

Louisiana Developmental Disabilities Council  
Planning Committee  
March 11<sup>th</sup>, 2024

LAUREN WOMACK: Good morning, everyone. I would like to call the meeting to order. We have a quorum of five members out of eight. Stephanie, could you please do roll call.

STEPHANIE CARMONA: Sure. Dr. Barovechio. Michael Billings. Christi Gonzales. Jill Hano.

JILL HANO: Here.

STEPHANIE CARMONA: Thank you, Jill. Julie Foster Hagan.

JULIE FOSTER HAGAN: Here.

STEPHANIE CARMONA: Melinda Perrodin.

MELINDA PERRODIN: Here.

STEPHANIE CARMONA: Brooke Stewart. Brooke, I'm not sure if you're talking, but you are muted. If you want to unmute.

BROOKE STEWART: Present.

STEPHANIE CARMONA: Thank you. And Lauren Womack.

LAUREN WOMACK: Present.

STEPHANIE CARMONA: And we do have a quorum.

LAUREN WOMACK: Thank you. Before we start I just wanted to remind you all of a few rules. For attendees please wait to be recognized by the chair before speaking. To help the meeting run smoothly please keep side conversations to a minimum and comments related to the topic we are discussing. Also, comments about a person's character will not be allowed. Please hold all public comments to what we are intending to discuss after we do our goals. Ebony, would you please discuss review of the budget.

SPEAKER: Sorry. Let's do the highlighted part first.

LAUREN WOMACK: Sorry about that. Council meetings that are accessible by Zoom are live streamed on YouTube. For council or committee members that are going to participate via Zoom we need to be considered present they must display a live feed video of their face with their first and last name. Have microphones muted unless they're called upon by the chairperson. Electronically raise their hand to request the chair

recognize them to speak. Once recognized to speak by the chair their microphone shall be turned on. After speaking the microphone shall be returned to mute.

Meeting the council's mandate. The DD Act states that councils are to engage in advocacy, capacity building and systems change activities that promote the self-determination, independence, productivity, integration and inclusion of people with developmental disabilities in all facets of community life.

Advocacy. Activity that seeks systems change by developing and approving or changing policies and practices that affect individuals with developmental disabilities. Capacity building. Activity that seeks to enhance or increase the ability and skills of individuals, organizations or service providers and communities to support self-determination and community inclusion of people with developmental disabilities.

Systems change. The transformation or significant improvement of a system achieved through policy, capacity building, innovation and demonstration, education and advocacy activities which further the inclusion of people with developmental disabilities in all aspects of community life.

Ebony, would you like to review the budget please.

EBONY HAVEN: Sure. Let me share my screen.

Okay. So currently you all have all of your state general funds go towards FHF. And currently in the FY25 budget request we have 507,517-dollars. We are advocating for that additional 500,000-dollars that we received for the past three years. And we're hoping to get that again to bring that total up to about a million dollars. In federal funding you guys have 722,000-dollars to spend for your contractual activities. And right now I have the contractual activities in the budget but as we move along throughout the day and you all develop new activities if you allocate more funding towards any activities those numbers will change. But total you have 722,000-dollars to put towards your contractual activities.

And just to go over a couple of things that go with the mandate. There's a restriction on the funds. So we can't supplant funds. Federal funds can't be used to either replace or they can't be used for

nonfederal funds. They may not be used to replace nonfederal funds, sorry. And then filling in gaps. Council funds can't be used to duplicate or replace services for individuals with developmental disabilities and their families. So as we move throughout the day those numbers will change and if you guys need to see the budget at any point I can pull it back up. But as you are allocating funding towards your activities those numbers will change. Does anybody have any questions about the budget?

LAUREN WOMACK: Thank you, Ebony. Any questions before we move on? Review of recommendations from the council. Everybody should have reviewed the recommendations from the council which was linked in the agenda you received via email. And it's also in your packets. Recommendations for the 2025 planning committee from council. Council recommends these items for the planning committee to consider for goals one and two. Promotion of ABLE accounts, create a TikTok page to share more information about the DD Council, foster parent training to care for children with developmental disabilities, training for medical staff including nurses on how to work with individuals with developmental disabilities. Similar to first responder training. The council recommends these items for the 2025 planning committee to consider for goal three. Training on procedure of how to file a formal complaint. Fetal alcohol spectrum disorder awareness. Assisting professionals to diagnose and treat individuals with fetal alcohol spectrum disorder. Objective 3.2. Speaking with chambers of commerce to educate them on hiring individuals with intellectual and developmental disabilities. Seizure and epilepsy training for schools compliance with current legislation. Are there any questions about these recommendations? Or discussion.

JULIE FOSTER HAGAN: A question. Are we to review these now or I see like we're going to go to each goal separately. So is there discussion you want to have about these now or when we get to?

EBONY HAVEN: We can wait if that's okay with you.

LAUREN WOMACK: Right. These are just the ones that, if I'm not mistaken, that staff recommends.

EBONY HAVEN: No. The council recommended these in

January.

LAUREN WOMACK: Okay. Yeah.

EBONY HAVEN: These are all that you recommended in January. As we go through the goals you guys can make sure that you keep these in mind as you are proposing new activities. Those may be some suggestions that you want to take into consideration.

MELINDA PERRODIN: Is there any way possible that I can maybe ask to add another recommendation or that would be something I would have to wait to April to do? Like I has something in mind.

EBONY HAVEN: No.

MELINDA PERRODIN: I was thinking about like having some type of text message system like, you know, during the legislature sessions. Like get like a text alert like to text council members and also whoever want to advocate for anything. I think having some type of text message system would be very beneficial to, you know, kind of remind people what's going on. And to get support like text alert like when we need to write to the members on a bill or a law that we're interested in cause I know in the school system we use Remind and it's kind of beneficial for parents to have that constant remind.

LAUREN WOMACK: I think that's really great because I know, I don't know about everyone else, but my emails often get inundated with things and I'm always scared I'm going to miss something.

MELINDA PERRODIN: And is it possible not only to consider TikTok, but even looking at Instagram as well too for people to find out more information about the council too.

BRENTON ANDRUS: As far as the social media stuff I just wanted to remind everyone most or a lot of organizations that have a very active presence on social media that are on multiple platforms they have a full-time social media person that travels to all the events, that takes the photos, that organizes things, that really-- or they might be an influencer and that's their full-time job. We don't have that on staff. We don't have a content creator. We don't have a full-time dedicated social media person. So that's why we share our info on social media but we don't have, I don't want to say an active presence, because I feel

like we put a lot of information out there, but it's not maybe as engaging as some people want it to be. So that's just to keep in mind when you start thinking of things like that that we might not be able to live up to an expectation based on what we have on staff currently. And that's not, I don't know that we can reconfigure staffing responsibilities to free up someone just to be on social media all day long. I just want to throw that out there.

LAUREN WOMACK: What do you think about the text message system? Would that be a lot of work for someone?

BRENTON ANDRUS: We would have to look into it. We have used a text message system way back in the day. Not a whole lot of people signed up for it from what I recall and it doesn't give you the information that you get via email on social media. It's kind of hey, check your email or prompt you to go look at something. But I don't know, we would have to look into it.

LAUREN WOMACK: And I think it definitely might be a step after we're doing the website, you know. I'm excited for that. Sorry. Not relevant.

Do you have any comments from staff? Jill, are you raising your hand? Okay. Are there any other questions about recommendations? Okay. Before we begin the discussion stuff, create a planning checklist to help us look at the five-year plan and activities. Let's look at that first. Stephanie, can you walk us through the checklist please.

STEPHANIE CARMONA: So I created this little planning checklist that's in your packet. What I did was I have each of our goals and objectives listed and I kind of broke them down. The whole idea for our five-year plan is that these are things that we want to accomplish with our activities so I want us to look at each of these things to see if we have accomplished them. And if not can we make a recommendation of an activity that will accomplish that. So the second part of it is the five-year goal, or I guess I don't remember what I called it. The 2022 to 2026 goals and objectives. So if you look at that I have all of the goals and objectives-- not objectives. I'm sorry. Well, goals, objectives and activities. So if the activity is in purple that is a current activity that

we've had either-- and I have on there how long we've had it during this five-year plan. So, for example, under objective 1.1 if we looked at the first bullet, the purple one, provide financial support and technical assistance for Partners in Policymaking and its alumni network. We have had it all between 2022 to 2024 for this five-year plan. And that approximate cost for those years. So the cost was 90,000 for each of those years. If the cost was different for a different year I do have that listed. And then it's a lot of documents, I know, I'm sorry. I tried to make it concise and have the most important information. But if there was a change within the past year in our planning status report I do kind of mention that change also.

So just looking at our activities I'll give y'all a couple minutes if you want to go through those and just kind of look and see using our checklist and the activities that we have for each goal and objective did we do what we said we were going to do with that activity. So, for example, objective 1.1 on our checklist I have increase awareness and knowledge of advocacy. So if we look in our five-year planning document under objective 1.1 do these activities, even if it's just one of them, increase awareness and knowledge of advocacy. I would say yes. I mean, we have Partners in there. LaCAN is in there. Roundtables. And FHF. So yes. So I'll give y'all a couple minutes if y'all want to just kind of familiarize yourself with the documents one more time. And then we can kind of go through them and maybe ones that we're not really sure if we've actually met that goal we can have discussions on.

JULIE FOSTER HAGAN: What does the purple mean again?

STEPHANIE CARMONA: It means it's current, doing it this year too. It's a current activity.

JULIE FOSTER HAGAN: So if it's dark it's stopped?

STEPHANIE CARMONA: Correct. And I tried to put like what year it ended. You'll see kind of towards the end when we get to like goal three there were a lot of activities that we no longer do. But I wanted to include them so you could see that when we're making those recommendations we're not repeating the

recommendations that we've done already. If that makes sense.

JULIE FOSTER HAGAN: Do we need to go through each of the activities to decide if we want to recommend continuing them or not?

STEPHANIE CARMONA: We're going to get to that in a moment, yes. This is more just for before we get into that discussion when we make those recommendations.

So under objective 1.1 the first is to increase awareness and knowledge of advocacy. So I personally think that we do that. Like I said, we have Partners in Policymaking. We have LaCAN under that. So I do believe that we meet that. The next one is increase awareness and knowledge of voting. We do that. We are doing that initiative this year. It's the last purple one under the objective. Increase awareness and knowledge of exploitation prevention. I did put a check on it, but I don't remember...

EBONY HAVEN: Were you thinking of the Leadership Forum?

STEPHANIE CARMONA: I think I was, yeah. The Youth Leadership Forum. Yeah. That must have been what I was thinking of was YLF. So we can kind of have a discussion if you think that that meets that one. So the exploitation prevention. The increase knowledge and awareness of financial stability and responsibilities. I mean, we kind of do it in a couple of them. So things like YLF. The supported decision-making they have something like money management, financial stability. I'm not sure. That wasn't my contract.

LAUREN WOMACK: Jill, did you have your hand raised? Would you like to say something?

JILL HANO: I forgot what-- oh. But I know that the supported decision-making did have money management. And as we go through can we kind of get details on like how well each like training is doing?

LAUREN WOMACK: That would be later on in our meeting, yeah.

STEPHANIE CARMONA: When we start to talk about the goals, Jill, we'll talk about each of the current activities and how they're doing and a little bit of information about them. But if that's not what you're looking for let me know, okay. And then under

objective 1.1 the last one was increase their awareness and knowledge of decision-making. And we did have that supported decision-making training from 2022 to 23. So for two years.

For objective 1.2 I broke it down into three different things. The first one being self-advocacy training. So that is accomplished with People First which is that first purple bullet under objective 1.2. Systems change advocacy, the same. And then participation on boards and commissions. We do send out any kind of information on any open positions on different boards and commissions. So we do send that out for y'all. So that was all for goal one.

For goal two objective 2.1 increased access to primary and specialist providers. I would say that yes for that one also. We oversee the implementation of the community and family support system. And y'all, if I'm off base please let me know because these two are not my goals. So I only know what I know.

EBONY HAVEN: I don't know if we've actually had an activity that would allow individuals with disabilities or their families to have increased access to primary and specialist providers, like a specific activity that would help families to do that. I don't think we have. Not in this five-year plan. Maybe in previous years. Just from the activities that I'm looking at I don't feel like just overseeing the implementation of the community and family support system would fall within that.

STEPHANIE CARMONA: Okay.

EBONY HAVEN: So that may be something you guys want to consider whenever you're looking for activities for that particular objective.

STEPHANIE CARMONA: Okay. The next one is increased access to preventive health services. And I think that kind of goes with what Ebony said. I don't think there's one specific to that. The only one I see is advocate for the creation of lists. So that could be something that we look at also. And increased access to prevention of chronic diseases. And I also don't think there's one specific to that. For increased access to dental care we did have, I don't even remember where it is, but I know we had one for dental care.



EBONY HAVEN: Yeah. There was advocacy around dental care for adults in the waivers and so that is now being covered. Representative Butler brought a bill that passed. So the adults in the waivers-- is it both for aging? No, it's just IDD. So in the intellectual and developmental disability waiver for adults dental care is now a covered service. So I do feel like this one has been through advocacy.

STEPHANIE CARMONA: Yes. The next one on the back of that checklist is the increased access to sexual reproductive health services. For this five-year plan I do not think that we have met that yet. As you can see, one of our purple ones is to conduct research on best practices to provide appropriate, accessible sex ed for middle and high school age students. So we do kind of have that, but we will kind of talk about that more when we get to the status report information.

And then increased access to behavioral health services. We do have right now the navigating the systems right now. So we do have an activity that's specific for that. For objective 2.2 we are looking at trained direct support professionals. So I don't think we had one specific to support professionals. We do have one for first responders. And then other professionals who value and promote inclusive community living. They do the emergency preparedness. Would you consider that, yeah. So for that one any kind of direct support professionals would be something that we might want to look at for recommendation.

For objective 2.3 this is our targeted disparity which is our disadvantaged population. We have been in talks with the newly opened Office of Women's Health. So as you can see for that bullet it's kind of both a little purple and not purple. It's because we conducted the research already and right now currently it just starts with collaborate with them. So these are things, for example, the increased access to health services we don't have any activity for that as well as increased access to health education. Right now it's just collaborate with them on those materials.

For goal three objective 3.1. I'm sorry if I'm going way too fast. Please let me know. I just know there's a lot of discussion to be had about the rest of it. So for objective 3.1 we're looking at education

and employment. So the things that were part of this objective were increased access to early diagnosis. I do not think that there was a specific activity that related to that.

LAUREN WOMACK: Would supporting Families Helping Families. Well, they don't really diagnose, I guess. That they could, I guess, of needs, the second one.

STEPHANIE CARMONA: I would say maybe early intervention services. I guess there's just not a specific goal for those things. Or, I'm sorry, a specific activity that meets those under this goal. And Families Helping Families is in goal one and I know they do a lot and encompasses a lot of the different aspects. But for education and employment this is one of, these are the things that they wrote for their objective five years ago when they came up with the goals and objectives. So I think the council wanted the increased access to early diagnosis, the identification of needs, the early intervention services, childcare and information and opportunities to collaborate with educators regarding IEP or individual education plan and programming to meet the needs of their students. Just looking at the activities that we have now I'm not sure if any of those. The only one I think that maybe there is the information and opportunities to collaborate with educators. There was an activity that I feel met that one.

BRENTON ANDRUS: The second bullet has including specific areas issues which could be spun in a way to cover those things. It might be of more benefit to be more specific of exactly what are those special things that you want to cover, what you want to do about those. If it's one to identify all those things instead of having-- cause sometimes basic information is going to work as long as we have direction on what should be done. But if we have very specific areas we need to focus on it might be better to break up those bullets into multiple actions instead of just a blanket statement. So we can have a little more direction on what we're looking at.

STEPHANIE CARMONA: And then on the last little bit, which is objective 3.2, is really focused just on the education. I'm sorry, the employment part of this

goal. The increased employment outcomes upon transitioning from secondary educational settings. I don't think we had one specific to that.

EBONY HAVEN: I would say the objective you all had with LAPIE. Although that is post-secondary inclusive education it did lead to employment outcomes. I think the employment rate for LAPIE was at 75 percent, if I'm not mistaken. Brenton, do you remember that 75 percent for individuals that went through LAPIE to get employment? Somewhere in there.

BRENTON ANDRUS: Yeah. I think there was a disclaimer on that. Maybe those that actually wanted employment. Cause I think there were some that opted to either volunteer for a nonpaying job or opted not to work because they didn't have to. But I think it was somewhere in the 70s.

EBONY HAVEN: Yeah. I feel like it was. So in a way I feel like that activity probably helped to meet this objective. If you all want to look at it like that. But if you're saying just straight out of secondary educational setting into employment you all haven't had an activity like specific to that.

STEPHANIE CARMONA: There was this one in 2022, advocate for information on post-secondary opportunities and access to LRS preemployment transition services within school districts for all students with disabilities.

LAUREN WOMACK: Do you know whatever became of that?

EBONY HAVEN: I think it was lumped into LAPIE, yes.

STEPHANIE CARMONA: Because we only did it for one year so it must have been lumped in somewhere since kind of like what Brenton was saying earlier. Some things we don't need it to be super specific it can just kind of be the umbrella of it as long as we know the direction you want to go in. So that's what I think on that one. But I agree with Ebony. I think it was at least hit on during the LAPIE activities.

LAUREN WOMACK: At least we have something in each.

STEPHANIE CARMONA: And then the last one access to employment opportunities inclusive of services from highly qualified employment support providers and increase competitive and integrated community

opportunities from employer side. That was a mouth full but that was kind of all of the last thing put together. So there were a couple activities that were done like the certification program. Would that be considered one of them or no?

EBONY HAVEN: So yeah. That was the capacity of the employers. Unfortunately towards the end of that particular contract we couldn't find learning partners for the individuals that were enrolled to get the certification. And so we pretty much discontinued it because we contracted with the Arc and unfortunately they weren't able to get the learning partners that they needed in order to complete the certification. But there was the employment seminars that you all did throughout from FY22 to FY23. Which I would say probably hits that activity or that objective.

STEPHANIE CARMONA: I agree.

LAUREN WOMACK: I know we kind of discussed it as we went, but does anybody want to comment on anything?

ERICK TAYLOR: Does have to do with the people that's strictly disabled?

EBONY HAVEN: Are you talking about the employment initiatives, Erick? Yes, so the focus is on individuals with disabilities.

ERICK TAYLOR: My thing with that is y'all saying that you're not getting a lot of people that participate.

BRENTON ANDRUS: I think that was in a previous initiative that we had where it started out one way and then towards the end we started not having as much participation.

ERICK TAYLOR: Okay. But my thing, and I understand that, thank you. My thing is with disabilities with the employment thing it's a lot of afraid to get out of that because they have foundations. They have something stable. And then to go out and find work they're scared of something to be changing, if I'm making any sense to y'all. And I think that's why we're not getting what we're looking for to push them out and do the work thing. Because my take is if I'm going to lose this, but if I gain this I'm getting more but I'm kind of scared to stick my feet.

BRENTON ANDRUS: Talking about losing benefits and

things?

ERICK TAYLOR: Right. So I'm kind of scared to get the pie taken. And if I get half of the pie taken but I get more on the other end. But then if I don't get more on that other end my thing is I can't get that back as quick as I can. If y'all understanding what I'm saying on that part.

JULIE FOSTER HAGAN: So just in response to that just for sharing purposes. The Department of Health is currently-- the Arc of Louisiana and some other advocates asked that we relook at something called the Medicaid buy-in program and it is specifically for people with disabilities, any disabilities, not just focused on developmental disabilities, who have a certain income in order to not lose their benefits. If they show they have these disabilities then they can buy into Medicaid. So there is a small fee you pay but then you keep your Medicaid benefits or waiver benefits. Prior to Governor Edwards there was a change in that program that it's still there, but the income is pretty low. And so they are currently looking at whether we can increase that income back again so that those folks who were previously able to participate in the program. And it's a lot of like the folks that are on the SPA's program that Kelly talks about during the council meetings. But just so you're aware they are, the department is looking at bumping that income back up so that those folks who potentially would want to work but are afraid about, you know, they still might need help with different things that are offered through Medicaid would be able to buy into Medicaid and not lose benefits.

ERICK TAYLOR: So it won't be afraid.

JULIE FOSTER HAGAN: Yeah. The main thing is there's a fiscal impact tied to it so they're just having to evaluate how much it will cost and do we need to ask the legislature during this session for some additional money or is it something we can do within the current budget and all of those things are being discussed now. The new leadership at the Department of Health is very much on board with the need for that program though and are trying to explore adding-- not adding it back because it didn't go away, but moving that income up again.

ERICK TAYLOR: Is it that they have to meet a status that certain people disabled on it or is that true?

JULIE FOSTER HAGAN: I think it is true they have to have disabilities, but I don't know what, it's not just developmental disabilities and I don't know what that criteria is. I can try to find out and let you know, but I don't know right off the top of my head.

LAUREN WOMACK: Any other questions or comments?

SPEAKER: You guys mentioned the previous activity with learning partners. Did you not have enough people to do trainings, was that the challenge?

EBONY HAVEN: So for the certification I know that the individuals that were enrolled in that program they had to have learning partners, like job learning partners. So the Arc was having a very difficult time trying to find those learning partners. And so due to that they just recommended that the council just discontinue the activity. And I think that they went through LRS to try and find learning partners and there just wasn't any.

SPEAKER: I know also the Baton Rouge Area Chamber they have been talking a lot about working with employers to increase their capacity to have people with disabilities and I was just going to say if that is something that is continued here that would be something Epilepsy Alliance of Louisiana would be able to participate in. We do get lots of calls about discrimination. Usually it's on the employer side a lack of understanding of what epilepsy is, what it isn't and how to appropriately accommodate the individuals. And so when you said learning partner that's more of what I was thinking of trying to work with employers. But y'all are working with individuals with disabilities, correct, for this activity?

EBONY HAVEN: Yeah. And I can get more information because this wasn't my actual contract and so I'm not as familiar with it. But yeah, I can get more information.

SPEAKER: Thank you.

LAUREN WOMACK: I have a question for staff. I'm on the Louisiana Rehabilitation Council and there's something called LMS which is like a learning platform. Would that fit in the budget if Louisiana Developmental

Disabilities Council got a subscription to this and we could put like, use that for our trainings? It's like a learning module and like I use it for continuing education. Like you go through the different modules and you can get like a printout or things like that. It just seems like it might be a really good way to hit a lot of these and cost effective to hit a lot of these things and to leave them out for people to be able to-- if the initiative is over it might be better than just YouTube. I don't know, just a suggestion. I don't know if that would fit with our budget or anything like that. But then if we contracted out we could say hey, if you do the training you can use this platform or whatever. I know I just really like it. It's a newer thing and I think LRS is going to use it for their counselor trainings.

