

Louisiana Developmental Disabilities Council
Quarterly Meeting
April 20th, 2023

NICOLE BANKS: Good morning, everyone. Our quarterly meeting for the Louisiana Developmental Disability Council will come to order. I just want to welcome everyone and tell everyone thank you for allowing me to be your acting chair. And I hope that we're able to do some very good work here, work together and move forward for systems change that we need for our council. And also just keep in mind who you're here for, you know. We want to always keep our mission for the people that can't speak out for themselves. All right. Amy, can I get you to do a roll call for me, please.

AMY DEAVILLE: Ms. Airhart.

LIBBY AIRHART: Present.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Here.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: Present.

AMY DEAVILLE: Ms. Bayham. Ms. Cosse. Ms. Crain.
Ms. Egle.

JILL EGLE: Here.

AMY DEAVILLE: Ms. Gonzales. Ms. Hagan.

JULIE FOSTER HAGAN: Here.

AMY DEAVILLE: Ms. Hano.

JILL HANO: Here.

AMY DEAVILLE: Ms. Harmon.

ANGELA HARMON: Here.

AMY DEAVILLE: Ms. Hymel. Ms. Jordan. Dr. McKee.
Ms. Polotzola.

BAMBI POLOTZOLA: Here.

AMY DEAVILLE: Ms. Richard.

MELINDA RICHARD: Here.

AMY DEAVILLE: Mr. Rocca.

TORY ROCCA: Here.

AMY DEAVILLE: Ms. Stewart. Ms. Tarver. Mr.
Taylor.

ERICK TAYLOR: Here.

AMY DEAVILLE: Ms. Washington.

RENODA WASHINGTON: Here.

AMY DEAVILLE: Ms. Webb.

VIVENNE WEBB: Here.

AMY DEAVILLE: Dr. Wilson. You have a quorum.

NICOLE BANKS: Okay. At this time we'll have Amy read our mission statement and Ms. Kim read our ground rules.

AMY DEAVILLE: The mission statement of the 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.

KIM BASILE: Good morning. Our ground rules. Members must be recognized by the chair before speaking. Be respectful of each other's opinions. Break for ten minutes every one and half hours. Discuss council business in a responsible manner. Except as necessary restrict the use of electronic communication. For example, texting during council and committee meetings. Silence or turn off all cell phones. Mission statement is posted at every meeting. Be on time for meetings. No alphabet. Side conversations are kept to a minimum, done quietly and restricted to the subject at hand.

NICOLE BANKS: Okay. I just want to add to when she says no alphabet, you know, we're all used to saying just the alphabet of what we are. But if we can please refrain from that and say your whole organization name because they have some people on here that are new that don't know all the accolades. So if we can just let everyone know your whole organization name. Thank you. Okay. So the next item of business is the meeting summary approval of the draft of January 19th. The meeting summary was distributed. The summary will not be read unless requested by a member. Are there any corrections? If there is no objection the meeting summary is approved as distributed. Hearing none, the meeting summary is approved. Has everybody had a chance to review? All right. The meeting summary is approved since we have no objections. All right. Our next item of business is our executive director's report. The chair recognizes Ms. Amy Deaville for her report.

AMY DEAVILLE: So there are a couple of things that

I wanted to talk about. My report is included in the packet for everybody to see. I wanted to give a couple of announcements and then talk about our legislative advocacy agenda. We're in session right now so I wanted everybody to know where we stand with all of our advocacy items. So a couple of announcements. Dr. McKee was not able to be here today, but she had made a motion in October 22 and it was approved by the full council that said that the full council would be trained, have DEI training, the diversity, equity and inclusion training by the end of April. We are currently at the end of April. A training provider has been selected. It took a while for me to get a number of different quotes. So we are ready to proceed, but it's not going to happen by the end of April. So her hope was that people would be okay with moving that deadline back to October of this year. I can't ask for a motion or anything, but that's just what she wanted so I wanted to make sure that I mentioned that.

Let's see. Financial disclosure forms are due May 15th. So if you have not completed yours, please let us know, we can help you get that. You likely received a couple different forms of communication about the financial disclosure by now.

There is a disability policy seminar that happens on April 24. It is a virtual training, one day. If you are interested in--

JILL HANO: April 24th or April of 24?

AMY DEAVILLE: April 24th, Monday.

JILL HANO: Okay. I was excited when it was April 24.

AMY DEAVILLE: If you are interested in attending or finding out more about it, let me know.

And then I also wanted to mention that the nominating committee will need to be appointed very soon. And the nominating committee is charged with figuring out a slate of nominees for the next executive committee officers. Those next executive committee officers will take office October 1st. So nominating committee meets in between the April council meeting and the July council meeting to discuss the options, make recommendations, and found out whether the people they would like to nominate would actually accept nominations. And then those, that slate of potential

officers is presented to the full council at the July meeting and the full council votes. And that's held (inaudible). In your packet you should have a list of the different officers that we have on our executive committee. And it gives a brief description of what each officer does. Please review it and see if that is something you're interested in accepting a nomination for. People on the nominating committee need to be people who are not interested in accepting a nomination so that there's no conflict of interest. So if you know that you are not wanting to accept a nomination for executive committee next term, please let me know. I'll take the list of names and that will help the chair know who to appoint for nomination.

And then like I said, review the different officers and the descriptions of what they do. And then the nominating committee will start their work pretty soon after that.

I will now talk about the council's legislative advocacy. We have four items on the agenda. The first one is funding incontinent supplies for adults with disabilities and the IDEA waivers. We partnered with the Arc of Louisiana to work on this agenda item. And we met with the department multiple times. We met with Julie and her team. We met with Melinda and her team. We met with Tara LeBlanc at Medicaid and her team. We had a lot of meetings. In the end the department decided that they were going to make this change without a bill being necessary. So OCDD is currently working--

JILL HANO: For what?

AMY DEAVILLE: Funding incontinent supplies. So Julie and her team are currently working on making the necessary changes to the waivers to be able to allow for this to occur. In the New Opportunities Waiver and the Residential Options Waiver they did not require CMS approval to make this change. So the changes will happen in those two waivers sooner. Julie, is it still in July?

JULIE FOSTER HAGAN: So we hope so. As all things when we started trying to figure out how to enact it, it doesn't require a waiver change, but it will require us figuring out how the payments are made to the providers for the incontinent briefs and supplies.

Where we are. We're not ready to say (inaudible). We have the target date of July 1. We still have the target date of July 1. But just alerting folks that as we start, we've already started working towards implementation, but we have to make changes in our billing system and things like that. We're running into some issues that we're having to investigate further. But it doesn't require waiver changes. So it's more internal. So we are still shooting for that, but it may be pushed back 30 days if we can't figure that out.

And then in the supports waiver, we got our supports waiver back approved so we're looking at adding that into the supports waiver, but we have a few other amendments that we're also trying to do in the supports waiver so we hope to get that to CMS soon. And then we'll be able to roll that out after we get approval from CMS. So that's probably more like a four to six month timeline in the supports waiver.

AMY DEAVILLE: Any questions about that agenda item? Erick.

ERICK TAYLOR: Is it true that y'all trying to make the waivers all in one waiver?

JULIE FOSTER HAGAN: It is true that we started trying to make it all one waiver five years ago and we've not been successful with it. There's a lot that we have to do and when we got-- we've talked in here a lot about the American Rescue Plan Act dollars. It's called the section 9817 which is the part of the American Rescue Plan Act that has to do with the home and community-based services. As long as we are getting money through them, we have to do something called a maintenance of effort which means you can't make substantial changes without them questioning it because it might look like we're taking things away from people. And so because of that maintenance of effort I don't imagine that we'll be able to even really start thinking about a consolidate, of one consolidated waiver until we get past that March of 2025.

However, what we are trying to do is take at least our three adult waivers and we're trying to make the services in those three adult waivers as similar as possible with some changes to the rates and the service

definitions when we do those waiver amendments. So hopefully by the time we get where we're ready to go to one or maybe two what we call consolidated waivers it's already going to look pretty similar. So in nature. So it won't be as hard to show. When you do any changes you have to show a crosswalk and you have to show how people, show CMS how people are closing things. So we're trying to make it simpler within our waivers now. Which is kind of a step to get us to the consolidated waiver. But we have been talking, what, probably more than five years. We've probably been talking about it for about seven years. And we did hear from stakeholders that they would like to have a consolidated waiver to make it more efficient and just easier to navigate our system. So since we weren't able to do that, we're looking for other ways to make that efficient and easier to navigate in our system.

ERICK TAYLOR: Okay. The waivers for the kids, are y'all doing any changes with them?

JULIE FOSTER HAGAN: There's been a few changes with the children's choice waiver. And we have, those are more along the lines of-- well, all of them will have family members able to be paid caregivers. But with the children's choice waiver it's always been more flexible than our adult waivers. You know, we have the services and then there's a budget. And so you can sort of use whatever you need to in the children's choice within that budget. But we have made some changes like being able to share across waivers and things like that that have applied to children's choice. So it's not that there's no changes but there's more-- and to be honest when I said one maybe two, as we start, we initially looked at having one consolidated waiver. There's some reasons why we might want to do that. There's some reasons why we might want to have two and have one waiver for children and have one waiver for adults. Because there's just some differences in terms of the children have access to EPSDT through Medicaid so they have access to more what we call state plan services than adults do. And so but we'll get back to that conversation probably in the next year or two. But we're not actively working to consolidate it into one waiver right now.

ERICK TAYLOR: One more question. Have y'all make

any changes with the providers like the case manager being more noticeable(inaudible)?

JULIE FOSTER HAGAN: So during Covid we had a lot of, kind of a lot virtual. I mean, we did virtual till today right here. So one of the things we are doing is having more back in the home. And we feel like when you're back in the home as opposed to virtual there will be the opportunity to see some of those things that we may have missed before. For example, even if you can see on the phone we now know when you go into the home sometimes you can tell that the living conditions aren't what they need to be to promote health and safety of the waiver participant. You can't easily see by phone if a person has enough food in their home for what they need. And so by having those, returning to those in-person visits now that the public health emergency is scheduled to end, we're hoping that it will start to help us be able to catch some of those things earlier again like we did before Covid.

ERICK TAYLOR: One more thing. Are y'all pushing the waivers to get people out the nursing home?

JULIE FOSTER HAGAN: Yep. We're under a Department of Justice settlement agreement that says we will get people out of nursing homes that want to and are able to get out of nursing homes.

ERICK TAYLOR: This is the last thing. I personally think that people use family members, but I think they need more training with the workers of coming in the homes. Are y'all thinking about more training for workers?

JULIE FOSTER HAGAN: Sure.

ERICK TAYLOR: I know everything is around pay. I think they need more training with the workers.

JULIE FOSTER HAGAN: We're actually in the process and we're almost ready to roll it out where we will have several training opportunities for direct support workers. We have different modules that we'll be using. Some of it is around person centered practices. Helping people have more meaningful activities in their day. There are some things like recognizing signs and symptoms of illness. Recognizing signs and symptoms of abuse and neglect. We have several different modules that we developed that we're going to offer webinar opportunities so that direct support staff can

virtually be able to attend that. Not that there's not. There's others out there, but it is often times at a cost. So one of the things providers told us is if we had up to date current best practice training that they could use for direct support workers-- they still have to pay them for their time while they're taking the training, but then they're not having to pay for the training. So we're very close. Within the next month or two we should be rolling all those training opportunities out. And we'll do them multiple times throughout the year with our staff that we have in OCDD.

NICOLE BANKS: Ms. Jill.

JILL EGLE: Ms. Julie, I recently got something talking about appendix K. What is that about?

JULIE FOSTER HAGAN: That would take me the entire DD Council meeting to tell you.

JILL EGLE: People have to go back by next month?

JULIE FOSTER HAGAN: No. So I would encourage everybody-- we did do several in-person meetings and then we had a webinar that we recorded. I believe it's on our website. I'd probably need to confirm that. But the intent was for us to put it on our website. It's actually a two-hour presentation that goes through all of the Appendix K waiver changes. So it goes through and tells you this is what was happening with waivers before Covid. This is what we've been doing the last three years during Covid. And this is what we're going to be doing now when we get to November. The only thing that ends in May is the virtual case management services in the New Opportunities Waiver because those are in state plan. All of the other exceptions in our waiver will continue through November but that presentation goes into detail about all of that.

JILL EGLE: And by that--

NICOLE BANKS: Ms. Jill, we're going to wait until after she gives her report to have these questions so that we can move right along with our agenda. So we're going to table that until it's time for you to give your report.

JILL EGLE: I'm sorry. I'm just on edge because my dad went to the meeting with the OCDD and it looks like DSPs, the funding that the legislative was supposed to

give, they didn't give it to no DSP. I don't know what's going on.

