might be relevant that is in the report, and people who may be used to you would have been receiving services from Disability Rights Louisiana and now you're going to be receiving, that people in these communities will be receiving services from Lighthouse in the future. Like Mitch had said earlier, it's a very intensive training. It takes almost six months to complete because you do training, then you get an actual case to work. Then that has to be graded. If you didn't get everything right, you have to correct everything. It's iterative, ongoing, repeating cycle until a person can do everything that Social Security Administration and Virginia Commonwealth University expects you to be able to do. Okay. So my understanding is that we have been working some of the cases on a volunteer basis when we've cleared our own to try to keep that backlog to

whatever minimum we can. But I would expect if you live in one of the parishes or counties, because we actually serve part of Texas as well, they have counties over there. Believe it or not. If you are in one of those counties or parishes that Lighthouse is going to serve, you should be getting services from that agency fairly soon. So we can only serve people in designated parishes or counties that the Social Security Administration has said okay, you serve everybody in this area. Hope that helps. And you can see a sentence or two in the report about Lighthouse becoming the new provider.

RASHAD BRISTO: Thank you, Dr. Wilson.

JILL HANO: Thank you.

ROSLYN HYMEL: Excuse me, Mr. Chairman.

RASHAD BRISTO: Yes, ma'am.

ROSLYN HYMEL: It's 12:00. How are we going to do lunch?

RASHAD BRISTO: I'm about to do a final assessment to see if we have any more questions from any council members, check the chat, and then we will move to recess for lunch for an hour. And with that being said, do we have any more questions or comments in regard to the report that's been presented by Dr. Wilson?

HANNAH JENKINS: I don't see anything or any comments in the chat.

RASHAD BRISTO: Okay. Comments in the chat. Okay. This report will require no action so it will be placed on file. If there's no objection, this meeting will recess until 1:00 for lunch. We will reconvene at 1:00. So we move to recess for lunch.

All right. The time is now 1:00 p.m. on January 20th. Call the meeting back to order. For those of you that have returned, please turn your camera on and that way we can go ahead and begin our meeting. Also, I'm going to ask that you govern yourselves accordingly for whoever's presenting the report giving the courtesy of allowing them to continue presenting their report before we're able to ask any kind of questions. Just

some housekeeping. Make sure that you limit your questions to-- you have three minutes when you're recognized by the chair whether you're a council member or visiting, in the chat box, guests. So at this point, we'll have the next item up for business is a report from the Office for Citizens with Developmental Disabilities. Ms. Hagan, we yield the floor to you.

JULIE FOSTER HAGAN: All right. Thanks, everybody. I mentioned this a little bit earlier, you guys should have all received ahead of time the report, our report. We did some work on the report. Some of the data that we were presenting that seemed to be a little bit confusing and maybe not really accurately addressing information that was relevant. So we did some tweaks. We also identified that some of the language that we were using, might have used, some people call it Baton Rouge language. Language that might be difficult to understand. So we made several tweaks to our report and I'm presenting it to you today. I'm happy to take any concerns or suggestions for changes today or as people review it. I've always shared my email, julie.hagan@la.gov. And if there's information that we don't have in here that would be relevant for people or if there's information that's confusing, I do ask that you let us know and we'll be happy-- or something that we might have taken out that people would like to see stay in there. We're happy to put it back. But again, our goal was to try to be a little more ease of understanding and have data that was a little more relevant to our current, to the current times. So I'll take a little bit more time than usual. I won't read the report, but I'll kind of go through to let you know what we changed.

So in that first page that you see right now that data table changed. We used to provide information that said this is the number of people in waiver this quarter, this is the number of people who've gotten in waiver, you know, over the last year. And it didn't seem that it was useful information. So what we've provided for you here so that people can take a look at

the number of waiver participants that we've had. Again, this table shows you over a three-year period. I'll explain a couple things in the table. So when we say unduplicated paid recipients, the unduplicated part means that there's no one who shows up twice. So in each month, for example, July fiscal year 20. That's the first cell. There were 12,477 individuals who received services. And sometimes we have to do things to make sure we're not counting people twice. So by unduplicated we just mean that's the total number and it's not repeated. By paid recipients that means that we looked at the number of people who are in our home and community-based waivers who actually had a paid service in that year. So you'll see the numbers fluctuate somewhat. That's as people go in and out of the waivers. And that's also, there may be people who don't necessarily get a paid service within that particular month. And so, again, you can now see those total numbers of people by month for the last well, two and a half years. And then we gave you an annual number of individuals that receive a paid service so that you can take a look at that over time. And we have had a little bit of a dip in the total number since fiscal year 20. But it's not a substantial number of individuals.

And then the next table that you'll see we wanted to share with you guys. So one of the things that the DD Council had asked of us in the past was that we share the number of people receiving waivers because we used to look at, when we were still in a first come first serve, we looked at the number of waiver slots that we had available. And when we shifted to the tiered waiver process where we no longer make offers on a first come first serve, but we make offers on a priority. And so everybody's who's a priority three or four, which means that you have urgent or emergent needs they get a waiver offer. We no longer count slots. But what we do count is our budget. And the budget that we have allocated to us for those services. And one of the things the council has asked in the past

is that if we get close to having to reinstitute a waiting list or reinstitute a process where we're not able to make offers to people who have that SUN score of three or four, or have urgent or emergent needs that we make sure we let the council know so that they would be able to go back and request additional funding. And so there is a request to keep a million dollars in the new opportunities waiver fund so that if we ever did get close to having to reinstitute a waiting list, we have that funding there. And the commissioner has agreed and has put in writing, Jay Dardenne, to the council that he will maintain that million dollars.

So what we now watch very closely, instead of looking at the total number of people in waiver, so slots, we now really use our waiver budget to watch and make sure that we're not getting close. And we are not at a point right now where we are near the point of having to reinstitute where we're not able to make waiver offers to people who are a level three or a level four. And as a reminder, if we ever did have to do that then we would make offers first to people that are level four. And then go by the person's protected date on the registry. And that's something that we worked closely with on the council in the past.

So you can see here by state fiscal year, and this is a total. And when we say total, that means it includes the state general fund amount that we put up in addition to the federal match that we get for our home and community-based waivers. So the total amount, and I think I saw a question, this is for all four of our OCDD home and community-based waivers. So it's combined for children's choice, supports waiver, residential options waiver and new opportunities waiver. So the total participants you saw and then the total payments are for all four waivers. So in fiscal year 20, and I think we mentioned this before, but our fiscal year runs July 1. So when you see state fiscal year 20 that would be July 1 of 2019 through June 30th of 2020. On our OCDD waivers we spent 557 million-dollars. In state fiscal year 21 we spent a

little less than that. And then right now we're halfway through state fiscal year 22 which runs, you know, started July 1 of 2021 and it will go through June 30th of 2022. So you can see there, again, we thought that was relevant information for folks to have to be able to look at what spending is over time as well as where we are.

The next table that we show to you guys is something that often, we often get asked questions about. And that is the average cost per recipient in our waiver. This is also combined for all four of our waivers. And what that tells you is that on average what the cost is to be able to support a person in our home and community-based waiver. And you can see across the state fiscal years that that average is remaining fairly consistent at about 44,000. Again, what that means is that if you take all of our participants that receive waiver services, and we look at the cost to be able to support those folks on average we're spending about 44,000. And again, the rest changes. But around 44,000, a little more than 44,000-dollars a year per waiver participant. And that is the average cost. So and I'll go through the report and then if you have questions. I'm having to dial in from my phone cause I'm having a little bit of trouble. So it's a little harder for me to navigate the chat. If it's okay with you, chairman, I'll go through the entire report and then take questions. It may be easier that way. Is that okay?

RASHAD BRISTO: Yes. Please proceed.

JULIE FOSTER HAGAN: So the next piece that we changed was the screening for urgency of need. In the past reports, this was probably the data piece that was most confusing. Because when we started reporting out on our screening of urgency of need to the DD Council it was when we were in the process of trying to screen everyone on our registry. And now that we've gone through the process of screening everyone that we were able to locate and that was willing to participate, because some did not choose to participate in the

screening of urgency of need, we felt like it may be more relevant to present the data in a little bit of a different way. And so the information that you see now, there's some lead into that. Again, I won't read. But the data that we're sharing with you now is the total number of screenings that we did in the quarter. And we did present this information before, it's just presented a little bit differently. So what this now tells you is that from October 1st, 2021, to December 31st of 2021 we completed 607 screenings. Which is our screening for urgency of need. Which is what is the pathway to have a person be offered a waiver opportunity. And then of those 607 screenings that we did we've given you guys a breakdown of the number of people who fell into the category of having emergent, unmet needs. The number who fell into the category of urgent. And then again, critical, planning or no unmet needs.

The other piece that we thought was important for you guys to know is we now, as I said, we've screened everyone that we were able to locate and that was willing to participate. So now we complete screenings really for two different reasons. One reason is that we have people every day who newly become eligible for our OCDD services. And they go through the eligibility process and get a statement of approval. Well, as soon as someone gets a statement of approval through the local governing entity, we ask if they want to be considered to be on the registry. Which means that either right now or at some point in the future, I might need home and community-based waiver services. If they say yes, then we have what we call an initial SUN screening. So that's people who are newly found to be eligible. And then we also have people, if you remember when we shifted from first come first serve to prioritization, we said if you don't have urgent or emergent unmet needs right now, but you might have needs in the future, you just need to ask, and we will come in and do a rescreening. And if you're found to have urgent or emergent unmet needs, then we'll be able

to make a waiver offer. We also now are routinely, so if you had a screening five years ago and you had a zero or a one, a one means I don't have unmet needs right now, but I may five to ten years down the road. So we are now starting to do rescreenings just on a regular basis. So we have initials, and we have rescreenings. We thought it would be important as well for folks to know how many that we did in the quarter that were initial screenings verses the rescreenings. So you'll see that information there. We're also often asked about Early Steps. And so we are sharing information about the number, the total number of children that are currently receiving services through our Early Steps Program. So that's a new data piece that we've added as well.

The other, the remaining parts of the report are just our summaries. And there's summaries of information that we have included in the past. Again, we just tried to organize it, so it read a little bit differently. And in terms of our waiver, the largest thing that we've been focused on is the post public health emergency exceptions. And thanks to any of you guys who participated in our workgroups. We are in the process of submitting, we've submitted some of our waiver amendments to CMS. The only one outstanding is our new opportunities waiver. And that's only because we're not able to submit it to them until we get approval on our five-year renewal. But we've posted all those for public comment. We did talk a little more at length in the community inclusion. So I'm happy to take questions. But we are still, we are moving forward to make sure that we have changes in our waiver that will be able to be in place before that public health emergency ends so that families, individuals and families will know how to plan. In the last quarter that was our biggest focus. In the report we've also included for you guys sort of a breakdown of what happened in those focus groups and what those changes ultimately were.

I've also provided, we had some questions about

the American Rescue Plan Act earlier. My report includes a summary of the things that we've asked for in OCDD. And then as a reminder we do not have CMS approval on those. As soon as we do have CMS approval, we'll be moving forward with requesting those activities that are approved. We were really excited that the federal government decided to continue the my place or money follows the person grant. So we now, we had previously had information in the report. That had slowed down because there was uncertainty about the funding. But we are full force back working on what we call my place Louisiana and activities for money follows the person. Which is really exciting because some of the conversations you guys were having earlier about people needing additional help to leave group homes or, you know, facilities whether that be nursing homes or group homes and to keep people, you know, out of those facilities. Our my place money follows the person grant is really a critical component to helping us with that. So we are excited that that's kind of up and running a little more.

And then, you know, again, the behavioral and medical interventions in the community. That was something that's been in the report in the past as well. But we tweaked that a little bit to try to make sure that the information we were giving was information that was relevant. And really what we tried to do is use questions that we've received or feedback we've received to try to make the report be a little more relevant. So I'll stop there and I'm happy to take any questions. I know this is kind of a revamp so there may be more questions. Thank you for letting me take a little extra time to go through that.

RASHAD BRISTO: Thank you, Ms. Hagan. I see Dr. Phil Wilson's hand. You're recognized by the chair.

PHIL WILSON: Thank you, Rashad. Thank you for that report too, Julie. Question I have has to do with, so we're requesting approval for the support waiver which includes apparently day hab and prevocational. Further down to the settings rule and

how that still was out there. So if we get approval to do day hab, for example, or prevocational training which would not meet the intent of the setting rule when it was initially put out there by CMS, what's going to happen? Is that going to get rolled back? Are we going to have like a whole process of undoing what the setting rule was supposed to undue?

JULIE FOSTER HAGAN: Sure. So we've worked closely with CMS. And the settings rule didn't necessarily say that you could not ever have prevocational, or you could not ever have day habilitation. It said that if you have those services available that you have to have certain requirements regarding community engagement and interaction with people who do not have disabilities. So we have made changes in the supports waiver to some of our service definitions. We are also trying to do-- we've done some. Anything we can do that doesn't have a significant fiscal impact tied to it. One of the problems we had is that across our three waivers, the supports waiver, the residential options waiver and the new opportunities waiver. So our three adult waivers. We had different services, different service definitions and different rates tied to those services. So what we're hoping to do with the waiver amendments is the first step in at least aligning our services and our service definitions. In day hab, you know, we now have opportunities for virtual day habilitation, which we didn't have before. We have opportunities for what we call small group activities that have to be based in the community. We have, in terms of prevocational, we're putting a time limit to the amount of time that a person is available to engage in prevocational. And we have to be able to show that it's progressing towards true employment. We do also now have based on several federal regulations, and I don't know the date. I think it's March, I think it's coming up soon, a requirement that there's no longer the ability to pay a subminimum wage. That you have to have minimum wage if you're working, be that group employment or whatever. So what we were really moving away from absolutely

facility based was that more sheltered workshop. That's, you know, HCBS settings rule doesn't allow that. We are also looking, we know that some of our providers who've had the most difficulty coming into compliance with the settings rule are those that are in our small more rural regions. You know, if you're in New Orleans or Baton Rouge, a lot of times even if it's transportation you have more options there. If it's doing things in the community, you have more options. Some folks that are in our smaller areas, you know. And did love that video, Phil. And, you know, Jill sharing her story. You know, when people are trying to go out and even if you're trying to find a mom and pop to get a job, if you're in a small rural area and there's not a lot of jobs there. Sometimes that's even harder to do and harder to support people that might be trying to come into compliance. So we are looking at where we might be able to use some incentives if we have the ability to get some additional funding to help those providers. And one of the target areas we're really kind of looking at are those rural areas. Those are our providers that seem to be having the most trouble coming into this compliance of the settings rule.