SPEAKER: What's it called again?

LAUREN WOMACK: And I have to get-- I know it's learning module systems but it's LMS. And a lot of people are moving toward it. Like employers for their training and things like that. And I didn't know if maybe, I don't know how expensive it is, but to get more input from LaCAN members and things like that. I didn't know if we could get a subscription to like Survey Monkey or something like that where we might be able to do like a survey every year. Just so people feel like they have more of a say and we could see where, you know, just people not on the council but what-- I know LaCAN does their stuff as well, but it would be anonymous and we could see the trends of where is the need. Those were just two things that I thought of. But that might be for next year if we need to do some research on it.

SPEAKER: Sounds good.

LAUREN WOMACK: I see a lot of this as educating and I would hate for the contract to be over and then we lose that. It would be so nice to be able to have that as something permanent.

STEPHANIE CARMONA: And that's all I have for that.

LAUREN WOMACK: Okay. We're going to go ahead and move on. Do we have anybody on camera that would like to make a comment before we move on? I think we're good. Everyone should have received the documents that were attached in the email. On the planning status

report there are descriptions of all activities. Also staff gave recommendations on every current activity. Those activities could include funding changes, discontinuing an activity or continuing an activity. Each recommendation includes a justification from staff. The committee does not have to accept the recommendations. Let's begin on goal one.

HANNAH JENKINS: All right. Activity 1.1.1 is Partners in Policymaking. Do I go over what that is or just go straight to staff recommendations?

EBONY HAVEN: You can go over what that is. We have a lot of new members present and I don't know who's watching on YouTube. So yeah, you can go over it.

HANNAH JENKINS: Sounds good. Partners in Policymaking is a national leadership training program for people with developmental disabilities and parents of young children with developmental disabilities. It provides the most current knowledge about disability issues and develops the competencies necessary for effective advocacy to influence public policy at all levels of government. The 2024 PIP class, that's Partners in Policymaking, 2024 PIP class has finished January/February and will be completing the sessions by June. Six sessions once a month. PIP will continue to complete sessions in person for fiscal year 2025. And we usually accept at least 20 participants, parents and/or self-advocates, in the class. So this year the staff is recommending that we not only continue this activity, but we increase the funding to 100,000-dollars for FY25 due to increased costs associated with inflation, hotel expenses, travel, etc. We've had this same budget, there's a little typo, since FY20. So for the last five years we've been at the 90,000. And as y'all probably know in the last five years things are a lot more expensive. And especially when you're talking about traveling, hotel costs, food, mileage, reimbursement, etc. Which is why we're recommending that we increase that funding.

JILL HANO: Are we on staff recommendations? I'm sorry. I had to take a phone call.

HANNAH JENKINS: Yes. You're good. We're on staff recommendations.

JILL HANO: Sorry.



HANNAH JENKINS: No problem. I love questions from Jill. And just adding to that just for y'all's knowledge we do already only reimburse participants a portion, not even half of what the state allows for mileage. So we're already trimming that down. We already only give them 31 cents a mile. And we also only budget for two per room. Each person doesn't get their own room. If they want they have to pay the additional cost. So we have already been using those as some cost-saving measures up to this point. But we're noticing this year things are a little bit extra tight. We were only able to accept three other participants that were in the northern regions because we couldn't afford the additional travel costs associated. This year we have, which is a good thing, we have a good bit of participants from the north which just cost a little bit more money because they're driving a lot further. And we also have a lot more participants that receive stipends, which is another fluctuating cost that we don't know until they start whether or not we know they're going to need stipends for their workers for the weekend. And we have a limit on that as well. So we're not just, you know, cart blanche. But we're just noticing cost is going up and it's harder to accommodate the amount of people that it adequately requires us to.

LAUREN WOMACK: I have a question too. We don't have as many council members from the north either. I know we were trying to do the different regions.

EBONY HAVEN: If I'm not mistaken we had one person from the Shreveport area.

LAUREN WOMACK: So this is even more important to get them involved, I would think.

HANNAH JENKINS: Yeah. To hear from these rural areas we, of course, really appreciate having them in Partners because we don't want just the people close to Baton Rouge. We want to get statewide. And we have to be able to pay for them to come statewide.

LAUREN WOMACK: If that's okay with everybody we'll just go through them all.

REEKESHA BRANCH: So the next one is--

JILL HANO: I have a question.

REEKESHA BRANCH: Sorry about that Jill.

JILL HANO: I'm sorry. I don't know these

protocols. I can't even see where I raise my hand. But Hannah, can you go over again what are the PIP costs we have.

HANNAH JENKINS: Why we're asking for additional funds or just in general?

JILL HANO: Just in general.

HANNAH JENKINS: Okay. Well, with PIP we cover professional services. So it covers speakers coming in. For majority of our sessions we have national speakers that speak at other PIPs. They come and speak at ours. We have mileage reimbursements. We have hotel costs, meeting rooms, food. Cause we really want these parents and these self-advocates to be able to attend without coming out of pocket. Obviously we would probably lose a lot of participants if they had to pay. So we cover basically as much as we can to get them there. And that's why we cover an additional, we do 100-dollars for if they don't have a waiver then we cover 100-dollars for that weekend so they're able to-- what did you say Jill? I'm sorry.

JILL HANO: What do you mean waiver?

HANNAH JENKINS: When it comes to, correct me if I'm wrong, the parents when they're leaving their children with a disability we want them to have somewhat assistance to pay for their care for their child while they're out. So if they have a waiver that covers that cost then that's cool. For those that don't have a waiver that covers the cost we pay 100-dollars towards it.

EBONY HAVEN: So like the children's choices waiver, Jill, if they don't have children's choice or some other type of waiver service that would pay for their worker to come in the home then Partners is covering the cost up to 100-dollars.

JILL HANO: Okay. Great. Thank you.

ERICK TAYLOR: I have a question. You're saying they're trying to cut down. So how would that be if they have caregivers. You saying y'all cutting it down to two people to the room. What if it's not sharing. If I had the question misunderstood but two people to the room.

HANNAH JENKINS: We always allow if the person is coming but has a caregiver with them, a worker then they have the room just with them and their worker.

This is how Partners has kind of always run that we've done two to a room. So I was just mentioning so that y'all know we weren't just spending money like crazy. That's already a cost saving measure that we do.

ERICK TAYLOR: I understand that part. Like I'm saying if they not physically a caregiver and they come with that person.

HANNAH JENKINS: They're not allowed to bring, unless it's a worker, they're not allowed to bring family members with them for the weekend.

ERICK TAYLOR: That person would be responsible for their room if they do.

HANNAH JENKINS: Yeah. We like to make the goal for them to really be able to focus on the program so they build relationships with the other participants. We've noticed if they have other people there they're not as focused on this group.

ERICK TAYLOR: Even though if they don't have the service but they need the assistance but they don't want to share that particular room with that person could they still have to be two to a person?

HANNAH JENKINS: They're welcome to have their own room they just pay a portion of the additional cost. They don't pay for a full night. But if they want their own room I think it's like an extra 50 or 60-dollars a night to have their own room.

EBONY HAVEN: And it's just one night.

HANNAH JENKINS: Yeah. It's just a Friday night.

ERICK TAYLOR: Got you. Thank you.

HANNAH JENKINS: No problem.

REEKESHA BRANCH: So the next activity that we're going to discuss is activity 1.1.2. That's our LaCAN activity that I monitor and it's Louisiana's Council Activity Network. So basically what that activity is comprised of a group of individuals that assist the council in pushing their agenda forward year after year. So the leaders, we have leaders located all across the State of Louisiana. A total of nine that cover ten different regions. And basically what they do is assist and provide in training opportunities on advocacy. And also they try to connect their members with legislators to discuss agenda items. Just to give you guys some results from last year. We had 16 action alerts with 2,266 actions taken. Nine yellow shirt

days with 134 people in attendance and 24 testimonies provided. A total of 84 formal legislative visits and 49 of those were with key committee members. So last year we did request an increase from 215,000 and you guys did approve us to go up to 240,000 so we're just asking to kind of keep it the same this year. And that's it. Any questions?

LAUREN WOMACK: How is the budget on that one, pretty good with the increase?

EBONY HAVEN: We're in that current budget.

LAUREN WOMACK: But we're on target, right?

REEKESHA BRANCH: Yes. So everything's good with the budget. Actually the increase allowed us to be able to provide bonuses to kind of I guess balance out the increase in pay rates to be more competitive. And actually last year during the time that we discussed, you know, the options of increasing we didn't have a leader in region nine. So now we have a leader in all regions. And everything's going well. No issues or concerns.

EBONY HAVEN: So the next activity will be 1.1.3. So that activity is for advocacy events like our legislative roundtables, any trainings. So the LaCAN leader trainings we normally have a summer training for the LaCAN leaders and a fall training. We haven't been doing the fall training as much just because sometimes our legislative agenda has been delayed in getting finalized but we do put money towards trainings there. And just services and policies that will benefit individuals with developmental disabilities. So that particular funding has been at 30,000 for a while and we recommend that it stays at its current funding.

REEKESHA BRANCH: All right. The next activity is activity 1.1.4. That's our Families Helping Families center activity. And actually the centers provide information, referrals, training opportunities and they also support individuals and families in their time of need. Last year's results, over 40,000 contacts were made to centers asking for information. Three thousand referrals provided. Over 400 trainings with more than 8,500 individuals trained. And over 28,000 peer-to-peer supports were made. So we're just asking for this particular item to continue to be covered under the state general funds. And that's it for that

one. Any questions? We're rolling through.

HANNAH JENKINS: Activity 1.1.5 is to share video and other visual materials featuring information important to individuals with intellectual and developmental disabilities and their families. The council staff shares videos and other materials from 23 East, formally O'Neill Communications, for the past three years on social media. The videos are also on the council's website and YouTube page for the public to utilize. The staff recommends discontinuing this activity for FY25. We feel as though it's already covered in 1.1.6 to share this information. We don't think it's needed twice. That's our recommendation. Any questions? All right. I think the next one is also me.

1.1.6 is produce and provide information important to individuals with intellectual disabilities and their families through a variety of electronic and social media, council website, Facebook, LADDC news. The council continues to provide information through a variety of electronic and social media. The number of subscribers, followers and likes grow daily. We recommend continuing this activity for FY25. Any questions?

EBONY HAVEN: Okay. So the next activity is 1.1.7 and of course we recommend continuing this particular activity because we do share information about how council members and even public members can participate on other boards and advisory councils such as SEAP. We just shared an LADDC news about SEAP membership. And we do share things about other advisory councils. If there are openings on LRC that Lauren mentioned, the Louisiana Rehabilitation Council. And other boards and commissions that have individuals with developmental disabilities on their councils. So we recommend continuing this particular activity.

LAUREN WOMACK: Kathy, would you like to say something?

KATHY DWYER: Yes, thank you. As almost a six-year member of the OCD State Advisory Committee I would like to recommend that one of those committees that you advertise membership for would be the Regional Advisory Councils. There are a few regions in OCDD that are struggling to find members. So there's information on

OCDD's page under their about us tab that talks about the SACs and the RACs and there's a form for people to apply for their Regional Advisory Council. And that's with the LGEs.

LAUREN WOMACK: Thank you.

HANNAH JENKINS: Activity 1.1.8 is Louisiana Youth Leadership Forum. It's an innovative overnight training program for high school aged individuals with developmental and other disabilities. It includes career awareness, leadership development information to assist young people with disabilities in reaching their full potential. YLF is also receiving 15,000-dollars from the Department of Education and may receive funding from the Louisiana Rehabilitation Services depending on the delegates selected to participate in YLF. That amount, if any, will be shared after selection of the delegates. YLF is in its second year of a five-year reoccurring grant from (inaudible) for transportation and meals. YLF also received an additional grant for housing and meals through the Brown Foundation. It will take place June 20 through 23rd at the University of Louisiana Lafayette. For FY24 YLF is accepting 14 delegates including one high support camper and will take place over three and a half days. The staff recommends continuing this activity and its current budget for FY25. The budget was increased from 30,000-dollars to its current 45,000-dollars in FY24. And in 23 they accepted 13 delegates for the program. Any questions?

REEKESHA BRANCH: All right. So the next activity is 1.1.9. That's our disability voting rights activity. This is our-- actually a new activity we started back in October of 2023. It provides training opportunities on voting rights and the different processes for individuals with disabilities. The current results, they have had one web-based training and two in-person trainings with a total of 28 self-advocates to participate. Actually, the most recent training opportunity was last Friday in region nine. And I'll have those numbers for our next council meeting. But we are asking that it continue at 30,000 for fiscal year 25. That's it.

STEPHANIE CARMONA: For activity 1.2.1 the council continues to provide technical assistance and training

opportunities to strengthen the self-advocacy network. So this is the People First contract. We recommend continuing this activity at its current budget and that budget is 25,000.

On activity 1.2.2 to provide information and support for participation of individuals with intellectual and developmental disabilities and their families and cross disability and culturally diverse leadership coalitions and advisory bodies. We continue to provide information and support participation and cross disability and culturally diverse leadership coalitions and advisory bodies. Council members currently serve on the ABLE Account Advisory Council. The Advisory Council on Student Behavior and Discipline, the Voting Rights Task Force and the Post-Secondary Inclusive Education Advisory Council. We recommend continuing this activity for 2025.

LAUREN WOMACK: If it doesn't have a cost it's just-- what does that mean?

STEPHANIE CARMONA: It's just not a contract that we have. So like, for example, this one we just sent out that information.

LAUREN WOMACK: Okay. All right.

STEPHANIE CARMONA: I'll read this one too. 1.2.3 is to support council members' participation in training and educational opportunities and council leadership participation and national training networking events and advocacy opportunities. Council members' participation and training in educational opportunities will continue to be supported. Staff will ensure council members are made aware of opportunities to participate when available. So we will let you know, send out an LADDC news, those kinds of things. We do recommend that you continue this activity but our federal partners, I guess, say that this cannot have any money attached to it. So that approximate cost, we can no longer have a cost attached to it. It comes from a different budget. It can't have this cost attached to it. I don't know how else to word that. It would be like a reimbursement, kind of like your travel and your like hotel rooms for the council meeting. So it would still be covered for those council members. We just can't have an activity cost for it.

JULIE FOSTER HAGAN: So that amount would need to be removed?

STEPHANIE CARMONA: Correct.

EBONY HAVEN: And so if any council members were interested you would follow the same protocol that's listed in the bylaws where you would seek a stipend request and fill out the request for whatever event it is. Either a conference or whatever it is. And then the executive committee would look at that request and either approve it or deny it.

STEPHANIE CARMONA: And we'll go onto goal two. Oh, I'm sorry. Oh, my goodness. We can discuss goal one. So any recommendations from the committee.

JULIE FOSTER HAGAN: We want to limit it to what? Do we need to vote or something on what the staff recommendations are or then open the floor for new ideas?

EBONY HAVEN: I think it's all together. Once you guys have a draft then we will vote on the draft at the end all together.

JULIE FOSTER HAGAN: I do have a new idea. And this is not a fully thought-out idea so y'all bear with me.

LAUREN WOMACK: Neither were mine.

JULIE FOSTER HAGAN: But one of the things that I do think our OCDD office could potentially partner with the council on, and I'm going to try to say this the best way I can because I think families have a very important role in providing us feedback. But when we recently, we've done a lot of different focus groups and we have a lot of different advisory groups and things like that, one of the things that's very noticeable to me is that I don't have a lot of people with lived experience or people with developmental disabilities themselves asking to be a part of these groups. It's most always families. And so one of the goals that I have that I wanted to bring here because I thought it might be good to partner with the council on is establishing whether that's some kind of advisory group in my office. I don't really, like I said, it's not fully fleshed out. But in some way I want to have some opportunity-- not like I'm kicking families out, but an opportunity where it's only people with lived experience and people with developmental disabilities



themselves that are on this group and help have that voice because sometimes I feel like we don't always hear that voice. Because again, families are very important and I'm not trying to say that that's not true. But I want to be able to make sure that people with disabilities, especially when we're talking about things like self-determination and, you know, autonomy. That they have an opportunity to have a voice. So I'm throwing that out there to see what you guys think about that. If that's something that may be better just for my office just to figure out that's fine. But it just seemed like while we were doing the planning committee, because that's something that's top of my mind. See really first, I guess, if people agree that's a need. And if so, any thoughts on how we might partner. And I don't know that it would have a cost associated with it, but still just partner on what that might look like.

ERICK TAYLOR: Excuse me again. I'm not just trying to jump in. I'm just trying to figure out what you said you're not trying to kick families out. Are you basically trying to say you want the people with a disability to have to speak the way they want to speak.

JULIE FOSTER HAGAN: That and an opportunity. So I just started a Self-direction Advisory Group, for example. And on that Self-Direction Advisory Group I didn't have anybody-- We had 300 people who said hey, I want to be part of this group. Not one of those 300 people were people who direct their own services. I did go out and convince a couple people to join who direct their own services.

We also, like when we're doing all the post PHE informational sessions and we were trying to decide where is our developmental disability system going to go we had no self-advocates who were part of that group. And we had over 700 people asked to be a part of that group. So one of the things I'm trying to figure out is it might be that I just need to figure out how do I get people with disabilities involved in the groups we have or it might be that there's some separate opportunity. I don't really know. I just know that I do want to make sure that I'm having opportunities to hear from people themselves who are receiving services. Not to, again, what I'm saying is

I'm not trying to negate the families feedback, but I want to hear from people themselves as much as I hear from families, you know.

ERICK TAYLOR: But my thing as a person with a disability and I keep going back to this is a lot of them is scared. A lot of them is scared to speak out because if they feel to speak out the way they want to speak out and say what they want to say I'm scared if I speak strongly the way I feel and speak strongly how I look at things I'm going to be scared I'm speaking too strongly and get something taken from me. I want y'all to hear what I'm saying when I say taken. They scared. Okay, if I show you what I feel and show you how I feel or why I'm going to get this taken because I'm setting a boundary that I have to act a certain way to get what I need. So I'm scared to speak that way. And when they got determination to speak I'm saying okay, I'm speaking but what happened back here that I done spoke. If I speak this way is she going to put a pin on it. Is she going to write something on me. Okay, he is capable to speak like this so what's going to be taken.

JULIE FOSTER HAGAN: So how do we overcome that, I guess?

ERICK TAYLOR: They need assurance that it's not like that. They need assurance it's all right for you to step up and speak the way you speak. But I'm not going to take nothing from you. If they don't have that assurance as a person with a disability they're going to push away. So they're going to push out there to speak. Hey, I'm going to use me. You be pushed out there and speak for us but I'm not going to put my name on that paper because I'm scared. Take that chance to step out but I'm scared. Take that chance to walk the walk and speak but I'm scared. You understand what I'm coming for?

JULIE FOSTER HAGAN: I do. What I'm trying to think about is how do I give them a safe space to do that.

ERICK TAYLOR: To show them hey, I'm here to help you and not to hurt you or take nothing. If I'm making sense to you and everybody in this room. To show them you can talk it but if you don't show them how to walk it I'm scared.

JULIE FOSTER HAGAN: And I think that's part of

what Partners in Policymaking tries to do.

EBONY HAVEN: And I was even going to say the Youth Leadership Forum. So that is designed to help younger individuals develop that voice early so that they're not afraid to speak up. But just to speak to what you asked about Julie. I think having separate stakeholder groups with just individuals with developmental disabilities or disabilities in general would be helpful because of the issue that he brings up. I mean, I'll just be honest, sometimes I'm afraid to speak up in certain meetings. So I think just allowing that safe space for them to have a place where they can come and talk about their concerns outside of the stakeholder groups that y'all already have established I think will be helpful.

SPEAKER: As a person with a disability, invisible disability, I don't receive any kind of services but a lot of my clients obviously do and they're terrified to speak up because as this gentleman stated they're afraid they're going to lose their services. So if you could have a meeting where it's a safe space and they don't have to maybe sign in. They're just there to air the services they would like to see or the things they feel they need instead of being told what they need would be helpful. I know I have this lovely little fuzzy thing over here so people know that I have a disability. But I'm treated differently when I go places. Not always nicely. It's not always wonderful. But I'm lucky enough to work for an organization that accepts me as I am. That's not the case for the majority of my clients and they're terrified to admit to their employers that they have a disability. So just a safe space. Not maybe sign in.

JULIE FOSTER HAGAN: Okay. So not go on record with your name. Okay.

BRENTON ANDRUS: One of the things I'm thinking about is, I mean you might have to approach it two-fold because you don't want to isolate anybody. So I don't want us to say oh, we're just going to have this one committee where we send all the people with disabilities. While it might help in some instances we also need to figure out how to get them on other advisory groups with their peers or other family members. One of the things that we did in, I think it

was one of our previous relationship, sexual education trainings was you would go in and you would have a class for our self-advocates, you would have a class for parents and family members, and then there was a point where they would be together. So you'd have two paths that would merge at the end or at the beginning or something. So that might be an option of having these two separate groups that then end up collaborating together at the end where someone on staff or whoever is running the groups and say these are the ideas we got from both groups and then maybe that will help. Because it might get people comfortable speaking on their own in this group so maybe they'll be more comfortable speaking out once the group comes together because they had that safe space but we're still engaging them with everyone. That might be something to consider.

LAUREN WOMACK: Julie, sign me up. I'll do your focus because I'm getting service with self-direct and I was doing the research and it seems like that is where a lot of the states are moving to beef that up. But another thing like that's why I feel like I'm supposed to do this because a lot of people specifically with developmental disabilities may have autism or they may not be able to speak for themselves. But I think too like maybe, and I don't even know if this would work, but if you had Disability Rights Louisiana as part of it. I'm sure-- I don't know if they have any staff that has a disability too. Because that would be kind of like a safe space that could go over like legally you have a right to speak and things like that. And I mean maybe just like you said, like the surveys or things like that. I don't know if there's any kind of blog or anything where you don't have to register. Like you could just leave comments or things like that. But yeah, that's why I feel like I need to do this is because even with what I do for work, employment, people are afraid to go to work because they don't want to lose their benefits. And my parents even told me like don't get a job without health insurance, you know, because it's like you're barely living with what you have but you're always afraid like you don't want to chance something that you're afraid to lose. Like you're surviving so if

you, I guess, a lot of my clients like they're afraid if they go to work they're going to lose the little bit that they have and then wind up worse than they are before and that's terrifying. And hopefully like Partners in Policymaking maybe you could speak to that or recruit some of the other people too. Or even at LRS if you put with the clients I know they give them the CAP information, but maybe if you ask them if you could put something in there for people in the LRS mailers or something about we want to start hearing from you. What are ways we can do better or things like that.