NICOLE BANKS: And again, I want to remind everybody to be respectful of all of our times here because we do have a lot of agenda items to go through so can we respect the subject that we're talking about. And if we have to hold it until the actual report until after lunch then that's what we have to do. Okay.

AMY DEAVILLE: All right. The second agenda item is recurring funding for Families Helping Families centers. So just as a reminder we have 507,517-dollars that occurs every year in our budget for Families Helping Families centers. It's state fund money. State general fund. The last two years we've advocated for an additional 500,000-dollars for a total of 1,507,000. I'm sorry, 1,007,000. And all that money is distributed equally to the nine FHF centers that we contract with. Every year when I make my budget request to the department that funding is in asking for them to analyze it, but every year it gets taken out because when it's amended in by legislators it's usually put in as one-time funds. Which is what has happened the last couple of years. So this year we're asking once again for the money to be amended back in, but also for there to be language that says that this money needs to be reoccurring and just in our budget every year. So we have, we've gone to house appropriations a couple times on this issue. And we have three separate representatives who have said that they will amend it in. So it will be a race to see which one does it first. But I'm pretty sure we're going to get this in as there are a number of different representatives who said they'll do it.

The third item is funding for post-secondary inclusive education fund and the ask was to add an additional 3-million-dollars to the fund which was created last year. We are-- right now that money is not in the budget. The rumor is that it will appear in the supplemental budget. But the supplemental budget has not been released yet. So we're waiting for that. But we do have a failsafe. If it's not in the supplemental budget Senator Boudreaux has agreed again to make sure that he gets the money amended in. So we're in a really good position with that one too.

Hopefully the money is just in the supplemental budget. But if not, Senator Boudreaux is going to make sure he makes an amendment.

And then the final one is amending open meetings law to allow for virtual participation. We have worked with Senator Hewitt on this a lot. She chaired a task force last legislative session that was about this. And we've done a number of yellow shirt days, we've done three so far in between the task force. And this item was just heard in Senate and Governmental Affairs on Tuesday. And so we did a yellow shirt day again. The Developmental Disabilities Council stands in a very good place within the proposed bill or the proposed amendment. We currently have a carve-out that would allow our council to meet-- they call it remotely, but it's really more of a hybrid because you do have to have a physical meeting for locations. It's not 100 percent. But we would be able to do that 100 percent of the time. Other wording in the bill does not allow that for every council. So we have a carve-out. The intent was that they were going to make the list of all of the different boards and commissions that had something to do with people with disabilities. The list that they have so far is not comprehensive. A list has been submitted to them, but it has not been amended in. So there is a request for that broader list to be amended in. But there's also been a request to actually take the list out and instead make the wording more general and say basically any board or commission that has something to do with disabilities would be able to meet virtually 100 percent of the time.

BAMBI POLOTZOLA: It's primarily focused on disabilities.

AMY DEAVILLE: Right.

BAMBI POLOTZOLA: Because a lot of boards have a little bit about. Its primary focus is disability.

JILL HANO: That's house bill 201?

BAMBI POLOTZOLA: Yeah. Senate bill.

AMY DEAVILLE: Senate bill 201.

JILL HANO: Thank you.

AMY DEAVILLE: So anyway, we stand in a good place, personally, our council. There is still a little bit more work to be done to try to get some of the other

councils that also primarily work with disabilities to also have the same capabilities. But I believe that amendment will be made. She's very open to doing it, it just has not happened yet.

There is also, there are other groups who are very interested in this bill that are pushing to make changes. Nothing that should affect us. But broadening it up to allow for other groups like groups that deal with early childcare, for them to be able to have the same consideration of virtual. So wanted to see, it still has a ways to go in the process, but it is heard on the senate floor, right, Brenton, next?

BRENTON ANDRUS: Monday.

AMY DEAVILLE: On Monday. Any questions about that? If it passes it does not take effect until August. So just FYI.

BRENTON ANDRUS: Just going to say there will be an alert that goes out today if you are interested in this particular issue so look out for that.

AMY DEAVILLE: And that's all I have.

NICOLE BANKS: All right. Thank you, Amy. Are there any questions from the council members on the reports? Are there any comments in the chat box? Oh, yeah. That's right. The report requires no action and will be placed on file. All right. The next item of business is the budget report, and the chair recognizes Ms. Amy Deaville for the report.

AMY DEAVILLE: You do have a copy of the report in your packet. So we are currently about three quarters into the state fiscal year. So when you're looking at, if you're looking at (inaudible) you should mainly be seeing percentages somewhere in between 50 and 75. Our salary percentages are going to run a little lower because we were not fully staffed until January of this year. Our travel, our total travel, of course, is down too because we have not had 100 percent in-person meetings which is what the majority of our travel budget is for. Our operating services are right in line. You'll see one percentage for dues and subscriptions, that's at 93 percent. Meaning we don't have very much money left in there. That's by design. We pay one due to a national organization for councils of developmental disabilities. And that's already come out. And then we're looking at contracts we're at

about 51 percent. That's expected too. It usually takes our contractors a little bit of time going so a lot of the billing happened at the back-end of the fiscal year. We should be receiving more bills and a lot more of that money spent. And that's it.

NICOLE BANKS: All right. Thank you, Amy. Are there any questions from the council members on the report? All right. It will be placed on file. The next item of business is our committee reports. Our first report is from the planning committee and the chair recognizes Ms. Bambi Polotzola for the report.

BAMBI POLOTZOLA: Okay. Thank you, guys. I filled in as chairperson for Rashad after his departure. And I appreciate Angela Harmon, Libby Hebert, Renoda Washington, Erick Taylor and Jill Hano for participating. Who else? Well, you're on this side of me. Appreciate-- it really had a good engaging conversation. And I think we came up with a good recommendation. So the draft plan that the committee approved has been included in your packet.

AMY DEAVILLE: It may not actually be in. It might have been a pop-up or on the side. It should look like this. If anybody doesn't have a copy let me know because I have some extras.

BAMBI POLOTZOLA: So but just to highlight the major changes, the committee agreed with staff recommendations and feels the following activities should be discontinued. And they are activity 1.1.5 which was to produce and disseminate videos and other visual materials featuring information important to individuals with intellectual and developmental disabilities and their families. And to discontinue activity 1.1.6 which is to provide financial support for promotion, awareness, training and support in the implementation of supported decision-making. And that amount was 50,000 in the current budget. And the previous item was for 36,000 in the current budget. Activity 3.1.1 was to provide financial support to establish the post-secondary inclusive education alliance to provide mentoring and technical assistance, host training events and develop resources designed to build capacity for Louisiana post-secondary institutions in providing inclusive post-secondary education opportunities for individuals with

intellectual and developmental disabilities throughout Louisiana. And the current amount in the budget is 40,000. And then the last item that we're recommending to be discontinued for next year is activity 3.2.1. And that one was to provide financial support to conduct seminars with chambers of commerce throughout the state on the benefit of hiring people with intellectual and developmental disabilities. And that is 39,000-dollars in the current year budget.

Okay. Additional activities that the committee recommends discontinuing do not have funding attached and can be found in the draft plan included in our packet. The committee also decided to increase the funding for activity 1.1.2, which is LaCAN. And so currently it is 215 and the committee is recommending to bump it up to 240, 240,000 I should say, for the following reasons. To ensure LaCAN leaders receive competitive wages to cover cost of living, mileage and supply cost increases due to inflation, to help with recruitment of new leaders in vacant positions and to assist with professional development costs.

The next activity, which is activity 1.1.9, is our Youth Leadership Forum which is funded for 30,000 this year but the committee is recommending to move that up to 45,000 for the following reasons. To be able to pay staff members, to be able to increase the number of delegates or participants and to increase the number of days for the forum and to achieve the American Camp Association Accreditation. With those changes the committee was left with 147,000-dollars for new activities. The committee decided to add the following activities based on recommendations from the standing committee staff and proposal sent to the council. These activities include to provide financial support, technical assistance, to educate and train individuals with intellectual and developmental disabilities on voting awareness, rights and accessibility. And the suggested funding is 30,000-dollars.

The second addition that we're recommending is to provide financial support for training to individuals with intellectual and developmental disabilities on how to navigate the developmental disability, behavioral health and Medicaid managed care organization systems. And the suggested funding for that is 30,000-dollars.

And then last recommendation, new item is to provide financial assistance to build capacity for advocacy regarding education and employment. And the suggested funding for that is 87,000-dollars. The planning committee approved the draft plan for federal fiscal year 2024 action plan and offers this draft for the full council's consideration. Any questions? Yes, Vivienne.

VIVENNE WEBB: Why was 2.1.2 taken out?

BAMBI POLOTZOLA: 2.1.2, what is that? Activity 2.1.2 is being added. Oh, okay. That was one that we considered. There was just concerns about the implementation of it and like we said, we had 147,000 and that was one of the other three that I talked about in this one. And so just because the amount of funding was limited and there was some hesitations on how to go about implementing it. Where the other three, so, for instance, the other three that I said, like the voting, we actually have a bill that's, a couple bills that are coming through that's going to make some pretty significant changes to accessibility around voting so we feel like right now we need to get it in training so people can learn about these new accessibilities or ways to be able to identify like voting barriers. So that's something that was like kind of, I guess, time sensitive.

And then regarding the training around like dual diagnosis, people with developmental and behavioral health people felt like that's something that we're hearing people are really, really struggling with whenever they have dual diagnosis and people not knowing where to get the support they need.

And then the one about building capacity around education and employment, the committee felt that that was like something that really needed, we need to increase our advocacy in education and employment because people are really struggling with the issues around appropriate access to education. And so those three kind of rose to be like the most-- the word I'm looking for?

AMY DEAVILLE: Highest priority.

BAMBI POLOTZOLA: Yeah. Highest priority. And it was pretty clear how to go about implementing that and how to get engagement from the groups. Whereas the one

about sexual education, it wasn't necessarily something that people heard as much about, and it was kind of how do you engage young people when you couldn't go through the school system.

VIVENNE WEBB: Could we do it through ABA?

BAMBI POLOTZOLA: What is ABA?

VIVENNE WEBB: Service providers like behavioral therapy.

BAMBI POLOTZOLA: I honestly, one issue that I hear is that teenagers often can't get into BCBA and ABA services. That's another issue that I hear.

VIVENNE WEBB: Well, the big problem with just like scratching that out instead of trying to implement it is the fact that this could be life changing for several individuals. Especially because people with developmental disabilities can be taken advantage of way easier than other people. And they need to know like their boundaries, protect others' boundaries and to really learn about all of that. And it's change, it's new and I think it's something really important that we need to discuss and have. It makes a difference between someone being labeled as a sex offender later in their life when they don't understand that they didn't really do much. If sex education could fix that then shouldn't we do this because it could make like a big difference.

SPEAKER: Our kids in the school system do not take the same classes for sex education and science and health that our special education kids do. So why is that?

BAMBI POLOTZOLA: It shouldn't be.

SPEAKER: It shouldn't be. They don't take the health class that the sex education is taught in. They're not allowed to take the science. So that right there would eliminate this whole one if they would have a class.

BAMBI POLOTZOLA: But they should have access to science. So wherever they're getting their science instruction.

SPEAKER: Curriculum, this is not in our science curriculum.

BAMBI POLOTZOLA: So that's an education issue, I think. I don't know if anybody else has an opinion on that.

JILL HANO: Two questions. Cause Bambi was getting to if it is an education issue, and I'm not saying, like I don't want to say this because I never know the solution. I just know book stuff. But can it be in IEPs that my kid goes to PE? Because I only went to public schools till 8th grade so, I mean, this was a while back. But like so special ed students went to regular PE and then or if not, they went to (inaudible), so why isn't that kid taught this?

And then another thing like cause if a student is in special ed, that's one thing. But if a student-- because I want a regular-- I'm going to cry. I was in regular ed my whole life. Like my mom is awesome. My mom fought tooth and nail. I was 504 in regular ed until I went to a catholic high school. So like if there are kids with disabilities in regular ed, are they still being excluded from programs? Like you have to sit out when we talk about this information. Because it's one thing (inaudible) are not getting taught this, but like if anyone in PE not getting taught this because my PE teacher wouldn't teach me how to drive and I'm still mad at her.

BAMBI POLOTZOLA: So the answer is that if it's in the curriculum every kid should have access to it unless their IEP specifically says.

JILL EGLE: Non-verbal, they don't understand what sex ed is about.

BAMBI POLOTZOLA: There's ways to teach people that are nonverbal.

JILL EGLE: Like they wouldn't know what to do and it's like parents are concerned cause they rate a nonverbal and then they lie down and something bad happens. I think that's appropriate.