So that was a very long answer to say that we're trying to set up the services and the definitions to align with things that will work with the settings rule so that we don't have to undue. We've been working a lot with the SELN, the state, I always say it wrong, State Employment Learning Network, I think. And so a lot of this we're running through them because they have worked with a lot of states to make sure that we're in compliance with the settings rule. So we're working closely in any of the definitions we've come up with. Our next step is if we can get any funding to support it. We know that there needs to be some rate changes to incentivizing especially individualized employment over group employment. But because we have that fiscal note we have to be able to get the funding to then better align the rates and make sure we're

incentivizing the correct things. But that's on our radar to work on.

RASHAD BRISTO: All right. Thank you, Ms. Hagan. I see several hands. Mr. Iddins, you're recognized by the chair. You have the floor.

MITCH IDDINS: Thank you, Mr. Chair. Julie, just a quick question. Do all the local entities that are getting new referrals for DD services, are they using the same eligibility assessment or criteria or application for referrals? And if someone is deemed eligible for DD services or deemed ineligible for DD services, is the person that is applying for services given something say in writing, a letter determining that they're eligible or ineligible? And if they're deemed ineligible for services, does it specifically say why? And I ask that because I've often referred people to DD services in my local entity and then a few weeks later I hear back from that person and I'll say well, how did your intake with DD services go. And they'll say something like oh, they just told me I wasn't eligible. When based on my assessment of that person and based on my working with that person, my opinion would be, seems to me you would certainly be eligible. They just say well, they just told me I wasn't eligible. I guess if I were going to advocate for that person, if there was some sort of appeals process for that. If I was going to advocate for them, it would be helpful for me if they had something in writing that says yes, you're eligible or ineligible and this is why.

JULIE FOSTER HAGAN: Sure. So we established, there is a policy that's established through my Office for Citizens with Developmental Disabilities regarding eligibility. There is a-- we utilize the federal definition for our definition, and it is in state law. And we have a process whereby all of the local governing entities are supposed to follow the same process in regard to intake and eligibility. There is absolutely a letter that they are supposed to receive in the mail that identifies if they have been deemed

eligible for services or ineligible for services. That letter is also supposed to indicate that they have an appeals process if they are found ineligible. And the process which they would follow to be able to appeal the decision if found ineligible. So all of that should be happening. If it's not, then, you know, as an advocate you can reach out to me. Because they absolutely should be getting that in writing. And once they apply then they should get a decision letter. I can tell you that through the DD Council we had had some concerns brought up, I think it was last year, about eligibility. And we've been doing a lot of internal work looking at our policies, looking at where we might need to have training, looking at how we make sure that we make things as consistent as possible. And within the next six months we do have some additional training planned for the local governing entities specifically and some discussions with them so that we can kind of revisit some areas that might sometimes cause concern or confusion so that we can make sure that we are all on the same page. That we are looking at, you know, cases that may be a little more difficult all the same way. So we do have that. We have been looking at our policy. We are planning to make some policy changes and we are planning to do training within the next six months on that.

MITCH IDDINS: Okay. Thank you, ma'am.

JULIE FOSTER HAGAN: Uh-huh.

RASHAD BRISTO: All right. Next hand I see is Ms. Jill Hano. You're recognized by the chair. You have the floor.

JILL HANO: I saw you have a list in this report which is very nice now that I know what I'm looking for. Great. You have it broken down into the exceptions that will continue and then the exceptions that will not. So is this like a different one of what you broke down in the handout we receive during committee?

JULIE FOSTER HAGAN: Yeah. It's the same information. It's just broken down a little bit

differently in the report. I did a separate handout, but it's the same information.

JILL HANO: Okay. So I can cross reference. Okay. Thank you.

JULIE FOSTER HAGAN: You're welcome.

RASHAD BRISTO: Okay. Next hand I see is Ms. Hymel. Ms. Hymel, you're recognized by the chair. You have the floor.

ROSLYN HYMEL: Yes. Thank you. For the waiver slots, does that also mean if you have like a disability to get it or does that mean, you know, is it for both ways? For the ones who are not have no disability, or some don't have a disability, and some do have like a disability in that. So how does that really, how can I say how does that really work if, you know, both ways or just one? What I'm also reading too is with leadership with the staff beginnings. So how does that really work as well?

JULIE FOSTER HAGAN: I'm not sure that I totally understand the question. The information that I'm sharing though in order to receive a home and community-based waiver in one of our four OCDD home and community-based waivers you first have to be deemed eligible for OCDD services. And what that means is that you go through an assessment process, and you have to be able to show that you have a qualifying diagnosis. And then that you have a need for support because you have what is known as functional limitations in certain life areas. So you have some limitations that mean that you need some help in different areas. And so the assessment looks at the, you know, medical reports people have and then it also goes through a need. If you're found to be eligible for our OCDD services, then consideration can be given for whether or not you have needs that can be met through a home and community-based waiver. There are other home and community-based waivers and there are other services for people who don't have developmental disabilities but are Medicaid eligible or meet a different level of care. And earlier, you know, there

was a question I think you had, Roslyn, about group homes verses nursing facilities. So there's an intermediate care facility level of care. Which means that you have a need. You go through an assessment with your doctor. And you meet the eligibility for our OCDD services. But you also have a need for those supports. That active treatment they call it. So you have a need to have some assistance at helping be as independent as possible. When you go into a nursing home there's a whole different eligibility that you meet and it's a nursing home level of care. That means you have a nursing need or something along those lines. And I can't speak very eloquently to that, but there's a different level of care you need for an ICF, an intermediate care facility or a group home than what you need for nursing home. But there are services that are in Medicaid and in what we call state plan for people that are Medicaid eligible and may or may not have disabilities. So the services that are in my report and what I'm talking about now are those that are for people who've been determined eligible for services through the Office for Citizens with Developmental Disabilities. Does that answer your question?

ROSLYN HYMEL: Oh, okay. That's what I wanted to know. There's my answer right there.

JULIE FOSTER HAGAN: Okay.

RASHAD BRISTO: Thank you. I see Dr. McKee. Your hand is up. You're recognized by the chair.

HYACINTH MCKEE: Thank you, Mr. Chair. Julie, I was wondering where we can find those seven core white papers that were provided to the MCOs on the adaptations to mental health treatment approaches for individuals with IDD? Where can we locate that information? My first question. And the second question was I know some time back the council had expressed some concerns about whether or not there are some interagency collaboration and discussion between OBH and OCDD to help assist those individuals who are falling through the cracks. Because there is like a

tossing of, you know, you don't qualify for me, but let me send you over here, you know. I believe a parent wrote an extensive letter about that and people falling through the cracks. I'm seeing in your report that there is some collaboration and education and training, but what does that entail and how do we reach those individuals to let them know about these services that you're talking about, the ones that are falling through cracks?

JULIE FOSTER HAGAN: And so for the white paper, I will have to find out about that. That particular, where we can get access to that and let Brenton know that. I don't know that off the top of my head. In terms of those folks that are falling through the gap, so a lot of times folks think that within OCDD that we have some forms of treatment for people with behavioral health. But we don't really, in our waivers, in one of our waivers we do have a service for psychological services, but it's very limited. The majority, you know, the services, the direct, if someone needs direct treatment or needs services for mental health or behavioral health issues in Louisiana now all of those go through managed care organizations. And so it's not necessarily a different service for people. What we have been doing is meeting, there's currently five managed care organizations here in Louisiana. Each of those have a behavioral health medical director. And OCDD and our Office of Behavioral Health have started having meetings every two to three months with those medical directors so that we can look at the gaps and start to identify what we may need to change in our system to be able to help meet the needs or the gaps there. Because the services themselves are with the MCOs now. They're not necessarily services within our system. And sometimes people think of Pinecrest, which is our state operated intermediate care facility, more as a treatment center. And not that people can't get treatment there, but it really is just a residential placement. If someone needs behavioral health treatment, those treatment options are really through

the managed care organizations. But a lot of providers tell us that if someone does have a cognitive or developmental disability, they're not always clear on how to adjust regular treatment to make sure that they're meeting their needs. So what we're doing is collaborating with them on ways that they may be able to adjust their system. And we do that through our OCDD resource center. Which we have psychologists, social workers, occupational, physical and speech therapists and dieticians that are available for technical assistance and consultation. And what we typically try to do is if folks have a treating person in the community, we pair our resource center clinician with the treating person in the community and we can then help to tweak whatever that traditional is. And there's not a conflict there because our clinicians don't do billing or anything like that. That's something that we offer through the state. I can send you guys the link, if you don't have it, to anyone can request services, anyone with an OCDD statement of approval can request services through our resource center for that. And so I'll be happy to share that with you.

HYACINTH MCKEE: Thank you, Julie.

RASHAD BRISTO: All right. Thank you, Ms. Hagan. Do we have any other comments? I don't see any hands raised. What about in the public chat? Do we have any comments or questions?

BRENTON ANDRUS: There are no comments in the chat.

RASHAD BRISTO: All right. Thank you, Mr. Andrus. Since we have no comments or questions, this report will be placed on file. So next item of business is the report of Office of Public Health. The chair recognizes Ms. Barovechio for the report.

PATTI BAROVECHIO: Thank you. Good afternoon. I am Patti Barovechio with the Bureau of Family Health and I'm here to share some highlights from our report. It's a rather lengthy report so if you have any questions about something I don't particularly call out, feel free to ask me. We are the title five

administrator for the State of Louisiana, and we administer the children and youth with special healthcare needs program. And through this program we provide direct services in some areas of the state where specialists provide, to improve specialists provider access. These services are limited to individuals that meet financial and medical criteria. But they are available if anybody has a need of that. When Phil was talking, I had put in several links thinking that I was going to be ready to go and they entered before I was ready. But I'm happy to share any of those links for more information on those specialty service programs provided by the Bureau of Family Health in the public health units. The family resource center is also an initiative of the Bureau of Family Health. Previously this was on the campus of Children's Hospital. With the onset of Covid we determined to expand this service as a statewide virtual resource center. And over the past year and a half we have been working to improve the centers access to anyone in the state. So I put in the chat the email address for the family resource center. Families, providers, community partners can request services such as resource and referral assistance through this resource center. Monday through Friday 8 to 4 p.m. You will be answered by a live staff person. And they will absolutely help you to link to any resource needed. These are also related to social related health needs. Not just health resources. And so right now we are working to expand this. And like I said, improve our services. We have just implemented a new data system for the family resource center to support our statewide efforts. And then a new phone bank. So if you do try to call them by phone and aren't able to contact, please email them and let them know. Because we are, we have a newly implemented system.

So the Bureau of Family Health also has a project and collaboration with the Families Helping Families. This is a statewide initiative. We work very closely with Families Helping Families on initiatives to

support children and youth with special healthcare needs and their families and the providers who serve them across the state. Upcoming in the spring you'll see provider education workshops that each of the Families Helping Families will be sponsoring. And most of the topics that I've seen so far will focus on supporting families during that early childhood development period.

One thing of note that we do have a children special health services transportation assistance program. It is set up to support families when Medicaid transportation is not efficacious for their need. So they have to go through Medicaid first. And if Medicaid cannot serve them or for whatever reason because of family health needs or just any barrier to using that service, they can utilize this transportation assistance program. Often times it's a stipend and allowance for possible gas and travel expenditures. So I encourage if you know anyone that is experiencing a transportation need, please reach out to the family resource center or to a Families Helping Families and they can give them more information on the transportation assistance program.

We do administer the Louisiana birth defects monitoring network. The biggest update on that is the family resource center is collaborating with them to do outreach to families who have been identified through surveillance to ensure that they are linked with the resources and supports to meet their child's need. So this is a pilot. You'll hear more about it next quarter. We're launching it at the end of this month. We've been preparing for it for about six months. So we're really excited about that. The Louisiana Commission for the Deaf is also under the OPH title five program. And they are doing a lot of great work in the state. They're working to enhance and establish interpreting standards across the state. They have several legislative initiatives ongoing right now. And those will be reflected in the report as well. You'll see there's information in our report about we also

administer the maternal infant early childhood home visiting program. We have the genetics program. Lead prevention. If you know a family that has a child with an elevated blood lead level, they can access resources and care coordination support through the lead program. And we also do school-based health programs as well as the developmental screening initiative. So there's a lot of things under the umbrella of the Bureau of Family Health. You can find more information at partnersforfamilyhealth.org or on the LDH website Bureau of Family Health information pages. And if there's any questions for me, I'll be happy to try to field them.

RASHAD BRISTO: Thank you, Ms. Barovechio. Do we have any questions from any council members on the report? Okay. Ms. Hano, I see your hand. You're recognized by the chair. You have the floor.

PATTI BAROVECHIO: Jill, you might need to unmute.

JILL HANO: My text message came back to me. But you briefly answered. And I can't listen to Patti. I'm going to call you and we'll talk about this later.

PATTI BAROVECHIO: Okay.

JILL HANO: All right.

RASHAD BRISTO: All right. Do we have any other comments?

JILL HANO: I'll be brief, Ms. Patti. So are y'all's initiatives going to be found in the LDH business plan?

PATTI BAROVECHIO: Yes. Thank you for bringing that up. So for those of you who are familiar, Louisiana Department of Health released a business plan this year and there are several of our initiatives that are mentioned there. We'll be launching some collaborative initiatives around the state to improve developmental screening. And you can see a little bit about that work in the report. Included in that we will be working with our key stakeholders to improve also para natal depression screening in pediatric practices. So we will have more to report on that. But yes, we are in several places in the LDH-- and

Louisiana Department of Health is the acronym. Sorry for the alphabet soup. But yes, the Bureau of Family Health has several initiatives that will be tracked by the state on different initiatives. The ones that touch us the closest are the ones on developmental screening. And we especially work around that zero to three population so that we can, the idea behind it and the evidence behind it is that the earlier we identify children at risk for developmental delay that we can provide access to early interventional therapies and remediate or re-ameliorate that delay. Thank you, Jill, for that question.

RASHAD BRISTO: Do we have any other questions from the council?

BRENTON ANDRUS: Sorry. No council members have their hands raised. But Charlie Michel in the public has his hand raised.

RASHAD BRISTO: Mr. Michel. You're recognized by the chair. You have the floor.

CHARLIE MICHEL: Thank you. And I wanted to just piggyback on what Patti had said because their work with early intervention has profound ripple effects for those children because there is so much research that supports that early intervention will not only help their immediate medical needs, but assist them in the educational development all along the way. In many times it will prevent the needs for special education intervention services. But in other cases it helps to level the playing field because their needs have been identified much earlier. And the disadvantages they have, especially if they're children of poverty, will be far outweighed. The disability will be mitigated much earlier because of the early intervention on the part of Patti's organization. But I just wanted to say that. We are not operating in a silo. We are all partners.