JULIE FOSTER HAGAN: Okay. Thank you.

LAUREN WOMACK: Just some thoughts.

MELINDA PERRODIN: And maybe just, you know, let them know that if they express their opinion about the situation that there will be no act of retaliation because I think a lot of the fear retaliation for voicing their feelings. If they could have some reassurance that no act of retaliation will occur for voicing their opinions. It will be kept confidential.

ERICK TAYLOR: Some people can be around family and family (inaudible) watch how you speak, how you say things. Also the people need us too to know where. The only way you can talk, you can't talk if you haven't walked. If you don't walk it then you could talk it and that is true. Like I said, they're scared in some ways. Watch how you speak because just that person that's living on what they have some families is living on what they have. It's a thin line. And just like they said, you just can't separate here to there and here to this.

JULIE FOSTER HAGAN: Yeah. And I apologize if it came across that way. I wasn't trying to say (inaudible). I just feel like I need to hear from people with disabilities more. And I agree there's some people who maybe have trouble having a voice and need families to be their voice for them. So I'm not trying to negate that in any way, shape or form. Just really truly trying to say I want to have more opportunities for those people who actually live it and walk it. I think you guys have given me some great ideas to bring back.

LAUREN WOMACK: Yeah. Cause it's hard. It's like

a lot of people that are in like in it, the positions of power too are not people with disabilities. Or the staff or things like that. So, I mean, that's something as well. It's difficult because I don't know of any other group where it's like the majority of people are not people with the actual. Like if a women's group you wouldn't have a man. You get what I'm saying. Like I don't know any other organizations. And just by the nature of it it kind of is that way. But I totally am excited that you see that and I hope, you know, anything I can do to help.

JULIE FOSTER HAGAN: And I've started seeing different other states have different groups. I was in Portland Oregon, for example, at a conference and it was a state director conference but they have such a strong self-advocacy group in Oregon there were tons of self-advocates at the state director. They were wanting to see what's going on at the state level. And I started talking to one of the ladies that sort of leads that effort and it really got me to thinking how do we help facilitate that. That's what I'm trying to do is figure out ways that I can help to facilitate that. I as the assistant secretary in OCDD I value input from every single group that I get. But I do just want to make sure we have opportunities for everyone's voice to be at the table.

LAUREN WOMACK: Well, that might be one-- I don't know if we can make that suggestion as one of our action items. I don't know exactly how--

JULIE FOSTER HAGAN: Maybe that we just think about this as opposed to it being a specific action.

LAUREN WOMACK: Right.

JULIE FOSTER HAGAN: I defer to you guys on that.

LAUREN WOMACK: Okay. Somebody had a question? Kathy.

KATHY DWYER: Yes. Thank you. Julie, as a SAC member I think this would be something good to bring up at our next SAC meeting. But my suggestion would be to reach out to People First. Isn't that what they are for. They're self-advocates. So maybe we even need our RACs to start reaching out to People First to try to encourage more membership and being active and participating in focus groups and so on and so forth.

JULIE FOSTER HAGAN: Thank you. Do we need to talk

about any of the other recommendations?

JILL HANO: Y'all there's a chat.

BRENTON ANDRUS: I think we're doing hands raised.

LAUREN WOMACK: We're doing hands right now, but thank you for letting us know, Jill.

JILL HANO: My bad.

LAUREN WOMACK: No, you're not.

STEPHANIE CARMONA: So any activities that we want to recommend to the full council for goal one this is where we kind of write those activities. Any of the recommendations that staff or council members gave those kind of go in here also. So if, for example, and I'm just giving an example, if we wanted to-- 1.1.5 was the one that staff recommended discontinuing. If the committee had decided that they want to discontinue that this is the place that we need to say that so that way we can get rid of it on the action plan cause at the end we're going to go through the full action plan and make sure that we have addressed everything that needs to address. And if there's anything from the committee-- I'm sorry, the council recommendations. So, for example, like the foster parent training or I guess that would go more for goal two. Or ABLE accounts or adding that TikTok or Instagram kind of thing. I know we kind of spoke on that. But if those things needed to be added to any of the activities that's what we need to talk about right now.

JULIE FOSTER HAGAN: I agree with discontinuing because our office is also working on some different materials that we get out, different informational. And we had partnered on some of those. But we're also trying to do more like just ten or 15 informational sessions about our services, breaking it down. Because a lot of times we say oh, just go look on our website. Buried ten pages deep is where you can find that. But just trying to figure out the information people need and do a small tidbit that we can get out and get reported.

I did have a question about, Brenton, you mentioned you don't have-- is there the ability to do a contract with someone for social media activities? I have no clue how much that cost or even if it's feasible. If folks feel like that is something that's important.

EBONY HAVEN: It's an option.

BRENTON ANDRUS: I have opinions. I don't know if this would be the place to share them. So as far as hiring someone that gets complicated as you know as far as getting positions and things of that nature approved. I would say contracting is an option. I guess you would have to weigh the options of best bang for your buck. Like if we are having a presence on social media is that really going to change the system in some sort of way. How impactful would that be to people's lives I guess is how I would think about it. And it might be, I don't know. A lot of people they want things delivered to you in a fun and helpful manner and all that. Is doing something like that really going to change the system like we're looking to do would be the big question. And if so, then great. And then how much would that cost, I have no idea. We would have to know specifically that it's going to be impactful and we're not just spending money for maybe doing a little bit more than what we already do like just sharing of information. So that would be something to consider.

HANNAH JENKINS: I would just toss it to something after it was brought up in January when we were trying to kind of brainstorm. A challenge that I was thinking we may face if we went that direction was going to be finding someone with the expertise, a content creator that also has the expertise to do videos and snidbits because we found I think in the past if we're using someone who doesn't know anything about what we do then you kind of hit a wall that they're trying to create stuff and they don't know what they're creating. They don't really know what is needed. And, you know, you tend to not get as much out of it if the person doesn't have that knowledge base. Cause as a whole social media content creators, even if they're working for stores, they know everything about marketing for a store or you know. So that would just be something to consider is the challenge of finding the right contractor if that ends up being an activity.

MELINDA PERRODIN: I guess the most important question here is I guess the way I was looking at it is if you wanted to make people more aware of the council and what they do for the community. Because I admit, I



have a special needs brother and I didn't really know about this council until I went on Facebook. That's how I found out about the council. Because not a whole lot of people know about it. And so that's the way I was looking at it to make people be more aware this exist. Seeing it more like a marketing strategy to let people know hey, I could learn more about the council and what they do for the community.

JULIE FOSTER HAGAN: Food for thought. One of the things you may do this year with a goal to looking towards next year they do have groups that could do if marketing is the goal. It may be that the council could do like a one-time contract with someone to do a marketing assessment that would include finding out, to your point, Brenton, like what is it that people want. Doing engagement with the communities. How can we best get the word out. And it might be social media and it might be a combination of other things. I know I've hired people to do that assessment for me before. It's been a long time ago. And I know Southeastern actually has a whole program because they have a student-- one time their students did a marketing research analysis for us and made that a special project when I used to work at one of the state operating facilities. I know that's possibility. But that way you know you're getting the bang for your buck down the road.

MELINDA PERRODIN: Or I don't know if it's something that could be addressed through the LaCAN leaders being that you have a LaCAN leader in each region maybe they can do more of an outreach to schools, to organizations like the Down Syndrome Association or the Autism Society. Find out whenever they have functions maybe we can get the word out that way.

JULIE FOSTER HAGAN: Because I do think that's important. We're always struggling with-- we know there's a lot of families that know about our organization too but we also know there's a lot who don't. It's hard to figure out. It's like a double negative. How do you reach people you're not reaching right now but you don't know because you don't know how to get to them. But I think the LaCAN leaders are a good idea. They have their finger more on the pulse in the regions.

EBONY HAVEN: And I'll just say, Melinda, in the LaCAN contract the LaCAN leaders they are contracted to do outreaches. I think it may be 12 per year if I'm not mistaken. So it's like 12 outreaches at least, I'll say, 12 outreaches a year. And I know some of them do go to organizations like the autism centers in their areas. So I guess I'm thinking about how impactful is it. I guess our name still isn't getting out there enough. Just because I know some people don't associate the council with LaCAN. They think they're two separate things and LaCAN is just the advocacy branch of the council. And so we can definitely look into something like this. We don't have the cost of course now because we didn't know that this would come up so we weren't able to research it. But we can maybe try to research a cost and bring that back to the council in April.

MELINDA PERRODIN: And another suggestion, being that we have the Louisiana Department of Education and she meets with the SPED director, maybe there could be some type of presentations to the directors and say hey, let me tell you about Louisiana Developmental Disability and these directors could take it to the school system and let parents know that they exist. Because I know she said she has meetings with her director so, you know, maybe could do some type of presentation or something to let them know. Or like a brochure or something to help parents know more about this organization.

JULIE FOSTER HAGAN: Was there other discussion on the ABLE accounts?

BRENTON ANDRUS: I don't think they talked about it yet. But I think that was under this section.

LAUREN WOMACK: We noticed a lot of things in the chat. We are going to do comments at the end, but if you would like to say something right now if you could just raise your hand. Is there a way to check if somebody doesn't know how to raise their hand? Kathy.

KATHY DWYER: Yes, thank you. The commenter in the chat does not have access to a camera or a phone. Just like a person with a disability who's not able to speak but only able to type you need to make chat an accessible accommodation. It would be an ADA requirement. I think the DD Council needs to set that

example.

LAUREN WOMACK: Thank you for the comment. For anyone that does not have the ability to raise their hand-- since Pasqual does not have a mike, if that's okay, we're going to go ahead and read the chat.

HANNAH JENKINS: This is from Pasqual Nguyen. As a parent of seven children and two children with DD I can't even go to work right now and have been isolated in our home with having to have ABA therapy sessions in our home and my son only being able to attend school two hours a day. This affects my children as well. From going from having an income to having none put a strain on our family. I'm hoping we can make changes in self-direct where employers can be employees. It is so unfortunate that I am in our home 24/7 while outside people are constantly in and out of our home and getting paid. And then I have to keep up with all the paperwork, keeping things organized, etc. The list goes on and on and it has become a lot. Then she also says I wouldn't mind supporting the council on content creating through social media. They need to know what's trending, hashtags, passion, creativity, etc. I agree marketing definitely needs to be vamped up. And there's some back and forth between her and Jill. I believe that is it for her public comments.

JILL HANO: Don't name drop me Ms. Jenkins.

HANNAH JENKINS: Just kidding. There was some back and forth between her and another participant.

JILL HANO: Thank you. Just kidding.

LAUREN WOMACK: Are any of our objectives or things addressing the waiver services right now? Those may be later on.

EBONY HAVEN: Goal two is waiver services. But I think there are rules just in regards to her comment about self-direction and the employer being the employee. So there are rules right now that are preventing that, right, Julie?

JULIE FOSTER HAGAN: Yes.

EBONY HAVEN: So I don't know if there's something that we can put in y'all's plan that would address that besides advocacy. And I don't know if that would...

LAUREN WOMACK: Is that something that's being looked at with the self-direction groups? Could you speak to that. Or if not, that's fine.

JULIE FOSTER HAGAN: It did not come up with the initial. So where we are with our Self-Direction Advisory Group, and I apologize I was trying to give an answer to the legislative auditor so I didn't hear all the comment. The Self-Direction Advisory Group has met twice and what we did was we went through and gave all the people that were on the advisory panel an opportunity. We called it a what's working, what's not working exercise where we kind of went through and from all the prospectives of the different people on there kind of got a list of things that what we said is each of these things are pretty large so we're going to take the list and then we compiled it. We had about 25 things that were identified. We sent it to all of our working group members and asked them to give us their top five priorities and we now have those priorities. So what we're going to now do in our advisory group is take things that were mentioned and based on the priority we're going to sort of tackle each one of those issues kind of one by one and then we'll go back and revisit the next five after we tackle the top five. Not that they might be finished, but some may take longer.

During that particular session the issue of the employer and the employee did not arise as one of the issues that was discussed during our what's working and what's not working exercise. So is it possible that the group will tackle that in the future, yes. But it wasn't one of the things. Because that's the way we'll continue to work this group. And we even said because a lot of times one of the things that happens is we sort of get off track with all of the things that may be not working. So that's why we're trying to tackle one thing at a time. It doesn't mean things can't continue to get added. We just said we're going to tackle the top five then we'll sort of revisit the list we had. Are there any new issues that need to be added and then just continue to kind of prioritize the top five.

LAUREN WOMACK: Like what we do here.

JULIE FOSTER HAGAN: Yeah. And so during that meeting, again, that was not something that was brought up by the panel. If it is brought up by the panel, then what we'll do is add it to our list, consider the

groups input in terms of the priority for that and then tackle it at that time. So CMS, and I get a lot of questions about is that a CMS requirement. It is not a CMS requirement but I get that question a lot about a lot of things. And the way that it happens is CMS sets general guidelines that we have to follow. And then states have to say this is what we're doing for those general guidelines. So CMS doesn't usually say you can do this, you can't do this. We have to put in our waiver application. So for example they say you have to have safeguards and guardrails in place when you have family as paid caregiver. It's up to the state. So CMS is not telling us what we do and don't have to do. We just have to put that in our application. They have to review it and then they have to tell us yes, this meets the requirements or no, it doesn't meet the requirements.

There are also different ways you can do self-direction. There are things called employer authority and there's also a way that you can do self-direction called budget authority. The way we do it right now is called employer authority. With the employer authority in self-direction the person or their authorized representative is the employer. They are responsible for hiring, firing, setting the salary for the staff. And budget authority you can do that a little bit differently. That would take a massive, just letting people know that is something we're looking at, but that's 2, 3 years in the planning because it's a massive change in the way we do self-direction.

But because we have employer authority and that employer is responsible for the hiring, the firing, setting the salary, doing progress notes we have been told that it is a conflict of interest for that employer to also be the employee because in essence they're setting their own salary, they're evaluating themselves. That is why we can't have the employer and the employee. So it's not really CMS. That really was when we look at how our self-direction program-- because some people may tell me in other states they can do different things and that is true. It all depends on how the program is set up. But because of the way ours is set up here in Louisiana there is what

we call a conflict of interest.

So if you guys just, again, I know that I've heard from a lot of people that they believe the authorized representative should be able to be the employee. I'm just letting y'all know there's really not anything legally I have been advised that that is what's called a conflict of interest for those reasons. A person can't hire, fire, set their own salary and evaluate themselves. That is where the conflict of interest arises. So I understand the concern, but I don't know that there's anything that we can do about it unless the plan is to then move. And then there's pros and cons if you go to budget authority, right. So in budget authority people get a set budget and then you have to work within that budget. So let's say you have 24 hours of care and you have to pay somebody overtime. Well, the concern there is your overtime comes out of your budget and so you may have to give up hours to be able to live within that. So there's some challenges there too which is why I say it's likely it would be a process. It is something I think we need to look at because a lot of states have moved from employer authority to budget authority. We just have to figure out how it works in our system. Sorry that was a very long answer to your question. But I cannot change that because I have been told legally that's a conflict of interest with the way our system is currently set up.

LAUREN WOMACK: Julie, are the self-determination, are they open meetings or y'all just doing the focus group?

JULIE FOSTER HAGAN: Sure. So the Self-Direction Advisory Council, not even council, honestly. Specifically so I don't have to follow Roberts Rules. I can just have conversations with people. But it's an advisory group. We have 26 members. Twenty people who are either individuals with disabilities or family members. We have two representatives from local governing entities. Two representatives from support coordination agencies. And then we have representatives from the two fiscal intermediaries, Acumen and Morning Sun who are a part of that group. We meet every second Wednesday. I'm going to have to verify that. What we did we had people sign in and we looked across the 20. We had a lot of people who

applied. We tried to make sure we had representation from folks in urban areas and rural areas. We asked how many hours of service people were getting. And I think we had like 1 to 8, 9 to 16 and 16 to 24. So we tried to look at the people who had different numbers of hours. We asked if the person being supported had complex medical or behavioral needs. We asked all those questions to try to make sure that we had representation from all appropriate groups of people. And so therefore-- and then we set it. So we do have the meeting open. When we do it people can listen in but we do ask that the 26 members are the only ones that are able to participate ongoing in the discussion. But it is open and we are working to record them.

And then we are also talking with our advisory group we're going to be starting quarterly self-direction meetings. So like we have quarterly provider meetings now. Might focus on those things that are relevant in self-direction that we share with providers, but there might also be other relevant information. That won't really be like a working session. That will be more us making sure people in self-direction have an opportunity to hear it. Those for sure will be recorded and placed on our website because one of the things we hear a lot from people is no matter what day or time we decide to do it it can't work for everybody. Some people need it after work hours, some people need it during work hours, some people want the weekend, some people want nights. We just have found if we can record things and put it on our site one, people can watch it whenever they need to. And two, we do closed captioning so if people need it in different languages it will translate to different languages.

LAUREN WOMACK: And if they have a comment they can email the group?

JULIE FOSTER HAGAN: Yes. We always give our OCDD info. People can send information in there. And some of the members have made their information public should people want to reach out to them as part of the advisory group.

LAUREN WOMACK: Great. Kathy.

KATHY DWYER: Thank you. Julie, do you post the schedule of those self-direction meetings?

JULIE FOSTER HAGAN: Yes. It's on our website.

KATHY DWYER: Okay. And then something maybe the council could work on, and I'm going to bring this up at SAC too, but this may also be a LaCAN legislative item to keep in mind for, I know not this session. Hold on a second. I'm sorry. I'm trying to fix Jenny lunch at the same time. I noticed Virginia just passed a bill that eliminates families having to be the last resort in order to be a paid caregiver. So I think that's something we need to work toward.

JILL HANO: We have a last resort law? I was not aware of that.

HANNAH JENKINS: Public comment from Pasqual. I would hope that we can take a look at it. I'm also on Self-Direction Advisory Group but I had to mention it today too because I'm sure I'm not alone in the situation. California allows it, they just have more in-home visits. It is doable. Thank you. Glad I mentioned it.

LAUREN WOMACK: Thank you, Pasqual.

STEPHANIE CARMONA: So if anybody has any activities that they want to add. I know we talked about a lot of things so if there's any that we want to add that we want to change any cost for or that we want to get rid of now is the time.

BRENTON ANDRUS: Specifically for goal one.

STEPHANIE CARMONA: Specifically for goal one. That's all we're talking about right now is goal one.

LAUREN WOMACK: So do we do a motion after we do all of them?

STEPHANIE CARMONA: We're going to do a motion at the end. Right now it's more of figuring out which ones we want to keep, which ones we want to change. We're going to vote just to accept and give to the council at the end. It's more discussion right now. If everybody is okay with it we get rid of it or add to it or whatever.

LAUREN WOMACK: Does anybody want to change the recommendations for goal one? Are there any comments in the chat?

HANNAH JENKINS: No.

STEPHANIE CARMONA: Okay. So what are we recommending specifically just so that we know? Are you saying y'all are accepting the staff



recommendations?

LAUREN WOMACK: Are we going to accept the staff recommendations for objective one?

STEPHANIE CARMONA: For Partners, do you want to keep it the same, increase it? Those kind of things.

LAUREN WOMACK: Okay. What would we like to do for 1.1.1?

JILL HANO: So what about like you were saying staff recommendations, but what about when would we talk about getting in the committee recommendations? Because these are kind of new. And I know we talked about adding to social media and we talked about a lot of stuff. I'm just worried that we're going to overlook everything and not getting something in because, I don't know. Maybe it's my head space, but this seems very discombobulated to me.

EBONY HAVEN: So Jill, are you saying the recommendations from the council that we received from January, are you asking should we talk about those now or I guess I'm confused about the question.

JILL HANO: Like so we have recommendations from the council members and recommendations from the staff. So like I'm just confused about how like we're going to go about all this.

EBONY HAVEN: So I guess right now you can look at the current plan. The current FY24 plan. I know you guys want to keep Partners, right. You want to keep LaCAN. We want to keep the advocacy events. We want to keep FHF on our plan. One of the recommendations from staff is to discontinue activity 1.1.5 because we feel like it's covered in 1.1.6. So if you guys are in agreement with that we can take that one off. It doesn't have any funding associated with it.

JILL HANO: What one, Ebony?

EBONY HAVEN: 1.1.5.

JILL HANO: Okay. Good.

EBONY HAVEN: So if you guys are okay with it we can take that one off because it is covered in 1.1.6.

JILL HANO: How come 1.1-- okay. Never mind.

LAUREN WOMACK: Does anybody disagree with taking 1.1.5 off the plan? Okay.

EBONY HAVEN: I can make sure that some of the wording from 1.1.5 is included in 1.1.6 just to make sure that we know that it's covered.

JILL HANO: I know what I'm missing. I know where the disconnect is. So in past planning committees we went through the plan multiple times actually, but we went through the plan picking and choosing what we want for activities with funding attached. Then we went through the plan picking out the activities without the funding attached. And I would recommend-- because to me like when we're going through the items with funding attached we're like with the budget and going back and forth as we go. And like looking at the past budget and making the new budget almost simultaneously. So I just know that we did it in two separate paths and that made it a lot less confusing for me. That made me feel like I was going at it less blindly.

EBONY HAVEN: Okay, yeah. And actually that is how it is on the agenda since we were just going over each goal we just decided to go over each thing. But we can follow the agenda and go through each contractual activity. And if you guys want to take anything away that way you'll know what amount for the budget you're working with to create new activities or add to current activities.

LAUREN WOMACK: That's a good idea, Jill. Thank you.

JILL HANO: And then we had a staff member keeping up with the budget as we went along.

LAUREN WOMACK: To show up on the big screen, Jill. Okay.

EBONY HAVEN: So we can do it like that that way once they decide which contractual items they want to discontinue--

STEPHANIE CARMONA: Okay. I understand now.

JILL HANO: Like is that easier? Is that the will of the committee?

LAUREN WOMACK: I agree. Does anybody disagree? Nope. Okay.

JILL HANO: Do y'all think it's easier staff people?