BAMBI POLOTZOLA: Yeah. And that's the point of the sexual education is to teach people about their bodies, teach them about what's appropriate touching, what's appropriate behavior. And that's really-- cause we had this discussion yesterday in the meeting. And also the issue I think Vivienne brought up, you know, sometimes our people with disabilities they're going through puberty or whatever and they may want to act out in a certain way, and they don't have the social understanding to know when they can do certain things you can't do in public. So this training would

approach both of those things. Whether they're a victim or if they have some behaviors that they need to understand when it's an appropriate place. And so I think there's an issue with education that every kid should have access to the same thing that all other kids have access to whether they're in a special education setting or in regular. And to answer your question, if a kid is in a regular education class where that's being taught, they should not be removed unless there's some decision made by their IEP committee. But the other issue is, and why it's so difficult in education is that the State of Louisiana doesn't require sex ed for all kids. Each parish decides that.

SPEAKER: So the parish would have to.

BAMBI POLOTZOLA: Right. Yeah. The Department of Education has no control over that.

SPEAKER: So like if they have the parish special advisory panel and the school board, right?

BAMBI POLOTZOLA: Yeah.

JILL HANO: So I think this is something we were talking about yesterday that since it's by parish advocacy needs to be done for this the way that the cameras in the classroom were done like by parish. Cause I think I'm saying the wrong thing. That's what I was thinking. And then I saw that every district had a different camera policy. So it may be similar to that. But then, I mean, people can't get away with this.

BAMBI POLOTZOLA: So we have Erick with his hand raised and then we have a public comment after.

ERICK TAYLOR: I think it's being too broad. I mean, it's being too broad. I mean, a lot of information out there with it already. It's too many parts to that to even touch that.

SPEAKER: They touch it in regular ed. As a teacher I'm dealing with it right now every day.

ERICK TAYLOR: Right. You still got to go through the parents to get them to sign it and say okay, it's fine for my child to be there in that class. And if you don't, and some parents don't feel comfortable letting their children be in there. It's a broad situation and so many parts to that. And it's a touchy situation. If I'm making any sense to y'all.

BAMBI POLOTZOLA: And I think there is a curriculum. I mean, it can be taught. The issue is we're not going to be able to do it through the school system. It's too disjointed. So the other way to go about it is to somehow reach out to this age population and get them to attend some type of training and that to me is where the barrier is. Like will we be able to reach those people and will it have the capacity to help.

SPEAKER: And it needs to be done before they finish high school because I already have some that have had children who are dealing with it in my classroom where they don't understand the relationship issues and we find them kissing and, you know, and they think they're just friends. They don't know. So you have to report it and it's a lot. So you have that mix of they don't know what's appropriate, but they want to be appropriate cause they see everybody else. And so having to report everything and it's a lot, believe me.

BAMBI POLOTZOLA: And so do you think though going about it and having some contractor to do some type of training that those kids will be reached, will those parents--

SPEAKER: Not after high school.

BAMBI POLOTZOLA: You can't do it in school so you would have to reach those kids in a way that the parents bring them after school or allow-- so that's our point that you're not reaching them.

SPEAKER: They're teaching it in regular education. Why can't they teach it for special education?

JILL HANO: This is literally a double standard.

NICOLE BANKS: Mr. Erick had the floor, and I just was allowing conversation and dialogue to happen.

ERICK TAYLOR: I'm fine with it. I'm through.

NICOLE BANKS: I have one more. I see Ms. Vivienne down there.

VIVENNE WEBB: So it sounds like the real issue is the fact that our special education students do not have access to the same curriculum or materials that our regular education students have. We can knock out several birds with one stone if instead of just sex ed we did (inaudible) and said we want our special education students to have an equal education and equal access to the same curriculum and same learning

materials that regular education students have. That sounds like the real problem. Like it includes sex ed, but also everything else.

NICOLE BANKS: Okay. The chair recognizes-- state your name.

MINDY RICHARD: Mindy Richard. This is just logistics. I'm trying to get to know everybody. If you guys could turn your cards around. Thank you so much.

JILL HANO: The only nonmember of the council has her thing correct.

MINDY RICHARD: Thank you. Not to call it out, but thank you for that. Appreciate it.

NICOLE BANKS: All right. And we have a public comment.

AMY DEAVILLE: I'm sorry. I think the public comment was Lillian was the first one.

JILL HANO: It was.

LILLIAN DEJEAN: I think a lot of people were, at least in our state, across the country are really, really scared to talk about sexuality and people with disabilities because the overlying assumption is people with disabilities are asexual. Especially our youth. I had the opportunity to visit another YLF, Youth Leadership Forum, in another state for a couple years now and they do take the effort to do two sessions based on sexuality. And they pull in a professor from their local university that teaches human sexuality. Part of that is an open Q and A where delegates submit questions unanimously and another part is kind of like an STD education part. And the questions that were submitted were pretty startling because we have high school students with disabilities who were excluded from the sexual education at their school, so they were 18-year-olds asking how babies were born. Despite the fact that these students are interested in getting into relationships, there is a lack of understanding of the basic mechanisms. Or even we had, you know, nonverbal individuals asking questions about consent and how to navigate that.

And so as Vivienne mentioned, you know, this is a more venerable population. Especially whenever you consider the fact that often things are done to youth with disabilities not in a sexual way, but in

educational settings and medical settings, decisions are made without them. And so with a lack of sex ed that sort of lesson goes over into their relationship life, right. So it really seems kind of silly to me to eliminate funding for this especially considering all the bills that are being passed currently with internet censorship, book censorship in an already conservative state where youth with disabilities do not have access to this information. We know this is a problem across the board. But I think with the funding that we have with the DD Council you guys have an opportunity to make a bit of a change there and put some protective measures in place so our youths with disabilities lead empowering lives(inaudible). But we can't do that if we don't have the proper education. Thank y'all.

NICOLE BANKS: Thank you. All right. Is there any more discussion from the council members up on 2023 action plan?

AMY DEAVILLE: Public comment.

NICOLE BANKS: Oh, I'm sorry.

SPEAKER: I think what Jill is trying to say, I think she was liking it to the way we had the districts draw up the individual policies regarding cameras. Perhaps adding it in somehow that way, require the districts to address the problem overall however it ends up being worded. There are a couple of ways to handle as far as addressing it. Adding it the standards is one way. I don't know if we do that in science classes, but adding into the standards would be one thought. But having to develop a policy to address the problem.

NICOLE BANKS: Any more public comment?

SPEAKER: Hi, (inaudible) Families Helping Families Greater Baton Rouge and I just want to (inaudible) what Jill said. One of the things that I want to (inaudible) Families Helping Families is for you guys not to overlook the fact that these organizations or centers across the state can help with that issue of training. Making that available for the parents and self-advocates across the board dealing with the whole sexuality issue because that's what we do so don't overlook that. But also consider adding additional moneys and responsibilities for Families Helping Families to be able to address that as an outside

entity. So thank you.

NICOLE BANKS: Thank you.

JILL HANO: Nicole. I'm so sorry. I have one more question. Do regular ed students, because I am very conservative, do regular ed, do they have to get a signed consent form?

SPEAKER: Yes.

JILL HANO: Then why can't you send the form to all the students? Like I don't know. Nicole, move on. I'm mad.

NICOLE BANKS: All right. Thank you.

BAMBI POLOTZOLA: So, I mean, hearing that testimony, I mean, it seems like it's pretty compelling. And just around the sexual education, pretty compelling testimony particularly from our youth that would fall in this population, so I want to value their voices and they're saying how important this is. And we thought it was very important, but as I said, the issue was how do you reach this age group when we know that going through the school system is not an option. And so maybe we need to change that activity to something else. I don't know. I'm going to open up the floor to have discussion about that.

AMY DEAVILLE: If I can just step in. So your current motion that's on the floor, because it came from the planning committee, is to approve the 24 annual plan as is. If somebody makes a modification to that then this motion has to be denied and then you need to remotion.

BAMBI POLOTZOLA: Okay.

JILL HANO: Did we already pass-- no?

AMY DEAVILLE: So the planning committee passed it.

NICOLE BANKS: So it can be entertained, like Ms. Amy was saying, it can be entertained with this motion. But if we don't all agree on it then it dies and someone else can entertain another motion.

BAMBI POLOTZOLA: Then we can go back. If there's no change we can go back to this motion.

NICOLE BANKS: Right.

JILL HANO: So if this fails, Bambi, you can make a motion to change like whatever activity (inaudible), correct? Okay.

BAMBI POLOTZOLA: So if the council wants to have more discussion about this item, we would have to...

NICOLE BANKS: Okay. I was told that we could just amend that. And like instead of taking it out just put it back in, like amend it and then we can move forward.

BAMBI POLOTZOLA: Okay.

NICOLE BANKS: So that will make it a little bit easier instead of reconvening, meeting and you have to do all that again just to take that one section out.

AMY DEAVILLE: No. It wouldn't require a new meeting. They would do it here.

NICOLE BANKS: Okay.

JILL HANO: No matter what, there's definitely like the planning committee is done. So whatever we're going to amend to the plan is done today by the full council.

NICOLE BANKS: Correct. So I'm open to entertaining a motion.

AMY DEAVILLE: So the motion is already on the floor. At this point you can ask if there are any objections then that would open it up for amendments if that's what the council would like.

BAMBI POLOTZOLA: If you want to object to have a discussion about this item somebody needs to object.

VIVENNE WEBB: I object to this motion.

NICOLE BANKS: Okay.

VIVENNE WEBB: Also, could we put the motion up on the screen?

AMY DEAVILLE: Yes. Ebony, can you stop sharing, please.

BAMBI POLOTZOLA: Can you put it back on the screen so we can see what we took out. I make a motion to change activity 2.1.2 to provide financial support for training of individuals-- and I'm actually reading the wording from the next one, provide financial support for training to individuals-- to high school age, middle school and high school age students with-- well, I don't like students.

SPEAKER: Individuals.

BAMBI POLOTZOLA: I would just put individuals. Middle school and high school students with intellectual...

SPEAKER: And they could do this during their life skills program. It could be done during that.

NICOLE BANKS: Okay. So currently we have a motion on the floor.

BAMBI POLOTZOLA: So provide financial support to provide appropriate accessible sexual education to middle and high school aged people with intellectual and developmental disabilities.

JILL HANO: I do like students because even though they may not necessarily be under 18, they're still students, right?

BAMBI POLOTZOLA: They may not be at school.

JILL HANO: Oh, okay. Sorry.

NICOLE BANKS: There's a motion on the floor. We need a second.

SPEAKER: Second.

NICOLE BANKS: Okay. Can you put it up there in more clear language?

KIM BASILE: Just what is provide financial support? To whom?

AMY DEAVILLE: What that means is we would have to search for a contractor and a contractor would have to develop and then provide this training.

SPEAKER: How would we disseminate this, I mean to distribute this?

AMY DEAVILLE: The training?

SPEAKER: Would this just be on like a website or what would that look like?

AMY DEAVILLE: That would be up to the contractor how to advertise it, what formats they use to provide the training.

ASHLEY MCREYNOLDS: (Inaudible) around school systems allowing one individual to come in, the likelihood of that happening is not very likely.

BAMBI POLOTZOLA: It's not going to be through school. To be clear, this is going to be outside of school.

AMY DEAVILLE: Please state your name.

APRIL: They send us, you know, things (inaudible), so why can't they send something for the student with disabilities where their family can be there, and we can give feedback like at the end like a survey or I don't know. I just think that the kids with disabilities need that and if you're offering it to regular students then can you offer it with consent from the parents with a virtual or something like that? Would that be something that they can entertain?

SPEAKER: Maybe so. I mean, it just depends on the

school system and the school itself. I would have no problem as long as they're getting something.

APRIL: We need something more structured. I mean, you know your kid or whatever, but the parents need to have a program or something to follow.

BAMBI POLOTZOLA: And just to be clear, if a school system is not giving a kid with an IEP with a disability access to the same curriculum, then they're in violation of federal law. Like that's the issue. It's not about school ed. It's about school systems not doing what they're supposed to do. That's a different issue than what we're talking about right now.

JILL HANO: The district and the state could benefit from a state training or just now include a definition in a letter, big bold paper just the-- I'm not mad over the topic per say, I'm mad because this is so basic. Like now every school-- sorry. Every school district has a big bold definition.

NICOLE BANKS: Okay. We have another public comment.

NICOLE DEJEAN: My name is Nicole DeJean. Maybe the resolution to the current discussion would be instead of funding something right now it would be more research the best way to approach this. Maybe do some, you know, research to see what the trends are across the country if we're going to kind of an external thing from the school system what would be the best way to reach the population that we're looking to reach and to disseminate the information. And maybe some way that other areas are partnering with families to support that information. Just a thought. So maybe that would be the (inaudible).

NICOLE BANKS: Okay. All right. So we have a motion. We have a second. Now we are going to do a roll call vote. We heard discussion. So we're going to go ahead and do a roll call vote on our 2023 action plan.