RASHAD BRISTO: All right. Do we have any other comments from the public or council members in regards to Ms. Barovechio's report?

BRENTON ANDRUS: It does not appear so.

RASHAD BRISTO: All right. We thank you very much. This report requires no action. It will be placed on file. Next item up for business is a report from Governor's Office of Disability Affairs. Ms. Polotzola.

BAMBI POLOTZOLA: Hey, everyone. How are you? Are y'all going to be able to pull up my report? Thank you. And Brenton, can you move my people over. I appreciate that. First off, just wanted to let you guys know, as most of you are aware, we have our annual Gold Awards. Which didn't happen in 2020 because of Covid, but we did have it in December. We had a limited in-person capacity. But none the less, the Gold Awards took place. And we have a list of people on the screen who were the recipients of the awards. We also have a link to the recording of the Gold Awards which will be included in our upcoming newsletter. So if you're interested in that. You have that and just wanted to congratulate all of our winners of those awards. Also, just wanted to share with you a little bit about-- and our inclusive art contest as well. I apologize. We have our winners listed here for our inclusive art contest. Actually, I see here the link is already in the report, so I didn't think we had that. But the link is in our report.

Also, just wanted to give you guys an update on our councils. So as some of you may be aware effective January 1st the Statewide Independent Living Council is no longer in the Governor's Office of Disability Affairs. And that is a big success for our office. They have transitioned out and that was a goal for several years. And Jamar Ennis is now the executive director of the SILC in its capacity now. The Governor's Advisory Council on Disability Affairs continues to meet quarterly. Our next meeting will be on April 16th which will be on a Wednesday 1:00. It will be two days into our regular session. We are hoping if the Covid numbers go down that we will have an in-person option like we had for our December meeting. And also a virtual option so people can

participate. The week prior to that, which is the week of March 7th through the 10th, I will have our committee meetings at 3:00 in the afternoon on those days. And we'll have that information in our newsletter. Hope you all are receiving our newsletter.

You all know Lillian DeJean who is our senior coordinator in GODA. She is serving on the voting systems commission. She actually attended a meeting yesterday and is doing really good work in advocating for accessibility in voting. And has also met with the secretary of state and getting some good responses in looking at some features that will make remote ballot return accessible for people with disabilities something that is an option in our state. So really hoping that will come to fruition.

Also, just wanted to share that I was appointed to the community responder task force. It's not in the report. But it's a task force that was put in place by Senator Katrina Jackson. And the focus of that task force is to look at all of our responders whenever we're interacting with the public and should that all be-- basically, should we call police for everything. Or how can we engage behavioral health in the process and being able to triage situations and respond more appropriately in identifying when it's really a public threat or whether we have, you know, medical or behavioral health issue and respond more appropriately. So I think based on our discussions this council has discussed many times about the importance of that. And so hopefully we can get some good work and recommendations from that commission.

Also, as I said, Jamar Ennis has transitioned out and just have a little bit of update about Jamar. Also, scroll up, Melanie Washington who was our former executive director. She's still in the governor's office, but she's now the director for the children's cabinet. So it's great to have those two individuals still working on really important community-based initiatives and so still partnering with them in a lot of ways. And right now I asked for Brenton to allow

Alacia Viane and Jordan Bristo for their video to be shown. I don't know if maybe you need to not share the document anymore so we can see them. Are they on the screen?

JORDAN BRISTO: I'm here, Bambi.

BAMBI POLOTZOLA: Okay. There's Jordan.

ALACIA VIANE: Good afternoon. I'm here, Bambi.

BAMBI POLOTZOLA: Alacia Viane is our new director for the SICC, the State Interagency Coordinating Council for Early Steps. Alacia has, I think, a quarter of a century experience in education and a lot of personal experience around disabilities. So she's hit the ground running. And then Jordan Bristo is our new assistant director for the Governor's Office of Disability Affairs. And Jordan has a background in healthcare and so we think she'll bring a lot of experience in that area in understanding the system and hopefully helping us. Good for y'all to see their faces if you see them around. Saying my internet is unstable, but can you still hear me?

RASHAD BRISTO: Yes.

BAMBI POLOTZOLA: Can you guys hear me?

RASHAD BRISTO: Yes.

SPEAKER: Yes.

BAMBI POLOTZOLA: So that's it.

RASHAD BRISTO: Okay. Thank you for that report, Ms. Polotzola. And congratulations and welcome Ms. Bristo and Ms. Viane. I hope I pronounced your last name right.

SPEAKER: Thank you.

RASHAD BRISTO: Do we have any questions or any comments from council members?

BRENTON ANDRUS: I do not see any hands raised or any comments in the chat.

RASHAD BRISTO: Okay. Thank you, Mr. Andrus. So we will accept the report from the Governor's Office on Disability Affairs. It requires no action so it will be placed on file. The next item up for business is the report from Department of Education. We yield the floor to Ms. Meredith Jordan. Ms. Jordan, you have the

floor.

MEREDITH JORDAN: Thank you, chairman. And good afternoon. It's a pleasure to be here and to have been here today listening, getting feedback and kind of getting updates from valuable members across our community. So I will start, I know at our last meeting, you know, we had some discussion around teacher shortages that are plaguing our nation. And, of course, we're experiencing those in our state. And so I wanted to bring an update on our educator recruitment and retention recovery work that's being led by both the board of regents and our educator development team at the Department of Education. So during last legislative session the recruitment, recovery and retention task force was created. And they have released a preliminary report. Some of their recommendations, both for our educator preparation providers in our universities and community colleges across our state, as well as recommendations for educator development and support at the department. And so you will see some of these here creating a campaign elevating the teacher profession. Planning for incentive-based compensation. Developing support for aspiring and current principals. Which that work has started at the department. Studying the impact of praxis exams on educator preparation program enrollment. And so the praxis exam is that certification exam that educators take in order to receive their teaching certification. And then providing research and guidance for teacher wellbeing. And supporting their social, emotional needs as well. Especially with the pandemic, hurricane impacts across our state we need to take care of our educators and support them as well to help retain them in the profession. And so we did, in our committee meeting, talk about this and they requested, several folks requested if there was a public, a report posted. I didn't find one posted, but I did send chairman and Executive Director Deaville a copy of that report that I received so that they can email that. Feel free to

email that out to this council. So it's not posted anywhere, but happy to share that report once I figured out that it did exist and obtained a copy of it. So you'll see that it says in there that it was a preliminary report. It's also going to the legislature this month. And the next steps for this task force they will continue to meet bimonthly doing research, answering questions, providing additional recommendations. And I believe they will submit another report in December of 2020.

And so I also wanted to just talk with you all about some of the current opportunities for school systems that we have started this year in response to this. But, of course, y'all know I'm always looking for feedback, ideas, input. So we are, we did launch a para educator to teacher opportunity this year at no cost to our school systems for para educators to receive a bachelor's degree. And hopefully grow them, train them, support them and grow our own educators. Cause we do know that we have some wonderful paraprofessionals in our school system who may be interested in becoming certified educators. We also have given our school systems the opportunity to apply for optional funding for some add-on certifications so just to provide further training for teachers. And so a couple of those would be to get their mild moderate add-on certification. They have the opportunity to request funding for teachers who are teaching our English language learners to add on their English language certification. And so school systems can request up to 4,000-dollars to add on that mild moderate certification. And they can request up to 2,000-dollars to add on an English learner certification. So those are a couple of opportunities that we do have in place for our school systems this year that they're beginning to take advantage of. And we'll do another cohort of the para educator to teachers for the fall of 2022 session as well. So we'll continue that opportunity.

And so I'll move to the next piece within my

report which is on our state performance plan. Which I am seeking your input on here today. So I'll talk to you a little bit about the survey links there. But IDEA requires that each state have in place a state performance plan. And that plan describes and evaluates our efforts to implement the requirements of IDEA. And so it includes targets for 17 indicators I have linked here so you can take a look at all of those indicators. But some of them are compliance indicators. For example, getting evaluations done on time. Some are performance indicators which are around our students with disabilities performance on assessments. Our graduation rate for students with disabilities. So some of those more measurable outcomes for students with disabilities. So it includes both compliance and performance related indicators. And so we are given a rating annually around, and that's called an annual performance review, from OSEP. And it is geared towards that date and that performance is rated based on this state performance plan. And these indicators that we have linked here. And so we are now in a target setting process. So every six years we submit a state performance plan that includes targets around those 17 indicators. So we're working internally at the department engaging really so that my colleagues at the department have a department wide ownership of the performance of our students with disabilities. And as well we want to get stakeholder input around these targets. So we ask that you visit our landing page. When you click on that landing page link it gives you kind of an overview of what this process is. And then you'll see on the right-hand side there's a link to an overview which tells you our performance right now towards those 17 indicators. As well as you'll see a link to a survey. Which is where you can go on and submit via this fillable PDF survey and you can give input and tell us what you think those targets should look like. How can we make them rigorous, yet meaningful. And so this is really important for me. I value this group, this council and

our community members input here. So we're definitely looking forward to hearing input on those targets and on that data.

So I'll skip down to the next piece on our report. I definitely wanted to mention our upcoming Jump Start convention next week which is currently sold out. But it will provide school systems with important information related to career and technical education, graduation pathways, successful transition after high school. And I will be leading and put together a panel that includes several folks here today. I know Melissa mentioned it earlier as well with LRS. So we'll have various panelists there. And that session, our session will really be geared towards helping school systems and educators to create inclusive career and technical education programs that include all our students, especially, y'all know our focus is around students with disabilities. So I'm very excited about that panel. It will be, we did have some questions during committee if any of the Jump Start sessions will be virtual. I did ask and there will be a set of sessions that will be accessible virtual. And I do believe we're repeating our session twice. So we're doing a morning and we're doing an afternoon to try to get as many participants there to come in and hear what we have to say and see some model school systems that are doing this. And I did hear that one of ours will be accessible virtually. So, chairman, I can send that information to you as soon as I receive how that will be accessed. And I can send that to you so that you can share that with whomever may be interested in that.

And then last, I wanted to touch on, again, another huge annual event for educators across our state, which is our teacher leader summit. Which will happen in May. It is planned to be in-person, but, of course, if any governor's orders change, we would switch to virtual as well. But it is an annual professional development conference that brings together all of our Louisiana educators, administrators, superintendents from birth to grade 12

content experts. We are accepting right now presenter applications until February the 4th. And we're excited about our students with disabilities track and sessions that will be available for educators who are impacting our students with disabilities. And again, that's going to take place the week of May 31st in New Orleans. So that concludes my report, chairman. I'll be happy to field any questions or receive any input and feedback, as always.

RASHAD BRISTO: Thank you, Ms. Jordan. I see we have one hand raised, Council Member Logan Davis. You're recognized by the chair. You have the floor.

LOGAN DAVIS: Oh, I forgot. I had my hand up for a while. My bad.

RASHAD BRISTO: Not a problem. Do we have any other comments or questions about the report that was presented?

BRENTON ANDRUS: Just one question in the chat from Charlie Michel. Says will the para to teacher initiative include the earning of a college degree, LEA training or both?

MEREDITH JORDAN: Yeah. So they will actually earn, we partnered with Reach University, and they will actually earn a bachelor's degree.

RASHAD BRISTO: Good to know. Mr. Andrus, do we have any other comments or questions in the chat?

BRENTON ANDRUS: Looks like Mr. Davis' hand was raised. And you also have Ms. Corhonda Corley's hand raised.

RASHAD BRISTO: Okay. Mr. Davis.

LOGAN DAVIS: Okay. I remembered it. Can you touch on the praxis exams because there are like multiple exams through that, correct? And you have to do a certain amount of prerequisites. Are y'all like streamlining it? Can you touch base on that one?

MEREDITH JORDAN: Yeah. Absolutely. Our certification department takes lead on teacher certification applications. We have a lot of guidance on our website around what course work is needed whether you're looking to become a high school mild to

moderate teacher, middle school mild moderate or severe profound add-on. And so there are lots of options there. And it kind of explains to you which courses that you need to take as well as which praxis exams that you need to address in order to receive and have a successful application to add on that certification. Whether it's a mild moderate for our English learner add-on. There's specific course requirements that you must have as well as a set of exams. Very good question. And hard long answer, but it kind of depends. It depends on which add-on that you're looking at in terms of what those requirements look like.

LOGAN DAVIS: Okay. So when you're saying mild to moderate, moderate to mild or severe, that's about the individuals disability, correct?

MEREDITH JORDAN: Correct. So there would be specific course requirements around specific courses on students with disabilities to be able to, in fact, receive that certification. There are specific courses that would need to be taken. You know, introduction to IEPs or serving students with disabilities, evaluating and assessing. So there are several different topics and courses that have to be covered in order to receive that add-on. Absolutely.

LOGAN DAVIS: Thank you so much.

RASHAD BRISTO: Ms. Corley, you're recognized by the chair. You have the floor.

CORHONDA CORLEY: Thank you so much, Mr. Chairman. How you doing today, Ms. Jordan?

MEREDITH JORDAN: I'm good. How are you?

CORHONDA CORLEY: I'm wonderful. And I have several questions.

MEREDITH JORDAN: Absolutely.

CORHONDA CORLEY: The first question is what are we going to do to ensure that the staff is actually equipped to work with our children with disabilities as we are aware having a BS is not enough? I have a lot of children that are being arrested and read their rights as young as ten years old. I have a case as you

was aware of during the BESE board meeting that I was contacted about that is now my case that I'm working personally. That the child was read his rights and arrested all due to staff not knowing how to work with our children with disabilities and not being educated and informed about different disabilities. Particularly, if the child have any type of neurological impairments that affects their ability to speak. So what are we putting in place as the state Department of Education to ensure that the staff actually know how to work with our children? That's the first part. That's the first question.

MEREDITH JORDAN: Yeah. I agree with you. You know, we know that we have work to do around educator development, professional development, specifically around IDEA policy, practices, procedures, discipline. So, you know, there has to be very specific professional development there. One of my goals too is to begin and start back our-- we used to host special education regional director meetings where I think it would be great to include some of those topics, have those educator sessions and those support sessions with them where we can bring to them those specific policies, talking about the law, what they should and should not be doing. We also have, Ms. Corley, and I can work with you specifically on this too, but we do have processes in place where we can go in and help school systems through IEP facilitation, mediation, dispute resolution if needed to help address some of these very specific complaints and issues. Because, you know, I think you're absolutely hitting the nail on the head that we have to better support our school systems with implementing these policies, making sure that they understand them. Because we do know we have a lot of new special ed directors as well. We did see a turnover in special education directors and supervisors, so we do have some new ones. And we're working with some of them in our SPED fellows academy and we have a topic around law and policy. And actually we're going to put out next year, next month

we are creating a guidance document specifically to address creating compliance and inclusive special education programs so that will help. And our intent was to do exactly what you're talking about, Ms. Corley. Like just a refresher on IDEA law, ESA law. What are the things that school systems need to do to be compliant. Looking at their discipline data. I think those things will help, Ms. Corley. But certainly, you know, that educator (inaudible) is going to be critical in helping to meet the needs that you're speaking of.