LAUREN WOMACK: Thumbs up. I'm glad you're here. This is my first time. I need your help.

STEPHANIE CARMONA: So then we're going to move onto goal two and talk about the contractual, is that correct? Just so that I can understand.

LAUREN WOMACK: So everybody got that? We're going

to move onto goal two and just focus on the contractual and then we'll go back.

JILL HANO: Ms. Kathy, I said everything with funding attached separate from everything with no funds attached and that would make going through the plan smoother.

LAUREN WOMACK: So we're going to follow the agenda which is what Jill suggested. And we're going to do the contractual first so that we know kind of what we're going to have to budget with.

JILL HANO: And I have one more suggestion.

LAUREN WOMACK: Yes.

JILL HANO: I would make sure that we go back and forth from committee recommendations and staff recommendations just so we can dot all our Ts and cross all our Is.

HANNAH JENKINS: All right. Goal two. The first contractual activity we have is 2.1.3. Navigating systems with co-occurring disorders. That is page six if you're looking at the status report. The council contracted with Hustle and Grow providing training opportunities to improve overall awareness and early recognition of co-occurring intellectual and developmental disabilities and mental health diagnosis for persons with disabilities and their families. The first installment of the in-person trainings focused on how to identify co-occurring IDD, and mental health disorders. Hustle and Grow conducted three trainings in North, Central and South Louisiana. The next set of in-person trainings are trauma informed and person-centered care for people with IDD, their families. Actually, there's a small change. They just began not with trauma informed, but they switched things up a little bit so that was my bad. They began trainings on de-escalation tactics in times of behavior health crisis. That training started just a couple weeks ago in the north and they will be having two more trainings on that in the central and the south.

And they have a couple other trainings coming up. The staff recommends continuing this activity for FY25 but recommends opening the contract up for proposals. Hustle and Grow's initial proposal did not meet the activity and had to be rewritten. Even with these rewrites the staff feels as though the trainings are

not meeting the activity requirements.

JILL HANO: Can you elaborate on that, Hannah.

HANNAH JENKINS: I would love to. So the initial activity when we sent out the solicitation of proposal the purpose of this activity was to educate and increase understanding of individuals with disabilities and their family members and caregivers on ways to navigate Medicaid, MCOs, the DD and EH systems. The entity was supposed to provide statewide trainings to individuals and their families and/or caregivers on how to navigate these systems and address existing barriers. And so that proposal was sent out. Solicitation proposal. The proposal we received from Hustle and Grow that was selected was focused primarily on instead of training families and individuals, it was focused mainly on collecting and disseminating information to the council. So we didn't feel like that fit the activity. So we worked alongside Hustle and Grow to try to adjust what they were going to be doing to fit more closely with what the council wants in an activity. And so it was adjusted but we do still feel as though the trainings are not focused primarily on the initial intent which was to assist families and individuals learning how to navigate between these three different systems. The trainings that are set up are how to identify co-occurring IDD, and mental health disorders, de-escalation tactics in times of behavioral health crisis. A couple other ones, rapid response, trauma informed and person-centered care training and how to choose the right behavioral health provider training. Though these are great training topics we just didn't feel like they fit exactly what the council was requesting for this particular activity. Did that help, Jill?

JILL HANO: Immensely.

HANNAH JENKINS: Score.

LAUREN WOMACK: Do we want to do a category too of tabling it to see how much is left in the budget. Do y'all ever do that?

EBONY HAVEN: You're recommending it stay at the 30,000. We're recommending that you guys maybe consider a different contractor.

LAUREN WOMACK: What if we don't get anything that we feel fits?

HANNAH JENKINS: So far we have had four trainings. We only have the numbers for two of the trainings. One of them was in November that had eight participants and one was in December and had eight participants. There was another training in December but we haven't received the numbers on that one yet. And there was one towards the end of February that we're still waiting on the numbers. So far we've had 16 people trained between those first two training topics.

MELINDA PERRODIN: Did y'all get any feedback from the people who attended that training, how they felt about it?

HANNAH JENKINS: We're still waiting on a decent amount of the surveys to come back. We did receive some and they were overall satisfied with the training topic. There wasn't a lot of elaboration. It was more of a did you get something out of this, yes, no kind of results. So we don't have a lot of. There's not tons of feedback. Just a yes, I get something out of this verses no.

JULIE FOSTER HAGAN: So just logistically if in April we said we want to put back out again. Would we put it back out maybe with some of the lessons we learned about giving more specifics in the proposal that people needed to respond to and then Hustle and Grow I guess would have an opportunity to-- I'm just trying to think logistically what would happen. I'm assuming they have the contract until October but if we decided to put it back out they would by all means have an opportunity, but we might look at the proposals differently based on what we've learned so far. We can be a little clearer in terms of what our expectations are and help members look at the responses. Just understanding. So it wouldn't necessarily mean that they are not able to do it. It would just be opening back up with more detail. Is that?

HANNAH JENKINS: I believe. With a little more clarification when we're sending out solicitations but also whenever we get those proposals that the council looks more detailed into what exactly this person's proposing and does it meet the activity.

MELINDA PERRODIN: Is it possible that they could kind of send y'all a clip of the presentation like so y'all could see hey, this is something we would want

or, you know, if it's possible when y'all do the proposal if they could kind of send you like a snidbit of what they're going to be doing.

HANNAH JENKINS: Yes. They did send that. I believe we had two proposals for this particular activity. And usually with the proposal they send a little bit of this is what we're planning on doing with some of the activities and things like that. So I definitely would agree that if y'all decided to send it back out we could.

EBONY HAVEN: So can I ask a clarifying question. So are you asking if they have sent information to us about the information that they're presenting at the trainings?

MELINDA PERRODIN: Yeah. Like a little video or something so y'all can kind of get an idea. Or do y'all look at reviews like from other people who receive the training. Just to kind of see, you know, is this something that y'all want to accept.

EBONY HAVEN: So we requested that. And so like Hannah said we're waiting on additional surveys. We're waiting on additional numbers from some other trainings that they've completed. We're waiting on the information that they're actually presenting at the trainings as well.

HANNAH JENKINS: Prior to the proposal or prior to the activity starting we didn't because we had to change what they proposed they didn't go in with the plan to do the trainings. They planned to collect information then we kind of had to adjust it. So they wouldn't have had that information when they gave the proposal because it was just a little bit different when the activity started.

LAUREN WOMACK: I'm just noticing we're not getting a whole lot of people that are participating in some of these. And, I mean, 30,000-dollars is a lot. Have y'all ever done an objective to see what people actually say they'll watch a video of? Like have we ever compiled data or anything like that?

STEPHANIE CARMONA: So this one, like this training there's some in-person and some webinars. That's just what this contractor's specifically doing. And this was one of the things that last year's planning committee said that needed to be addressed. That there

were a lot of individuals with developmental disabilities that also had behavioral health needs and how to really navigate that system. So that was how we wrote the activity for this one.

LAUREN WOMACK: I mean, it just seems like I know every state's different and it seems like we're going to need to bring like the Department of Health in or are they just general trainings? Is it like specific to Louisiana, our system, how to navigate or is it just these general?

HANNAH JENKINS: Now what the contractor has done so far they have collaborated with LDH on the topics that they have which is so far collaborate with them on how to identify co-occurring IDD and mental health disorders. I'm not sure if you're asking about the trainings that they have verses the trainings that y'all are wanting in the activity.

LAUREN WOMACK: Right. Which ones we're wanting in the activity.

EBONY HAVEN: So you're asking like what you all wanted for that particular activity?

LAUREN WOMACK: What was the council trying to accomplish? Was it just general? Our constituents, not constituents, but our clients in Louisiana, here's how you navigate points of contact in Louisiana.

HANNAH JENKINS: Yes. It was originally, the solicitation of proposals was for individuals with IDD and co-occurring behavioral health conditions to be served by these three things. The developmental disability system managed by OCDD including LGEs and human service districts and authorities, Medicaid and the managed care organizations and behavioral health system. So it was trying to specifically how do I navigate between OCDD and LGEs, the MCOs and Medicaid and the Office of Behavioral Health.

LAUREN WOMACK: I got it now. So specific to our population. Yeah.

STEPHANIE CARMONA: So I think just kind of like what you were saying before though there isn't a lot of participation or we haven't seen a lot of participation in the trainings for the numbers that we have right now. We only have two out of the four attendees, like the amounts. So that's why our recommendation was yes, we need to continue this because it is an important

topic that the council talked about last time, last planning. But we don't...

LAUREN WOMACK: I think you're trying to say it's not like it's not important, it's just is that 30,000-dollars that we could use towards addressing more--

ERICK TAYLOR: It's not that it's not important. We don't want them to take the contract just to take the contract. We want to make sure they're doing what they need to do and handle it the way it need to be handled. I mean, 30,000-dollars, that's a lot of stuff we could make sure somebody's doing what needs to be done. Sorry to cut you off.

STEPHANIE CARMONA: I think that's kind of our feelings was that if we put it back out for solicitations for the proposals then we can, since this is the first year that we've done this activity, we can kind of if we put it back out for proposals then we can kind of analyze how it is doing in a second year with a different contractor too. That was just kind of our idea to see if there is a way to improve upon it, I guess.

JULIE FOSTER HAGAN: If we did that, would you include in the proposal that one of the things the proposer needed to do was talk about how they were going to market it. I know we get it out through DD Council, but I think part of the proposal should be how they are going to get the word out.

LAUREN WOMACK: They're the contractor. I don't know if it could be a stipulation maybe.

STEPHANIE CARMONA: We do have, I think specifically for this proposal, that-- or maybe she said it, I don't remember, if it was on our part or her part, but had the amount of people that we were trying to train to do these trainings. And I don't know how many more she has left, how much trainings she has left. Do you know?

HANNAH JENKINS: Well, she has two more on the current.

STEPHANIE CARMONA: And then the two that are webinars.

HANNAH JENKINS: Topic and then there will be, yes.

MELINDA PERRODIN: Is there a way to like write an attendance requirement in the proposal. Like if we



don't have X amount of people or this is something that you really can't do?

JULIE FOSTER HAGAN: Yeah. If you don't get so many people then you're not going to do it and you're not going to get paid.

BRENTON ANDRUS: If you weigh your options of what is the expense that goes into hosting the training, what kind of return on investment you need to have I guess you could consider it. Just depending on where you go, especially when we're looking statewide. At least with some of our other initiatives when we go to North Louisiana don't get a lot of people that show up to those trainings. And then when you come back down to Alexandria a little bit more. And then when you get to (inaudible) a bunch more people attend. I would be worried if we say you have to have X amount of people involved in a training you might not be able to have an opportunity to get outside of maybe a big urban area.

LAUREN WOMACK: Is this something that we own? It's not a video or something? That's an issue too. Like some of these things if we could transform it into something we could keep, you know, I feel like it would maybe be more beneficial. I don't know if we could put that in the contract.

BRENTON ANDRUS: I don't know about this contract in particular but there used to be a clause in all council contracts that we own the rights to all materials that were produced.

LAUREN WOMACK: Okay. That might be something we can look at the bylaws.

BRENTON ANDRUS: I don't know if it's still there or not but it used to be in all of our contracts. And I don't even think-- so in our contracts we have multiple documents, some that we create and some that are in there because it has to be in there through LDH. It might be an LDH lingo that was in there. I don't know if it was just us. But I remember a long time ago having conversations, intense conversations that talked about who owned the rights to different materials.

LAUREN WOMACK: It seems like yeah. We could keep having the training if we have some really good ones. They would last maybe at least five years.

BRENTON ANDRUS: Yeah. And to some extent it's also, at least the initiatives I can think of,

depending on what the initiative was. So sometimes yes, we own the rights because we created this program. It's ours, we used it. Other times they created it because this was a national thing or a statewide thing that you can pay them for outside of the council to add this. But we pay them to have access to that so that we didn't necessarily own but we may have contributed what we thought should be included, at least for our purposes. So it just depends.

LAUREN WOMACK: Kathy had her hand raised.

KATHY DWYER: Yeah. I was just going to say the same thing the previous person said. I'm sorry. I don't know who that was that was just speaking about maybe requiring a video that we can then just maintain instead of annually paying someone 30,000-dollars to do something that people don't attend that well. If we had the videos that could be disseminated at the appropriate time of the year depending on what the emergency. Or as reminders for people to participate. And it can include a link to any materials that are going to be attached or like handouts and so forth. And maybe even an email like Julie does. If anybody has any questions or needs to discuss it further reach out to us and we'll be happy to help. That kind of thing.

LAUREN WOMACK: Pasqual, are you still doing okay there? Okay. So is that something we want to put maybe in the contract?

EBONY HAVEN: I don't think it's in the contracts that we are currently in right now. And if it was in before I'm wondering why it was taken out. So I just want to make sure that we can have staff look at that before we say yes.

LAUREN WOMACK: Okay.

JILL HANO: So that was what I was thinking about so someone on staff really knows why that was taken out of the contracts?

EBONY HAVEN: I don't know, Jill. Brenton, do you have any recollection?

BRENTON ANDRUS: I know I had it on some of the contracts that I worked on. But again, maybe I shouldn't have said the council had it in every contract. But part of the contractual discussion is a negotiation process. We want this, they want that, we

got to meet in the middle. So sometimes people are putting in time and effort to create their own materials and they're not willing to just give that, turn that over to us. So that would be a discussion you would have to have and then a backup plan for, let's take this initiative, for instance. Whatever it is you want them to create that you want to own the rights to they tell you no and that's the contractor you selected well, what's your backup plan. Because they're going to walk and then you start over again.

But like with the videos and stuff that we had created I mean, they created videos, we have the links, we have those videos saved to our accounts. I don't know that there was ever a discussion of who owns those videos but we have access to them and we share them at our own will. You have to discuss, I guess. But I would have to-- I don't have older contracts that I could look at. I would have to go digging through paper files somewhere to see what that specific language was.

LAUREN WOMACK: So do y'all want to maybe table that one and see what the other budgetary items or any suggestion? Staff, any recommendation?

BRENTON ANDRUS: I would say keep the initiative. I think the big question is do you continue with this contract and remain status quo or do you try to do an SOP to get a better idea of what could be done, whether this contractor does it or a different one, to fit more in line with what the council's original intent was.

LAUREN WOMACK: What happens if we don't get any that we like? What do we do?

JILL HANO: Send it out again.

BRENTON ANDRUS: You can either send it out again or you have a conversation about needing to change up your plan.

LAUREN WOMACK: Okay. Okay. So we're going to leave the initiative open but put it out to more contractors.

BRENTON ANDRUS: That's our recommendation. That would be up to y'all to decide.

LAUREN WOMACK: Okay. Good with that. I make a motion that we stop.

SPEAKER: We don't need a motion for lunch.

LAUREN WOMACK: Sorry. We're going to take a break

for an hour for lunch. Thank you.

STEPHANIE CARMONA: And we'll come back at 1:00.

{Break}

LAUREN WOMACK: Okay. We have a quorum. What part were we on?

STEPHANIE CARMONA: We were on the discussion of goal two activity 2.2.1 which is the first responder training. Yeah, we were done with the first one.

LAUREN WOMACK: 2.2.1. First responder training.

BRENTON ANDRUS: So that's first responder training with Interaction Advisory Group. Basically with this particular initiative we've been doing it since fiscal year 21. So a few years now. They are basically coordinating training activities with first responders. A lot of times it's held at police departments but it's also inclusive of firefighters, EMTs, pretty much anyone that would be considered a first responder to train them and make them aware of their interactions and their encounters with people with developmental disabilities in hopes of promoting safe responses, safe interaction. And I guess the first couple years of the initiative there was a component where with each, not with each first responder training, but some of the first responder trainings you also had a training component for the community. This year we do not have that component for the community mostly because they weren't-- in the first year they were well attended but in subsequent years they were not well attended so we focused mostly on first responders in this current year.

So since it started in October 2020 there's been over 1,400 first responders that have been trained. So far this year I don't really have much for you. We haven't had any trainings yet. Normally it takes a little while for the trainings to get going because as soon as our initiatives start, which would be October, you run into the holidays. And then we've also noticed with a lot of police departments, sheriffs, first responders they have their mandatory trainings right at the first of the year, right after the first of the year. Things that they have to accomplish each year. But usually in like the February, March timeframe we

start getting trainings done. We have not had any trainings-- I actually spoke to the trainer. He's going to do something in partnership with, I don't know when it is, but I think it's something with the Autism Society over in the Acadiana area where they want to have a training for first responders similar to this so he's going to partner with them to do a training out in that area. Which is great because that's not an area that has been, I don't want to say receptive because we just haven't gotten in that area.

The other issue the trainer said he's running into this year which is impacting trainings he thinks is, so he was supposed to do some stuff, Jefferson Sheriff's Office wanted him to come back and do some stuff. Well, they just settled-- and I say just. It's probably been three or four months maybe a little longer now. Settled a case four or five years old where-- I'm not going to go into the whole case but basically interactions with I think a teen that was on the spectrum maybe. I think that teen passed away and there was a lawsuit that resulted from that. And part of that lawsuit, aside from just the monetary payout that they have to do is they have to, I don't remember the exact language, but essentially hire someone to develop a training of sorts for these officers. And so not only is that impacting Jefferson Parish, the trainer thinks it's impacting pretty much departments statewide to see how this is going to play out and who they utilize. Certainly he doesn't know the requirements of what that training is supposed to be because there's some stuff that he's obviously covering in his training but he's doesn't know if it would meet the requirements through the lawsuit because he doesn't have that information. But he thinks that's creating some hesitation for people to start participating in this initiative this year. So slow start.

Ultimately we are recommending discontinuing this activity. You know, generally when we look at activities like this and they've been running for three, four, five years it's time to start looking at new initiatives instead of just doing the same thing over and over. So that's part of that conversation. And so that's kind of why we're recommending possibly looking at using this funding for other newer

initiatives that we might have.

LAUREN WOMACK: Okay. Questions?

JULIE FOSTER HAGAN: So is that lawsuit just in Jefferson Parish or is that a statewide lawsuit?

BRENTON ANDRUS: It's against Jefferson's Sheriff's Office. So I think it's just for them.

JULIE FOSTER HAGAN: I was just thinking because I wonder if rather than continuing the training if there might be some, I know not this session, but some opportunity to think about potentially the council supporting legislation that would require there be some type of training for interacting with people with disabilities for all law enforcement. I know there's some training requirements. Especially if like you're saying there's kind of some hesitancy or what not. So rather than us spending the money trying to do the training and having to rely only on who we wanted to do it. I don't know. I don't know a lot about the law as it relates to.

SPEAKER: That law has passed. That passed last year for autism.

JULIE FOSTER HAGAN: What does the law say?

SPEAKER: So it relates back to being able to put your autism designation on your driver's license, your ID card. And then a sub part of it is requiring a training for police officers. For epilepsy as well we get those same calls. People being arrested, all sorts of things for having seizures in public. So the idea would be to follow up with allowing people to have that designation on their driver's license or ID card and then requiring the police officers to get training. I can look it up and make sure you have that.

JULIE FOSTER HAGAN: Thank you. I just want to see how strong the language is on the training.

SPEAKER: It's very vague. We're working on ours right now and that's part of the challenge. I want to say the Department of Correction has to adopt it so it doesn't really specify that.

JULIE FOSTER HAGAN: Thank you.

ERICK TAYLOR: Question I have. Has this been training not just for that? Is it being for any kind of disability?

BRENTON ANDRUS: Before that, Erick, I think it's Act 172 last year. I think it was in 2023, Act 172.

The training focuses, I want to say the self-advocate that attends the trainings with him has a developmental disability. He is also the parent of a child with a developmental disability, the trainer is. So I think there's a lot of components that focus specifically on a developmental disability. But in general a lot of the information he is sharing is also just disability related period.

ERICK TAYLOR: Is a lot of people being trained to-- this is my question. Is the people being trained how to handle people with disabilities?

BRENTON ANDRUS: Yes. So I want to say the first year of this initiative is was kind of, I don't want to say a free for all, but it was more or less hey, this sheriff's department or police department said you could use the training room and then people from various departments would come in. And what he's focused more on the last couple of years is a whole agency training. I think in the summer maybe he's looking at I think Plaquemines Parish wanted him to come back out. Last year Plaquemines Parish Sheriff did a whole agency training. So every single police officer. This year they wanted him to come out to do all firefighters. There were other trainings that he's done, whole agency trainings like at St. Tammany and that was inclusive of all of their sheriffs, all their firefighters, all their EMTs. So it really depends on the area that he's in if those people are attending. But it is open to everyone.

ERICK TAYLOR: Because board members, this is where my concern is if they being trained in this area. When we had a storm came nobody was trained for the storm for the people that was disabled. And we was turned away from, me and my daughter, God bless her soul, she's gone. We was turned away from shelters because people wasn't able to set up and be trained on how we can be moved around because they were so concerned about suing and handling you in certain areas so they just left you because you had to be waited by ambulance to be handled. And I figured that it shouldn't just be one area is trained to handle you. It should be all areas ready to handle you at any time, any situation.

BRENTON ANDRUS: And I think that plays more into the next initiative which is our emergency management

disability awareness training initiative. This one is more-- so I mean just general interactions with people with disabilities. But I think it's more focusing on responding to a call if there's an emergency, there is an arrest happening, like those sort of situations.

EBONY HAVEN: Okay.

BRENTON ANDRUS: And a lot of it is kind of some of the identifying factors because not all disabilities are just outright seen so you have to be able to notice certain behaviors or certain actions to help you start trying to identify the needs there. But it's been well received. It's done well over the years. We've had great comments. I know he does this training with other councils. So, I mean, it's really up to you guys. But it's been around for a while. We've kind of seen a slowdown this year. So I don't know your thoughts on that.

EBONY HAVEN: My thing is everything has been a different disability. You can't really see all disabilities until you actually. Maybe we can use it somewhere.

LAUREN WOMACK: You want to wait and talk about that on (inaudible). Yeah. Just in the interest of time if you have something to say about one of them kind of just jot it down and we're going to go through all of those at the end if that's okay with everybody. Would anybody like to do it the other way?

EBONY HAVEN: I thought we was doing it as we go?

LAUREN WOMACK: Okay. That's fine. Because Jill was getting confused because-- well, I was kind of getting confused too because some are associated with funding and some are just initiatives. So we were trying to go through all of the ones that have money connected to it first.

EBONY HAVEN: Okay. I got you.

LAUREN WOMACK: Next one.