BAMBI POLOTZOLA: We just had a comment that I would like to hear from the council, do y'all want to fund it or do y'all want to do--

SPEAKER: I like what she said.

NICOLE BANKS: Okay.

JILL HANO: A study resolution.

NICOLE BANKS: We can recognize you all while you speak because we do have the YouTube and they do want to know who is speaking. So raise your hand so we can recognize you in regards to this discussion.

ERICK TAYLOR: My name is Erick Taylor. I think we should do what the young lady just said at the end. Have a research of it and see what's out there before we even go forward with it so we will know what we're facing. That's all I have to say.

SPEAKER: But I guess I'm wondering who's doing the research. I mean, we're not going to fund it, staff will do the research? Okay.

NICOLE BANKS: Okay. Just to reiterate Bambi's motion is to just change like to not take it out and to put it back in so that everyone is clear what we're actually voting on. Discussions can still be had at a later time in regards to the research and what we want to do as a council.

BAMBI POLOTZOLA: But that's a different thing. What I put as a motion was to provide financial support, which means we have to put funding behind it. And what Nicole DeJean recommended was research. So that's a big difference. There's a funding-- mine, which I'm okay if the council's okay with doing research.

AMY DEAVILLE: (Inaudible) it's your motion on the floor so the easy way would be either a roll call vote or ask if anyone has objections.

NICOLE BANKS: Okay. Do we have any objections to this motion? Ms. Kim.

AMY DEAVILLE: We need another motion.

NICOLE BANKS: Motion, guys. And we're here to entertain another one.

KIM BASILE: I want to motion what Nicole DeJean said.

ERICK TAYLOR: I second.

JILL HANO: Can I second that or do you want to second this?

AMY DEAVILLE: Is the wording (inaudible) or is there suggested change?

NICOLE BANKS: Can you read the motion for us, please.

AMY DEAVILLE: Yeah. The motion by Kim Basile is to amend activity 2.1.2 to research best practices for

providing appropriate accessible sexual education to middle and high school aged people with intellectual and developmental disabilities.

NICOLE BANKS: Okay. We have a motion on the floor.

VIVENNE WEBB: I second the motion.

NICOLE BANKS: Can we just maybe pause for a second. Okay. (Inaudible) on the floor from Bambi first. Motion, we still have to do a roll call vote. So we're going to do a roll call vote on this activity.

AMY DEAVILLE: But this one that's highlighted yellow is the one that's a roll call that we're voting on.

NICOLE BANKS: And it was objected by Ms. Kim.

BAMBI POLOTZOLA: I just withdraw that motion.

NICOLE BANKS: Okay. That's easier. Thank you. Okay. So we're going to do a roll call vote on the motion since Ms. Bambi Polotzola withdrew her first one.

KIM BASILE: I have a question. So activity 2.1.2 originally was to advocate for sex ed. Then we made a new activity 2.1.2 to provide financial support for IDD to navigate the developmental disability behavioral health and Medicaid managed care systems and this one says 2.1.2 also.

AMY DEAVILLE: So what we'll do is we'll push this one back in as 2.1.2 and the one on the co-occurring disorders, the system will become 2.1.3. All right. Just for clarity, if you're a yes vote means that you are in favor of amending this activity to research best practices for providing appropriate sexual education. And a vote for no means you are not in favor of the research activity. Ms. Airhart.

LIBBY AIRHART: Yes.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Yes.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: Yes.

AMY DEAVILLE: Ms. Egle.

JILL EGLE: No.

AMY DEAVILLE: Ms. Gonzales.

CHRISTI GONZALES: Yes.

AMY DEAVILLE: Ms. Hagan stepped out. Ms. Hano.

JILL HANO: Yes.

AMY DEAVILLE: Ms. Harmon.

ANGELA HARMON: Yes.

AMY DEAVILLE: Ms. Polotzola.

BAMBI POLOTZOLA: Yes.

AMY DEAVILLE: Ms. Richard.

MELINDA RICHARD: Yes.

AMY DEAVILLE: Mr. Rocca.

TORY ROCCA: Yes.

AMY DEAVILLE: Mr. Taylor

ERICK TAYLOR: Yes.

AMY DEAVILLE: Ms. Washington.

RENODA WASHINGTON: Yes.

AMY DEAVILLE: Ms. Webb.

VIVENNE WEBB: Yes.

AMY DEAVILLE: With twelve yes votes the motion passes.

NICOLE BANKS: All right. So our motion has passed and we're going to adopt the action plan for the 2023.

JILL HANO: No.

AMY DEAVILLE: So now if there is no further discussion there would need to be a new motion to accept the plan as amended and then we would have to vote on that.

NICOLE BANKS: So I'm here to obtain a motion.

CHRISTI GONZALES: I motion to accept the draft of the 2024 action plan as amended.

NICOLE BANKS: We need a second.

VIVENNE WEBB: I second the motion.

NICOLE BANKS: Okay. And we're going to do a roll call vote.

AMY DEAVILLE: A vote of yes means that you accept the action plan as drafted and a vote of no means do not accept. Ms. Airhart.

LIBBY AIRHART: Yes.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Yes.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: I think I'm going to have to abstain.

AMY DEAVILLE: Ms. Egle.

JILL EGLE: Yes.

AMY DEAVILLE: Ms. Gonzales.

CHRISTI GONZALES: Yes.

AMY DEAVILLE: Ms. Hagan is not in. Ms. Hano.

JILL HANO: Yes.

AMY DEAVILLE: Ms. Harmon.

ANGELA HARMON: Yes.

AMY DEAVILLE: Ms. Polotzola.

BAMBI POLOTZOLA: Yes.

AMY DEAVILLE: Ms. Richard.

MELINDA RICHARD: Yes.

AMY DEAVILLE: Mr. Rocca.

TORY ROCCA: Yes.

AMY DEAVILLE: Mr. Taylor.

ERICK TAYLOR: Yes.

AMY DEAVILLE: Ms. Washington.

RENODA WASHINGTON: Yes.

AMY DEAVILLE: Ms. Webb.

VIVENNE WEBB: Yes.

AMY DEAVILLE: With twelve yes votes the motion passes.

NICOLE BANKS: Okay. So now since our motion has passed, we are going to have the actual plan with an amendment. Is there any more discussion? All right. Now at this time we're going to take our ten-minute break. And we're going to be back at 10:15.

All right. The time is now 10:18 and the meeting will come to order. Our next item of business is the report on the membership committee which I will present. Okay. So the membership committee we met on April 13th to choose self-advocates to recommend for the full council for council membership. We currently have four self-advocate positions open. One of the seats being federally mandated that we have to provide a seat from an institution. The seat has not been filled by someone who is currently living in an institution or facility or has in the past. Or it can be filled by a parent of someone that lives in an institutional facility. The membership committee has asked the staff to continue outreach to fill that institutional facility seat since we didn't feel a candidate that we had interviewed so far was a good fit for the council.

The membership committee recommends Tony (inaudible), Lauren Womack and Mary Francis (inaudible) to be recommended to the governor appointed for the council, to the council. In your packet we have bios written by Mr. Tony and Lauren for your review. We wasn't able to get one from Ms. Mary, but we can tell

you that Mary Francis, she was a student at UL post life secondary inclusive education program. Very passionate about her outreach and just how it touched her and reached her when we interviewed her. So even though she didn't provide that the people that interviewed had a chance to kind of get to know her. She's on Student Government Association at the Louisiana, the University of Louisiana at Lafayette Community Organization Committee. A member of the Beacon Club, Disability Advocate Student Organization. She's also in Tri Sigma sorority.

The membership committee motions to approve the recommendations of Tony (inaudible), Lauren Womack and Mary Francis (inaudible) for government appointment to the DD Council.

AMY DEAVILLE: I will also say I forgot to write it in the summary, put Pamela Darby is also being put forth as the alternate choice in case one of the other three candidates are not able to fulfill or not be governor appointed for some reason. That way we already have an alternate.

NICOLE BANKS: All right. At this time I will obtain a motion to adopt the committee's recommendation.

SPEAKER: Can we enlarge the font just a little bit.

BAMBI POLOTZOLA: So just to be clear, do we have to do a roll call vote?

NICOLE BANKS: No. We're just entertaining a motion to adopt the recommendation from the committee.

BAMBI POLOTZOLA: If it comes from a committee that means it comes from two people or more than two people.

JILL HANO: But don't we have to adopt?

NICOLE BANKS: It has to be a roll call vote. We have discussions. That's why we put in you guys' packet, their bio, so you can look at them.

NICOLE BANKS: If you're on the committee you definitely can make it. I just can't.

ERICK TAYLOR: I motion.

NICOLE BANKS: All right. Erick Taylor has motioned. Do we have a second?

CHRISTI GONZALES: Second.

NICOLE BANKS: All right. Second by Ms. Christi Gonzales. Are there any objections? All right. Do we

have any public comment? Yes, ma'am. Ms. Jill.

JILL HANO: Because I'm big on that, are we going to be provided on the website a summary from that membership committee?

AMY DEAVILLE: We will. I just haven't gotten it done.

JILL HANO: Okay. I'm sorry. No. I'm not because I apologize too much.

NICOLE BANKS: Okay. All right.

JILL HANO: Thank you.

AMY DEAVILLE: Okay. Roll call vote. Ms. Airhart.

LIBBY AIRHART: Yes.

AMY DEAVILLE: Dr. Barovechio.

PATTI BAROVECHIO: Yes.

AMY DEAVILLE: Ms. Basile.

KIM BASILE: Yes.

AMY DEAVILLE: Ms. Egle.

JILL EGLE: Yes.

AMY DEAVILLE: Mr. Gonzales.

CHRISTI GONZALES: Yes.

AMY DEAVILLE: Ms. Hagan. Ms. Hano.

JILL HANO: Yes.

AMY DEAVILLE: Ms. Harmon

ANGELA HARMON: Yes.

AMY DEAVILLE: Ms. Polotzola.

BAMBI POLOTZOLA: Yes.

AMY DEAVILLE: Ms. Richard.

MELINDA RICHARD: Yes.

AMY DEAVILLE: Mr. Rocca.

TORY ROCCA: Yes.

AMY DEAVILLE: Mr. Taylor.

ERICK TAYLOR: Yes.

AMY DEAVILLE: Ms. Washington.

RENODA WASHINGTON: Yes.

AMY DEAVILLE: Ms. Webb.

VIVENNE WEBB: Yes.

AMY DEAVILLE: Thirteen yes votes. It passes.

NICOLE BANKS: All right. Adopt the motion and the recommendation is adopted and is passed. All right. The next item of business is our standing council membership reports. The reports that were submitted and linked up on our agenda. Our first report is from the Office of Citizens with Developmental Disabilities. The chair-- oh, she's not here.

AMY DEAVILLE: Yeah. She stepped out.

NICOLE BANKS: Okay. I'm going to move onto our next one.

AMY DEAVILLE: Phil Wilson is not here. Courtney Ryland is here with Louisiana Rehabilitation Services.

NICOLE BANKS: Okay the next one is (inaudible).

AMY DEAVILLE: Right. She's not here, but Courtney Ryland is here in her place.

NICOLE BANKS: All right. So our next item of business is the report from Louisiana Rehabilitation Service and the chair recognizes Ms. Courtney.

COURTNEY RYLAND: Hi. Thank y'all so much for having me. So I'll be representing Louisiana Rehabilitation Services. My name's Courtney Ryland and I'm a bureau administrator for the agency. So if you have access to viewing the report that was submitted I'm just going to kind of briefly go over what's been provided for you. I won't read the charts. But Louisiana Rehab Services provides preemployment transition services to students with disabilities between the ages of 16 to 21 with an active individualized education plan or who meet the definition of a student with a disability as covered under section 504 who was a student who has a documented disability.

Preemployment transition services include job exploration counseling, work-based learning experiences, counseling on post-secondary opportunities, workplace readiness training and training on advocacy. Right now Louisiana Rehabilitation Services is serving 3,318 students statewide. And I just want to note that that's actually up 1,518 students since last March. We currently have 14 active third-party cooperative arrangements with local or state educational providers to provide these services to our students in the classrooms. So that's kind of like a contract with the school board for them to employ someone like students with preETS services. And Louisiana is helping to pay for those employments.

All right. So again, we provide some more data on students being served and other individual students being served. I will make of note that we have a new rehabilitation employment development specialist who

began serving the Lafayette region starting in November. But we still do not have a specialist to serve the Houma region. So if anyone knows of someone who may be interested in that position it is still vacant.

The Louisiana Rehabilitation Council, the report indicates that the meeting that was scheduled for April 27th has been postponed. That has been rescheduled. It will take place on May 18th, and it will be held at the Louisiana Workforce Commission headquarters building. The executive committee meeting starts at 8:00 and the full Louisiana rehab council meeting begins at 9:00 for those interested in attending. That council is still seeking to fill five vacancies and the report list which of those positions that they're still trying to fill.