CORHONDA CORLEY: Okay. The second question that I have is in regards to the evaluations. Just as you stated, a lot of the superintendents and special education directors are new. So they're not equipped with the knowledge to actually do real true evaluations for our children with disabilities. Which are actually having them have the incorrect exceptionality. Or if they're given a correct exceptionality, they're not given the proper assessments and the proper tools in place such as emotional disturbance, no behavior intervention plan. Autism, no behavior intervention plan. Other health impairments, some of them are not having functional behavior assessments, no behavior intervention plans, no health plans. What are we putting in place to make sure in the state Department of Education that this is actually going to take place? In addition to that, what are we putting in place to prevent the retaliation? Because we are having parents retaliated on left and right for filing cases or filing state complaints against that actual school system. What are we putting in place to prevent retaliation? And last, but definitely not least, what are we putting in place to ensure when a family ask for a camera in a classroom, that they actually can get that camera in the classroom?

MEREDITH JORDAN: Yeah. Both really good topics. So let's talk about the evaluations. You mentioned superintendents are new. We have special ed directors who are new. How do we ensure students are receiving a

comprehensive evaluation and assessment so that we understand their present levels of performance and we understand what supports and we can develop an appropriate IEP that's going to help them be successful. One of the things that I'm working on because I saw need as well for our pupil appraisal staff. So anyone who would be involved in that evaluative team we haven't provided much support that I can tell over the past few years. So I am working with a partnership, and I'm hoping to launch a summit or convening this summer for pupil appraisal and those evaluative staff. Again, to develop that knowledge. And to share best practice. To talk through their struggles. Make sure they understand what a compliant evaluation looks like. How do I ensure I'm giving a comprehensive evaluation and touching all of those pieces and all of the needs for students. So I think that's a start, but I definitely agree with you that our pupil appraisal staff certainly need additional support from the department. And it's certainly a goal of mine. I completely agree with you.

With regards to the cameras in SPED classrooms, we talked a little bit about this in our committee. The way that the law is currently written the department doesn't have any oversight or accountability or authority. And so what I talked with our SPED directors about at the beginning of this school year because really the initial step in implementing that legislation and, you know, school systems typically have approximately a year to implement new legislation. But the initial step is to write policy in alignment to that law. So that was my recommendation and really the only recommendation or input or support I could give them. But they did have questions and I wanted to answer them. I wanted to give them some support. At the beginning of the school year was to begin writing your policies. Work with your local council and begin to draft policy in alignment with the law. And so many of our school systems are in that process and they're doing that. And I also urge them to work with each

other, you know, connect with your neighboring school system to see what have they thought through. What issues are they thinking they're going to need to address in their policy. You know, what does that look like. Because really as the law is written the department, we couldn't provide any guidance. We couldn't provide any templates for them to use for that policy. So we are, I am closely watching this for legislative session. I know we are at the department to see will there be any updates, will there be any changes. I know most school systems the issue is funding and how to fund those surveillance systems in classroom. And have the software to protect student privacy, the monitoring and the storing. So I certainly appreciate the discussion and input around that legislation, for sure.

CORHONDA CORLEY: Okay. And this is my last question, Mr. Chairman, if you don't mind? Cause I want to ask this one last question.

RASHAD BRISTO: I'll permit it. We still have several other hands. So go ahead, Ms. Corley.

CORHONDA CORLEY: Okay. My very last question is we've had a lot of children with disabilities that have been abused in the school system. And the school as it's written right now, a school system can actually contact DCFS on a parent, but a parent cannot contact DCFS and the police department on a school system because the school systems actually contract with the local police as SROs. So I am asking as the state Department of Education, will you be creating a database on the staff that have been charged with abusing or neglecting children and children with disabilities so that it will prevent them from being hired from one parish school system to another? And are y'all considering any type of legislation to have DCFS or the police department to be able to investigate any of these claims by the parents when it is alleged against the school system just equally like they do to parents? That was my last question, Mr. Chairman. Thank you.

RASHAD BRISTO: Thank you. Ms. Jordan.

MEREDITH JORDAN: Yeah. This conversation is infuriating. Because it shouldn't be happening. So school systems should have in place--

ROSLYN HYMEL: Excuse me for a second. Mr. Chairman, can I please be excused? I should be back in four minutes.

RASHAD BRISTO: Yes, ma'am. Yes, ma'am. You can be excused. Please proceed.

MEREDITH JORDAN: Yes. So school systems should have in place, I mean, all school systems are required to do background checks. So we know if it becomes a legal issue that these folks would be caught through background checks. But we also, you know, when we do receive this information at the department or we receive complaints around this, we do follow-up and we do address it. I'm not aware of any legislation, Ms. Corley, but I will bring this back to our team and take a look at this. In fact, this was also something that I wanted to and prep for perhaps updates to the camera legislation was to see what kind of data we have at the department on complaints for abusive children. But unfortunately, a lot of that would go through DCSF, as you mentioned. But what complaints are we getting. Are we seeing any complaints. Currently to my knowledge we don't have a database where we're tracking individuals that we have received, you know, that we know or have been convicted of abusing children or students with disabilities at all. I don't think that would probably be something that would fall under the purview of the department. But I do want to talk with this and follow-up with this with our legal counsel as well. But I said it's infuriating. It's infuriating because the people that we trust most with all of our children and with our children with disabilities should not in any way be hurting them or harming them. So I certainly want to follow up with our legal counsel as well as far as complaints that we've received or what processes do we have in place. Thank you so much, Ms. Corley.

RASHAD BRISTO: Thank you, Ms. Corley. And thank you, Ms. Jordan. Dr. McKee, I see your hand. You're recognized. You have the floor.

HYACINTH MCKEE: Thank you, Mr. Chair. Thank you, Ms. Jordan. This is the very first time I've heard the word compliant come from the Louisiana Department of Education within the past maybe 16 years. Typically we don't hear that type of wording. I'm grateful that you did use the word compliance because that is what we're working towards. I do see that there's a lot, based on your report, a lot that's on the side of educating teachers and educating staff, you know, on different things and what the responsibilities are. But I think the level of frustration from our advocates and parents is on the enforcement side. You know, we have a lot of guidelines, we have a lot of information and reports on pages and different colorful power points, but we have no enforcement. And so it is not good. So the frustration that you're hearing is that what we need is more oversight. What we need is more enforcement. What we need is to make sure that when the guidelines are written that the districts are actually implementing what's written. And if there's some type of consequence or whatever that happens if they don't enforce, if they don't adhere to the word compliance that we're talking about. So I think that's what we need the support. We don't need many guidelines.

And I also want to say to the other council members as it relates to the special education and cameras legislation. We need to strongly let our legislators know that we need language to be put into these laws and acts that allow for this enforcement. Because what's happening is it creates a loophole for the Department of Education to say that they cannot enforce. And I'm concerned about that. I've heard that over and over. What we can't do. Where we are now is to have wording where it's going to say this has to happen to protect our children. And, I mean, the advocates have fought so much for this legislation. We're hearing now we don't have funding. Now we can't

tell them this. So we need the wording. So I'm saying that to my advocates on the call. So let's fight to do that.

I also wanted to speak to what Ms. Corley's comment was about the staff abusing students and not being able to report it to law enforcement. This is my first time, honestly, hearing that. Because I know that if something is reported on campus to a mandated reporter or a mandated reporter is supposed to report that. And if they don't there's some consequences as well. So, Ms. Corley, at some point if you are willing to share that information so that we can provide support to look more into that. Cause that does not sound like it should be happening. We know it shouldn't be happening. So, please, whatever information you have on that, please forward to the council or you can forward it to the education and employment committee chair. Thank you.

RASHAD BRISTO: Thank you, Dr. McKee. Do we have any other, I don't see any other hands raised for council members. Do we have any public comment?

BRENTON ANDRUS: Yes. You have two hands raised. Ms. Alacia Viane and Charles Michel.

RASHAD BRISTO: You're recognized by the chair. You have the floor. Ms. Alacia Viane, you're recognized by the chair. You have the floor.

ALACIA VIANE: Thank you, Mr. Chair. Ms. Jordan, in regards to para to teacher track, that's a regular, the para would receive a bachelor's degree, correct?

MEREDITH JORDAN: Correct.

ALACIA VIANE: And then they'd have to go on for certification or is that some type of alt program?

MEREDITH JORDAN: Right. No. So they would receive their bachelors in an education track, and they would come out a teacher.

ALACIA VIANE: So they would not have to take the praxis?

MEREDITH JORDAN: Yes. I'm sorry. Yes. They would still have to take the praxis just as you would if you were in a university or community college you

get to the end of your education program or you get to the end of your degree program and you take your praxis and receive your certification. Yes. They would still have to go through all those steps.

ALACIA VIANE: Will the state offer some sort of stipend to help them pay to be able to take that praxis?

MEREDITH JORDAN: As part of that 4,000-dollars school systems may be also paying for the actual like praxis and the application for certification. But they may be using the majority of that to pay for the course work.

ALACIA VIANE: So, yeah. Cause that would be a shame for them to work so hard and then not have the money to pay for the praxis.

MEREDITH JORDAN: The certification.

ALACIA VIANE: Why I'm asking if we look at the whole picture. I think that's a great program. But I want to be sure we look at the whole picture. Because you do have to pay to take the praxis.

MEREDITH JORDAN: Yes.

ALACIA VIANE: And Ms. Corley, I am fresh out of the trenches in education, and this is the first I've heard about someone not being able to, I'm going to use the word complain, if they thought somebody was being abused. Cause, as a matter of fact, we've had a couple of parents use that as a revenge method, you know, when I would get a teacher-- I was an administrator. When I would get a teacher to write a statement about something. So as far as I'm aware, you follow the same process as if there was something that happened on the street. You know, OPD, I'm from Opelousas. So Opelousas Police Department does the same type of investigating as if a teacher was just a regular person on the street. So I hate that that happened to someone because the police department is usually very cooperative either way. You know, if it's a teacher against a parent or a parent against a teacher. And thanks for clarity on the para to teacher track, Ms. Jordan.

RASHAD BRISTO: Okay.

ALACIA VIANE: That's all I have, Mr. Chair. Thank you.

RASHAD BRISTO: You're welcome. Mr. Charlie Michel, was he the next one with his hand raised?

BRENTON ANDRUS: Yes.

RASHAD BRISTO: Okay. You're recognized. You have the floor.

CHARLIE MICHEL: Thank you so much. Just a couple little points on what has been talked about in the last few minutes. First off, the idea that parents can't complain or call DCFS on school systems is erroneous. And if that is happening then I believe that whoever it's happening to should seek legal assistance because in my 34 years in education there were many parents over that period-- and when I say many, I don't mean hundreds. Cause it doesn't happen that frequently. But there were many parents who did call the authorities on the school system and an investigation was conducted. The end of the investigation would be either it was found that the school did, in fact, do what they said, and then legal action would be taken against an employee or the school. It's just like any other investigation. Whatever the truth is, it is what it is. So that is possible. And again, if it's not happening with someone that you know, please advise them to get some legal assistance.

The other thing is school district employees are mandated reporters. So when it's said that school systems can't call DCFS, it's a mandate. They must call DCFS if they suspect any kind of abuse. And it may not be that it's abuse. It could be something very simple. But that's the purpose of the investigation to ensure that the interests of the child are being taken care of. So that may be why it seems a little lopsided. I also want to remind everyone that when anyone calls DCFS about suspected abuse it is supposed to be anonymous. Many school districts have procedures and policies in place that say that the reporter has to notify the principal. That is illegal, but many

districts do it. Just know that you really don't have a right to know who's making the complaint. And that's for the protection of all involved.

Now the other thing is when we're talking about campus police and the way that they're used, we know that this is a huge problem. Because training is limited on all sides. The police department, the school system. But as we're looking at this, Meredith, I hope that y'all are looking at a bigger, broader picture. Because when a teacher does something like that which is so wrong on so many levels, the truth is I think that is more an issue of leadership than that teacher. Because if that teacher is ignorant of the law and the rules, it's because her principal didn't talk to her or him. If the principal doesn't know, it's because the special ed director didn't get with them. If the special ed director doesn't know, it's because the superintendent didn't let them know. Or the state Department of Education didn't know. So the training should not be focused just (inaudible) because it doesn't change the culture of the organization. That's what I'm going to say. And there are ramifications that many superintendents, cause they're new, just like the special ed directors, they don't understand the ramifications of using a school resource officer as an administrator. The fact is, when they use a police officer as an administrator it ups the requirements of the administration of the school to do any kind of investigations. So they need to be informed of what the ramifications are of that. So those are the two things that I want. Paint it with a broad brush because that's the benefit of everybody involved. Schools, parents, children, everyone. All right. Thank y'all so much for your time. I appreciate it.

MEREDITH JORDAN: Thank you.

RASHAD BRISTO: Thank you, Mr. Michel, for that insight. Ms. Hano, I see your hand raised. Excuse me. Ms. Egle.

JILL EGLE: So I'm confused. The Louisiana

Department of Education, I've been hearing this, and can somebody on the DD Council members, or panelists, or staff tell me what this is all about? Is it like people investigating people with special needs hurting them physically? Like punching on them, getting the cops involved? I'm very confused and I'm an advocate for all. So I want to take a stand, but I'm a little confused. And why would they want to hurt somebody that's different?

RASHAD BRISTO: Ms. Jordan, I yield the floor for you to bring clarification for Ms. Egle.

MEREDITH JORDAN: Sure. And Ms. Egle, that's my sentiment as well. As well as Mr. Michel. Like I haven't gotten any complaints and I don't think anyone at the department. But for sure, like everyone has mentioned here, this is a law enforcement issue, right. And a mandatory reporting. I'm glad y'all mentioned that, absolutely. But definitely law enforcement should be involved. The department isn't the (inaudible) that could bring justice to that. I agree exactly what Mr. Michel said. That's a law enforcement. Call the police. Get those people involved. Because I know if we did get that, that's exactly what we would have to do.