BRENTON ANDRUS: So the next one is 2.2.2. That is our emergency preparedness and response initiative. So we've been contracting with Niagara University, same as the last initiative, for the last four years or so. And they have developed, this will be a case in point of we're using their materials but we do not own the rights to their materials. This is theirs. They are providing emergency preparedness and disability



awareness trainings here in our state. So the idea is to target emergency managers. Those individuals in the community that are responsible for emergency management or responding to emergencies. We're talking like hurricanes, floods, things of that nature. Making sure that they are trained on how to actually respond. What is FEMA's guidelines. What are your interactions supposed to be. How to make sure that they are prioritized. Making sure that you're able to understand all evacuation processes or what is needed to be done in those situations. So it's supposed to be very all encompassing of basically from the start to the finish and how to make sure that you prioritize not just individuals with disabilities, but also access in functional needs is what they call it. So you might be looking at minority populations. You might be looking at socioeconomic status. But there is a large focus on disability.

And so he, the contractor, travels the state. Usually this initiative is at 50,000. I think it's been at 50,000 most of the time. It is usually that gets you up to about five in-person trainings because it's a two-day training that happens. Two full days from like 8 to 5 or 9 to 5. We actually have one coming up in Alexandria and Baton Rouge in April. We sent information out about that. But I think last year he was able to do four. So we say up to five but probably four is usually more realistic. This year I think he's also going to try to do a virtual training or two on I think it was the very first year of this initiative he did a similar training for service providers. And so I think he was thinking of trying to do another virtual session because that was actually really well attended. That was almost 400 people whenever he did a training for service providers. But also the virtual component to try and get emergency managers involved because we don't have a lot of emergency managers. That there's actually an emergency manager association, I forget the name of it, here in Louisiana and they have not been very receptive to this. Not necessarily to this training but participating. I don't know if it's cause they think they've got it covered and they have their plans and they know what they're doing. Or this contractor is

from out of state so I don't know if they see it as someone coming in that's not from here. Whatever it may be they haven't been very participative. Many other people have. Lots of other people in emergency management capacities. In fact, they have frequently mentioned to us that we have the best response out of all the states he's in. I can't remember how many councils he does this training with. But he's contracted with multiple other states to do this initiative. So it's very well received here in our state. We've had just shy of about 200 people participate in the trainings since FY21. That's not including the provider training that he did that one time.

We don't really have a strong opinion of what you would want to do with this particular initiative. I mean, obviously we deal with disasters all the time. It's something that we know that people need to be educated on. The contract or at least this initiative has been successful. He hasn't done any trainings yet. Like I said it's coming up in April for this year so I don't know what the response has been this year. I will say we've certainly had much more people in attendance when you think of sort of Alexandria is our cutoff. Alexandria and below. Our trainings in Monroe and Shreveport weren't as well attended as the ones south of that. But a few things for you to consider, I mean, we have been doing this contract for a few years now. So that might play into what you're thinking. We are kind of repeating some spots. I think he's going back to Alexandria. Back to Baton Rouge. We've done those before. I think the only place we have not had a training would be in the Acadiana area and I think that one is coming up maybe later in the summer or Septemberish timeframe. I know it's on the list. I think he's going to try to do that. And maybe the north shore area around the same time. Or maybe it's New Orleans. But I know Lafayette is on the list to finally get in there. But the other places he's going we've hit. We've been in all corners thus far. So really up to y'all if you want to continue. If it's still a priority or if you want to utilize that. But this particular initiative we don't really have a strong recommendation.

LAUREN WOMACK: Does anyone want to discuss any of this?

ERICK TAYLOR: Number what that was?

LAUREN WOMACK: Was it 2.2.1?

BROOKE STEWART: No. He was referring to goal one.

LAUREN WOMACK: My thoughts are maybe, and I don't know what we would want to fund instead, but I feel like a lot of these agencies get training budgets from the state anyway and maybe it's just to recognize that it's their kind of duty. Like we're citizens. Part of me feels like we shouldn't have to spend our whole budget on notifying them on how to deal with people with disabilities. Like they should have a set of their budget. I don't know what y'all think about that. I know a lot of times agencies budgets are slim. I mean, maybe you could speak to this Julie. I know your agency is a little bit different.

JULIE FOSTER HAGAN: Yeah. And that's what I was thinking when I was trying to get at in terms of-- and I don't know. I do know for like us. But I don't know for police officers (inaudible). And I did find that law and it doesn't say much at all about training. I think kind of going where you were going that if there could be some requirements for different-- for example, I know that there was something that passed so dentists in Louisiana now must take coursework on providing services to people with disabilities. So just kind of thinking of it from the other. Yes, most anybody who is required to have like a license. Like I'm still a practicing speech pathologist. I have a license to be a speech pathologist even though I haven't done it in a long time. I have to take so many continuing education units per year to maintain my license. Most people have to but if there would be some way to instill in more folks the ability to do that.

I can share one of the things we're doing in OCDD. We still don't have the ability yet because of the administration change but we've got two universities that I think we're going to do this with and three community colleges that I think we're going to do this with. And it's partner to build curriculum. So at the two universities we're trying to get it to the school of social work, the school of nurse-- school of social work primarily to talk about case management stuff.

The school of nursing and the school of-- there's different, it's not just psychology, but behavioral health folks. We already go in and teach some classes but we're trying to build more of a curriculum there to help people know what jobs there are supporting people with disabilities to have some introduction to the field and the different opportunities we have while in college.

And then at the community colleges there's something already in most colleges called a mental health tech. And what we're trying to do is actually take that and just have a few more hours and tie having a developmental disability certification to that mental health tech so that we're building that at the community college. So we are thinking about that. That helps students coming out. That doesn't address people that are already out in the field. But we are using some of our Rescue Plan Act dollars to build that curriculum. We wanted to offer a stipend to people like once you graduate to be able to continue but because the Rescue Plan Act dollars have an end date to that I don't know that we will be able to get to that stipend ahead of time. You know, something that would just help kind of keep people in Louisiana, keep them in the field and then they could use that stipend. So we are working on that.

But yeah, cause I know like I saw the nurses and emergency rooms was a possible answer. The only other thing I can think, because I know it's hard to get that. I know I've been in some council meetings where we've talked about trying to make that mandatory and that's hard to kind of get in there and make it mandatory. If we did decide to have some focus on hospital personnel from the Department of Health's perspective maybe we can help bridge that gap. I'm not in them usually, but there are meetings with the Louisiana Hospital Association folks so we may be able to partner and bridge if there were some type of training. And I'm not sure what the gaps are. I know what the gaps are on my end which are people getting stuck in emergency rooms for a long time. But training is not going to help that. We have to have capacity for placement in the community. But if there are other issues people are experiencing than we can help make a

connection, even if it's not mandatory, to let the hospitals know this is a training that might be available through the council or something. So we don't have that in with police officers or police, the different police or the different maybe emergency responders. But we could help with that on the hospital side.

LAUREN WOMACK: Like I know are you considered civil service?

JULIE FOSTER HAGAN: Yes.

LAUREN WOMACK: So you have to take like your ethics, sexual harassment.

JULIE FOSTER HAGAN: Yeah.

LAUREN WOMACK: The Governor's Association for Disability Services did two trainings on disability awareness and they were going to keep those coming out. Which I think is really cool because you have that turnover and if that's something you're required to take that might be something that we might have to get in touch with our LaCAN leaders and advocate to our mayors.

JULIE FOSTER HAGAN: And somewhere along the line I saw working with like chambers of commerce and things like that.

LAUREN WOMACK: For employment, yeah. Something like that.

EBONY HAVEN: Do you want to take that activity away and we can look at others at the end once you're done?

LAUREN WOMACK: Does anyone feel strongly about, I guess, keeping?

STEPHANIE CARMONA: I'm just saying we're looking at both 2.2.1 and 2.2.2?

LAUREN WOMACK: Yeah.

ERICK TAYLOR: My thing is, I mean, they getting training, some of the providers getting training. Some of the other people basically getting their own training. We can use 80,000 somewhere else.

LAUREN WOMACK: Okay. Good. I'm glad you said that because I was like I'm new to this but that seems like a lot of funding.

ERICK TAYLOR: That's a lot of money. We can put that somewhere else. And the training, some of the service providers is qualified to get this done and

don't they have to get it paid? Don't they have to pay for training to be done?

JULIE FOSTER HAGAN: I think it depends on the organization. There's different requirements.

ERICK TAYLOR: That they have to do. So why is we giving them funding that they already qualified to have to do?

LAUREN WOMACK: I think you and I are on the same page. I just wanted to make sure.

BRENTON ANDRUS: That training that they mentioned, or the law that somewhat mentions training, that wasn't passed until last year. This particular activity's been around a few years. So it makes sense that there was a need at that time. And now that need is going to be addressed in other. I don't know.

ERICK TAYLOR: But it's the employers now, right?

BRENTON ANDRUS: I don't know as a result of that legislation if anything has happened yet. I can't speak to that.

ERICK TAYLOR: I mean, they qualified to do CPR classes and they're qualified to have this done. I mean, them zeros look good behind that.

BRENTON ANDRUS: One thing to factor in these two trainings, 2.2.1 and 2, these are out-of-state contractors. One is in New York. One is in Alabama. They're doing in-person things so you're paying a lot of money to get them here to do these things. And then some are, you know, 2.2.2 I think he's only doing up to five trainings, two days each training. The one above the first responder he's trying to do 15 trainings. Now that is a combination of in person and virtual but most of his trainings are in person so he's driving out to Louisiana those times. So that's why they're more than some of your other initiatives. There's a lot of travel involved.

MELINDA PERRODIN: I kind of agree with y'all on that. They are already receiving CPR training, you know, in the hospitals, the nursing home. And like some providers provide CPR training and all that for their workers.

LAUREN WOMACK: Jill, did you have your hand up? I'm sorry.

JILL HANO: I disagree with a lot of this because personnel has to take trainings. Like you have to give

trainings and you have to be trained in CPR blah, blah, blah A, B and C. And then this is just touching on the disability aspect. But our trainings are specifically used for situations with people with disabilities. So I think in the long run that this training is going to be more specific to this population.

ERICK TAYLOR: Yeah. But Jill, what I'm saying is, this is what I'm saying. I understand what you're saying more specific for the population, but they're already being trained for this population, right?

BRENTON ANDRUS: That would be speaking to that legislation that I don't know what's been implemented since it passed. It would have only been probably most legislation goes into effect July, August.

ERICK TAYLOR: If we still keep it why we can't wrap this budget down?

JILL HANO: Well, we still have a set budget. Like our federal fiscal budget will be that whatever is not on it. Then if not we'll have the 80,000-dollars have to be used.

ERICK TAYLOR: I understand we have to use it. But if we drop it down to 30,000-dollars that's some money we still pulling back. A lot of this is, correct me if I'm wrong, a lot of this is traveling. A lot of this is being used to get them here. Now we got-- what this is now we on, YouTube and Zoom and all this stuff. I mean, let's put him on a big ole TV like this and we can cut some of that money down.

BRENTON ANDRUS: So speaking to that this initiative is tough because you're dealing primarily with a lot of law enforcement. But first responders in general. And I don't really know how to describe it unless you're in that field. They want to be in person. They're not doing virtual. They did virtual when we started this. We still had some Covid times. We had to stop doing virtual because we couldn't get attendance virtually once everything was back in. Whenever it comes to law enforcement sometimes they're not open to some new folks coming in to talk to them about these particular issues. Maybe they think they got it right. Maybe they think they don't need to learn this. Maybe they're (inaudible) of the information. I will say most of the time we've been able to get around that because the contractor is

previous law enforcement so that has helped because he can speak the lingo. We've had some trouble tracking outside of the letters that we've received as far as recommendations of how great they thought the training was. It's very hard to track other data because most of the people that participate they're not going to tell you if they're male or female. They don't want to tell you their sex. They don't want to provide that information. They also aren't really open to you going in and looking at all their policies and what they're doing so it's hard to say how many policy changes we had as a result of this training. So there's some stuff we can keep funding and having this training and we can base it off of how many people attend and how many good letters we have. But I don't know how we can actually see what are the improved outcomes. Because I've asked for it. What policy changes are out there. Have we reduced incidences of arrests. And that's not information that these departments are just throwing out there for you to have. And so we kind of have to hope to some extent that you're getting what you pay for without having those long-term changes. Are they happening? It's hard to say.

LAUREN WOMACK: And you touched on it.

Developmental disabilities are so broad. I mean, I would caution you to say autism is one thing. That's a whole spectrum. What are they actually, is it a two-hour training, while even people with epilepsy might be completely different. You can do general, but like in an emergency or if you're at, where do you go, a center like if you're in an emergency, a shelter. Even if you're trained chances are you're not going to know what to do with every person. I don't know. I mean, maybe want to look at that and maybe say like focus on tying this in some way to how to advocate for yourself what you need in a shelter. Or how do you let people know like law enforcement what you need or something like that. Just a thought. Jill, are you raising your hand?

JILL HANO: No.

BRENTON ANDRUS: I think some of the shelter aspect of things is those kind of conversations are occurring in 2.2.2. I don't know that those conversations are really buried in 2.2.1 because we're talking more



about-- I mean, it's emergency responses but if you get pulled over or if someone says there's a suspicious person walking in the neighborhood, like those kind of things. Not necessarily the emergency disaster sort of response. We're covering that in a different initiative.

ERICK TAYLOR: But my thing is like I'm supposed to go, and I'm not trying to argue, y'all, but this is my thing I'm qualified right now I have to go a (inaudible). We put certain things in place for people that have a disability in certain dangerous ways we can put certain things in position to protect us. It's certain things y'all don't know personal about me on the board. But if I have a brace on well, we need to do this, we need do that, we need do this. But to say okay, we're going to use this and training people. You never trained for a situation. You don't know a situation.

SPEAKER: So I was just going to say we do these trainings currently or we have in the pandemic when the police stations have allowed us to go in. Like epilepsy is not specifically a developmental disability but they commonly co-occur or some for people that is (inaudible). Our police officers are not prepared. Even our EMS are not prepared to deal with people. We've had several people who either have bracelets or will self-identify as a person with epilepsy but because the police officers have no idea what this looks like they kind of disregard the bracelets or the statements because again, they haven't been trained that this is what this can look like.

We recently got in with another police department and overall they really appreciated having (inaudible). That's kind of been our feedback overall. The same as you shared that they wanted to know what to do. They don't really want-- but it's really hard in the field, right, actually for police officers to determine what is going on if nobody has provided them fairly accurate information. There are (inaudible) different types of seizures alone (inaudible) so we're going to ask somebody with no prior training to be able to identify that in a very stressful situation.

LAUREN WOMACK: I don't know if you could give us this information but when y'all do your trainings it is

a grassroots? Like can you speak to how much it cost.

SPEAKER: Well, we do it and we fundraise to be able to. That would kind of be my hope in this world and as a parent of a kid with a developmental disability that we would actually start looking at finding local people within the communities who are prepared to do this across the board.

LAUREN WOMACK: It's just kind of hard to see like money wise. We don't really know is this a good investment. We could talk about it all day.

BRENTON ANDRUS: Trying to think back I don't remember what this initiative started at but I do know it was increased to 80 at some point. Started at maybe 50 or something and it bumped up to 80 and it's kind of been there. I mean, based on some of the conversations it also sounds like folks also need to be trained on having things available on them or at home or something where they can try to, whatever level of communication they have, to be able to express that when emergency responders are there. I know it's also difficult to do speaking to the funding piece. It's whole agency trainings but you have to understand you can't pull every police officer off the force to go to this training. So you're there for multiple days trying to cover it in shifts.

And similar to other professions law enforcement has trainings every year, excessive amount of trainings they're required to do every year. Now you're trying to throw in another one. So there's lots of things that go into not just travel. The contractor's time and salary to make these connections. Again, it's someone from out of state that's trying to do this by phone, by Zoom traveling in to shake some hands, kiss some babies to see who these people are and try to get in the door.

LAUREN WOMACK: Like you're saying, I don't know if owning the content, if it was videoed or something. They might be more resistant to actually sit there and watch it.

BRENTON ANDRUS: I mean, we did some virtual stuff and he wasn't getting very many responses after the first year so that's why it's mostly in person. He has added in there this year to try to do some virtual training sessions again to see if he could get people

to attend those. But thus far in general he hasn't had a whole lot of people banging down the door to get the training. And again, he thinks it could be tied to that lawsuit.

EBONY HAVEN: We're at the end of goal two. Y'all can discuss all three things that have money attached to them. So we have to make a decision on this one, 2.2.2. And we have to go back up to 2.1.3.

JILL HANO: Did we officially increase the PIP one yet or do we have to go all the way back to 1.1.1?

EBONY HAVEN: Right. So yeah, that's what-- I thought that's what the recommendation was was to talk about each of the contractual activities to see which ones you guys want to discontinue maybe so that way once we're at the end you guys can go back in and suggest new activities, suggest increasing the funding for existing activities like Partners. That's why we're trying to see if you guys want to make decisions now on these because if we don't, if you want to keep them we won't have any money to put towards anything new.

EBONY HAVEN: I think we should cut this 80 down. I mean, if we see where it needs to be looked at again can we look at it again?

BRENTON ANDRUS: You have three options. You either take it away, reduce the funding or leave it as is. If you take it away you have the option of doing it again any other year. If you reduce the funding then we may have to go, I don't know, negotiate with the contractor, put another SOP out. We don't know.

MELINDA PERRODIN: An in-state provider to do that contract.

BRENTON ANDRUS: Yeah. Actually, whenever we put the SOP out for this the only two responses we got were all out of state. Actually, this group and then the current ones that do 2.2.2 also have a component although its different, but they have a similar component. They applied for it as well. But no in-state people applied. No in-state people applied-- well, one did for emergency management but it was not going to accomplish what the council was looking for. I mean, so you could put preferences in there if you would like. But ultimately you want the best person that's going to do what you want them to do.

MELINDA PERRODIN: Is it something that you can work with another governmental agency like with Department of Health and Hospital. You know, to say hey, we're looking at a disability training to see, you know, if y'all can network and probably try to share the funding for the program since it's touching their area.

BRENTON ANDRUS: Not the first responder. I don't know that that would be under the scope of Department of Health. Not the training that we're doing.

MELINDA PERRODIN: The emergency management part of it.

BRENTON ANDRUS: I wouldn't bank on it, but I guess you could always ask if they want to throw some money at it. You also have to factor in the state is responsible for providing some of these emergency services. So Department of Health, for instance, runs medical special needs shelters. Other departments are responsible for the evacuation of people to get to these shelters so there's a lot outside of these private agencies or these local police officers or firefighters that are supposed to be able to get you to these shelters. So it sounds like there was a breakdown somewhere in that chain. And that is what our program is designed to do to have some of those conversations. But you have to get people there first. And so for 2.2.2 I can't speak to are they there this year because we haven't had those trainings yet. 2.2.1 I know we've been trying to host the trainings but we can't get people in the seats. So you might want to consider that if you think about reducing or eliminating an initiative.

ERICK TAYLOR: Y'all don't know if they're there? Then why we holding it?

BRENTON ANDRUS: That's for y'all to decide.

LAUREN WOMACK: Brooke has her hand up.

BROOKE STEWART: After hearing everything that Brenton had said I think that I definitely can agree that the police and first responders are like an important, we need to have them as like a disability advocate for us so I would like to keep it at the 80,000 because like he said, they need to have like someone that they can believe in that's talking to them. They need to have people that they trust to give

them this training. And if it's already worked I think we should keep it at the 80,000 so we can continue having these partners in the community.

LAUREN WOMACK: Okay. Do we want to go ahead and have a vote on it?

EBONY HAVEN: You can vote amongst the committee like what you guys would prefer to do but you don't have to have like a roll call vote or anything like that.

LAUREN WOMACK: Jill.

JILL HANO: Actually under both-- and I'm just making sure everything is considered because I agree with Brooke. And then I know for the committee recommendations it said training for medical staff. And then for your staff recommendations it said emergency room workers. Attach the staff recommendations for 2.2.1. Could we keep 2.2.2 and then change the activity for 2.2.1? Because maybe instead of the first responder trainings could we maybe get emergency room staff trainings and then that would be a new activity and you would put an SOP out for that and keep 2.2.2.

BRENTON ANDRUS: Yeah. The option would be you would eliminate this activity and you would want to do something that focuses on training emergency room workers however that would be done. So yeah, you put out an SOP. You would just have to decide how much money to put towards that initiative. To do that you would eliminate the current activity and start up another one.

JILL HANO: What activity were you wanting to keep Brooke?

BROOKE STEWART: I would like to keep activity 2.2.1.

JILL HANO: Okay. I misunderstood.

BROOKE STEWART: That's the one we're talking about right now, right?

LAUREN WOMACK: We're talking about both.

JILL HANO: I always put them together and I get confused.

BRENTON ANDRUS: Yeah. They're not together. So you have one training that's handling first responders interactions with people with disabilities. Then you have another training that's the emergency management

disability awareness. So they're two separate. They don't really blend together much. They're not done by the same contractor. Not much overlap between those two trainings. If you just think about first responder and emergency management that will help you keep them straight.

JILL HANO: Okay. I see. In my head I always lumped them together for some reason.

LAUREN WOMACK: So do we vote on that?

STEPHANIE CARMONA: We don't need to do a vote until the end but if you want to do an unofficial who wants to keep it.

LAUREN WOMACK: Yeah. Through the committee. I vote that we get rid of both of them and look at new stuff to put on the agenda.

EBONY HAVEN: Does anybody else agree with Lauren that we should get rid of both of them and look at new activities to put that money towards?

ERICK TAYLOR: I second you.

EBONY HAVEN: So Erick agrees.

LAUREN WOMACK: Melinda, what are you thinking?

MELINDA PERRODIN: I can agree with getting rid of the first one. The second one I'm kind of leery about it because due to the hurricanes and all that that we have I'm kind of leery about that one. But the first one I'm okay with getting rid of the first one.

LAUREN WOMACK: Am I correct in Jill and Brooke wanting to keep 2.21 the same for the same allocated cost?

BROOKE STEWART: Yes.

BRENTON ANDRUS: Jill wanted to change it.

LAUREN WOMACK: Jill?

JILL HANO: I'm confused so I just am going to keep my comments because I don't think I know what I said. Don't take anything I was talking about out. Just make sure the training for the emergency room staff is added whether we add this all to 2.2.1 or make it a new item.

LAUREN WOMACK: Right. Okay. Are we going to revisit the funding that was in objective or goal one?