And since the beginning of this calendar year, which was January 1st, we have an employee housed within LRS who became certified as a community partner work incentives counselor, and she has served 28 LRS consumers directly with regarding benefits planning with their social security disability insurance and supplemental insurance. But we still also provide informed choice to allow our consumers to use either Lighthouse for the Blind or LSU Human Development Center depending on where they live.

Louisiana Rehab Services also has an update for the disability innovation fund project or otherwise known as STEMM Up. And STEMM is S-T-E-M-M which represents science, technology, engineering, mathematics and medical curriculums. We got an update that Dr. Condu with Southern University is going to retire at the end of the spring 2023 semester. But we have been assured by Dr. Sandra Brown at Southern University that they are committed to honoring the subcontract agreement and all the deliverables upon Dr. Condu's retirement.

So Michigan and Louisiana are still working together to move forward with providing the social cognitive career theory intervention to job seekers and they're going to be using a virtual platform called Yes LMS. They've been discussing what audience would be able to access that platform and how the training module would be accessed by each participant. And

Southern University has actually already hired and has begun training career pathway coordinators who will be actually interacting directly with the students participating. And the regions being served by those career pathway coordinators are New Orleans, Baton Rouge, Lafayette and Monroe. If there are any questions regarding the report from Louisiana Rehabilitation Services.

NICOLE BANKS: Thank you. Are there any questions from the council members? Any questions from the council members?

BAMBI POLOTZOLA: I have something. Courtney, it's not about your report, but yesterday the Youth Leadership Forum gave an update about the people who were, the young people who potentially would be attending and what they reported on LRS was kind of troubling to me. First off, none of the ones who had applied are preETS, are in preETS and they're all in that age range and all have disabilities. And so which is troubling that you have probably a population of young people who are probably engaged more than typically from across the state and none of them are in the preETS program. So that's kind of like an outreach issue that was concerning.

But then the other thing is it didn't appear, and just my interpretation, you know, I think if they're not in it then LRS could say let's get those students in preETS because they're eligible, they should be eligible, trying to fast track it. But it seemed like that's not what the Youth Leadership Forum, the information they got back was any type of like outreach or help. It was just kind of like-- I don't know what LRS said, but it wasn't helpful. And then there was kind of like an interpretation that it's a long arduous process to get into preETS and I didn't think that was the case with preETS. Now when you get into voc rehab it's a little bit more developing a plan, right. But preETS is pretty simple.

COURTNEY RYLAND: Correct.

BAMBI POLOTZOLA: Okay. So I would like to see LRS partner with that contractor to help that group of students to get into preETS. I think there's multiple reasons for that, but those students, it would kind of help to be able to see them to be able to understand

about LRS, which these students potentially will be able to use those services in the future. Plus I know there's some requirements for the preETS, for LRS to spend 15 percent of their budget on preETS. So that would help them to meet that federal goal as well. So there's a mutual benefit I think to everybody. So can you check in on that?

COURTNEY RYLAND: Absolutely. Yes, the application and/or eligibility process for becoming a preETS (inaudible) is much easier and less complex than our traditional vocational rehab program.

NICOLE BANKS: All right. Is there any public comment? All right. With no public comment the report requires no action and will be placed on file.

COURTNEY RYLAND: Thank you.

NICOLE BANKS: All right. I'm sorry, y'all. We just have to skip around because some people are not here so we're just skipping around right now. Our next person that is going to be presenting their report is going to come from the Bureau of Health Services and Financing, Medicaid, Ms. Tangela Womack.

TANGELA WOMACK: How are you all? My name is Tangela Womack. I'm the Medicaid deputy director and our report is on the light blue. Of course the report includes several updates and data points for a couple of our programs like the CSoc program and some network advocacy for behavioral health. It also talks about our Act 421 program. If you're not familiar with it, it is for children under the age of 19 with developmental disabilities and it disregards family income. And since March 17th of this year we have approved 989 children for that program with approximately 268 of our applicants going through the level of care assessment.

Two points that I would really like to express to you guys today is number one, the 2023 Consolidated Appropriations Act or the CAA. And what that act does is end the continuous coverage that we were allowed by the Families First Coronavirus Response Act. So it ends continuous coverage which means Medicaid is about to have to go through a renewal process for all over two million of our members. And what that means is we're trying to connect with you guys who have Medicaid, but we have not had to do this in three

years. So if you've seen some of our billboards or handouts, I've seen some in pharmacies. Coming in this morning I saw one of our billboards. We're trying to make sure that we have all of our Medicaid members with accurate contact information. So if you're receiving text messages saying hey, we need your updated address, we need your phone number, we're trying to reach you guys. We're trying to make sure that when you get that letter from us saying we need additional information that we get that in, and you don't lose the coverage that you desperately need.

We have outreach. We've contracted with outreach (inaudible) and community partners going door to door just making sure we have the right contact information. We have people put in signage in pharmacies, Wal-Mart. Just where our members are. And if any of you are having any events coming up and you would like for us to come and speak or just to come out and get that updated contact information from the members in-person we can definitely do that. And Amy can share my contact information with all of you.

On page three it also list how you can do it yourself. Just to verify that we have it you can log onto mymedicaid.com and the email address is there. By your health plan there's a number on the back of the card. Of course we have a hotline, and the number is here. And in-person in our regional offices. Also, again, we can come to you guys. If you have any events going on where you think that the Medicaid population's there, we're happy to come out and actually take down the information in-person.

The first batch, one thing I want to make clear, everybody will not be reevaluated at the same time. They're going to be in cohorts. It's going to take us 12 months to reevaluate everyone. Our first starts May 1st. So those letters will be mailed out at the end of April, end of this month and dated May 1st. If you're starting to get those letters that means it's time for your renewal, we need your information.

But if you have a cell phone, if you got a text message or even an outbound dialer it's probably not a scam. It's probably us trying to reach you to get your updated contact information. If you have any questions about that please contact, the contact information is

on page three. You can definitely check here.

And Amy, if you guys would like for us to bring any fliers it has the QR code on it. It will take you directly where you can update your information. I can provide that for you.

AMY DEAVILLE: Great.

TANGELA WOMACK: And the second thing is provider enrollment. I'm pretty sure you guys have heard this quite a bit. It's a really big push now because we have a deadline for all of our providers to be enrolled by the end of the fiscal year which is June 31st. So we're asking for any providers to make sure you have a complete application in by June 20th to ensure that you continue to get the reimbursement for our members. Louisiana actually has over 85 percent of our providers that have completed enrollments, which is great. But we still are doing a big push for that. So we are reaching out to providers. You might see some of our fliers in your doctors' offices or in hospitals. We're trying to get their contact information as well and get them reenrolled into our program so that we can continue to see our members and you'll have access to the care that you need. With those points made I'm happy to take any questions.

NICOLE BANKS: Thank you for your report. At this time we're going to be entertaining questions from the council members. I saw a hand. I didn't see who it was.

AMY DEAVILLE: Jill Hano.

NICOLE BANKS: Ms. Jill, you have the floor.

JILL HANO: Okay. So I called because this is the Consolidated Care Act, appropriations. That's the pink letter campaign?

TANGELA WOMACK: So one of our outreaches is the pink letter campaign, correct.

JILL HANO: And I was thinking, and Ms. Nicole Flores, I need you as a volunteer, cause don't our FHF centers do a resource fair in every parish?

NICOLE FLORES: We have various workshops with Bureau of Family Health contracts.

JILL HANO: Okay. Because I didn't know if ours was statewide or just Jefferson Parish. But I thought families had a resource there and I thought that may be a good opportunity for y'all to have for self-advocates

and parents. Cause, y'all, it took me a minute and I made the support coordinator stay on the phone with me to make sure I was doing the right thing. If there are any resource fairs out there, I was thinking there might could be for Medicaid helping self-advocates and parents to say hey, this is what you need to do by this date.

TANGELA WOMACK: Yeah. Absolutely. And if there are any fairs, if you can get that information to Ms. Amy and she can get it to us. We are going out into the community. And any health fairs that we are aware we are setting up booths and we can help you in-person there. A resource person who can update the information right there for you and even (inaudible) when you'll be up for renewal. Absolutely. You can share those dates with me. We'd be happy to come out.

JILL HANO: Okay. Because I know it's done in my region, but are we the only PTI in the state?

NICOLE FLORES: That's the Greater New Orleans, they have the PTI.

JILL HANO: Okay. So I didn't remember if it was statewide or just region.

NICOLE BANKS: Okay. Do we have anyone else from the council.

JILL HANO: Thank you.

NICOLE BANKS: Any others? Mr. Taylor, you have the floor.

ERICK TAYLOR: I'm in a complex with a bunch of elderly and disabled. Would y'all come to a complex or how would y'all?

TANGELA WOMACK: When you say a complex, can you tell me where you're looking.

ERICK TAYLOR: Housing.

TANGELA WOMACK: Okay. I can definitely check. In this region?

ERICK TAYLOR: Yeah.

TANGELA WOMACK: I can definitely check. Our regional area can set up for your guys. Can you tell me where it is? Or I can get it from Ms. Amy. We're happy to come out to where you guys are to make sure we get that.

ERICK TAYLOR: Cause a bunch of them is disabled and a bunch of them don't have transportation. And I know a bunch of them going to need assistance with this

and majority of them have problems with stuff like this.

TANGELA WOMACK: Understandable.

ERICK TAYLOR: If I can get this to you guys and y'all can set up in the complex or talk to the manager because I see they do a bunch of stuff in the complex. I was wondering if y'all guys would be interested come in the complex.

TANGELA WOMACK: I will follow up with you all. And that's a good idea to provide to our regions because those are the guys who are out doing the work. And I'm not sure if that's something they're already doing, but I can definitely--

ERICK TAYLOR: Because I know-- I don't mean to cut you off. Because I know when people knock on your door and say this is this and we need to show you this a lot of people just not going to do it. But if it's in the community, like we got a community spot where everybody meets, if y'all set up in that community then they know hey, they're out here really doing this. But if somebody is knocking on your door and saying hey, okay, we Medicaid too many people run from that. But I think if we could set something up with you guys where y'all is dealing with the complex and they'll come to y'all than people knocking on the door that would be better for that.

TANGELA WOMACK: Yes. I'll make sure I get back with Amy. And if you guys have any other ideas where we can reach Medicaid members where they are, I understand the transportation, I understand everybody doesn't have technology. Any other ideas you all, the council would have where we can meet our members, that's great.

NICOLE BANKS: All right. Do we have any public comment? All right.

ERICK TAYLOR: You're going to be at the end of the meeting?

TANGELA WOMACK: Yeah.

NICOLE BANKS: All right. There's no public comment. The report requires no action and will be placed on file. The next report is the Office of Public Health. The chair recognizes Ms. Patti Barovechio for her report.

PATTI BAROVECHIO: Thank you. I'm from the Bureau

of Family Health. For those of you who are new to the council, the Bureau of Family Health is the Bureau under the Office of Public Health that administers the title five block grant maternal and child health program. And underneath that program is the children and youth with special healthcare needs programming. So we are the bright orange or bold colored report. And the children special health services program has traditionally throughout the state provided subspecialty services for children and youth with special healthcare needs in areas where one lacks provider adequacy. I'm happy to report that over time some of those clinics have been able to shift those children to care in the community with a provider that is located where they habitat. But there are still some subspecialty services around the state, and you can see that reflected in the children's special health services clinic area.

We also sponsor a family resource center. And this is for any family statewide, they can contact the family resource center either by phone or by email. There is somebody manning the phone 8 to 4 Monday through Friday. And this is for any resource need that touches a child or family. We use a very holistic approach to our family resource center that anything that impacts that family will impact that health outcome so they can call for just about any reason.

And we also have a collaborative project with Families Helping Families. Through that work we do provider education. Right now several of the Families Helping Families are sponsoring provider education events as well as family education events promoting early childhood development topics. We also sponsor a transportation assistance program. So a family of a child with special healthcare needs needs transportation to a medical service that where other transportation services like through Medicaid are not feasible for this particular youth there is a special stipend program to support those families.

We also administer the Louisiana birth defects monitoring network. So we do birth defects surveillance and there's some information on the 2022 findings. We also sponsor the early hearing detection and intervention program. Louisiana hands and voices

which is a peer support organization for that population. The Louisiana Commission for the Deaf. And you can see all of that information is listed in the report. We do home visiting. Publish the Louisiana early childhood risk and reach report for 2021. And we also have a young child wellness collaborative that provides, is the advisory body for early childhood comprehensive systems work. But overall our mission for children and youth with special healthcare in the state is to ensure a high functioning health system to support them and their needs. And if there's any questions, I'm happy to answer them.

NICOLE BANKS: All right. Thank you, Dr. Barovechio, for your report. Do we have any questions from any council members? All right. Do we have any from the public? Yes, sir. Can you come up and state your name.