JILL EGLE: Yeah. I totally understand because people that are different if somebody's hurting somebody or assaulting them in the schools and they need to get the cops involved because nobody, a parent who has a son with IDD doesn't want to come home and see all these marks all along them and it's like who was trained properly. Or sorry to bring this up, we wouldn't want those little ones to get assaulted and maybe sexually assaulted. That, people, I mean, I'm an advocate for all and I hope to be on the DD council in the near future, but this is not acceptable when people are different. Because then these parents are worried. I want my child to come home safe and I don't want them to go missing.

MEREDITH JORDAN: Exactly.

RASHAD BRISTO: All right. Thank you for that. Do

we have any other comments in regards to the report that was presented by Department of Education?

BRENTON ANDRUS: You do have a hand raised from Ms. Kathleen Cannino. There are some comments in the chat. And some of those comments are actually from Ms. Cannino so if she wants to address them when she has the floor, that would be great.

RASHAD BRISTO: Okay. Ms. Cannino, you're recognized by the chair. You have the floor.

KATHLEEN CANNINO: Thank you. So I one, I had a question, can the Louisiana Department of Education enforce and provide oversight and monitoring? Cause it depends on who you ask, you get mixed response to that. And then also, if you do have a child that is abused in a school setting it is required to be reported to law enforcement and DCFS. And the law enforcement is who would investigate it. The problem comes in where that the schools are all contracted with the SROs, but those are the normal police and those are the sheriff's office and so they have contracts with all of them. So you have that bias for the parent or for the child when you hope to get things investigated. I know of two cases in the past few months in Lafayette where the child with special needs was assaulted by an employee and made the paper. And, I guess, I'm asking is there something that Louisiana Department of Education could create maybe a form that's easy to fill out for parents and submit? Because I know when that happened to my son, I had zero idea of how to go about reporting it. And I think it would be helpful to have that form and to have an email where you're supposed to send it. Cause I did try to do that, and then I got an email back from LDOE saying that I had sent it to the wrong place, and I asked a question where I should send it to and never got a response. So those would be some of my concerns. And then also, law enforcement seems to not be aware of laws that protect all people with disabilities. They don't know about restraint and seclusion laws or the timeframe in which it's supposed to be, the parents are supposed to be notified. The

schools superintendents and SPED directors, I believe, need to be made aware of that as well. Because kids are being restrained improperly and then corporal punishment is not legal to do on children with disabilities in Louisiana. And so if they are restrained improperly and it leads to injury, that can be considered corporal punishment. But yet nothing's happening. It's just like oops, they didn't have intent, bad intent so nothing happens. Except for that child is injured and that child is scared and has everything to deal with, but there's no repercussion and training's not being done. Anyway. I'll get off my soapbox but. Thank you.

MEREDITH JORDAN: Yeah. I appreciate that Ms. Cannino. And we do collect, and we collect data unrestraint and seclusion incidences. And we also collect, so school systems are required to send us their policy on restraint and seclusion. And that is a part of some of our monitoring. I know that you asked sort of that general beginning question like does the department have any oversight in monitoring. We do provide statewide monitoring. Now with Covid some of the on-site monitorings, those have not been (inaudible) so a lot of that was desk monitoring. But our statewide monitoring team this year should be, pandemic permitting, going back to some on-site monitorings for folks who fall in, or for school systems that fall in certain risk levels. So we do have and should have oversight with monitoring implementation of IDEA, and we can place school systems in corrective action for certain things. And that does happen. And then we provide that oversight, and we help them correct policy, procedure, practice to get out of that corrective action. So we do have that ability.

KATHLEEN CANNINO: Can I just say one thing? With the restraint and seclusion the problem is they are unaware or seem to not know that they're supposed to report it to the parents within 24 hours. That's not being done. And then the other part is--

MEREDITH JORDAN: And that's in law.

KATHLEEN CANNINO: Yeah. And they're saying that well, this one incident they said I thought they only reported to the state if the child is injured while they are performing the restraint and seclusion.

MEREDITH JORDAN: Yeah. That's something that we can communicate. We can do some training on just kind of a refresher of restraint and seclusion law. What are the dos and don'ts.

KATHLEEN CANNINO: Please.

MEREDITH JORDAN: Absolutely. And the best email, Ms. Cannino, to ask a question, even for parents to request assistance and resources is specialeducation@la.gov. That is our inbox where we take those requests from parents as well and try to help provide some supports. And I appreciate you as always.

RASHAD BRISTO: Okay. I see several hands. I want to recognize Vice Chair Banks. You have the floor.

NICOLE BANKS: Thanks, chair, for recognizing me. First and foremost, I just want to commend all of the people that have gotten up here and have spoken about this issue. Because I wasn't even aware about any of this stuff. And that is so awesome that you guys are using your voice to speak up to us because we're not in there every day. You guys are in there every day and you're seeing it. So, you know, I commend you guys. Keep on speaking up. Don't ever lose your voice in thinking that, you know, you're scared to say it. I commend you guys that have spoken up. All you guys. Ms. Corley, you know. Trying to get all y'all comments. But Ms. Katie. All of you guys. Ms. Kathy. All of you guys. You guys have done such an awesome job with putting this information in the forefront. My question is, or maybe my suggestion moving forward, is to have a comprehensive detailed training on how to handle situations like this. Or how to handle, you know, people with intellectual and developmental disabilities that have those kind of outbursts. You know, I dealt with that in high school. It was like a

little intern thing that my high school had. So, you know, I think it is very imperative that they come up with some comprehensive training that everyone has to go through because every teacher end up having to deal with it whether they're in special ed or not. And have this done quarterly and have where a training has to be done and it is mandatory and where we put it in place. Because I'm very upset that something like this is going on in our state and stuff can't be done and people can't speak up and this can't happen. Okay, moving forward what needs to happen, we need to have this quarterly so at these meetings we can see okay, this parish, all their teachers went through the training, let's see the report. Okay. The other ones. Okay this parish. You know, that's how we try to hold some accountability going on here. Because if nothing is, you know, you can report it and then no investigation happens and then it just gets pushed under the rug. And then here you are another person have the same thing happen to them. So it's like, you know, at some point we have to stop and reevaluate things and be like okay, this is not the way that we have to continue to keep doing this. We have to change things because now people are getting hurt, you know. So we have to bring that-- and I love what Dr. McKee said about bringing it to the education and inclusion so that we can further discuss this and see how we can move further as a council to help with this process to hold some more accountability with these situations. Because it's happening obviously in a lot of areas. Lafayette, Livingston, St. Tammany, Ascension, East Baton Rouge. That's too many parishes. And East Baton Rouge is our capital. Come on Louisiana. We've got to do better. We have to. And I know that we can. Because these group of people that's coming out here voicing their concerns and, you know, with everybody that's here collectively, I feel like we can make that change. We know about it now, it's time to do something about it now. That's all I had to say. I yield the floor.

RASHAD BRISTO: Okay.

MEREDITH JORDAN: I appreciate that, Ms. Banks. And all educators are, I do know there is legislation that requires them to go through annually mandatory reporter training because we had to. You know, what steps should you take. But I'll find out if we collect that data at the department. And if so, that's something that and I can bring and start that discussion point to.

RASHAD BRISTO: Getting ready to take this conversation offline because we have a couple that are going to have to log off at 3:30 hour. Ms. Hogan, you're recognized by the chair. You have the floor.

KIMONA HOGAN: Thank you. And I'll be brief. I just wanted to state that a lot of the parents that I work with too experience kind of what has already been explained when parents begin advocating for their children sometimes the SROs are being used as a form of retaliation. I personally have had that happen to me where I was doing the advocacy for a client and my child was arrested for something that was related to his disability. My question is for Ms. Jordan. You said that you do monitoring and you're collecting data. What is kind of the criteria for the Department of Education to do these enforcement activities? What has to happen for you guys to kind of go into a school system and do some corrective actions?

MEREDITH JORDAN: Absolutely. And that's a tiered system that I can also bring back. I'm putting that on my piece for our next committee meeting as well. It's a variety of factors around our students receiving services in their IEP. Alternate assessment participation. You know, is the district over their 1 percent participation. That could be a factor. Are students receiving the related services that are in their IEP. So there are multiple factors. Overrepresentation, you know, of students of color in special education. A lot of demographic data like that. But I can certainly bring that information back to you and how we select, you know, based on certain

criteria, who's getting a desk monitoring, who's getting an on-site monitoring. I'll be happy, Ms. Hogan, to bring that back for y'all. I think that would be helpful.

RASHAD BRISTO: All right. Thank you. Mr. Davis, you're recognized by the chair. I ask that you limit your comments.

LOGAN DAVIS: I just have a quick question. Ms. Jordan, can I have an example of what you mean by corrective action?

MEREDITH JORDAN: Sure. Absolutely. This is just one example. Let's say that we received an issue that a school system was using, you know, incorrect processes or like we've seen that some school systems aren't even using the correct 504 plan for students with 504, students who qualify for 504. And so like we would put them under corrective action for procedural and process issues. And so they would have to go back, and they have to create a plan to address that. You know, first of all, I'm going to use the correct form that includes all of the accommodations and all of the supports that these students could potentially receive. So it could be a variety of things, Mr. Davis, regarding different compliance pieces. It could be that we found in a desk monitoring or an on-site review that there were no logs of related service. So we have students with IEPs that say they get related services, but we couldn't find any evidence of that. So they would go under corrective action, and they would have to come up with a plan to get out of corrective action that satisfies certain pieces, right. That they properly document related services. Stuff like that. So it could be a variety of different compliance issues. But I hope that gives you just a couple of examples.

LOGAN DAVIS: It does. And it sounds to me like corrective action isn't so much as you're in trouble. You didn't do X, Y and Z. You are giving them an opportunity to do X, Z and Z and there's no repercussions on them. I propose that, you know, if

you don't do certain stuff then your system gets funding cut or whatever. But I know that's terrible, but, I mean, stuff got to happen. Like to tell them hey, you did a bad thing, time out. I know that's very elementary, but the way I'm hearing it, corrective action is not punishing them for doing the incorrect things. And section 504 plans, that's against the law, is it not? And, I mean, they're doing illegal stuff, so treat it as such. Don't just let them fix it and wash their hands with it. That's how I feel. I mean, I had a 504 IEP and all that and so that's how I was brought up and that's my thoughts. And I yield my time back to the chair. Sorry, Ms. Jordan, but.

RASHAD BRISTO: Thank you, Mr. Davis. Ms. Hymel, I see your hand. You're recognized by the chair. Last hand. I ask that you limit your questions or comments to at least two minutes.

ROSLYN HYMEL: This is what I want to find out in that. Now you kind of mentioned about cameras in classrooms and that. I know it works, but for the classrooms, how many feedbacks do classrooms kind of get? Do you ever get feedbacks from them?

MEREDITH JORDAN: We haven't received any specific feedback, negative or positive, about the cameras in special education classrooms. I know most of them, Ms. Hymel, this year really began to work with their council. And they focused on drafting their policy. They are also trying to find local dollars to support it. So like many school systems had already budgeted funds this year. And so that is kind of what we hear is around just a funding. You know, finding the funding to support essentially these surveillance cameras now. Based on the law it's for a specific, it's for self-contained classrooms only. So not every special education student, for example, that are in exclusive environments for the majority of the day would that law apply. But it is specifically for self-contained classrooms. So for students with the most significant disabilities. And we understand, you know, this is to protect those nonverbal students, right, who

can't voice or tell you always. So but I haven't heard, Ms. Hymel, any specific, positive or negative, feedback around it from school systems or classrooms.

ROSLYN HYMEL: Because, you know, even here they rollback on the cameras even if it's not in the centers or whatever or classrooms. Do they ever use it even in homes as well?

MEREDITH JORDAN: I'm not aware. So the legislation is very specific and geared towards self-contained classrooms. So I'm not sure of any places where that's happening for like homebound settings or students being served at home. If that's what you're asking. I hope that answers that.

RASHAD BRISTO: Okay. Thank you, Ms. Hymel. Thank you, Ms. Jordan. Very passionate conversation. Time well spent. We're going to go ahead and take this conversation offline. If you do, Ms. Jordan, for those that still have concerns, have your email address available. Because this is something that has been a very enlightening conversation within the last 45 minutes.

MEREDITH JORDAN: I'll drop my email in the chat.

RASHAD BRISTO: Yes. So this report requires no action and will be placed on file. We don't have any representation from the health services financial for Medicaid so we're going to bypass. We don't have a report nor a representative. So we're going to bypass that report. No. No. I'm sorry. We have a report. Elderly Affairs. Ms. Zimmerman's here. I'm sorry.

AMY DEAVILLE: We do have a report from Kelly Zimmerman from Bureau of Health Services.

RASHAD BRISTO: I'm sorry. I got confused. I was looking at the wrong part. Ms. Zimmerman, you're recognized by the chair. You have the floor.

KELLY ZIMMERMAN: Hey. Good afternoon, everybody. The report covers many things that you guys have already heard. You have heard some mention of the LDH business plan. So I did start the report with just a quick really high level of the four commitments within the LDH business plan. Along with a link where you can

read this for yourselves if you wanted to. But basically, the overall goals of the entire LDH business plan would be to improve the health and wellbeing with Louisianans with emphasis on prevention. Reshape the LDH culture. Enhance customer service partnerships and community relations. And to promote transparency, accountability and compliance. And so a lot of the work that you guys are doing and a lot of the work that we are doing really will sort of align and fall underneath these goals. And so I just wanted to share the high level. And the entire business plan is online at LDH.la.gov/businessplan.

There is an item in the report that is specific to provider enrollment, and this is a reminder that all Medicaid providers have to enroll within the Medicaid provider portal system which is a new requirement. However, that system is temporarily unavailable right now for some maintenance. And so we are going to let everyone know when that comes back online. The exciting news on the next item is that we did receive CMS approval to go ahead and implement our Act 421 or TEFRA. And so we have started accepting applications for this. And I think as of yesterday we had 228 applications already. And so we appreciate your help and support in getting this started. We appreciate you guys helping us spread the word. If anyone has questions about how to apply for that, the steps are outlined here in this report, but also on our website LDH.la.gov/act421.

A little small update on dental coverage. Within Medicaid and in several places, there are some things that we have to do behind the scenes to make sure that we are ready to implement dental coverage. And so we have on the waiver side, we have submitted the waiver amendments to CMS for approval. And then we are also working on some contract amendments on the dental contacts that we have. And so really working to move that forward and get everything in place in a timely manner. You guys have already heard about the American Rescue Plan Act. And again, we are still waiting on

CMS approval and as soon as we have it, we are going to share that information with you all. And then the rest of the information in this report is updates on numbers that we always share with you guys. So an update on permanent supportive housing, money follows the person, et cetera. So all of these are in the report each quarter with updated numbers for you now in this current report. And that is it. I will turn it over for questions. And I will do my best to answer.