EBONY HAVEN: Okay. So Lauren, Erick and Melinda have agreed. Oh, Julie, I'm sorry we didn't get you.

JULIE FOSTER HAGAN: I feel weird as the state person here. I'll defer to what they feel like. My only comment would be that I do think that if there

could be some advocacy around making some of those things mandatory that to me seems more in line. Or it maybe would help us to get more bang for our buck.

EBONY HAVEN: Okay. So Lauren, Erick and Melinda. I'm just on 2.2.1 right now. Lauren, Erick and Melinda agree to eliminate 2.2.1. Brooke wants to keep it and Jill wants to change it. So as of right now it's three people that want to eliminate it and use the funding for something else. Are we all okay with moving forward with that?

LAUREN WOMACK: Going once. Going twice. All right. So we're eliminating 2.2.1.

EBONY HAVEN: So as far as 2.2.2 goes I didn't get Brooke or Jill's opinions on 2.2.2. So that's the emergency preparedness training that Niagara is doing for us. Do you guys have any opinions about that particular activity? Do you want to keep it, change it, eliminate it or discontinue it?

HANNAH JENKINS: Brooke says keep it in the chat.

EBONY HAVEN: Jill, do you have a preference for 2.2.2? You want to keep it? All right.

EBONY HAVEN: Yeah. We're keeping 2.2.2. And we're going to keep it at the current funding for 50,000.

SPEAKER: I would suggest right now we keep it at current. That way if y'all wanted to add something.

JULIE FOSTER HAGAN: This is just a note on that. If there's anything we can do to help promote that since it's under LDH let me know. I don't know what we can or can't do but I can talk with (inaudible) emergency preparedness. I don't know if they will or won't. DCFS has pretty major changes so they're over some shelters and we're over some shelters. If there's things that we maybe need to do to get together to help advertise that I'm happy to try to help bridge that.

LAUREN WOMACK: Also as a reminder when we're picking what contractor we want to do, like I know for some of the people that are in the healthcare industry if that would count as a continuing education credit they're more likely to watch it. Especially if it's free because you usually have to pay for those. For nursing they probably have to do continuing education and stuff. I know a lot of them--

JULIE FOSTER HAGAN: You have to go through board

of nurse to get approval. Each different group has different ways that you get approval for continuing education. There's some if it has to do with developmental disabilities my office can approve, but nursing is not one of them. We can approve social work and psychology. I have somebody who can reach out to occupational, physical and speech therapy boards. So it just depends.

LAUREN WOMACK: Might be really good to promote it. Good job.

JULIE FOSTER HAGAN: Can I make one more comment in case I need to leave. There was also a recommendation around foster parent training for children for people with developmental disabilities. Just want to make folks aware that our office does do that through our resource center. We do two types of training. One, we've partnered with DCFS to do training, just kind of general training for people who might be (inaudible) into foster parents but want to know how to support people with disabilities. So we do that. And then we offer individual consultation. So any child with a disability who's placed with a foster family we are available for individual consultation. So I don't know if that's in line with what folks were saying, but just wanted folks to know that we do already do that. We probably could do a better job advertising that, letting people know that, but it is a training that's available both at the general and at the individual child level through our OCDD resource center.

LAUREN WOMACK: I know you probably have, but have y'all reached out to CASA?

JULIE FOSTER HAGAN: I would have to find out.

LAUREN WOMACK: The court appointed child advocate.

EBONY HAVEN: Are we keeping 2.2.2?

LAUREN WOMACK: Yes. We got outvoted.

STEPHANIE CARMONA: And that's it for goal two. So we can do the last one, goal three. And there's only one so it will be quick. One contractual. And it is 3.1.5. Building capacity regarding education and employment. So the council contracted with Arc of Louisiana as an education and employment consultant by conducting statewide trainings on how to identify and follow new and/or proposed changes and policies around special education and employment for individuals with



intellectual and developmental disabilities. They will provide in-person trainings across the state for education and employment. Trainings will be provided to individuals with IDD and their families. They also attend meetings and advocate where education and employment policies and legislation are being discussed including but not limited to the Board of Elementary and Secondary Education, the Special Education Advisory Panel, the Louisiana Rehabilitation Council, the Louisiana Legislature and other related meetings such as the Accountability Commission, the Superintendent's Advisory Council, etc. Staff recommends discontinuing this activity for fiscal year 2025. If you would like to keep this activity I or we as staff feel it should be separated into two separate contracts. One for the education part. One for the employment part. That's all I have for that one but we can talk more about it if you have questions.

LAUREN WOMACK: Can y'all explain a little bit like what the funds are used for. I'm just confused how that's 87,000-dollars.

STEPHANIE CARMONA: So a lot of it is, most of it is salary and wages and benefits for the people that do any work related to it.

LAUREN WOMACK: From the Arc of Acadiana?

STEPHANIE CARMONA: From the Arc of Louisiana. And then there are some like travel costs associated with it if they travel for things. If they provide, like if they're doing a training, let's say, in Shreveport. Their hotel, their travel expenses, their meals, the meeting space all comes from this budget.

EBONY HAVEN: So they're doing ten, right? They're doing ten education trainings.

STEPHANIE CARMONA: I think it's nine and nine.

EBONY HAVEN: Okay. Nine education trainings and then nine employment trainings.

STEPHANIE CARMONA: And from what they said the reason that it's nine it's supposed to be one in every region, from what I remember, of the state.

EBONY HAVEN: And they'll probably combine one and ten.

STEPHANIE CARMONA: They're supposed to be nine that are on education. Nine that are on employment. They do have one coming up. I just got the information

on Friday. So I want to say it's at the end of March. So I don't remember where it is, y'all. I'm so sorry. But I can look it up if you want to know. So they do have a training coming up for this activity.

EBONY HAVEN: And so they've also been working with staff here to help us with our education action alerts. And if you ever need to put out an employment action alert they would help us with the language on that. So it's a consulting sort of thing to help staff to review BESE's education agendas to determine where we need to go and advocate on the issues that will affect students with disabilities. So it's to help families and train them as well to be advocates, but it's also to help the staff.

ERICK TAYLOR: Can you elaborate on that.

LAUREN WOMACK: Do they have to turn in a list of expenses or anything?

STEPHANIE CARMONA: Yeah. They send in an invoice. They send in-- like so depending on what it is that they're trying to get reimbursed for. So everything is reimbursement for this contract. So they send in a report that tells me what they did with the money. So they have different objectives that they are trying to meet. They tell me how, you know, what they did that month that meets that objective. They send in, like they sent in training material for this upcoming training. And then after trainings they send things like the attendance report, any kind of surveys, any receipts that they have for the space for their lodging. So we see everything and I check it all.

ERICK TAYLOR: So y'all basically see everything. Y'all basically know every move by receipts.

STEPHANIE CARMONA: Yeah. And I'm in contact with them pretty frequently.

LAUREN WOMACK: Is that something that y'all could start giving the council since it's a contract?

EBONY HAVEN: If you guys have specific questions we could probably answer those, but we don't normally give out like the invoices and things like that.

LAUREN WOMACK: When we put this out they had different agencies for this one or did they extend a proposal to y'all?

EBONY HAVEN: Yeah. I think did we have two proposals for this one?

STEPHANIE CARMONA: Yes.

EBONY HAVEN: Bayou Land Families Helping Families wrote a proposal. And so did the Arc of Louisiana.

STEPHANIE CARMONA: So we did have two proposals for this one.

JILL HANO: The one we combined and then we decided not to, right?

EBONY HAVEN: So it's still combined Jill. You're talking about for education and employment?

JILL HANO: No. The contract.

STEPHANIE CARMONA: Yes, Jill. That they were going to kind of subcontract with Charlie and then Charlie kind of put his feelers out and it wasn't feasible so we ended up taking that out the contract. I think that's what you're referring to.

JILL HANO: Yes, ma'am.

JULIE FOSTER HAGAN: So I see kind of like a distinct difference between the training and then the advocacy piece. So my question is if we don't have this contract are there things that would happen at BESE, SEAP, LRC or the legislature. Would we be missing advocacy opportunities. Just trying to understand. I understand like if we say if we don't have this training (inaudible). I can get that part. But if we don't have the contract would there be an impact because it looks like they specifically advocate for certain education and employment activities. So just curious if there will be a gap if we didn't have this contract. It just started last year, right?

EBONY HAVEN: Right. I feel like the goal of the contract is to build the capacity of the staff where we are able to review those agendas for BESE and any advisory council that we're looking at. Not just BESE but SEAP also so that when we see items that need to have advocacy behind them that we're able to write those action alerts and call for yellow shirt days to have our LaCAN advocates come out to advocate for that.

JULIE FOSTER HAGAN: So what they are doing as part of this contract would take the advocacy part, not the training part, the advocacy part would be taken over by the council staff?

EBONY HAVEN: Yes. I would say yes.

JULIE FOSTER HAGAN: Just trying to understand.

STEPHANIE CARMONA: Because currently, just to kind

of-- it's also going to be on our reports and stuff. But I try to go to every SEAP and BESE meeting in person. So I am there. I was at the last BESE meeting and I gave public comment. I'm sorry. The last SEAP meeting and gave public comment at that one. So yes, essentially staff would be taking over that part.

ERICK TAYLOR: This is basically is y'all are asking us do we want to keep this and fund this or this is basically saying let's get rid of this?

EBONY HAVEN: Well, our recommendation, if you look at the back piece, to discontinue it. But if you decide you want to continue it we recommend separating it. Having one for education and then one for employment.

LAUREN WOMACK: I'm just concerned, this might not be the case, it's just a question. Arc of Louisiana is a vendor and a concern of mine, and it might not be justifiable, but are they advocating for their as an organization or are they advocating for us as the council. And to me that would be hard to see without knowing exactly what they're advocating for. I mean, as staff y'all work for the council. And they're a sub-council but they also have, I guess-- actually too they do supported employment. So I don't know how other council members feel about that. But that just kind of is a little concern of mine.

BRENTON ANDRUS: I will say as part of a contract with the council any advocacy or materials or trainings that they do for this contract or council opinions, stances like it has to be representative of what the council does. So for like instance, like we've had some educational alerts that have gone out where we've been like no, we're not addressing those two issues that you recommend. We'll address this one because it's more aligned with what we're focusing on but not this. I don't think they make, at least in the little experience I've had with some of the things I do with them. The ultimate decision is up to us of what information gets pushed out.

LAUREN WOMACK: I just want to make sure.

BRENTON ANDRUS: The overall impact, if any. And then we make a determination what aligns with the council.

MELINDA PERRODIN: So basically this item that

y'all suggested to discontinue if we do decide to discontinue it means that y'all going to pretty much take over the education and employment issues or y'all going to try to find another vendor?

STEPHANIE CARMONA: So if y'all get rid of this activity then the advocacy part regardless I would still go to the SEAP meetings. I would still go to the BESE meetings.

EBONY HAVEN: And we would review agendas. Like I was saying, the purpose of this particular contract is to help build the capacity of the staff. So whenever we're looking at a SEAP agenda we're like okay, this is going to negatively affect families or positively affect families and we can decide if we want to call a yellow shirt day. Hey, we need to go to SEAP and allow our advocates to testify and give that public comment to make sure their voices are heard. So the point of the contract is to help build that capacity within staff but also within like advocates in general. So we feel like the capacity will have been built.

STEPHANIE CARMONA: And that's just really hitting on the advocacy part of it. I know that they are also doing the trainings. That wouldn't be something that we would be providing for families. So if that was something that you would want to continue that would have to be an activity.

JULIE FOSTER HAGAN: When you said separated I was kind of thinking instead of separating education and employment, if folks feel like that's a training that's needed, could you take what they're doing now and separate out the advocacy piece from the training piece and potentially consider continuing whatever training opportunities. Again, if that's well attended and the curriculum is in line with what they want. Then remove the advocacy from the contact.

ERICK TAYLOR: I was just trying to understand when you said we would continue doing advocacy even though we draft that, right, continue doing that. Now the other thing, would that affect the jobs. I maybe got it wrong. What jobs the people that does the yellow shirt. I'm not understanding them.

EBONY HAVEN: No. That wouldn't affect their jobs. You're talking about our LaCAN leaders?

ERICK TAYLOR: This is different?

BRENTON ANDRUS: Yes. That's under goal one.

ERICK TAYLOR: Okay. I say leave it if it's not going to affect nothing that we're doing. I don't understand. I understand that we're going to continue doing all. Can y'all repeat that?

STEPHANIE CARMONA: So like the first part would be the advocacy. So we would still go and advocate and represent the council. So I would still go to those BESE meetings. I would still go to SEAP. I would still look for important information that needed to be pushed out in case there was a need for a yellow shirt day, a need to call for advocacy. But the second part of it that I was kind of saying that they are providing our trainings. So they also provide trainings to family members and people with disabilities about education and employment. So we wouldn't take that on. So if you wanted to continue trainings it would have to be a separate activity.

BRENTON ANDRUS: Looking at the training piece though we do have Families Helping Families that provide trainings on everything. So personally I would say stay clear of education trainings specifically and then we could work with, I mean if there's a particular training you want I would work within your FHF contracts to do the training. Not a whole new provider, contractor, whatever come in to do trainings. That seems like a duplication of effort in my opinion.

JILL HANO: This just seems like an in-house thing in that activity that we can remove because there are certain services we have that are done in house. Like we have a Parliamentarian which that's not on our plan. Staff deals with that. And staff arranges the caption service and the transcriptionist. I didn't understand why this was on the plan in 24 because it just seems like it's something that's done in house. Like when Stephanie goes she's not going to go to the SEAP meeting and not tell us about it. Like, I mean, that's like she said that's in her report. Like regardless of what we say, what we do with this activity she's still going to report back to the council. The only thing I was thinking is that about the trainings on the education and employment trainings across the state. And we could make that all separate activities. Or if this is what the staff recommendation was, is a

contract for employment trainings and then a contract for education trainings. But then again, like Brenton said and like if these trainings are already in contract that we have then do we even need to put the training aspect of this activity.

LAUREN WOMACK: Thank you Jill. Staff, when was the last time y'all got a raise? Can y'all tell us that? Just thinking to myself. One of the reasons I voted for you is because to me being dedicated for this stuff you have to be passionate and dedicated. And obviously you don't do it for the money, but still. I personally would rather give y'all a raise for what you're doing anyway than pay another company to contract in to go to meetings where y'all have to go to anyway. I don't know. That's just my 2 cents. I would rather that money go to Stephanie. I'm sorry if I came out very guarded with the money stuff but I didn't want to like (inaudible).

ERICK TAYLOR: I am this last one-- Jill, you were saying something?

JILL HANO: I was just making a joke. You said giving Stephanie a raise. No raise for Brenton.

BRENTON ANDRUS: Well, it would be nice if y'all could determine a salary for the director here so we could get back on the path of what we're doing. I understand, but if we're going down that path I'm going to share what I think.

JILL HANO: Tell them I'm trying. I'm working on it Brooke.

BRENTON ANDRUS: I will say I appreciate the comment. As state workers that are classified it's a little harder to just throw money at us.

JILL HANO: She only wants to give Stephanie a raise.

ERICK TAYLOR: On a serious note I think we should table this one and use the money somewhere else.

LAUREN WOMACK: And maybe we could see what specific trainings. We do a survey or something what specific trainings people want to attend.

ERICK TAYLOR: Right.

LAUREN WOMACK: Well, employment too, that's LRS's avenue. I know we do it as well.

EBONY HAVEN: But this young lady, what's your name?

STEPHANIE CARMONA: Stephanie.

ERICK TAYLOR: She still will report the information and do that and this other thing. I don't see no connection.

LAUREN WOMACK: All right. Are we going to do a vote or do we have any more comments? Unofficial vote.

BROOKE STEWART: I think Brenton had just started addressing it when I had asked. Like duplicating the trainings with Families Helping Families and partnering with Arc.

BRENTON ANDRUS: Yeah. That's what we were talking about. If you separated it and did just the training portion that would be a duplication. I don't want to go as far as saying whatever trainings they're going to do this year is a duplication because I don't know what their trainings are doing. I'm not familiar with that. But I would say in future years or next year if you're looking at a training aspect we have a mechanism for trainings which would be FHF so we can negotiate through those contracts specific content areas.

LAUREN WOMACK: For the different regions.

BRENTON ANDRUS: For a particular training.

LAUREN WOMACK: Okay. Cool.

BRENTON ANDRUS: Sometimes they might already be doing them as well.

LAUREN WOMACK: I vote taking it off.

ERICK TAYLOR: Take that off.

LAUREN WOMACK: Melinda?

MELINDA PERRODIN: I vote taking it off. Yeah. Because it doesn't make sense to pay them 87,000-dollar and they have people doing that type of work already.

STEPHANIE CARMONA: So are we looking at just the budget right now? Okay. I just wasn't sure.

EBONY HAVEN: And then I'll go back to the budget. So I'm striking through the activities that you all have decided to discontinue so that you can determine how much funding you have remaining to add new initiatives or like we said you can add more funding to other current initiatives. So just remember for 1.2.3 our federal technical assistance has given us information that we can't have funding tied to the council and the leadership training. So that 15,000-dollars will have to go to something else.

JULIE FOSTER HAGAN: Is that in the budget now?



STEPHANIE CARMONA: It was part of the 24, yes.

EBONY HAVEN: So I'm not great with math so I'm going to add this up with my calculator. You guys have 182,000 to work with.

ERICK TAYLOR: Do we have to find where we put it?

EBONY HAVEN: Right. You can create activities. I think Stephanie wants to give you guys information about an activity she researched that you guys can consider. Remember we had the recommendations from the council, from the full council from the January meeting. And then we had that one recommendation from staff to increase the Partners in Policymaking activity. That's activity 1.1.1.

STEPHANIE CARMONA: So one of my recommendations, and I had been in contact with Lauren Womack, was doing a website overhaul. So just fixing up our website. The council in Delaware they just-- or it's part of their plan this year. So they are working on it. Their website will be live in May and they have done it in two parts. They did a website overhaul. So making it more accessible, easy to follow. More user friendly. And then they also had another part that was a plain language component where they took all of their documents, converted them over to plain language or easy reads. I had a meeting, or we, it was me, Hannah and Ebony had a meeting with Gator Works who kind of host our website right now. So they host our website. So we had a meeting with them, I don't know when, last week sometime and were given this proposal that is this paper. It's a dark paper. They have a bunch of information in here but really the thing that I wanted to talk about was the price tag for it. So for the website design and development, that's from start to finish, we're looking at about 30,000-dollars if this is something that we're interested in. This is a one-time, so it is a one-time fee. It says it on there it's a one-time investment. So it would clean up our website, make it more accessible. Make it more user friendly for everybody. Kind of organize things. There's a lot of stuff to it. Making sure it's an ADA compliance. They do this search engine optimization thing where if you just search developmental disabilities I think on Google it will be one of the top searches that pop up.

ERICK TAYLOR: Who's doing it now?

STEPHANIE CARMONA: We are. Well, they are. They're hosting it. Which means that we pay a fee monthly to keep it up and running, right. Am I wrong?

HANNAH JENKINS: They keep the website running. But I don't know if you visited the website in a minute. It's not to keep the website running. It's basically do a full refresh of the website to make it where people can actually find what they're looking for verses following 100 pages and getting lost. They would basically do a full revamp which we haven't done in well over ten years.

ERICK TAYLOR: Who's holding the domain address?

HANNAH JENKINS: Gator Works does.

STEPHANIE CARMONA: You just reminded me of a different point. They also, he was saying that they make it so that if you have it on a phone it's like mobile compatible too. It's not like just like the desktop version on your phone, it's the website.

ERICK TAYLOR: Can I put some meat on this table. 30,000-dollars when you're saying adding a web page where somebody's coming to the web page how much would y'all have to charge them. Who is going to go in and change things and keep things up and running and doing all this?

STEPHANIE CARMONA: So I want to make sure that I understand what you're asking. Hopefully if I give enough information it will cover what you're asking. The first meeting we would have with them would be to decide what information we're going to keep.

ERICK TAYLOR: That's what I'm saying. Who is going to go in and upload and change things?

STEPHANIE CARMONA: Them.

ERICK TAYLOR: Update and all that.

BRENTON ANDRUS: We'll keep it up afterwards. They're going to do it. They're going to overhaul the website. We keep it up afterwards.

ERICK TAYLOR: Okay. Why we can't let the workers do it and they just do the spread sheet on it and we'll save some of this 30,000-dollars.

LAUREN WOMACK: It's like a special set of skills and it's hard to make a website.

ERICK TAYLOR: No. It's not.

HANNAH JENKINS: I can speak on I'm the website and

social media person. I'm able to do some things. So like I'm the one who put these sliders on. I can change words and things like that. But anything that involves a full revamp of the whole website one, would require a lot of coding knowledge. Which I can speak for our office, no one in our office has that. And in addition to that the time that this would take would be, I would only be able to do that.

ERICK TAYLOR: Why the board can't put-- I'm just asking, I'm just speaking me. But why the board can't pay for the software and have our own spread sheet put up and we save some of this money?

EBONY HAVEN: Again, I'm going to go back to Hannah. A lot of this is coding Erick and we're not trained in how to code. We're not capable of pulling off like a whole overhaul of our website. So a lot of the information on here, some of it's outdated, some of it takes you to links that don't work. It's a lot of information that has been on here since probably--.

ERICK TAYLOR: I understand what you're saying and I understand what everybody's saying. But to get an address, as long as you got your own domain address you is locked where it's signed to you and it goes straight to Google, straight to any website. Once you buy your domain address and once you buy a spread sheet and all that then you set up as long as you got a domain address.

REEKESHA BRANCH: Right. But I think what they're trying do is try to make it more user friendly for people that need accommodations. They need to be able to click on certain things and go straight to--

ERICK TAYLOR: But the thing is once you get a domain address locked and signed into this board that domain address I can hit it across the world and that domain address is going to take me directly to this board. Once you type into a different board or wherever you go with that that board is going to pop up.

HANNAH JENKINS: Are you saying when she mentioned the Google?

STEPHANIE CARMONA: The Google optimization.

HANNAH JENKINS: Basically when it comes to a lot of them, the way Google operates, yes, if you type in Louisiana Developmental Disabilities Council yes, we

come up. But if you have someone who knows how to operate when it comes to marketing on social media, marketing, etc. what they know how to do is make it where you don't have to type Louisiana Developmental Disabilities community and council but you can type in developmental disabilities and we're one of the first ones. Verses right now if you type in developmental disability we might be page 15, you know.