JAMES SPRINKLE: Region six a comment for Patti. The transportation part of that. I just got off a conference call this morning, which is why I was late, and I wanted to make sure everybody knows that (inaudible) which funds the people who want to take the time to get transportation to Baton Rouge, New Orleans, hospitals, requires a hotel room, there's money there. There's a lot of it. Just have to identify it and seems to be complicated for these people because they first have to go through the Medicaid system and sometimes when they first go through the Medicaid system, they just drop the ball right there. If you have any ideas, I'll guarantee you we're open. The amount of money that's there is not being used.

BAMBI POLOTZOLA: Can we get information about that because if that's the case then perhaps the DD Council or even like my office like we can, I mean, I kind of heard Jim talk about it before, but I think if there's a problem with people accessing it if we maybe gave more information that would be helpful.

PATTI BAROVECHIO: Yeah. I'll send you-- I'm sure they have it in the children special health services information online. So yeah, if you want to help promote it. The thing is is that the way it goes is that it goes through Medicaid first and, as Jim said, a lot of times families, whether they perceive that as a barrier, don't go through the process and come back.

But the moneys are there. The eligibility criteria is the same as for any children special health services service. Like they have to meet the eligibility criteria there and then if they do so they can access those funds. So yeah, I will make sure I get you that link.

BAMBI POLOTZOLA: So those people who are accessing the children special health services like they're in the system, as I understand it, and they're seeing people so, you know, seeing the specialist.

PATTI BAROVECHIO: Yeah.

BAMBI POLOTZOLA: So they should be getting counseled on all the resources that are available.

PATTI BAROVECHIO: Absolutely they are. There are social workers and nurses in the public health unit clinics. So yeah, they would provide them. I would say it's probably not that population because they're very well connected to the system and the supports. I would say it's probably more community dwellers that are not seeing specialty providers because there's a very small number. I don't know enough off the top of my head. I can get that count. But it's not a huge number of the population that are now being served. They're actually being served by subspecialists and specialists in the community.

JILL HANO: I do have a question. So the stipend expenditures are from the fund Mr. Sprinkle was talking about?

PATTI BAROVECHIO: Right. So Mr. Sprinkle's Families Helping Families, the bureau has a contract with them, and they administer the transportation program.

JILL HANO: Are y'all Crossroads?

PATTI BAROVECHIO: Yes.

JILL HANO: Perfect.

JAMES SPRINKLE: Can I make one more comment on that. There's a loophole for these families. And I'll just mention one of them. The requirements are you have to have a denial from Medicaid. And if you need more than one person to go with you that automatically will take, that automatically qualifies. So since I was alive, we always had to have two people. We would qualify. If you only have one person, automatically qualify. So little loopholes you can get through you

just have to (inaudible).

NICOLE BANKS: All right.

JAMES SPRINKLE: Is that okay to say, Patti?

NICOLE BANKS: All right. Are there any other public comment? All right. Hearing none, the report requires no action and will be placed on file. All right. Our next item of business is the Office of Aging and Adult Services. Chair recognizes Ms. Richard to present her report. Mindy.

MINDY RICHARD: Thank you. I hope you all can see me down here. Yeah, I would like to touch on some activities that we've been engaged in that you would have interest in. The numbers are actually on this pink colored sheet in your package, and I will address some of these as we talk. But certainly am open to questions about the data. Programmatically I wanted to tell you a few things that we have going on. If you'll notice that our registry wait list is growing very quickly. We saw that our-- so we kind of talk about our wait list for community choice waiver in two terms. We talk about those who are waiting for CCW waiver, a home and community-based waiver, and then we talk about those people who don't have any other services. We haven't been able to put them on another program and they have no services. So those two numbers were as of last week, or the 28th, we have 7,149 waiting for a community choice waiver. But of those 3,000 have no other services in place. That 3,000 number had actually gotten below 900 as recently as October of last year. So you can see that our wait list has tripled in just a matter of months. And we don't know the entire, we look at kind of the trend of what we see in a year, and we do see this time of the year that those numbers go up. But it has gone up dramatically from what we've seen in the last few years. So the trend is much higher. We attribute that to two things really. And this is antidotal. But we attribute it to now that Covid has subsided people are wanting to have services in their home and they're wanting to get more services. And secondly, we've put out a pretty concerted effort to make people aware of the services that we offer. We think that that's positive that people know about the services, but, of course, we get stressed when we start seeing that number climb faster

than we can supply the services.

Our waiver slots, we have filled, since last year we got 800 additional waiver slots and we have filled all of those. And that's a good seg way for me to talk about-- well, let me say one other thing. You all, in our last meeting I mentioned our business plan, our LDH business plan and each office within LDH has certain things we're working on. And one of the things that we're working on is that when we mail someone a letter that says hey, your ship has come in, you know, we have a waiver just for you. But we need you to get in touch with us so that we can go through the process of putting you into the services. We don't get a very good response rate at all. And so one of our business plan items is how do we increase that response rate. And one of the activities that we did was we called people that we had mailed the letters to and had not heard back from. And what we learned from that, just kind of high level, is that number one, a lot of people either didn't get the letter, it got tossed in the trash because they didn't know what it was, or they opened it and didn't really know what to do with it. And our population, we learned from this, want to be spoken to. They want a human to talk to them about what that's about. So we are working towards trying to address that with face-- not face to face, but phone conversations with those.

So going forward we have our first batch going out this week. There are two things we'll be doing differently. We will be sending those in a bright blue envelope and then we will also be calling those folks that we send it to to say did you get it, and if you did, do you know what to do with it. So I think that this personal outreach is going to be successful, but we're kind of conducting it almost as an experiment. We're watching the data to see if this makes a difference. So I'll be interested in our next meeting for any of you who hear about this to let us know what you're hearing in the community, has this made a difference. Because we don't want to prevent someone getting services just because they didn't know their waiver was offered to them. So I think that's an important thing.

Another thing I want to mention with regard to

just numbers is that when you look at adult protective services those numbers are not anything different than what we've seen in previous years. We're not seeing any trends, anything different than what we've seen. So nothing really to report there. But I did want to point out another activity that we've done. You can kind of see a common theme in this is we are, our philosophy is that we need to be out in the community, and we need to be talking to people and we need to be finding out from people what we are doing well and what we need to do differently or do better. And sometimes we think inside this arena of work that we do that we think we know what people need. But until we go out and talk to people, we really don't always have the information. And so we're doing, right now we just concluded last week a statewide tour at all of our nine public health regions and we called it a listening tour with regard to abuse and neglect. So we had partners with Elderly Protective Services as well as my office, Adult Protective Services, and we went out and we had meetings in the community. One of the things we learned at our very first meeting was that our population people don't readily jump in the car and go to a meeting in the middle of the day at the library. So we are having a virtual meeting, we have one tonight and we have one next Wednesday. And again, I'm happy-- Amy, we should have shared that with you. Do you have the information on those two virtual meetings?

AMY DEAVILLE: I believe I got an email earlier this week about one.

MINDY RICHARD: Okay. It would have been from Tangela, her first name. But we can share that. But basically this is what I call voice of the customer. It's an open dialogue conversation where we say have you had any interaction with Adult Protective Services. If so, was it good or not. What do we need to do differently. And the second part of the conversation is how do we need to educate people about what we do and how we do it. Most people don't know they may be redescent to file a complaint because they don't know what happens when that occurs. And so this is not about necessarily educating people on that, but we provide whatever information we need to. But it's also about finding out how do we get that information out.

And so we're learning a lot of feedback on how best to communicate with our communities on these topics. It came out of some discussions last summer with some of our legislators who said, you know, what is our community outreach. And we really do dozens of outreach opportunities, but the word wasn't getting to the right people. People didn't know about them. And so we're trying to improve that. So just if you see those opportunities to give us feedback, please let us know.

We have had a parent from the DD community come to our events and so real pleased about that and we learned a lot. And so I think from my point of view it's been very successful. The numbers, we have not had a lot of people engaged, but the people who engaged were very open and it was a very healthy conversation. So wanted you to know about that.

And on the legislative front there is a request for 500 more additional community choice waivers. It was heard in the House Appropriations Committee this week and seemed to be favorable. So we're optimistic about that. There's also a bill to create a community choice trust fund much like we have for the NOW trust fund. That also was heard yesterday. And it seems to be moving along the process well. I will point out too in our Traumatic Head and Spinal Cord Injury Program, THSCI is the letters we use. And that program one of the impacts we had during Covid was that that program is funded through traffic violations such as driving while intoxicated, reckless driving and the moneys that come from that then fund the services for the people in our program. But during Covid a lot of the courts were not being held and so therefore they were not collecting those fees and so therefore it hurt our funding. And last year Senator Price did a line item in the budget to give us additional money to kind of fill that gap, but it also gave us additional money so that we can open up cases that had grown on this wait list. And so we have offered services to 100 new participants because of that funding. We're optimistic that that might happen again this year with Senator Price. There's been some discussion so we're optimistic about that.

Let's see. Another thing is that I just wanted to

double down on what Tangela was saying about the Medicaid unwind and the need to go in and update information. One thing I always try to point out too is one of the things about the appropriations act, there were two points. One was we had to do all this redetermination. The second part of it was if we don't have two forms of contact for people then we can be fined as a state. And if we get fined that money's going to come out of other programmatic activities. And so it has two prongs. Number one, we don't want individuals to lose services. That's number one. Number two is we need to have those two contacts or if we don't, there could be financial penalties on that. So anything you can do to help us, it is really an all-hands-on deck effort here to get that information in our system.

The last thing I'll talk about is our American Rescue Plan Act. Many of you are aware of there were several initiatives within our spending plan and one of the most recent ones that had to, was delayed, and is the bonus payment to direct service workers who worked during the pandemic. And so we had to do some revisions on it and send those revisions back to CMS for approval. We got approval last week on that. We had already kind of leaned forward in getting all the programming with the computers together to issue those payments and we expect those bonus payments to go out by the end of May. There will be webinars that are held to explain how the logic behind all of it, what and where the check goes. But we are really anxious to get those checks out and happy that those payments are going to finally be made. And I think that is it. We do have some other activities with American Rescue Plan Act that we submitted and we're still waiting to hear back from CMS, but I'll wait until those are approved to share those with you maybe next meeting. But thank you, madam chairman.

NICOLE BANKS: Thank you, Ms. Mindy, for your report. Do we have any council members that have any questions up on the report? All right, Ms. Jill, you're recognized.

JILL HANO: Me again. Are the bonus payments retroactive?

MINDY RICHARD: Yes, ma'am.

JILL HANO: Okay.

MINDY RICHARD: Will be paid from April of 2021 through October of 2022 for direct service workers and support coordinators under some rules that they have. They have to have had a certain number of activity, but it's who worked during that time. I will say that one of the things that, you know, this was really derived to increase the number of direct service workers, the retention that we have for direct service works. And so from the Medicaid population of direct service workers through our system we will say who is a direct service worker as of March. And if they worked those time periods then those checks go to those employers for March. So there's a lot of rules how that's going to work, and I don't want to bog our meeting down today, but I would say please join the webinar or have people join the webinar to learn exactly who gets the check for whom and for how much. There will be quite a bit of rules because again, it has to be very structured how that's rolled out. But it's finally happening.

NICOLE BANKS: Okay. And so this is this information that you're talking about is going to be on the virtual meeting on the 18th? Is that what you're talking about?

MINDY RICHARD: No. The virtual meeting on the 18th is talking about abuse and neglect.

NICOLE BANKS: The one that you're talking about right now that you want people to be engaged in, can you give us that date.

MINDY RICHARD: Yeah. It's tentatively being set up for May 4th, but I don't think invitations have gone out and I don't think the Zoom has been set up yet. So tentatively May 4th, but it will be coming out very soon to an email near you to let you know about that. So please join.

JILL HANO: So this is different from the OCDD road shares that she just had, correct? Okay.

MINDY RICHARD: Yes, ma'am.

NICOLE BANKS: All right. Do we have any more questions from the council? Bambi.

BAMBI POLOTZOLA: This table right here makes us ask questions, I think. So the direct service worker bonus that you were just talking about, is that OCDD

and DD and long-term personal care, that's all together?

MINDY RICHARD: Yes, ma'am.

BAMBI POLOTZOLA: Anybody who worked as a direct support worker in any of those systems--

MINDY RICHARD: Yes, ma'am.

BAMBI POLOTZOLA: Would be eligible if they meet all the criteria?

MINDY RICHARD: Yes, ma'am.

BAMBI POLOTZOLA: Okay. And then the other question that I had. In regards to in the beginning you talked about the letters going out to people who get Community Choice Waiver offers and then sometimes people don't return them, that type of thing. Are those people taken off the list, what happens? I know you said there's some outreach, but then eventually what happens?