RASHAD BRISTO: All right. Thank you, Ms. Zimmerman. Do we have any questions or comments from the council? I don't see hands on my screen.

BRENTON ANDRUS: Yeah. I don't see any hands raised or any comments for Ms. Zimmerman.

RASHAD BRISTO: Okay. And we don't have anything for public comment as well?

BRENTON ANDRUS: Sorry. What was that?

RASHAD BRISTO: We don't have anything for public comment for Ms. Zimmerman's report?

BRENTON ANDRUS: No, sir.

RASHAD BRISTO: Okay. Since there are no questions, no concerns, comments from either council members or the public this report requires no action and will be placed on file. Next item of business is the Disability Rights Louisiana. Chair recognizes Tory Rocca for the report.

TORY ROCCA: Thank you. A lot of our report just details individual cases we've handled this time. So I don't want to go through summaries of individual cases. Basically, get an overview of the programs and just some of the highlights here. So one of our larger programs is our community living ombudsman program. And we have ombudsman who advocate for people with developmental disability who live in the state licensed privately run group homes across the state. And we have, or we had after the previous Covid surge started to meet people in-person again. A lot of our program had to go remote for safety during the first year and a half or so of the pandemic. We did start last summer trying to go in-person again. We had to take that

offline for a bit because of Delta, the Delta surge. And then we brought them back online, but now, unfortunately, or I'm sorry, in-person after the Delta surge. We are temporarily once again monitoring facilities remotely because of the Omicron surge. We will be returning to in-person visits instead of remote visits once the current surge is over, hopefully. Because we do find when we have people living in facilities and we have to help them and monitor them and make sure they are being treated properly that in-person visits are much, much better than remote visits. And remote visits are really no substitute for in-person visits.

We do work with the attorney general's Medicaid fraud unit. And we have a Medicaid fraud unit, and we are reporting resident complaints every month. Some of the complaints that we have received or lodged have been chemical restraints being used improperly for behavioral management. Lack of informed consent or approval by (inaudible) committee prior to administration of chemical restraints. Staff verbally abusing residents. Staff physically assaulting a client. And failing to conduct nursing assessments. We do monitor facilities for things like that. We do find things like that. And we have been finding them and sending those complaints onto the proper state authorities.

(Inaudible) our ombudsman dealt with that issue and corrected both of those problems. It's just one example of the kind of work we've been doing. We also have a program that operates only in about two regions. Well, three regions of the state. That does something similar to our ombudsman program that monitors people who are in facilities. We do try to monitor people who are using HCBS services to make sure they are not being mistreated. Again, after the Delta surge began in-person meetings again. That is our supported independent living advocacy program. Unfortunately, we had to go back to remote monitoring given the current surge. Just like with our program that monitors people

in facilities. We will be turning to in-person monitoring as soon as it's safe. We, of course, were active in helping people after Hurricane Ida with that program. Trying to make sure we stayed in contact with people and make sure they had things they needed post hurricane.

So we have a representative payee program we are still operating. The program essentially provides oversight to our representative payees and their services to beneficiaries. So for folks who are (inaudible) other people's social security benefit money. Imagine we oversee them to make sure they're not misusing the money. They're properly handling it. They know how it is to be reported and taken care of. And we through that program and also other programs were actively involved after Hurricane Ida with the debacle involving the evacuation of (inaudible) nursing homes. Our team in that program worked with our national organization to make sure that the beneficiaries have access to their funds and their personal needs allowances. So our team was monitoring that. And we have been trying to get interviews with people in the nursing homes and conduct reviews of the nursing homes. And we do have, our legal team does have at least one or two clients in those nursing homes. And our legal team did open an investigation into that. And that's still pending right now. We haven't decided if we're going to bring litigation yet. In large part, because so much private litigation there may be no point in us bringing litigation from our agency. But we did open an investigation into the evacuation of the nursing homes to request information and to find out where the residents were located. Because that was a big question where the residents were located. Including the clients we had in those nursing homes.

Our FAIR program. This is an interesting program we have that helps the formally incarcerated with disabilities find employment after incarceration and also helps them finding the resources they need to

maintain things like housing and employment. And had a lot of success in the last couple of years. We've helped about 100 formally incarcerated people with disabilities. And just over 51 percent of those clients we've helped them find employment. We've helped them increase their income. And after Hurricane Ida that shifted over a bit towards making sure they had other resources they needed to try and maintain the employment and housing. And also whatever other things they might need. And that's really the high points of the report. If you have any questions, I'd be happy to answer them.

RASHAD BRISTO: All right, Mr. Rocca. Do we have any questions from the council members in regards to the report from Disability Rights Louisiana?

BRENTON ANDRUS: You have three hands raised. Mr. Logan Davis, Dr. McKee and Ms. Jill Hano.

RASHAD BRISTO: Okay. Mr. Davis, you're recognized by the chair. You have the floor.

LOGAN DAVIS: Okay. And I'll be brief. Mr. Rocca, I shot you my personal information. Did you get it?

TORY ROCCA: Is it in the chat? I wasn't even looking. So if it's in the chat I wasn't looking. Let me put my email in there so you can see it.

LOGAN DAVIS: Direct message in the chat box.

TORY ROCCA: Okay. I did not see it. Probably because I was presenting, so I did not see it. I see it now.

LOGAN DAVIS: Okay. We'll just talk offline because I don't want to waste any more time. But yes. Yeah.

RASHAD BRISTO: Okay. Mr. Andrus, who was the next hand you saw?

BRENTON ANDRUS: Dr. McKee.

RASHAD BRISTO: Okay. Dr. McKee, you're recognized by the chair. You have the floor.

HYACINTH MCKEE: Thank you, Mr. Chair. Mr. Rocca, thank you so much for your report. I wanted to get more information on that CAP program, and you highlight that. That's something I think maybe the council might

want to be interested in and I want to get more information on that. And then I also wanted to make note that I know we're trying to save time, but I think we may be required to read some of the public comments that's in the chat because it is for public record. So I just wanted to (inaudible). That's it.

TORY ROCCA: In terms of more information, would you like my report next time to focus more on our CAP program?

HYACINTH MCKEE: Yeah. I mean, it seems like it's really good stuff. Good work, I believe. If you could just kind of maybe say 20 seconds about it. Cause I think you kind of glossed over it.

TORY ROCCA: I probably did, frankly, because I'm basing this report on a lot of the director who manages that part of our agency wrote and she didn't have a lot to write about this time around. I'll be honest with you. This report is in part cannibalized from a report somebody else wrote from my agency. And that's about what she had written about it. So I can say a little about it. We just hired a new manager in that program. We're focusing on that program as much as we have been. We hired another advocate too and a new manager. We'll be developing that more. It would probably be better if I focused a little more next time on it because I, honestly, don't have that much more to say about what CAP's been doing in the last few months. Because, frankly, the director of that department knows more about it than I do.

HYACINTH MCKEE: Thank you, Mr. Rocca. That's okay. Next time we'll hear more about it. Thank you.

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

JILL HANO: Okay. This is kind of going to piggyback on Dr. McKee in the sense of requesting information. But we had some horrifying discussion about restraints in the school systems. And I know that your cases you show us is more geared towards abusing group homes. But do you have any cases-- by

the way, I love that cases are on here because I love to read them. Do you have anything specific to restraints in the actual school system or your reports more geared toward group home systems?

TORY ROCCA: I don't think I have any. Right now I don't have any specific things to report about restraints outside of group homes. We do, however, monitor HCBS group homes. Unfortunately, our program for doing that is actually small. It only covers the Baton Rouge area and Orleans Parish and Jefferson Parish simply because we're only funded for that. We have wanted to expand that program for a while and get more funds to actually cover the whole state. But right now our main focus, just because of funding and the resources we have, does cover facilities, not HCBS situations. In terms of other improper restraint, things we handle, it would also be in schools too, but only if reported to us. We don't go in and actually monitor the schools. One scope for monitoring for improper restraints would be in things like ICFDDs. We do monitor HCBS for that too. But the scope of our program is much more limited. And we do handle those issues in the schools, but only when reported to as we simply don't have the resources or mandate to go inside schools and constantly monitor them.

JILL HANO: All right. Okay. So I know that restraints is a hot, literally a hot topic today. Just for clarity, so Ms. Jordan would provide more school-based data and you would provide more intermediate care facility data. Okay. I mean, okay. That's all. And I ask because I like to check around with our hot topics issues every quarter. And I think Dr. Wilson kind of cleared it up to check. Do y'all still offer benefit planning as an initiative?

TORY ROCCA: Was there another question? I didn't quite get it.

JILL HANO: Do y'all still deal with benefits planning or is that strictly Lighthouse for the state?

TORY ROCCA: In terms of benefits planning, our program that I mentioned it's sort of like benefits

planning because it actually monitors people who are managing benefits for people. In terms of the program that Lighthouse now manages, WIPPA, we do that. Because of federal changes though, we are now handling that program for a portion of the State of Texas. The federal government decided to change some of the standards by which it awarded these programs in the last year or so. And that is why Lighthouse has the portion of the Louisiana contract that we used to have. And we are managing a portion of Texas. Just how that worked out with federal changes. Looks like I think Dr. Wilson and Lighthouse are who you would go to for that. Unless you move to Texas, then I'd be able to help you.

JILL HANO: Then I'll call you. All right. Thank y'all.

TORY ROCCA: Thank you.

MITCH IDDINS: You're muted, Mr. Bristo.

RASHAD BRISTO: Oh, I'm sorry. I muted. Been talking the entire time. I don't see any other hands raised. Am I overlooking anybody?

BRENTON ANDRUS: Roslyn did have her hand raised. And then it looks like she got off and then back on. I don't know if she still had her question? And Ms. Bambi Polotzola has her hand raised.

RASHAD BRISTO: Okay. Ms. Polotzola, you're recognized by the chair. You have the floor.

BAMBI POLOTZOLA: Are we on new business?

RASHAD BRISTO: No, ma'am. Not yet. We're still entertaining the report provided by Disability Rights Louisiana.

BAMBI POLOTZOLA: Okay. I have new business. I'll wait.

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

ROSLYN HYMEL: Thank you. I just got kicked off. That's why. Yeah. Is I want to know I read it on your report in that for Delgado is for adults in that for like GEDs in that. Does that help out with anything like for adults for programs if, you know, sometime in

the future like? If you go pull up the report again where I saw that. You're muted.

TORY ROCCA: Are you referring to the part of the report where we mentioned helping get people the support they need to get his GED? We don't have like any GED program within the organization, but this was helping provide somebody the resources they needed to get their GED. We don't have a GED--

TORY ROCCA: Yes. That is the one that I am referring to. Yes.

TORY ROCCA: We do not have anything like a GED training program within the organization. This is more a program that was mentioned in that part of the report is the program that specifically helps people who were formally incarcerated with employment and other things they need to find employment and gain employment.

ROSLYN HYMEL: That's what I was trying to see into that because I couldn't read it all. But what is that specifically to help adults in the future? Like, I mean, to get, does that mean to get like jobs or something like that?

TORY ROCCA: It is specific to people who were formally incarcerated. So that is a specific program that we have that was created by one of our managers about four years ago or so. She just invented the program herself and sought funding for it through independent organizations that fund things like this. And the crux of the program is that it's for people who are formally incarcerated who have disabilities, helping them find stable, long-term employment. And helping them find other resources they need to help maintain that employment. That is specific to people who were formally incarcerated.

ROSLYN HYMEL: Oh, okay. That's what I'm looking for. I do appreciate that.

LOGAN DAVIS: What is the name of that program again, Mr. Rocca?

TORY ROCCA: It is called fair, FAIR. I'll have to look up what that stands for. It's in the report. What does that stand for? Financial Access Inclusion

and Resources program. FAIR.

ROSLYN HYMEL: Can you spell that word again please. I will appreciate it.

TORY ROCCA: F as in Frank. A-I-R.

ROSLYN HYMEL: Is it F-A-I-R?

TORY ROCCA: It is.

ROSLYN HYMEL: Okay. Thank you.

RASHAD BRISTO: Do we have any other comment, questions in regards to the report that was presented by Disability Rights Louisiana?

BRENTON ANDRUS: I don't see any hands raised. You did have someone specifically for Mr. Rocca put his email in the chat.

RASHAD BRISTO: Okay. All right, Mr. Rocca. If there's no other comments from council or any public comment, this report will be placed on file. It requires no action and placed on file. Due to the restraints of time we're going to bypass the recess and we're going to go into transition. Do we have any business, Ms. Polotzola? You had your hand raised. You're recognized by the chair.

BAMBI POLOTZOLA: Yes. I just wanted to make a motion--

ROSLYN HYMEL: Bambi, can you kind of fix your sound to your tablet.

BAMBI POLOTZOLA: Sorry. Can y'all hear me? Can you hear me?

ROSLYN HYMEL: Yeah. That's better.

RASHAD BRISTO: Yes. We can hear you. That's better.

BAMBI POLOTZOLA: Okay. I make a motion for the executive director to have the decision-making authority to allow LaCAN to participate in in-person activities with the expectation that relevant public health information is considered and LaCAN staff have the ability to make personal choices to not participate in in-person activities. And the reason why I say that is we won't meet for another three months, but the legislature will start in about, the regular session will start in about six or seven weeks. And so I don't

want to tie the hands of the ability for our LaCAN leaders to be able to advocate in a way that they need to. So this will give that option for them to be able to have in-person if it's safe to do so and the executive director decides to do that.

RASHAD BRISTO: Okay. So we have a motion on the floor presented by Ms. Bambi Polotzola to give the executive director to have, make the authority to allow LaCAN to participate in in-person activities with the expectations that's relevant to public health information is considered and LaCAN staff have ability to make personal choices to or not to participate in in-person activities. We have a motion on the floor.

NICOLE BANKS: I second that.

HYACINTH MCKEE: I second that.

RASHAD BRISTO: It's been moved by Ms. Bambi Polotzola. It's been seconded by Dr. Hyacinth McKee. Now time for question.

LOGAN DAVIS: What do you mean by the proper public health, let me find it. What expectations is she referring to when she says, or when Bambi says something about public health information and the LaCAN staff have the ability to make personal choices to not participate in in-person activities?

LOGAN DAVIS: I'll let Ms. Polotzola elaborate for you, Mr. Davis, cause I know you're a new council member and there may be some things that, want you to have a full grasp for what you're about to vote on.

LOGAN DAVIS: Thank you.

BAMBI POLOTZOLA: The public health information would be any recommendations from our public health officials on the safety of interacting in-person. So we should take all of those things into consideration. And then the other part in regards to allowing, just allowing people to make personal choices. We don't know everyone's health condition, so they have to make personal choices for their own safety. And so this would just allow people to not be forced to do anything they don't want to do.