ERICK TAYLOR: Okay.

STEPHANIE CARMONA: I understand wanting to save money but right now we have 182,000-dollars that we have to spend so is there something else that you would rather use the money for? Because it's money that needs to be spent. There's no saving it and using it for next year.

ERICK TAYLOR: If the web page needs to be revamped. And board members, I want you to understand I know that's got to be spent and I know the web page needs to be put out, right. But I think we can get it put out for lesser than we don't have to spend 100, that much for the web page.

LAUREN WOMACK: I actually think that's a pretty good price. Just to put it in perspective we are customizing an already created case management system and it's 11,000-dollars just for them to take some stuff away. They're going to be building this from like scratch and it's going to have in there too, which I think is great, words that are like for certain reading levels.

STEPHANIE CARMONA: For this part. So right now this proposal is from, is for just the website. So the actual look of the website, the click, the coding parts. That part is this. And then as far as like timeframe for this they said they are looking at about five to six months that they could have this completed. If this was something that we would want to do with them. Most places if we're using some kind of outside company this is right around what we were quoted 20 to 30,000. We're right here at almost exactly 30,000.

The second part of our reading with Gator Works, or I guess another part of our meeting with Gator Works is they were wondering if the committee wanted to do some re-branding. Currently we just kind of have that banner up at the top of the web page. That one up

there. From what Gator Works was saying they could do a re-branding that would be about 5,000-dollars and that would include things like letterhead that had a new logo on it. And everything would have to be approved. It's not that they're just going to give it to us and that's it. We would get feedback, talk to them. They would come up with things that are visually appealing but also work for us and the ADA compliance. There's a lot of moving parts to it.

I'm trying to remember what else he included. We would own that logo. So that would also be a one-time kind of fee if that was something that we would want to do. I think kind of the other part-- well, let's talk about this part first. I talked to somebody about the plain language stuff like you were mentioning too. I mean, if y'all want to talk about just the website part right now we can or I can give you all of the information. Cause like I said, Delaware they did kind of it in two parts. They had somebody that created their website with the web design team and then they also have a different contract with somebody that does plain language and easy read versions. So this is the web design aspect of it.

And then I met with the person that Delaware is using for their plain language and that was also in order for him to convert all of our documents, brochures, things that we would use that are on the website. So he would also give recommendations for the website view. As a user, you know, maybe this category needs to go here. That kind of thing. Any kind of recommendations that we could take or not take. It's up to us. He said that for something of the size that we were looking at it would be about 20,000.

LAUREN WOMACK: Would it link to other, like we could put in it linked to OCDD and stuff like that?

STEPHANIE CARMONA: Like the links in there?

LAUREN WOMACK: Yeah.

STEPHANIE CARMONA: Like this text in there where you see like the council engages in advocacy. Those are linked so we can click on those and things open up. If you wanted to link a different website essentially you could.

JULIE FOSTER HAGAN: Do either of those options include any type of translation?

STEPHANIE CARMONA: There is a translation on this page already. There's the accessibility option right there which is like the screen reader. But then there's a translation. There's a way to do a translation on the home page. It kind of gives like a step-by-step of how to translate. It's not exact, but if you click it it gives direction on how you can get the website translated.

JULIE FOSTER HAGAN: I can only speak from OCCD's perspective. Our website needs lots of help too. And we have the extra step of having to go through our Department of Health Bureau Media and Communications. So it's not even just us who gets to do it. But I know that again, only speaking from-- we do hear from a lot of advocates requests to make things simpler, easier to get to, easier to connect.

JILL HANO: You don't even have your own website. You have a branch of an LDH website. And yours is very complex.

JULIE FOSTER HAGAN: It is. Again, I know that that's something that seems important to the developmental disability community to be able to easily access information. I don't know if you guys hear the same, but I know on our end we hear that about our website a lot.

EBONY HAVEN: We hear it a lot.

JILL HANO: I agree.

LAUREN WOMACK: I like the phone thing too. Because a lot of families might not have that or might just have a tablet.

EBONY HAVEN: Well, that's just something for y'all to consider. Remember you have the other recommendations from the council.

STEPHANIE CARMONA: So if we were to do both things on the website design and development is-- do you want the exact amount? 29,500. That was with Gator Works. That was what they proposed. He sent me this proposal. To add the branding on, if we wanted to do the branding that's 5,000. He said about 5,000 so I don't have a proposal for that because we did tell him we would have to come talk to the council. So he said about 5,000. It seems that it's very accurate though because in our emails he said about 30,000 for our website and it was just at that. And then if we wanted to include a

conversion of our documents to plain language that would be another 20,000 about. And that I only spoke to-- it's very hard finding someone that will do it. It's easier to find trainings to train people to do it. This person that I've been in contact with was the executive director of a council in a different state and this is kind of his contract job now. So he has worked with two councils doing this and he worked with one years ago and then he's working with one right now. So he said for a council of our size with our amount of documents it would be about 20,000-dollars.

LAUREN WOMACK: Would we subscribe to where we have them moving in the future he would just do them as they come or is this just retrospect? How does that work?

STEPHANIE CARMONA: So that was also one of my questions. He said that he could, like if there was something that needed to be translated essentially we could hire him to one off to translate-- or convert. That's not translated. I guess that's a better way to put it. Convert it into plain language. He did send me kind of a guide for ways to change wording in order to be more plain language or easy read. But usually it's things like the bylaws that are being converted to plain language or...

EBONY HAVEN: Position papers. Actually, like our state plan can be converted to plain language.

LAUREN WOMACK: I'm thinking that's important with self-determination.

JILL HANO: So what did you mean can be converted? Like would there be like a button that says plain language? Because then too the DD Act is four pages. When like on plain language it's five pages. Which seems a little lacking. So like my question is will it be like offered in both plain language? I don't know the opposite of that.

EBONY HAVEN: Like the original version?

JILL HANO: Yes.

STEPHANIE CARMONA: Yes.

JILL HANO: So would there be a button for a plain language option?

EBONY HAVEN: Yes.

JILL HANO: Okay. Cool. Thank y'all.

ERICK TAYLOR: If we're hiring him how fast would we get started?

EBONY HAVEN: So he said it would take about five months. If we did it together simultaneously it may take a little longer because the person that would help the web designers to put the things in plain language it may take more collaboration with them before we were able to go live with the new website.

ERICK TAYLOR: But this one going to stay up until?

EBONY HAVEN: Yes. This one will still be active and you'll still be able to access it.

JULIE FOSTER HAGAN: If I'm not mistaken they wouldn't be able to start until the new federal fiscal year.

EBONY HAVEN: Right. So this wouldn't start until October 1.

ERICK TAYLOR: Would the page be decrypted and safe and locked and all of that?

LAUREN WOMACK: I know what you're saying.

ERICK TAYLOR: And uploaded and stuff. Doing all that.

EBONY HAVEN: Yes, I'm sure it would. Decrypted. Encrypted. Erick is the computer guy over there.

ERICK TAYLOR: But I'm saying when you got it like that everything that y'all loading that mean nobody can remove something unless they got legal access from the board to let it be removed. Because somebody can hack the page and that's why I was wondering. Somebody could make a dummy page and use it.

HANNAH JENKINS: Yes. The security would be the same because we wouldn't be switching. Gator Works already runs our current website as our host. So we wouldn't be changing that up. It would still be Gator Works creating the new website while this website is running.

LAUREN WOMACK: Did y'all look at any other ones and this is just the one you liked best or you just kind of feeling out?

EBONY HAVEN: Since Gator Works was already the host of our website we decided just to ask them for a proposal. If you guys wanted more proposals that's something we can look into as well.

BRENTON ANDRUS: I will say four, five, six years ago we migrated over to this website that we have now. It's pretty much just--

HANNAH JENKINS: Seven.



BRENTON ANDRUS: So it looks pretty much the same as the old website. It's just a different type of...

LAUREN WOMACK: Coding or whatever.

BRENTON ANDRUS: It looks the same as the other one. We used to use Cold Press something and now we're using Word (inaudible) or something like that.

LAUREN WOMACK: But y'all like the company?

BRENTON ANDRUS: So we vetted other companies. We use Gator Works. That's how we ended up with Gator Works. They gave us the best bang.

LAUREN WOMACK: And y'all are pretty happy with them?

BRENTON ANDRUS: And they've been very responsive when we ask them to do things.

LAUREN WOMACK: And the 100-dollars a month, that will just be so we can kind of bank on 1200 a year to host it.

STEPHANIE CARMONA: That's an administrative cost.

EBONY HAVEN: I think we might have just put that in there. We already pay that. We pay that yearly.

LAUREN WOMACK: Okay. So we won't have to pay that until we move over to the...

EBONY HAVEN: We already pay that.

HANNAH JENKINS: It wouldn't be part of the contractual. That's through administrative cost.

ERICK TAYLOR: I say if they comfortable and they know that we got security on them I say go for it.

LAUREN WOMACK: For seven years that's kind of A long time they proved themselves.

HANNAH JENKINS: They're also a locally owned company.

STEPHANIE CARMONA: They're located in Baton Rouge.

ERICK TAYLOR: Question with this. Are y'all up to date on computers or y'all have any issues with y'all running older computers?

BRENTON ANDRUS: That's a different situation.

HANNAH JENKINS: The state IT.

EBONY HAVEN: You're talking about our personal state?

ERICK TAYLOR: Are y'all running ten?

EBONY HAVEN: Are you talking about Windows?

BRENTON ANDRUS: We're 11 now.

ERICK TAYLOR: I was just wondering because when you do another web page you have to at least be updated

to run the web page.

BRENTON ANDRUS: We're still working on getting our internet to run smoothly in state offices.

ERICK TAYLOR: You got a problem for a while.

BRENTON ANDRUS: Out of internet most of last week.

ERICK TAYLOR: Cause Windows is updating their new software and they don't know what they're doing.

LAUREN WOMACK: Julie, did you have anything?

JULIE FOSTER HAGAN: Do you mind if I do mine really quickly.

LAUREN WOMACK: Before you leave, yeah.

JULIE FOSTER HAGAN: Thinking of other stuff. I do think this is important. But also just something that I'm hearing a lot of and I think is important if you guys want to consider there's a lot of discussion right now around abuse, neglect and exploitation for people with developmental disabilities. I noticed there was something from council about how to file a complaint. And that's part of it. We are trying to do trainings. We can do trainings on our end for providers and for direct support workers and we are doing that. I do think it's important and I hear from folks in the community that it's also important for people with disabilities and family members to also be able to recognize symptoms of abuse and neglect and exploitation to know where to report it, to know what they should expect once they report it because there's lots of questions too around that. What an appropriate investigation should or shouldn't be. And I think that people and families really need to be armed with that information. So if we are looking for training opportunities for people and families I think that's something I'm hearing top of mind from a lot of folks. And I think if we have other opportunities to look at what trainings might be relevant I know that that's something that's out there. So just before I had to leave I did want to make sure I was able to share that as a thought.

And even if you guys did agree and we wanted to partner on some of the things. Like I think it's important to know what are we training the direct support professionals to make sure that it's consistent information. I think that collaboration is probably important. So whoever would contract out with that one

of the things I would want to do is make sure that they're talking with us. You know, under the Department of Health we have adult protective services, not child prospective services. But that access rule I was talking about earlier that's coming out is going to have some additional requirements around collaboration for everyone. But I think it's important that people know that and that the messaging that they know is consistent with messaging we're given. And so not just training, but also the collaborative piece as the curriculum and training is developed.

And the only other thing I did see another recommendation from staff. I just haven't been part of the-- like this is only the one-year review of the five-year plan. And so you can imagine we're just kind of talking about what's in place now. When you're developing a whole other five-year plan, it looks like this one goes through 2026. I think there was a recommendation to maybe contract out and have somebody come in. And I know I've been on a few different committees where they have somebody who kind of specializes in that. Whether it's because you can get people virtually and do Miro boards and see what's more important and just help navigate that I do think that when it comes time to do the five-year plan you guys-- again, I think this was a very productive meeting today but at the same time it's going to take a lot to develop the new five-year plan. And if we want to make sure to hear from folks the idea behind contracting with a group who specializes in that type of facilitation and has the tools might be helpful for everybody. Those are my two 2 cents.

LAUREN WOMACK: You know, when you do your report if you could include anything that y'all are working on or any other collaboration. Because I know for grants and stuff like that it seems like the people that collaborate with the other agencies are the ones that get funding and stuff.

JULIE FOSTER HAGAN: Thank y'all. Any other questions for me before I leave though about other?

LAUREN WOMACK: Any questions?

JULIE FOSTER HAGAN: All right. Sorry. Again, I'm really sorry. It's a medical appointment.

STEPHANIE CARMONA: No, thank you.

LAUREN WOMACK: Thank you for being here.  
Appreciate you.

BRENTON ANDRUS: See you tomorrow, I'm sure.

JULIE FOSTER HAGAN: I will be there.

BRENTON ANDRUS: We will too.

JILL HANO: Whatever y'all are doing tomorrow sounds like fun.

JULIE FOSTER HAGAN: We're going to present the budget. Most of the people on House Appropriations are new. Some people moved off. A lot of new people moved on. And I think it's not until the next week that we go to Senate Finance for the presentation. I don't think that agenda has come out. They give us a heads up it will probably be the 21st is a Thursday morning. But we don't know that. Thank y'all.

JILL HANO: I have a question about the budget Stephanie.

STEPHANIE CARMONA: I can try to answer Jill.

JILL HANO: So okay. I wrote this down on a folder. So we have 182,000-dollars to spend total. And how much did you say upfront we would put for this website redo?

STEPHANIE CARMONA: The website redo would be 29,500.

JILL HANO: Okay. That's not bad.

STEPHANIE CARMONA: So that's for the website redo. If we wanted to do re-branding where they reworked a logo for us that we would own, that they would have formatted for us to do for like emails, letterhead, that kind of thing. That's an additional 5,000. And then if we wanted to do the documents in plain language that is a different contract. But I know it kind of goes together because it's with the website. But that is 20,000.

JILL HANO: I definitely like the plain language. I just know that like I don't want all the funding-- I mean, like in the grand scheme of things 182,000-dollars is going to go quick. And I don't want all the-- I mean, we did take funding out but I don't want to literally put all our eggs in one basket and use a majority of the funding for just one project.

STEPHANIE CARMONA: I understand. I just wanted to, I just did the math really quickly. If we were doing all three of those things including the design,

the re-branding and the documents it would be about 55,000-dollars.

JILL HANO: For everything?

STEPHANIE CARMONA: Yeah. So it would be about 55,000.

JILL HANO: That's not bad.

LAUREN WOMACK: How much stuff do we already have ordered? Like the brochures and like that stuff.

STEPHANIE CARMONA: I just wanted to let you know, Jill, if y'all decided to do the whole website overhaul including the branding and the plain language we would still have 127,000-dollars left. But to answer your question.

JILL HANO: I definitely, not to go all over the map, but I definitely want to use the increase PIP by 10,000.

STEPHANIE CARMONA: So that was the staff recommendation, yes.

JILL HANO: I know that's kind of out of order but I did want to use 10,000 or bump PIP up to 100.

LAUREN WOMACK: How many people were unable to come because of funding? Was it a big group on the waiting list?

JILL HANO: Three.

HANNAH JENKINS: We had a couple alternates that we technically would have space for. There were three of them from the northern region that if we had the funding we would have been able to accept. But even this year without accepting them we're already having to try to make it work through June and it's just super tight.

LAUREN WOMACK: I know that's one thing. We have them in the budget. Could technically we bump it up a little bit more?

STEPHANIE CARMONA: You can put as much as you want.

LAUREN WOMACK: I've never been, but everybody that's been (inaudible). I feel like that really fits with our mission.

JILL HANO: You've never been to Partners?

LAUREN WOMACK: I've never been.

JILL HANO: Oh, my God.

LAUREN WOMACK: But even if we can bump it up a little bit because staff (inaudible). So I don't know

if that could be, if we bump it up if a little bit could help towards that. I know people coming from the north. I don't know. What do y'all think?

EBONY HAVEN: Wait. I'm sorry. What was the question?

LAUREN WOMACK: We were just thinking about adding more to Partners and Policymaking.

HANNAH JENKINS: She was saying she'd do more than the ten. And you were saying y'all wanted to do more than the ten.

EBONY HAVEN: If you wanted to do more than the ten. But if we do more than the ten then I would ask y'all to reconsider the number of participants that you are allowing to be in the program.

LAUREN WOMACK: Yeah. That's what I was thinking that way we can allow more.

BRENTON ANDRUS: Would you lose the magic if you have more?

LAUREN WOMACK: See, I've never been. I don't know.

JILL HANO: Wait. What, Lauren?

LAUREN WOMACK: Sorry. I was trying to get you to speak because you've been staff too at Partners in Policymaking.

JILL HANO: Oh, yeah. No. Just YLF. But PIP, what are the advantages of increasing the funding because like my class was like 15 people and I like it like that.

HANNAH JENKINS: Okay. Well, I believe the council, I would have to look through the things, I believe that our council has said that anything less than 20 we didn't want to continue with the class. So we kind of created a 20 minimum.

JILL HANO: I do remember that.

HANNAH JENKINS: And then that's why we usually try to accept 25 so that gives us a little leeway. And ideally all 25 go to the class and graduate and that's awesome. But usually you lose a little along the way. We had 22 we accepted and we're down to 20. But I know usually I think the magic spot is the 20 to 25 range participant wise. If that answers your question Jill.

ERICK TAYLOR: How long do you stay?

HANNAH JENKINS: It's six sessions. So in January there's Thursday to Saturday. And the other sessions

are Friday to Saturday.

ERICK TAYLOR: Like a week.

BRENTON ANDRUS: A weekend.

HANNAH JENKINS: Six weekends.

BRENTON ANDRUS: Like the national guard. But there are other things that you could potentially look at outside of maybe if we don't increase the class size maybe we can reimburse more for their travel because they don't get full reimbursement of travel. Or, I don't know, one time the coordinator got a bump in pay, more competitive pay. There's things that you could potentially look at.

HANNAH JENKINS: We also have, we've been noticing, which is not an issue this particular year, but most of our national speakers are getting older and getting closer to retirement age. So we of course have that in the very near future we're going to possibly have a lot of new speakers therefore different speaker costs. Most of our speakers have tried to stay as close to what they have been charging us. But as we know we get a new person that wants to come speak on a topic and they might be charging more and that could interfere with whether or not we're able to have them.

LAUREN WOMACK: Would you say 25,000 would be a reasonable increase or would that be too much? I don't know what the budget.

EBONY HAVEN: I mean, do we have to put this in that area?

LAUREN WOMACK: No.

EBONY HAVEN: Our recommendation was to increase it by 10,000. And I think that's based off conversations we had with the PIP coordinator just due to cost and everything. Now like Brenton said, if you guys wanted to increase it a little bit more we can pay the participants more for mileage. That would mean that we could accept more individuals from the north because they are having to travel a little farther so that means that their mileage reimbursement is more. So it's all about what you all want to do. Our recommendation was the 10,000.

ERICK TAYLOR: Is the 10,000 holding us good where we're at?

EBONY HAVEN: Do we feel like bumping this up to 100,000-dollars will be enough to sustain the Partners

classes? Is that what you're asking?

ERICK TAYLOR: Yes.

EBONY HAVEN: Yes. Hannah, do you have anything to add?

HANNAH JENKINS: I think the ten would sustain it as is. And like they mentioned if you were to add additional funding on top of the ten then that would likely be utilized to either assist with instead of 31 cents we might be able to move that up or accept 25 participants instead of 20. A little more cushion.

LAUREN WOMACK: Like Julie was saying I would think having more people would give them more, hopefully more confidence to being on maybe other committees and things like that.

HANNAH JENKINS: And, I mean, it all depends on how the contractor uses the funding. But there's also the opportunity of more marketing for Partners. Specifically towards individuals with developmental disabilities verses just, you know, we usually have a majority of parents. And so that would be something that possibly the coordinator could use additional funds for. Just speaking off the top of my head.

ERICK TAYLOR: A question. Do we have to use (inaudible) or we can do whatever we want?

STEPHANIE CARMONA: You can do whatever you want as long as we spend it.

ERICK TAYLOR: Only if we spend it. And how long do we got before we have to spend?

BRENTON ANDRUS: You have next year to spend it. It will start in October and you have until the following September.

ERICK TAYLOR: We can sleep on it right now.

SPEAKER: No.

BRENTON ANDRUS: This meeting you have to make the decision.

LAUREN WOMACK: I agree that would have been helpful to sleep on it.

ERICK TAYLOR: I mean, where we at now we at this 90,000, right? And the 90,000 is getting 20 people, correct?

SPEAKER: No.

ERICK TAYLOR: They're not?

BRENTON ANDRUS: That's why they need the ten because of the cost increase.



EBONY HAVEN: You have to think since the pandemic like costs for hotel rooms. Well, we're on the state. But like the meeting rooms, the food costs, all of those--

ERICK TAYLOR: We're paying for the food? We're paying for all that?

EBONY HAVEN: Yes.

BRENTON ANDRUS: Yeah. We're housing you. We're feeding you. We're training you.

EBONY HAVEN: This is a training initiative.

BRENTON ANDRUS: We're flying people in from out of the state.

LAUREN WOMACK: It's just keeping us as is. If we want to grow it you're saying we might have to add a little bit more than 10,000.

ERICK TAYLOR: I get it now. I think we need that. Covid and all that stuff. Yeah, I understand.

LAUREN WOMACK: Melinda, what do you think over there?

MELINDA PERRODIN: I agree with increasing the cost. You have people that's driving in from different areas in the state to go to this training. I think that would be a great idea and it fits the council mission, this training. So we need to invest more money into it.

LAUREN WOMACK: What do you think, the ten or?

MELINDA PERRODIN: I would probably say anywhere from 10 to 20.

LAUREN WOMACK: That's what I was thinking. Erick, what you thinking? Come back to me?

ERICK TAYLOR: I say 10 to 15.

LAUREN WOMACK: Okay. Brooke, Jill? What y'all thinking?

JILL HANO: Sorry, Brooke. You can go.

BROOKE STEWART: I agree with increasing.

LAUREN WOMACK: Okay. Brooke, you've gone to it, correct?

BROOKE STEWART: Gone to?

LAUREN WOMACK: Partners in Policymaking.

BROOKE STEWART: No.

LAUREN WOMACK: Oh, okay.

BRENTON ANDRUS: Jill's been.

HANNAH JENKINS: Pasqual's also a recent graduate. And she says I agree with increase.