MINDY RICHARD: So they stay on the list, and I believe they stay on the list for, I have to double check it, but I think it's 90 days. But even if they fall off the list after 90 days that we haven't had a response if they call in, we immediately put them back in. And so I have to double check the 90 days, but yes, they stay on the list. We're just trying to work them to get them off the list and into services.

BAMBI POLOTZOLA: So those people who, you know, got an offer last, a year ago and then they're like oh, I need this service. They call and say hey, what's my status. Oh, you got a letter sent to you a year ago. Would they get an offer if a slot's available?

MINDY RICHARD: Yes. They would get an offer. And I will say that when we talk about our slots there's a percentage, I think it's 3 percent of our slots that are kind of held over here in reserve for just that situation. So when someone calls, we pluck it out of there.

NICOLE BANKS: Go ahead, Mr. Taylor

ERICK TAYLOR: Do you have a person who need this service, what do you have to do?

MINDY RICHARD: So we have a number you call and it's a vendor that we pay and they kind of go through all the information that we need and kind of do a preliminary screening process. And we can share that number again. Amy, I'll provide it to you again. But

we can blast that out to the council as well. I will call it a gateway to come in to tell us that you need services.

NICOLE BANKS: Do we have any public comment? All right. If there's not any public comment the report requires no action and will be placed on file.

JULIE FOSTER HAGAN: Am I up?

NICOLE BANKS: Yes, ma'am. Our next item of business is our--

MINDY RICHARD: And that we have a webinar tentatively on May 4th and there were a few questions about that.

JULIE FOSTER HAGAN: Okay. So I'll start by I truly do apologize. I host the National Advisory Council on Individuals with Disability and Disasters public meeting and so I'm a voting member, so I had to step out for that one as well. So I do apologize. My report is, I think everybody knows my report. A couple of other, I'm not going to read it, and happy to take any questions about the report. But just a couple of highlights, many mentioned about bonus payments. We've talked a lot about the American Rescue Plan Act. That's part of what we're able to fund the bonus payments from. But we've also talked a lot in here about we were working to get a contract with the Center for Start Services which will be working directly with us, really got national best practice. They showed some really great outcomes for supporting folks and helping states figure out how to support folks with intellectual and developmental disabilities as well as behavioral health concerns. So some of our internal teams that will be working on the project are going to go through four intensive trainings in May with the Center for Start Services and then in June we'll be beginning our state folder outreach for that and a lot of folks that are on or part of the council will be getting some invitations to be able to update on that. What they do is talk to stakeholders, try to get a feel for what's working and what's not working in our state as it relates to services for that specific population. And then they help us really develop a plan. We do know off the bat and have already also has some funding that we have a great need for what we're calling therapeutic crisis respite. Those people who end up in

the hospital in the emergency room for a long time because we can't find an appropriate place for them very quickly. And then if they do end up maybe in a psychiatric facility then it's usually just medication management, but maybe not other things that are truly designed as treatment to help those folks. So we know and we already have funding, and we will be working with them to talk about the best way to be able to set that program up. So I'm really excited that we finally got the contract. Finally got that through and we're ready. We've been talking about starting this with Start for about five years now. So I'm happy we're finally doing it. I'm super excited and hopeful for what we can bring.

The other part of the American Rescue Plan Act that might be of interest to you, we had gotten the ability to use our funding to do some training for dentists in the community to be able to increase access for dentists to be able to have their practice work for folks with intellectual and developmental disabilities or we are able to add that as a service. We did a training at the-- I'm sorry, the Statewide National Louisiana Dental Association. We plan to do another one at the Louisiana Dental Association, but they also reached out to us, apparently there's kind of a statewide dental association and then each region has regional dental association-ish things because I think they're all formal. But we've had outreach to all the regional folks and we had enough funding that we can actually sponsor, they do some like quarterly meetings in person so we're also helping to sponsor some trainings at those regional meetings. Which is a little bit more intimate setting, so we're really excited about that and we're in the process of getting those scheduled now.

A quick update on our post PHE. And I mentioned this earlier, but, again, I do encourage folks if you were not able to participate in a roadshow or a webinar it should be recorded. I could talk for hours and hours about what will happen after the pandemic, but please do focus there. I can share with you that we had over 800 people in person at those events. And we had over 500 people on our webinar participate and that doesn't count people who now have gone to our website

and viewed it. We had a lot of positive feedback from people that they heard the same message. So a lot of times we don't have opportunities where our providers, our people receiving services, our family members, our case positioners, our local governing entities have an opportunity to hear the same message all at the same time. And a lot of times people tell me it gets interpreted differently when we have different audiences. So we felt like, you know, having that many people attend it's obviously something that we need to repeat. It's something if people took the time out to come to our meeting it's important to people. So we are looking at doing another roadshow, I don't have the details of that yet, but in September knowing that a lot of our exceptions are coming to an end in November so we want to make sure if there's any outstanding questions that we do any, you know, last kind of discussion that-- we also have several other topics that we would like to dive into in more detail. So we're in the planning phases of that. And then one of the things I've told my team is like twice a year I think it's important that we do this so that folks can hear the message, you know, from our office.

And then just one other announcement and then I'll stop and see if people have questions. We do, I think everyone knows the Early Steps Program we do a report here on our Early Steps. Our director for Early Steps, Brenda Sharp, who's been the director for I think over 17 years is retiring. She's actually leaving at the end of this month. And I'm super excited to announce that Caroline Nailor Oglesby, she's actually a Louisiana resident and a proud graduate of Southern University, had left Louisiana to go to Arizona and she was serving as the Early Steps director in Arizona. And when we announced it, she applied. And when I spoke with her, she's like I've always wanted to come back to Louisiana, but I had to get my kids out of school. So she has come back. She started Monday. I would have brought her with me today, but she's still trying to get acclimated to everything. So at the next council meeting I will bring her and introduce her, let her introduce herself to everybody. We're super excited to have her on board. So with that I'll stop and see if people have questions for me about the

report.

NICOLE BANKS: Thank you, Ms. Julie, for your report. We will entertain questions from the council regarding her report. No questions from the council? Okay. Any public comment?

SPEAKER: I have a question.

NICOLE BANKS: Yes ma'am. You're recognized.

BAMBI POLOTZOLA: Julie almost thought she was getting (inaudible).

SPEAKER: One simple question. So I'm having discrepancies for my own self with my daughter having a waiver. So we do the Children's Choice Waiver where I basically get paid to take care of her for the minimal hours. Is that tax detectable for taxes, can they count that as an income?

JULIE FOSTER HAGAN: So we've gotten that question a lot, and I'll be honest with you, that's not something that like I'm able to answer because that's the IRS rules and I really don't know IRS.

SPEAKER: IRS rules state no, they cannot count it as an income. But we just need to find-- because there are so many parents that we are being docked for that because CPAs are considering that as a taxable income.

JULIE FOSTER HAGAN: And I can take that back. When I brought-- I got the question a couple times, and I brought it to legal. It's just hard for us to answer the question because we don't, I mean, we make the payments, they're Medicaid payments, they're made to people. But then how that-- like what is, you know, we get questions all the time is there anything that could be a 1099 verses a W2 and how it is reported. And we have to be very careful because we're not the governing entity for any of those. But I can take it back and see if there's anything additional that we may be able to do or any other departments that we may be able to reach out to to get that information. I mean, from like the provider perspective I don't know what they have to do or what their rules are. If it's a parent working for the provider agency. And I don't know what exactly happens even in terms of like our Self-direction. So I can take that back, but I thought it had to be reported because it's working, but then what happens with that is the part that I'm not totally sure on. I will try, but, again, I don't know that

I'll be able to get an answer on that one.

NICOLE BANKS: All right. Is there any more comments? If there's not any more comment her report requires no action and will be placed on file. So our next item of business is the report of Government Office of Elderly Affairs. The chair recognizes-- oh, she's not. Okay. Our next agenda item is the Office of the Governor's Office of Disability Affairs, and the chair recognizes Ms. Bambi Polotzola for her report.

BAMBI POLOTZOLA: My report is the green report. So a few things I just want to highlight. We're doing our GODA conference, our office's annual conference. It will be completely virtual. Again, it's the last week of July to coincide with the signing of the ADA, anniversary of the signing of the ADA. We have received a lot of proposals which we're really excited about that. Typically we're having to really like do a lot of outreach, but we've received several proposals and really, I think is going to be engaging like it is every year. And we'll be sending out our newsletter on the 1st of May. And it will have like the link for people to start registering for the conference. And just to remind you guys you register for the conference, you get one Zoom link, and you can join into whatever sessions you want to join into that week. Whatever your availability or interest. And they're all recorded. So we have, if I've ever sent you an email, you'll see at the bottom of my email there's the link to the past two years conference. You can go in and look at all the information, all the reporting. So it's really great information.

Of course, the legislative session, this is the second week. And we are, we probably have about 100 instruments that we are monitoring. At that link you can see on the report, you can go in and see the tracking list. We try to keep it updated, multiple times a day we'll update that tracking list. And we also have the positions that the Governor's Advisory Council on Disability Affairs took on certain deals. And also other disability related agencies. So like the DD Council, the Arc, AARP, Community Provider Association. Any organization that will tell us what their positions are we'll put it there so people can see like what, you know, what's the feeling of the

disability community and kind of all work concertededly. That's ongoing.

A couple of other things, the Disability Voting Task Force concluded it's work and that has-- I'm forgetting my words. Anyway, like to thank my two counterpart buddies right here, they served on the Disability Voting Task Force, Jill and Erick and also I think Lillian. Lillian back there. Which I just want to give them, the really great thing about the Disability Voting Task Force is that we designed it to be the majority of the people to be people with disabilities. I wish that that wasn't something special. I wish that's something that would just be practiced, but I wanted to highlight that because they successfully, that task force had people, majority of people with disabilities. Representative Willard has a bill which is HB 449 which includes all the recommendations from that task force that was unanimously supported by the disability advocates as well as the people from the Secretary of States Office and others.

And then Representative Glover has another bill that would appoint a person with a disability on the state board of election supervisors. And so really would appreciate all of the organizations to get behind these bills whenever they're heard in committee and so we can get those things passed. And then, of course, we worked with many of the disability organizations on the Remote Operations of Public Meeting Task Force which resulted in SB 201 that we talked about earlier.

A couple of other things. Oh, EMDAC Emergency Management Disability and Aging Coalition is hosting a webinar lunch and learn on Thursday May 4th and it's going to be access to assistive technologies and disasters. LATAN is going to be doing that presentation. And so I think that's going to be interesting. We just thought that people get so much information about disasters and how to prepare and it's kind of just like overwhelming. We thought doing like a little lunch and learn about specific topics might engage people a little bit more. So please help spread the word about that.

And also, just I want to, kind of a sad note, many of you may know Gale Dean who's the director of New

Horizons in Shreveport. She was very active in EMDAC and just across the state. And kind of at disasters she would come from Shreveport and her staff and people would really help out in disasters. She passed away this week.

JILL EGLE: I remember her from SIL.

BAMBI POLOTZOLA: Yeah. She passed away. Just let you guys know that. And also, let's see. Liam Doyle is our new Lillian. Took this position that Lillian was in as senior coordinator. And he is an ADA coordinator, certified ADA coordinator which is really great and has jumped into the role. Of course, we miss Lillian greatly, but he's doing a good job. He's doing a great job and just glad to have him on board. And I think that's it.

NICOLE BANKS: Thank you, Ms. Bambi Polotzola, for your report. The chair recognizes if anybody has a question. Erick Taylor.

ERICK TAYLOR: I just want to ask the board, if I'm not asking too much, can we have a silent moment for Ms. Gale because she did a lot.

NICOLE BANKS: Yeah.

ERICK TAYLOR: Thank y'all.

NICOLE BANKS: All right. Do we have any public comment? All right.

BAMBI POLOTZOLA: Can I just add one more thing. It's not on our report and I'm so sorry that I didn't. Also, as many of you know, the former chair of the DD Council who was our current chair of GACDA, Lynette Fontenot passed away suddenly a month or so ago. If you didn't know who Lynette was, please research her because she was phenomenal. I think, and kind of the reason the strength of this council is from self-advocates like Lynette. So she's a great loss.

JILL EGLE: Bambi, who was that?

BAMBI POLOTZOLA: Lynette Fontenot.

JILL EGLE: Do I know her?

BAMBI POLOTZOLA: She was the chairperson of GACDA for the past seven years.

JILL EGLE: Wow.

BAMBI POLOTZOLA: Yeah.

NICOLE BANKS: All right. So this report requires no action and will be placed on file. Our next item of

business is a report of the Disability Rights Louisiana. The chair recognizes Mr. Rocca for his report.