LOGAN DAVIS: Okay. Can you remind me what LaCAN

stands for? Cause I thought we had a thing about abbreviations.

BAMBI POLOTZOLA: LaCAN is the Louisiana Council Advocacy Network. So it's our advocacy network. They do legislative advocacy and policy advocacy on behalf of the council.

LOGAN DAVIS: Okay.

RASHAD BRISTO: Do we have any other question in regards to the motion that's on the floor?

BRENTON ANDRUS: Ms. Hano has her hand raised.

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

JILL HANO: I'm so sorry. This is not pertaining to the motion, so I will wait.

RASHAD BRISTO: Yes. If you will table that until after cause we have a live motion on the floor. So anything nonrelevant to the discussion at-hand I'm going to ask that you table it until we come back, okay.

ROSLYN HYMEL: What's the motion again? Can you remind me again or remind us please.

RASHAD BRISTO: In summation, the motion is by Ms. Bambi Polotzola, she makes a motion for the executive director, Ms. Amy Deaville, to have the decision-making authority to allow LaCAN to participate in in-person activities with the exceptions that relevant public health information is considered and LaCAN staff have the ability to make personal choices to not participate in in-person activities.

LOGAN DAVIS: I have an argument. Would that at the same time be moot because you're allowing the executive director, Ms. Amy Deaville, to make decisions, but then again you have the governor say hey, we're not doing all this? And so wouldn't that be moot? And then LaCAN staff have the ability to make personal choices to not attend for their own personal health. So what's the purpose of doing that in the first place? I mean, I'm just asking questions.

RASHAD BRISTO: And this is why you ask questions because this is a very serious discussion that we're

talking about.

LOGAN DAVIS: I mean, we've already had Delta and Omicron. Are we waiting for Omi Prime. I'm being sarcastic, but at the same time I'm being serious.

RASHAD BRISTO: That's why, like I said, that's why (inaudible) this vote is. When it comes down to the decision that you make, the way that you vote will determine if this is something that will take place, Mr. Davis, or not.

LOGAN DAVIS: Well, I vote no.

RASHAD BRISTO: Okay. Just pause until it's time for the actual vote. We haven't called the vote yet. We just had discussion at the moment. That way everyone can have a clear understanding about what we're voting on. That way after the vote has been made there's not going to be any redacting. So that's why I want everyone to make sure they're understanding what's going on. Ms. Hymel, I see your hand. You're recognized by the chair. You have the floor. And then Dr. McKee.

ROSLYN HYMEL: Yes. I do. This is what I'm thinking. I'm looking at it. Can we really word it differently and for what we have it now? Because what I'm thinking and I'm really feeling can the LaCAN, I feel like this, that they should have some kind of say as well to get their input. That's how I feel about it.

RASHAD BRISTO: I'm going to open it for public comment just as soon as we get through discussing amongst the council members. So I haven't dismissed that. But I will open up for public comment. I just want to remind everyone--

ROSLYN HYMEL: So can we change the wording?

RASHAD BRISTO: Based upon the public comment or do you want to present another motion?

ROSLYN HYMEL: Well, we could keep it like this, but can we just change the wording? I mean, this one to me could we change the motion a little bit?

RASHAD BRISTO: You have to go with what's been presented and seconded at the moment. But then if it

dies, then we can change the language.

ROSLYN HYMEL: Yeah. That's what I'm looking for, the language. Yeah. That's what I'm trying to say.

RASHAD BRISTO: Yes, ma'am. For clarity we have to entertain the motion unless the initial person, who is Ms. Polotzola, wants to change the language. It's moved and second. Now we're up to discussion. Also, Dr. McKee, I see your hand. You're recognized by the chair.

HYACINTH MCKEE: Thank you, Mr. Chair. I actually don't see any problems with the wording. I think that the last sentence clearly says that the staff has the ability to make personal choices to not participate in in-person activities. I think the motion is just asking that the executive director to have the decision making, you know, to have the authority. But the motion does not say that staff does not have personal choice. So I'm understanding that the motion is written the way it was intended, and I don't see any problems with the motion the way it's written. It still allows the individual staff to make personal choices, not participate in in-person activities. And that is keeping the public health information under consideration when those choices are being made. Just allows the executive director to have decision making authority. I hope that brings clarity to the motion. I don't see where the word of the motion needs to be changed.

RASHAD BRISTO: Thank you, Dr. McKee. Do we have any other council members with questions before we move to public comment?

LOGAN DAVIS: Yes. I do, chair.

RASHAD BRISTO: Okay. Mr. Davis, you're recognized by the chair. You have the floor.

LOGAN DAVIS: I am going in part by my personal thoughts and the public's feedback in the chat. Personally, you know, it is written that LaCAN staff have the ability to make personal choices to not participate in in-person activities. But say they do, and then they spread whatever comes next around the

state. What happens then? Who is held libel? And then the public says, Vivienne Webb said I agree. Going in-person isn't a very good idea as it puts people's health at risk as the employer (inaudible). Yeah. So, I mean, are the legislators, do they take any precautions like wearing masks? Are they doing this, are they doing that?

RASHAD BRISTO: Good question, Mr. Davis. Hold that thought for just a minute. Mr. Andrus, if you will, go ahead and read the public comment. That way we can have it on record.

BRENTON ANDRUS: For this particular issue?

RASHAD BRISTO: For this particular issue, please.

BRENTON ANDRUS: Okay. So Ms. Susan Reihn says so LaCAN leaders would still be able to choose according to their health issues, et cetera. Let's see. Ms. Kathy Dwyer says exactly, Susan. Many legislators do not wear masks and can put others at risk. Especially those in an at-risk group. Mr. Logan Davis agreed with Kathy. Vivienne Webb also said I agree. Going in-person isn't a very good idea. Puts people's health at risk. Mr. Davis, there should not even be an option to do this. Melinda Elliot says I agree, Logan. Ms. Susan Reihn says as the employer for the LaCAN leaders personal safety is my concern for all leaders.

LOGAN DAVIS: For all leaders. So is it just limited to leaders, not everyone else? Like not public safety, public at large? Just the leaders?

RASHAD BRISTO: Is the question directed to the chair, Mr. Davis?

LOGAN DAVIS: I'm sorry, chair.

RASHAD BRISTO: No. I'm asking. Are you asking the chair, or are you just making additional comment to the comments that have been made by public?

LOGAN DAVIS: My question was directed at the chair and at Vivienne Webb because she was the one. No. Was it? I don't know. No. It was Susan. I can't pronounce her last name.

RASHAD BRISTO: Susan Reihn.

LOGAN DAVIS: That's it.

BRENTON ANDRUS: I can probably shed some light on at least some background on Susan's comment. Just as the employer for LaCAN, so we do contract with Families Helping Families Southwest Louisiana for the LaCAN contract. But Susan Reihn is actually the employer of the LaCAN leaders. Technically they are supervised by her cause she holds the contract and employees them to fulfill that contract on behalf of the council. So I just wanted to clarify that. And also let you know there are a few more comments in the chat about this. And you do have three hands raised from the public.

RASHAD BRISTO: Okay. Who do we have from the public?

BRENTON ANDRUS: You have Charles Michel, Christy Curtis and Kathy Dwyer.

RASHAD BRISTO: And in that order. Mr. Michel, you're recognized by the chair. You have the floor.

CHARLIE MICHEL: Thank you. Can y'all hear me? Can you hear me?

RASHAD BRISTO: Yes, sir.

CHARLIE MICHEL: Okay. Great. Just real briefly, I view this motion as a means to be proactive instead of reactive. Because I know like last year, and maybe even the year before, we weren't allowed to make the visits. It was mandated that there could be no visits. If things get better and people are comfortable doing it, this will allow the LaCAN staff to make the choice. They're not in any way forced to go, but it gives them the opportunity. I know for the last two years we've had a lot of difficulty getting meetings with legislators because we couldn't go over there, and they had no time to meet with us. In region three specifically, this will give us the opportunity, if the LaCAN staff member chooses to do it, to have better representation as we're trying to advocate for the things on our agenda. I think this is just being proactive. It doesn't force anyone to do anything. And if anyone chooses to go and they get sick, that's basically a risk they're willing to take. I'm not going to mandate that they go, and I don't want to

mandate that they don't go. So I just think this is a proactive measure. Thank you.

RASHAD BRISTO: Thank you for those comments. Mr. Andrus, who was the next hand that you saw?

BRENTON ANDRUS: Christy Curtis.

RASHAD BRISTO: Christy Curtis you're recognized by the chair. You have the floor.

CHRISTY CURTIS: Thank you, chair. So I am the LaCAN leader for region four. And I don't speak for all leaders, but there are quite a few of us that would like to make the choice to attend in-person events on our own, even if there is some kind of contract or something that we need to sign, some release. I think it needs to be pointed out that my outreach for LaCAN is falling behind. The only form of outreach I have is email and social media. And I am very active on social media for LaCAN, I'm still not able to connect with groups like Autism Society of Acadiana who is only holding in-person activities. Now I have a son with a deficient immune system, so I am well aware there are health risks. And I am keeping social distance. I wear a mask. I'm taking all precautions. I have had my Covid vaccines. I've done everything that I'm supposed to do that I've been asked to do by the governor. I would like to make that choice for myself so I can continue my outreach and connect with our members and self-advocates. Also, many of our, there are quite a few meetings that have been scheduled, that I've been able to schedule virtually, many of our representatives and senators want to meet virtually instead of in person. Maybe if I was able to meet in-person I can schedule with other legislators. I'm not sure. I would just really like to make that choice for myself. Thank you.

RASHAD BRISTO: Mr. Andrus, who do we have next?

BRENTON ANDRUS: Ms. Kathy Dwyer.

RASHAD BRISTO: Ms. Kathy Dwyer, you're recognized by the chair. You have the floor.

KATHY DWYER: Thank you, Mr. Chair. I'm really torn by this one. I understand the importance of

outreach. I understand a lot of people care and are concerned about everyone's safety. And may actively use all the guidelines and then some. The problem is you can be asymptomatic with Covid and still spread it. And that's where my concern. And I'm going to say because I have been home with my daughter for almost two years now. It's going on 21 months, I think. I want my life and my daughter's life to get back to normal. But her day hab isn't open yet because it keeps spreading in the day hab. I can't let people come in because it keeps spreading because my daughter's at risk. Every time we ease up on something there's a surge. And that sets us back even more. And people seem to be forgetting about my daughter and me who are sitting home 20 plus months without any services or real activities. Even though we try to go out where it's safe, where the crowds aren't large. Excuse me if I'm expressing some frustration, but I am very frustrated. I just think we're never going to get to a safe place where we can go out safely. And those, and I say we, those that are at high risk and participate in community like we're supposed to do. My daughter has every right, every constitutional right to participate in society. But she can't because others are going about freely whether they're practicing mask wearing and social distancing or not and spreading a highly contagious virus because they're asymptomatic. You know, so I'm not sure where this motion is going. I'm not sure what Bambi's intent was other than maybe to give people personal choices. But it's people's personal choices who have interfered with my daughter and I having our real lives back. Thank you, Mr. Chair.

RASHAD BRISTO: All right. Thank you for your comments, Ms. Dwyer. Mr. Andrus, do we have any comments from the public?

BRENTON ANDRUS: Yes. You have a hand raised from Ms. Katie Kroes and you have a few comments in the chat.

RASHAD BRISTO: Okay. Ms. Katie Kroes, you're

recognized by the chair. You have the floor.

KATIE KROES: Yes. Thank you, chair. As the LaCAN leader for region two I just want to voice the same opinion as Christy Curtis did. Which is that those of us like myself who are vaccinated, boosted, wearing mask and social distancing and doing all the things that we can do, I would like to be able to conduct outreach to my representatives and senators. It's very important to my job. And those who are willing to meet with me, I would like to be able to join in those meetings to do legislative outreach as part of my contract to do so. So thank you.

RASHAD BRISTO: Thank you for those comments. We have public comments in the chat, Mr. Andrus?

BRENTON ANDRUS: Sorry. I was muted. Yeah. You do have some in the chat and a few other hands. You want me to handle the chat first?

RASHAD BRISTO: Yes. Please read the comments in the chat for the record and then we'll go to the hands that are raised.

BRENTON ANDRUS: Okay. So Ms. Vivienne Webb says even if people are wearing masks and social distancing it's still not a good idea. Omicron is very catchy and more people going in-person will help Covid 19 spread, thus endangering people. Susan Reihn, I believe this was in response to a question Mr. Davis had. She said LaCAN leaders have families and coworkers. Ms. Kathy Dwyer agrees with Vivienne's statement. Let's see. Katie Kroes said she agreed with Christy. Julie Folsie says everything Christy is saying is happening in region three. (Inaudible) choice. Logan Davis says Christy, you can't assume that everyone else has gotten the vaccine. He also said Ms. Kathy had a good point, asymptomatic. Ms. Corhonda Corley says that's correct. I strongly agree with Ms. Dwyer. Vivienne Webb says making that choice yourself may still pose risks to you, your families and everyone you encounter. Long-term Covid is serious, and it comes back. And your first time may not be as bad as the next. I know why people want things to go back to normal, but it isn't

safe. Before we start letting things go back to normal the numbers need to go down for it to be safe. Roslyn Hymel says that she agrees. (Inaudible) says I don't think we are collectively doing enough to control the virus. Ms. Kathy Dwyer says outreach can be conducted in other ways. We have been doing it since the pandemic. That's it for the chat about this topic. Next, well, you do have a council member, Jill Hano, has her hand raised.

RASHAD BRISTO: Okay. Ms. Hano, you're recognized by the chair. You have the floor.

JILL HANO: For me, and I agree with everything everyone's saying, but for me the main point that sticks out is that I wholeheartedly agree with Bambi because this should be personal choice. And y'all, like okay. And this is what I don't understand. Is if it's right now in my pea brain we're talking about personal choice. So if your personal choice is not to go, then stay home. Like everyone I love has had Covid. And I am doing whatever I can not to have Covid. I am determined not to get Covid. Rashad, as you already know, Covid interfered with my Christmas. But I think, okay, I think I'm going to stop because I'm kind of in the wrong. So never mind.

RASHAD BRISTO: Thank you. Do we have any other public comment?

BRENTON ANDRUS: You have two hands raised and I think more chats.

RASHAD BRISTO: We have an issue at the moment. The issue isn't the discussion at-hand. Now the issue is looks like we're losing our quorum.

LOGAN DAVIS: Mr. Chair?

RASHAD BRISTO: Mr. Davis.

LOGAN DAVIS: Can we go ahead and just vote on this cause it sounds like we're just going in circles?

KIM BASILE: I would like to call the question.