TORY ROCCA: Thank you. I will be incredibly brief. Just an update from our ombudsman program. Here's information about what we're working on between January 1st 2023 and (inaudible) Disability Rights Louisiana filed eight formal complaints with the state for issues including possibly negligent (inaudible), financial exploitation, substandard living conditions, allegations of severe neglectful health and possible federal fraud. (Inaudible) reporter of 2023 our Supported Independent Living Advocacy Program opened seven new cases for assistance and has been assisting with, among other issues, community reentry from Pinecrest, unsafe living conditions and unnecessary removal from services.

NICOLE BANKS: All right. Do we have any questions from the council? Jill, you're recognized.

JILL HANO: I have a question because of something yesterday. Why is it only a 13-day gap?

TORY ROCCA: You would have to ask the person who wrote the report. That wasn't me. I used to write the reports, but our person who runs our ombudsman program writes them and that's the period she chose. I don't know why exactly.

JILL HANO: I thought it would be like January to March.

TORY ROCCA: I honestly don't know. I didn't write the report. Somebody else did.

JILL HANO: Okay.

NICOLE BANKS: Is there a possible way that we could find out why it's like that, that 13-day gap because that's a concern from the council.

TORY ROCCA: Sure. I'll ask.

JILL HANO: Okay, gap was really the wrong word. It should be-- I hate when I misspeak. It's a pet-peeve of mine. But I meant 13 days period.

TORY ROCCA: I will ask.

NICOLE BANKS: Thank you.

JILL HANO: Thanks.

TORY ROCCA: No problem.

NICOLE BANKS: All right. Do we have any more questions? Any questions from the public. All right.

This report requires no action and will be placed on file. The next item of business is a report from our Families Helping Families center and the chair recognizes Mr. Sprinkle for his report.

JAMES SPRINKLE: You'll see on this red page (inaudible) Families Helping Families is doing. So it's kind of just a general information page. So you'll see each center, the director, number of employees, (inaudible) oldest center, the unduplicated services and the duplicated services which (inaudible) occurred multiple times. And what the prevalent disability is for this quarter and the second prevalent disability for the quarter. Those right there I hope and the next one will also include the last four items. It goes year by year. How many unduplicated, how many duplicated, what the prevalent disability is. And overall autism seems to be the number one thing. (Inaudible). So anyway, I promise you all I did make an agreement so I will stay to that. But I'm hoping that the next report-- you have any questions on this keep this for your information because it has everything you need to contact these centers. I'm hoping the next one I will have a description, I haven't approved this yet, but a description of the contracts that each center has and underneath that a brief description of what those contracts mean. How they serve the community. So anyway. If there's any questions, let me know. And that's my report. Less than three minutes.

NICOLE BANKS: All right. Mr. James Sprinkle's report. Any questions from the council? And I saw Ms. Bambi, you had your hand raised. You're recognized.

BAMBI POLOTZOLA: So two things. For Families Helping Families Northeast Louisiana about the rent or own it has NA. For Northeast Louisiana, did they own or rent, purchasing NA.

JAMES SPRINKLE: They exchange for services. They chose to put NA.

BAMBI POLOTZOLA: Okay. And the second question, or I guess more of a comment, like our council members, would you encourage them if they want to learn more about just what the services of the Families Helping Families to reach out to their Families Helping Families centers in their region?

JAMES SPRINKLE: Please do. What you have is a remarkable set of people that have their hearts in it. I'm not saying it's perfect by any means. But I know at our center, for example, some of them, I've been there 22 years, some longer than me. They know everything. And they would love to have you reach out to them. Every one of them. And I'm hoping so next time this comes up, I haven't talked with anybody yet, so you have to understand that, but, for example, one of the contracts that we list with DDC. Well, heck, what do we do for DDC. What is it. And the description that pertains to each center has that for one. And maybe another one would be state Department of Education and that contract would probably be similar to each one. But there are some that have contracts like I do, and some others have contracts that are different than everybody else. And so we list that for that center then on the second page would be an asterisk 3, for example, that would say what that contract actually does for the community. Carry on the education as to what we're here for. And if you know what we're here for and see what we're doing then it means something. If you don't know what we're here for and you don't see what we're doing all you hear is rumors or whatever, what is that to you. So I'm really pleased, thankful for you folks to let us do this.

NICOLE BANKS: I just want to say something. I really appreciate this because not everybody has this and now you can go to your region, look at where it is, contact information and make yourself equitable to the people that's there so you know that you're sitting on the DD Council and that you, you know, you're active and involved and you want to be a part of the everyday going on that you should be a part of it because that's in your region. And Families Helping Families helps families out a lot.

JAMES SPRINKLE: It should have been done a long time ago.

NICOLE BANKS: So we thank you guys. Thank you for giving us this comprehensive document where everybody can go to and look at. They can go into another region. You're able to have that now. So thank you. I appreciate it.

JAMES SPRINKLE: You'll be able to keep track here

on out. Every quarter numbers of the unduplicated, the duplicated, prevalent disability and the(inaudible).

NICOLE BANKS: All right. Is there any public comment? Yes, ma'am.

SPEAKER: If I may, and I'm (inaudible) from region two here in Greater Baton Rouge area and the parishes we serve. I think what this does is to highlight the fact that you have a resource right among you and the value, we want you to understand the value that Families Helping Families bring to even your council in the decision-making process. Because you'll see a variety of programs and resources that are available through Families Helping Families. So when you make those decisions, you might see you may not have to bring on another contractor. You have Families Helping Families that can do some of the work that you're seeking to have done. So maybe in the future you'll give us an opportunity to share, as Jim was saying, all the different programs. We have some that are different. Nicole is here and ED in region four. I'm two. He's six. And others that may have different programs. We even have a statewide program. The empowerment program that can do some of the things that you're asking for or maybe seeking some outside source to do. So I think we do lend some value to your decision-making process, and we would like to avail ourself to share with you, all of you. So thank you for the opportunity.

NICOLE BANKS: Thank you. Okay. We have another public comment.

NICOLE FLORES: I would like to thank Mr. Jim for doing that. It makes it easier to understand because it's a lot of information to see what each center does. So that just gave a little snippet and it's easier to understand who we are and what we do. Y'all know where to find us.

JAMES SPRINKLE: When you get the description of what the services are. DD Council, what do we do for you. It's going to be put out there.

NICOLE BANKS: All right. Thank you. Thank you. Thank you for your report and this report requires no action so it will be placed on file. Okay. So we have a little bit of a good thing going on. We have actually finished all of our committee reports. And at

this time I'm going to be asking people who want to be a part of the nominating committee. Nominating people to be up on council. So we need four of those. I'm going to open-- okay, Bambi said she wants.

PATTI BAROVECHIO: Can I ask a clarifying question. Do you have to attend in-person meetings in Baton Rouge?

NICOLE BANKS: Yes, you will because the actual bill hasn't passed just yet, so we have to follow what's under law right now. But we're pretty sure it will. So I have one. We need three more.

BAMBI POLOTZOLA: And if you're on the nominating committee then that means you don't want to be nominated. If you want to be nominated, then don't volunteer for this.

NICOLE BANKS: Right. But it has to be-- and then it also can't be someone from a state agency either. It has to be a parent or a self-advocate.

AMY DEAVILLE: On nominating committee you can have a state agency.

NICOLE BANKS: Okay. I thought you told me--

AMY DEAVILLE: It just can't be an executive officer.

NICOLE BANKS: Okay. All right. So you just can't be an executive officer. So we have one, Bambi.

BAMBI POLOTZOLA: I'll just pick everybody.

NICOLE BANKS: I was about to say. We don't know who really wants leadership positions.

BAMBI POLOTZOLA: Oh, I'll be bugging y'all.

SPEAKER: I don't want a leadership position, but I can't come during the week. I can come on like Mondays and Fridays.

NICOLE BANKS: Okay. So that can be something y'all work out, you know. Each committee is different about we meet at different times with different things. So we have two. Two more. Any takers? Mr. Tory?

TORY ROCCA: Sure.

NICOLE BANKS: Okay. And we need one more.

JILL HANO: We have fewer self-advocates on the nominating committee.

NICOLE BANKS: I really want one of them.

JILL HANO: I got my mind.

NICOLE BANKS: I know, so I don't want you to do it. I don't want you to do the nominating committee.

Ms. Vivienne, yes? Would you consider that, Ms. Vivienne?

BAMBI POLOTZOLA: I mean, the other thing is we might want self-advocates to be on the executive committee.

VIVENNE WEBB: I'm going to say no for what was just said.

NICOLE BANKS: I respect your decision. We have people that want to come up in roles, so I do understand.

JILL HANO: I think we should let the executive committee know because I can guarantee we can do it in two minutes.

BAMBI POLOTZOLA: Can we do three and then if somebody's not here, might want to do it.

NICOLE BANKS: We can do it that way. If they want to come because we don't have everybody here in attendance for the council meeting, so we'll leave one of the positions open just in case someone wants to participate that was not here. So I'm going to go ahead and put that in there. My nominating committee is going to consist of Libby Airhart, Bambi Polotzola and Mr. Torry Rocca. And we'll leave a position open for the council members that were not here that want to have the opportunity to be up on there.

JILL HANO: Can we send an email out like today?

AMY DEAVILLE: Yeah. The people who were not here, I'll email them.

NICOLE BANKS: So again-- oh, Ms. Mindy.

MINDY RICHARD: I have an answer to the question you asked, and I wanted to make sure I gave y'all the answer before.

NICOLE BANKS: Oh, before we dismiss. You can go ahead and address it.

MINDY RICHARD: Well, that was correct, 90 days. The thing I want to say just to recap is we mail an offer. If we don't hear back, we mail a second offer. Then if we don't hear back in 90 days, we take the person off but if they call in, we immediately give them a waiver.

NICOLE BANKS: All right. Thank you, Ms. Mindy. Like I was saying, we have a situation here. We have about ten minutes to lunch. We have to do our public comment. That's what I was going to ask everyone. We

can work through it and just go ahead and do our public comment and then our meeting will be over. Everyone is in agreement with that we're going to move onto our public comment. Yeah. That's rare.

JILL HANO: Can I just say go Nicole.

NICOLE BANKS: So at this time if there's any other public comment so that you guys want to come up you have the opportunity to come now. And when you do come up just state your name and you have three minutes to talk. Yes, ma'am.

SPEAKER: Yeah. Sorry, I've been up so many times here. But I was realizing, I just wanted to share after we just spoke about Families Helping Families. I don't know if you guys have access to the Parents magazine. I only have a few with me if you would like to have. But this month is highlighting autism acceptance month throughout here. For region two we have an ad in here that identifies the kinds of things that we do with families. I blew it up, y'all. Families Helping Families, just to give you an idea. And I realize I had it with me, we can just kind of pass this around. I have only about five of the magazines, you're welcome to it. But it identifies the kinds of things that we do at Families Helping Families.

The other thing that this represents is that this year is our 25th year of operation as Families Helping Families so we're celebrating the 25th anniversary. We will be doing some things throughout the rest of the year to engage the community, but also to raise funds for what we do. We touch upon seven parishes including having the one time (inaudible) that we do statewide. There is a tremendous need for more outreach activities that we need to have funded to reach the population, huge population throughout our regions, but also statewide. And the other Families Helping Families are also in need of additional support.

I want to alert you to the fact that on this Saturday there's an organization called Spectrum. They're doing a circus on Saturday evening, and they have committed to giving the proceeds from that event to Families Helping Families of Greater Baton Rouge. So those of you who are in the area or visiting the area and know someone, please tell them about this. There's a QR code. I have a few of these. I'll just

put it on the table.

JILL EGLE: I sit on the board for the Arc of Greater New Orleans. Can I pass it to them too?

SPEAKER: Please.

JILL EGLE: This is my last month, and I don't know how next year's going to play. And every time I voice my concern nothing's changed.

SPEAKER: We're here to provide whatever help or support we can. But I'll have some of these. There's a QR code that you can, I got it upside down, that you can take a picture of and get more information. The information is also on our website with Families Helping Families of Greater Baton Rouge. We want to get more activity out and highlighting inclusive across the board everywhere that I go, and people are focused on what's available for everybody. And I always ask the question how can you or will you identify how you're going to approach the needs for those who have disabilities.

JILL EGLE: Because people like myself, Jill Hano, Bambi, everybody has a different story to tell. But some people (inaudible) the services around the country is a nightmare. She has a good story to tell. She's a good person.

NICOLE BANKS: Thank you, everybody, for their concerns, their questions, their comments, their passion about people with disabilities and getting the right services and funding that we need.

SPEAKER: Thank you so much.

NICOLE BANKS: Thank you. Is there any other further business?

AMY DEAVILLE: No. Just a couple of announcements. The next quarterly meeting is July 19th and 20th. And council members please don't forget to complete your financial disclosure forms and get them in.

NICOLE BANKS: All right. If there's no objection our meeting will be adjourned at 11:57 a.m. Rare.