RASHAD BRISTO: One minute, Dr. McKee. Let me reassess something. From what I'm counting--

HYACINTH MCKEE: I didn't say anything. That wasn't Dr. McKee.

RASHAD BRISTO: Oh, I'm sorry. Who was that?

KIM BASILE: It was Kim Basile.

RASHAD BRISTO: Okay. One second, Ms. Basile. Let me see. Do we have a quorum still. Ms. Jenkins, are you still there?

HANNAH JENKINS: Yes, sir. I'm here.

RASHAD BRISTO: I can't see all the screen at one time. Do we still have a quorum?

HANNAH JENKINS: Okay. We just got quorum. We have 13 now.

RASHAD BRISTO: Okay. We have a quorum. Okay, Ms. Basile.

KIM BASILE: I would like to call the question.

RASHAD BRISTO: Okay. We have a quorum. The question has been called. At this point we will have a roll call vote. This will require 2/3rds vote. So we'll have roll call vote. Ms. Deaville.

AMY DEAVILLE: Mr. Andrus, can you do the roll call vote, please?

BRENTON ANDRUS: Sure. So are you doing it for calling the question, is that what this is?

AMY DEAVILLE: This is for calling the question.

BRENTON ANDRUS: Okay. Ms. Banks.

NICOLE LEARSON: I'm sorry. Point of order. I do apologize. Ms. Basile's motion requires a second before you move to a roll call vote.

RASHAD BRISTO: Okay. Thank you for the point of order.

PHIL WILSON: I will second the motion.

RASHAD BRISTO: Okay. Can you identify who that was? I heard the voice, but I didn't see it on my screen.

LOGAN DAVIS: That was Dr. Philip Wilson.

RASHAD BRISTO: Okay. Call the question been seconded by Dr. Wilson. Please proceed.

BRENTON ANDRUS: Ms. Banks.

NICOLE BANKS: Yes.

BRENTON ANDRUS: Dr. Barovechio. I'm sorry. Ms. Banks, yes. Dr. Barovechio, I don't know if she's still on. Ms. Basile.

KIM BASILE: I'm sorry, Brenton. But can you explain to the council what they're voting on, yes or no and how?

BRENTON ANDRUS: A yes vote would end this discussion for this particular motion. A no vote would continue the discussion.

KIM BASILE: Thank you. Yes.

BRENTON ANDRUS: Ms. Basile, yes. Ms. Bayham. Ms. Cosse. Ms. Crain. Mr. Davis.

LOGAN DAVIS: Question. So yes vote would end the discussion, not the motion at hand, correct?

BRENTON ANDRUS: Correct.

LOGAN DAVIS: Then yes. I vote to end the discussion.

BRENTON ANDRUS: Mr. Davis, yes. Ms. Egle. Ms. Gonzales. Ms. Guidry.

CHANEY GUIDRY: Yes.

BRENTON ANDRUS: Ms. Hagan. Ms. Hano.

KIMONA HOGAN: I'm sorry. If you were calling Hogan, Kimona Hogan, yes.

BRENTON ANDRUS: I'm sorry. Ms. Julie Hagan. Ms. Hano.

JILL HANO: Yes.

BRENTON ANDRUS: Ms. Hano, yes. Ms. Harmon.

ANGELA HARMON: Yes.

BRENTON ANDRUS: Ms. Harmon, yes. Ms. Hogan.

KIMONA HOGAN: I'm sorry. Yes.

BRENTON ANDRUS: Ms. Hogan, yes. Ms. Hymel.

ROSLYN HYMEL: Yes.

BRENTON ANDRUS: Ms. Hymel, yes. Mr. Iddins.

MITCH IDDINS: Yes.

BRENTON ANDRUS: Mr. Iddins, yes. Dr. McKee.

HYACINTH MCKEE: Yes.

BRENTON ANDRUS: Dr. McKee, yes. Ms. Polotzola. Mr. Rocca.

TORY ROCCA: Yes.

BRENTON ANDRUS: Mr. Rocca, yes. Mr. Rovira.

MATHEW ROVIRA: Yes.

BRENTON ANDRUS: Mr. Rovira, yes. Ms. Tarver. Ms. Webb.

VIVIENNE WEBB: Yes.

BRENTON ANDRUS: Ms. Webb, yes. Ms. White. Dr. Wilson.

PHIL WILSON: Yes.

BRENTON ANDRUS: Dr. Wilson, yes. That is 14 years, 0 days.

RASHAD BRISTO: Okay. We will entertain the motion that is on the floor. Go directly to the vote of the motion that was on the floor by Ms. Bambi Polotzola. I repeat the motion. To make a motion for the executive director to have decision making authority to allow LaCAN to participate in in-person activities with expectations that relevant public health information is considered and LaCAN staff have ability to make the personal choice to not participate in in-person activities. Was seconded by Dr. McKee. Now we'll have a roll call vote on this motion. Mr. Andrus, if you please.

BRENTON ANDRUS: Ms. Banks.

NICOLE BANKS: Yes.

BRENTON ANDRUS: Dr. Barovechio. Ms. Basile.

KIM BASILE: Yes.

BRENTON ANDRUS: Ms. Bayham. Ms. Cosse. Ms. Crain. Mr. Davis.

LOGAN DAVIS: No.

BRENTON ANDRUS: Mr. Davis, no. Ms. Egle. Ms. Gonzales. Ms. Guidry.

CHANEY GUIDRY: Yes.

BRENTON ANDRUS: Ms. Julie Hagan. Ms. Hano.

JILL HANO: Yes.

BRENTON ANDRUS: Ms. Harmon.

ANGELA HARMON: Yes.

BRENTON ANDRUS: Ms. Kimona Hogan.

KIMONA HOGAN: Yes.

BRENTON ANDRUS: Ms. Hymel. Ms. Hymel.

ROSLYN HYMEL: Yes.

BRENTON ANDRUS: Mr. Iddins. I'm sorry. What was that?

MITCH IDDINS: Yes.

BRENTON ANDRUS: Yes. Dr. McKee.

HYACINTH MCKEE: Yes.

BRENTON ANDRUS: Yes. Ms. Polotzola.

BAMBI POLOTZOLA: Yes.

BRENTON ANDRUS: Mr. Rocca.

TORY ROCCA: Yes.

BRENTON ANDRUS: Mr. Rovira.

MATHEW ROVIRA: Yes.

BRENTON ANDRUS: Ms. Tarver. Ms. Webb.

VIVIENNE WEBB: No.

BRENTON ANDRUS: No. Ms. White. Dr. Wilson.

PHIL WILSON: Yes.

BRENTON ANDRUS: You have 13 yeas, 2 nays.

LOGAN DAVIS: I have a question, chair.

BRENDA COSSE: Ms. Cosse abstains.

RASHAD BRISTO: Hold on for just a moment. Did you recognize Ms. Cosse, Mr. Andrus?

BRENTON ANDRUS: Ms. Cosse abstains. That will be 13 yeas, 2 nays and 1 abstention.

RASHAD BRISTO: Motion passes. Thank you very much. Mr. Davis, you're recognized by the chair. You have the floor. Let me preference this. A vote has just taken place. If this is about that discussion, unfortunately, we can no longer discuss it because the vote--

LOGAN DAVIS: Sorry. I thought I was muted.

RASHAD BRISTO: So is it in regard to what we just voted on?

LOGAN DAVIS: It's moot. Drop it. Dropping it.

RASHAD BRISTO: Yes, sir. Okay. Ms. Brenda Cosse, I see your hand. Okay. So do we have any announcements?

BRENTON ANDRUS: Mr. Chair, looks like Jill Hano has her hand raised.

RASHAD BRISTO: I apologize. Thank you. Ms. Hano, you're recognized by the chair. You have the floor.

JILL HANO: I think that was a mistake.

LOGAN DAVIS: Can you repeat that, Ms. Hano.

JILL HANO: I didn't mean to have-- I don't know why it was up.

RASHAD BRISTO: Okay. It was an accident?

JILL HANO: Yes.

RASHAD BRISTO: Okay. Not a problem. So now we're up to announcements. Next meeting is going to be April 21st, 2022. Do we have any other announcements from any other council members?

ROSLYN HYMEL: Excuse me, chairman. Are we ending right now as we speaking?

RASHAD BRISTO: Yes, ma'am. We're getting ready to adjourn. All business has been taken care of. We've had our reports that have been presented by our council. And we also have our announcements. But before you say anything, I just want to say you were up next. I was about to recognize you. Thank you for your time and your service to the DD Council. You're going to be greatly missed. You've been a great contributing factor to the DD Council. Just because you're rolling off does not mean that you don't have to make yourself available. And, you know, you're still an asset in any capacity whether you're a council member or in the public.

LOGAN DAVIS: You're muted.

RASHAD BRISTO: You're muted, Ms. Hymel.

ROSLYN HYMEL: Yeah. Like I'm saying, could I still be a part of it? Or what could I really do to be a part of it? Because this is my passion and I really want to thank everybody for it, for giving me this opportunity to be on the council.

RASHAD BRISTO: There's still a lot of things you can do to be a contributing member of the council. Just because you're not a council member, does not mean you still can't be in attendance of any public meetings or be able to be a voice and still be boots on the ground to let us know what's going on in the community. So we thank you for your service and we're looking forward to seeing you in the near future. One more thing I want to address. This has happened with the previous chair, and I noticed it happened with me last month. Periodically the council will receive a fraudulent email that says it's from the DD chair. If you ever receive an email and you question if it is me,

two things going to be identified. One, I'm going to put what I want in the subject. And two, in the body I'll have my personal phone number that way you can verify that it's actually me and it's not fraudulent. I don't want anyone to be taken advantage of anymore where someone is trying to ask me where I'm saying I'm in a meeting and I need you to handle something privately for me. So if you receive anything moving, if you don't see my phone number attached to it then it's a fraudulent email. Just let us know so we can go ahead and let everybody else know. Do we have any further business to discuss before we adjourn?

BRENTON ANDRUS: There is a comment in the chat from Ms. Corhonda Corley.

RASHAD BRISTO: Okay.

BRENTON ANDRUS: She said question, does the DDC have a representative attend the BESE and SEAP meetings and speak on behalf of the DDC. And Ms. Banks I think is asking a question related to that. When and where are the meetings.

RASHAD BRISTO: Do we have a representative?

AMY DEAVILLE: I don't think we currently do.

RASHAD BRISTO: Since that's been proposed to us by public, we'll make sure that we-- we'll find out how we can start making that fluent with that possibility. Do we have any other further business to discuss? Do we have any other comments? Do we have anything in the chat?

JILL HANO: I have a question.

RASHAD BRISTO: Okay. Ms. Hano, you're recognized by the chair. You have the floor.

JILL HANO: Thank you. Ms. Deaville, didn't you say you were either this week or you still have to meet with the legislator for the camera bill?

AMY DEAVILLE: We met two days ago.

JILL HANO: Okay. Cause I was just like impressed with we had some very good conversation about the camera bill, and I didn't know if y'all had met. But I was, if not, I was hoping to get that you had all this in your notes to forward to him. But just a thought.

Thank you. Thanks anyway.

RASHAD BRISTO: All right. I didn't mean to raise my hand. Okay. Do we have any other comments in the chat, Mr. Andrus?

BRENTON ANDRUS: I'm sorry. I froze and got back on. I don't see any. Ms. Corhonda Corley, she also has her hand raised. But she has answered Ms. Bank's question. BESE and SEAP are held at the Claiborne building in Baton Rouge. BESE meets two days a month. And I do know those schedules are usually published on the BESE or Board of Elementary and Secondary Education website.

RASHAD BRISTO: Okay. You said Ms. Corley had her hand raised?

BRENTON ANDRUS: Yes. As well as Ms. Kathy Dwyer.

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

CORHONDA CORLEY: Thank you so much. I'm actually currently driving so that was why it was taking me so long to respond to you. But currently we don't have any representation at anything that is very pertinent for the disability community. The DD Council actually have many-- I'm sorry. The DD Council have many seats on many boards, and we currently don't have any parents of individuals with disabilities on those boards. And we are currently, and our voices are actually (inaudible) so we really need to have the representation there at those meetings. BESE meets two consecutive days in that month, in a month. They just met Tuesday and Wednesday. Their next meeting is next month. And SEAP meets every two to three months. And both of them have their meetings scheduled. The schedule is actually posted on BESE's board in the board doc. And SEAP scheduled (inaudible).

RASHAD BRISTO: Okay. Ms. Corley, it sounds like we keep losing you.

CORHONDA CORLEY: You keep losing me cause parents keep calling me. I apologize for that. But I just wanted to make sure that the council know that we really need representation. When Mr. Fleming was our

deputy director he was always, always at every single one of those meetings. Whether it was BESE, SEAP, the board that deals with discipline, et cetera. He was at every board meeting, and he always spoke on behalf of our DD Council as well as parents on each and every last one of those boards. And right now it is not happening. And we really need that representation. I am one person, and it is hard for me to be 50 million places at one time. So I just really and truly ask that you make that a priority because one of the things is our DD Council staff is actually supposed to attend some of these meetings. And they're not being there because they're working from home. And I do understand that Covid is a reality, but also making sure that the DD Council is represented is important as well. So thank you so much.

RASHAD BRISTO: Thank you, Ms. Corley. And I'll get with the executive director in regards to your request. Ms. Kathy Dwyer, you had your hand up. You're recognized by the chair.

KATHY DWYER: Thank you, Mr. Chair. I believe I had asked this at one of the last meetings. I can't remember if it was the absolute last one or the one before. But I receive DD Council emails about several events, and I would like to ask that you also send out email announcements about DD Council meetings as well as the committee meetings. I understand they're on the website, but you have to stop and remember to go to the website to look to see when they're scheduled after they're posted. And I think you would get more people participating. Which and the public should have the right to know that they're happening, if an email announcement was sent out a week or two before the first meeting.

RASHAD BRISTO: Okay. Thank you for that. Do we have any other business or any comments from public or council members?

BRENTON ANDRUS: Looks like you have a couple of comments in the chat. I think lot of this may have been answered. Yeah. Ms. Kathy was asking about email

announcements, which she just covered. Ms. Christy Curtis did say LaCAN leaders usually attend these meetings. She's referencing BESE and SEAP. And they have been attending those virtually since there was in-person suspensions. And then Ebony Haven, she posted the schedule, the BESE schedule for Ms. Banks.

RASHAD BRISTO: Thank you for that. I don't see any more hands raised. We don't have any more comments from the public, just to be clear? That's all, Mr. Andrus?

BRENTON ANDRUS: Yeah. I don't see anything, Mr. Chair.

RASHAD BRISTO: Okay. Well, hearing no objection, this meeting is now adjourned.