JILL HANO: I have a question for the staff. And I don't know how to say this because y'all recommend on the paper it says y'all wanted to increase to 100,000 but that doesn't include what y'all are saying now. Like at this very moment do y'all recommend us giving more than 10,000-dollars? Ebony?

EBONY HAVEN: I would say based on the conversations that we've had with the coordinator Rebecca Fruge I think the 10,000-dollars would be sufficient to cover the inflated costs. Now if you guys want to look at increasing the mileage reimbursement, if y'all want to look at paying the coordinator more than yeah, you want to put more money towards it. But due to the things that we listed on the status report our staff recommends that 10,000-dollars will be to cover the inflated costs for hotel expenses, for travel, for reimbursement costs. All of those types of things. So if you guys want to add more funding that's fine. That's just what we were recommending.

JILL HANO: Okay. And I'm sorry. I didn't mean to put anyone on the spot.

HANNAH JENKINS: No. It was a good question. I think the ten in our mind was like that's a minimum we need to continue operating as status quo.

JILL HANO: Okay. I see what you're saying.

HANNAH JENKINS: But yeah. I can guarantee if the contractor was on this meeting they would definitely be 100 percent behind all increases. I can say that, I don't know exactly how many years, but I know our coordinator has been paid the salary for the coordinator, I believe has been the same maybe ten years, maybe longer.

STEPHANIE CARMONA: Probably at least five because they haven't had an increase in five years.

HANNAH JENKINS: At least five years, possibly longer that the coordinator salary has been the same, for instance. So the money would not be wasted if you went above ten.

LAUREN WOMACK: Brenton, did you want to say something?

BRENTON ANDRUS: I was mostly going to say in line of what Hannah mentioned. Just doing LaCAN over the years I have had to increase the leader pay. So part

of it is offering incentives whenever I can. And part of it is increasing salaries to whatever I can afford to pay. Mostly because you want to-- these positions are different. I don't want to say be competitive because the nature of this position you can't necessarily be competitive. It's not like your typical jobs that you might find at a different organization elsewhere. But for people that are doing the work that are putting in the time that's required you want to have some sort of comparable pay for that. And one of the things we've been trying to do with LaCAN is start giving better monthly wages. So not as much focus on the incentive pay at the end of the year, whatever's leftover try to send it out to them, but more (inaudible). And at least for Partners, right, I don't know how long, it's not my contract, I don't know how long she's had that salary for the coordinator. That sounds about, at least what I've always known. I've been here over eight years. So it seems like, I don't know, a bump would be in order. I think she's doing a good job.

HANNAH JENKINS: I did have one other. I just looked at the national, what they encourage for the class size. They say they encourage you to have a class size of 35 and hoping they end with 30 by graduation. Obviously we've been closer to the 20, 25 range but it does sound like nationally you could scooch it up a smidge.

LAUREN WOMACK: I would be happy doing 25. What number y'all think?

ERICK TAYLOR: I'll second it.

MELINDA PERRODIN: I agree with 25.

LAUREN WOMACK: Brooke, Jill, what number y'all thinking of?

STEPHANIE CARMONA: Just my understanding. Is it increasing the amount 25,000 or is it increasing the amount of people?

LAUREN WOMACK: No. I think we were just saying the budget.

STEPHANIE CARMONA: Just wanted to make sure I understood.

BROOKE STEWART: I'm good with going for the ten and then whatever y'all think to increase for the salary of the, is it the leader?

SPEAKER: Coordinator.

LAUREN WOMACK: Do we need to figure that out too or is that something we can address later with that extra allocation?

BRENTON ANDRUS: We can work within whatever you sign.

LAUREN WOMACK: So Brooke y'all are okay with going up 25,000 or is that too much or too little?

BROOKE STEWART: I'm good with it. We have to spend money somewhere.

LAUREN WOMACK: Okay. Good.

EBONY HAVEN: Y'all are at 157.

LAUREN WOMACK: All right. I'm down with the website.

STEPHANIE CARMONA: I don't remember where we were putting that Ebony. Was it in 1.1? I don't remember. I'm sorry.

EBONY HAVEN: Yeah. I mean, it doesn't have to go in 1.1.6.

STEPHANIE CARMONA: So does that mean we just attach money to it, we don't write a new one? Okay. And would it be for both things?

LAUREN WOMACK: Or three things.

STEPHANIE CARMONA: All three. I just want to make sure I understand too.

EBONY HAVEN: As long as your committee, if that's what they're recommending to the council yes, they want to do all three whenever we are introducing this to the council in April we have to make sure that we explain that that's what that funding is including the branding, the website.

LAUREN WOMACK: If we have stuff we have to throw away but that's part of re-branding. You know what I'm saying. Or if we could use like the pens and the stuff that we already have. I just didn't know how much we already had of that stuff.

BRENTON ANDRUS: It's not as much as you think because we don't have as much council. We had a lot of LaCAN stuff but we're not really looking at that. Some LaCAN things like our brochures, we have a bunch of those, it might still have the old council logo but we can work with that.

LAUREN WOMACK: That's true.

LAUREN WOMACK: Jill.

JILL HANO: Sorry. My bad.

LAUREN WOMACK: All right. So everybody good with the website and the branding? Erick, you good with that?

ERICK TAYLOR: Yeah. I'm good with it.

LAUREN WOMACK: All right.

STEPHANIE CARMONA: So for the amount do you want it to be like I added it up and I got 54,500. Is that the amount we want to allocate or do we want to say 55,000? I'm thinking we maybe round it up.

ERICK TAYLOR: What was your total?

STEPHANIE CARMONA: My total was 54,500. But, I mean, at this point 500-dollars is nothing.

ERICK TAYLOR: How much would they go above? Negotiate with us?

STEPHANIE CARMONA: I don't know. I can say that for the website this proposal is active for 30 days. I don't see us really negotiating this. For the branding there's probably going to be a little bit of negotiation just to talk about what it is that the council wants with that logo and their branding. And then as far as the documents that's just an estimated cost because, you know...

ERICK TAYLOR: I mean, if that's going to cost the board right at where we're at we don't want to go too much up and we don't want to go too much down. We want to be fair with them. Because we put this on the table well, why they dropping this on the table. We locked that way.

BRENTON ANDRUS: Question for clarity. The proposal was good for 30 days with them also knowing the work doesn't start till October? Like that's to lock it in.

STEPHANIE CARMONA: Yeah. I believe so. And that's just what it says on the proposal. They seemed very interested. And I'm sure that even...

BRENTON ANDRUS: Yeah. I don't think they like our website either.

STEPHANIE CARMONA: He actually was the one that suggested that he send a proposal. He was like oh, would it help if I sent you a proposal that you could give to your committee.

EBONY HAVEN: I don't think that the proposal would change just because I don't think our website would

change that much from now to October when they would actually start.

STEPHANIE CARMONA: Correct.

ERICK TAYLOR: We don't want them to say okay, they're working with this. If they want to change something is we going to be knowing if they want to add tweaks somewhere or try to put something else on the table?

STEPHANIE CARMONA: From what I understand, like for the website proposal, everything is already included. So even if we wanted to tweak something that price is already included when we want to meet with them.

ERICK TAYLOR: How much would we have to put down to just lock it in what they want to do? I mean, what we want to do.

EBONY HAVEN: I think the contract will be set up where we make payments based off-- and I think that's in the proposal. I think he said it would have to be like...

STEPHANIE CARMONA: After every milestone kind of thing. I don't remember.

EBONY HAVEN: Or it might be fee for service type contract where they get paid a set amount every month.

ERICK TAYLOR: I understand. But how much would we have to put down for them to even start?

EBONY HAVEN: We can't set up our contracts like that. It either has to be fee for service where we pay them a certain amount of money or they do the work and we reimburse them.

ERICK TAYLOR: Okay. Got you.

EBONY HAVEN: We can't put anything down.

LAUREN WOMACK: So we're going to do even 55,000?

ERICK TAYLOR: I'm good.

LAUREN WOMACK: Okay. Anybody object?

SPEAKER: I don't think you have a quorum.

STEPHANIE CARMONA: We're one short of a quorum. It's not an official vote, right. Right now it's just a discussion.

LAUREN WOMACK: Is there anything you would like to add to the website discussion?

MELINDA PERRODIN: No. I'm in total agreement with the website.

LAUREN WOMACK: All right. We got that one.

STEPHANIE CARMONA: The only other, it's not contractual-- or are we still just going to talk contractual? It's just to add these two objectives. I just knew we were in goal one so that's why I wanted to ask. So we also have the council recommendations and the recommendations for activities.

LAUREN WOMACK: All right. Julie was talking about the foster parent training. And Brooke was interested in doing the first responder training with the medical stuff. Is that the emergency room?

STEPHANIE CARMONA: Yes. And that one is under goal two.

LAUREN WOMACK: Okay.

STEPHANIE CARMONA: I thought she said OCDD does that already.

LAUREN WOMACK: Right. I don't know if we would allocate funds for that.

EBONY HAVEN: She was talking about collaborating with them about abuse, neglect and exploitation training.

LAUREN WOMACK: But she did say there was some kind of foster.

HANNAH JENKINS: I went to a DCFS meeting with the new secretary and that was brought up and they said they are already working on an initiative specifically for helping train foster parents.

EBONY HAVEN: And Julie said OCDD's resource center provides general training for foster parents but if they need individual counsel they can also provide that as well. So I don't know if the council would want to duplicate those.

ERICK TAYLOR: They got so many services out there that's providing that. There's no need for the council to do something that's duplicating.

LAUREN WOMACK: Have y'all ever just had like a staff member or LaCAN volunteer to be on like collaborating efforts like that? I know they all overlap.

BRENTON ANDRUS: So, for instance, one of the activities is dealing with women's health that we collaborate with that office to make sure that they have materials. I forget the whole initiative but essentially materials for the disability community. So we have activities like that where it just says we

would collaborate or something. And that could be something as simple as sharing information whenever it comes up. Or full-blown collaboration of some kind. Just sometimes you get what you get with those initiatives because you may want to collaborate or research or do something and you might hit a dead end. Like maybe there isn't something to collaborate on or maybe there isn't something to share. Like in the instance with the women's health initiative. That office has been in turmoil and transition since it was created. Kind of difficult to do anything with them. But it's not outside of the realm of possibility.

LAUREN WOMACK: Is Pasqual the nurse? Or that was Samantha. I know she had talked about doing some type of training for emergency room staff.

BRENTON ANDRUS: And that would be one if y'all decide to do it you'd just have to put an SOP out there to see who could do it. You'd probably run into some of the same barriers that you have with first responders. How do you get a lot of people in the training if they're, you know, if you're working nights are you going to go to a day training. We would have to find the right provider to be able to do that. That's where the SOP would come in to see who was interested.

LAUREN WOMACK: Have y'all ever done in the past SOP? That's what it's called?

BRENTON ANDRUS: Solicitation of proposals.

LAUREN WOMACK: Have y'all ever done like exploratory studies or anything to see like what the consensus is? I know we do our own like what needs.

BRENTON ANDRUS: Right. You know, not outside of attending public meetings to share your feedback.

LAUREN WOMACK: Just trying to wrap my head around other stuff besides just coming up with a training and hoping. Like throwing it against the wall and hoping.

BRENTON ANDRUS: Yeah. I don't remember the one thing I was thinking of. This would have been helpful if Patti was here today. We used to have a healthcare module that we contracted many years ago before I even got here with LSU Human Development Center I think, maybe some other folks, where they created these healthcare modules. You could get CEUs for it at the time. And I don't know how long it took to develop any



of this. This is before my time. But it was almost like this curriculum that was developed and so, I don't know, it's not necessarily targeted towards emergency room staff, but just medical professionals, could take this training. It talked about various disability related topics. Depending on what your title was or what your degree was, whatever it may be you might have got a CEU for it. The problem with those is you create it but it's outdated. It has to keep being updated. So we had it for a while. We shared it for a while. And I guess like five years ago it came off of our plan because it got to the point where it was too outdated to be able to get CEUs so not many people were watching it all that much anymore. That might be an option. But again, we don't have information to tell you how to do that other than figure it out. But I'm wondering if something like that may have been more feasible for the emergency room type initiatives to at least that way this could be-- and you're also looking at probably a year or two of development. So it wouldn't be an immediate training that just happens. But almost like this curriculum that you could then watch virtually or something on your own time and get credits for.

LAUREN WOMACK: All right. So how much more money do we have to spend?

EBONY HAVEN: 102.

LAUREN WOMACK: I think we're just on one and two, correct? The ones at the top. My suggestion was the ABLE accounts but I know they're still working on that. Put me in touch with the group that's working on it. So I don't know how much we would want to promote it if they're still working out the kinks.

STEPHANIE CARMONA: Just to go back to our checklist. We did have a check for each of our activities that we wanted to do for that goal. On goal two we have the first three. And then on a couple other under goal two. So we could potentially try to add an activity that goes with those if there's something that y'all are interested in looking at.

LAUREN WOMACK: Is the increase access to primary and specialist providers for people on Medicaid and LACHIP. Do you know if that was a suggestion?

JILL HANO: I can't see the entire document. Can y'all minimize it a tad.

EBONY HAVEN: Yeah. I can Jill. Hold on one second. Is that better?

JILL HANO: A little to your left.

EBONY HAVEN: I don't think I can slide it to the left.

JILL HANO: Okay. Then it's perfect. Thank you.

LAUREN WOMACK: Under objective 2.1 where it says increase access to primary and special ed providers.

EBONY HAVEN: Brenton, she's on this checklist to determine like that we haven't touched on the objective.

BRENTON ANDRUS: I will say that's something that comes up.

LAUREN WOMACK: Quite a bit.

BRENTON ANDRUS: A lot whenever we're looking at agenda items. As far as conversations in the past whenever it's come up at council meetings or in the plan. I mean, some of it is access, making sure that it's covered. I'm thinking more I guess from a rural standpoint. So we hear from a lot of people if you do not live in the city you do not have access to these specialists and you have a long ways to drive. The conversation has always been how do you get these people to set up shop in rural areas. How do you provide them some sort of incentive. That's the age-old question.

LAUREN WOMACK: And I hear from like my clients too there's a lot that don't take Medicaid.

BRENTON ANDRUS: Right.

LAUREN WOMACK: I kind of was looking at that issue. I wonder if we could do something or contract out through Medicaid or something to get the providers that take Medicaid and give them some kind of resource that maybe we might be able to give them. Like one amount to do the big and then like a supplement amount every year to like pull out the ones that aren't in there anymore and add new ones so that you can look up if you need a pediatricist you could look up a pediatricist, see where they are and if they're covered by Medicaid. I know you can always call the back of your card.

BRENTON ANDRUS: Yeah. I think the complicated part we did have something one year about having this website that would list all of the providers and that's

a major task to take on. But also the upkeep of it.

LAUREN WOMACK: Yeah. That's what I was saying. We would have to contract.

BRENTON ANDRUS: Look at the contract of someone to do it, but then you have to continue this contract forever, indefinitely to make sure that it stays updated. Unless you can convince the department or someone to just take it on. At that point they might say call the back of the card. But I know at least from medical friends that I've talked to it's complicated to get reimbursed by Medicaid when they're not reimbursing you enough. So there's no incentive to accept Medicaid. Not sure how you address that.

ERICK TAYLOR: I had a situation going on. I went to a doctor's appointment and my doctor she said she no longer takes Medicaid because she was not with the state through Medicaid. They go through so much with Medicaid because they want you to take the lowest price with the doctor. And the doctors that only take Medicaid can't stay alive because they can't keep their business open because they want the lowest price.

LAUREN WOMACK: Was just trying to see if that's something that we can use funding for.

STEPHANIE CARMONA: This one would also be-- I know the recommendation from Julie was the exploitation kind of thing. There is, like at the top of the next page under the same objective is increased access to, I would think it would probably be under this, but increased access to sexual reproductive health services. But also like preventive. And I might be off by saying that. I'm not sure. But I think it would probably fall into at least that section of the goal.

LAUREN WOMACK: Okay. No, I know the sexual and reproductive come up a lot since I've been on the council. Have y'all ever had a contract with that?

BRENTON ANDRUS: Yes. In a way. So it was healthy relationships. Some sexual education health type information. Some information about abuse, exploitation. That was actually one of the trainings I had mentioned earlier where you would have a self-advocate training, a parent, family, caregiver training. And then there would also be a portion where they would be with other. It was very successful, the

training was. That ran oh, gosh, probably four or five years we had that initiative in place.

LAUREN WOMACK: Do you know how much funding by any chance?

BRENTON ANDRUS: The number I have in my head I don't want to say it because it might be wrong. But I should still have the files. I shouldn't have turned off my computer. It was done by Team Dynamics.

LAUREN WOMACK: I think they do a lot of the DCFS.

EBONY HAVEN: That was for FY 2019, that action plan. It was 27,900.

BRENTON ANDRUS: Okay. Was that our last year?

EBONY HAVEN: I don't know. I'll go back to 2020. I couldn't remember when it stopped.

STEPHANIE CARMONA: It's not in this current five-year activities.

EBONY HAVEN: So that was the last.

BRENTON ANDRUS: Because it was throughout our five-year plan, the very first five-year plan whenever I got here.

EBONY HAVEN: Okay. So FY 2020 which would have been October 21. October 19 to 20 it was 32,000. So that's the max it got to was 32,000. Are you talking about the exploitation training that Julie was mentioning and abuse, that training?

LAUREN WOMACK: That along with just sexual.

EBONY HAVEN: Reproductive health services. Yeah, I'm not sure if those things tie together. It may fit better under another goal. Let me look.

STEPHANIE CARMONA: It might fit better under activity goal one.

EBONY HAVEN: Yeah. There's voting. Individuals with disability of all ages will have access to opportunities to increase their awareness and knowledge about exploitation prevention. So I think that would fall better under goal one if y'all wanted to create a training in collaboration with LDH about abuse, neglect and exploitation. It's not specific to sexual abuse like this particular training was that Brenton mentioned. It's abuse in general. Exploitation and neglect.

ERICK TAYLOR: Where are we at?

EBONY HAVEN: So we're creating new activities that y'all were just considering the recommendations that

were given to you by the council, by Julie.

ERICK TAYLOR: When did y'all give us that, January?

EBONY HAVEN: It is this one right here, Erick. If you want to look at the recommendations for the planning committee. Recommendations for the planning committee, that page. It should be in your packet. Also, the one that we're talking about right now Julie just gave us that one as she was leaving so that one won't be on the page.

ERICK TAYLOR: So I'm just asking questions. I notice to the board members, whoever can answer the question, but I notice we been trying to work on this so much about abuse and neglect. That's something that the board wants to work on, if I'm making any sense.

EBONY HAVEN: This was just a recommendation based off the information Julie has been receiving from her stakeholders groups. She said a lot of families need training on how to recognize abuse and neglect and like the steps in order to prevent those things from happening.

BRENTON ANDRUS: I get a lot of calls about it.

EBONY HAVEN: Yeah. They get a lot of calls about abuse and neglect.

BRENTON ANDRUS: I would say I probably get two or three of them a month or so.

ERICK TAYLOR: Wow.

BRENTON ANDRUS: Just a where to go. Who to call kind of thing.

ERICK TAYLOR: Wow. Okay.

LAUREN WOMACK: Yeah. I propose that we look into that. Maybe open an SOP.

ERICK TAYLOR: Can I ask this to any one of the workers. Do y'all get a lot of calls about suicide?

STEPHANIE CARMONA: I don't.

BRENTON ANDRUS: I don't.

ERICK TAYLOR: That's a high thing that's going on. You don't know who you're talking to and they might be crying out for help but it's a lot of it. Which it's sad but there's a lot of it going on. Just throwing it out there. I think we need to work on that.

STEPHANIE CARMONA: You want to add an activity to work with OCDD?

EBONY HAVEN: I'm going to create one and then you

all just tell me if you don't like this particular wording.

ERICK TAYLOR: Can we create on the website page that we're doing, would we be out of line, can we create a website where if somebody did come to y'all?

REEKESHA BRANCH: A suicide hotline?

ERICK TAYLOR: Abuse hotline.

BRENTON ANDRUS: Honestly, it is probably on the website under our resources tab. But there is a lot of stuff on our website.

LAUREN WOMACK: And it's probably very underreported like he said because people with disabilities, especially people with waivers might be isolated. Could we add work in conjunction with Julie's OCDD? Did anybody get to read Patti's suggestions? I know she wasn't able to be here. She had suggested some trainings.

EBONY HAVEN: Before moving on can y'all dedicate money towards-- if everybody's in agreement we can dedicate money. Remember you guys have 102,000-dollars left to spend. Before we move on to Patti's we can maybe allocate some of that funding that you all had left to this one.

LAUREN WOMACK: Okay. I would say 50,000.

EBONY HAVEN: So Lauren's suggestion is 50,000 for this particular initiative. Is everybody in agreement?

LAUREN WOMACK: Jill and Brooke, could y'all maybe speak to if you think that is too low or too high for that specific initiative.

BROOKE STEWART: Can you name the initiative again.

LAUREN WOMACK: Provide financial support, technical assistance in collaboration with OCDD to educate and train individuals with intellectual and developmental disabilities on abuse, neglect and exploitation. And I guess how to report it.

JILL HANO: How much was it in 2018 Ebony?

EBONY HAVEN: We just found out that it ended at 32,000. And that might have been specific to Team Dynamics which y'all were contracting with.

JILL HANO: Wait. What?

EBONY HAVEN: That might have been very specific to Team Dynamics, the contractor that y'all were using for that particular initiative.

JILL HANO: Okay. Got it.

BROOKE STEWART: I'm good with that. That price tag on there.

JILL HANO: Me too.

EBONY HAVEN: So y'all have 52,000-dollars left.

LAUREN WOMACK: Is there anything that we could do like explore like the different learning platforms for survey systems and subscriptions?

EBONY HAVEN: The LMS platform?

LAUREN WOMACK: Yeah. Because if we have a lot of these training things. Somebody also mentioned something-- I feel like we keep coming over and over.

EBONY HAVEN: Which one?

LAUREN WOMACK: Some kind of training platform that might just be a little bit different. She was saying a training for disabilities on how to file, explain, document, the process. Provider trainings on system allegation report. Explore platforms and see if these would even be able to be used as tools. That Families Helping Families could send out anonymous surveys and see. Because I know that we do our rating system but we may have more input if people can get on the website and just do like a poll or something.

EBONY HAVEN: Are you referring to like our advocacy agenda, how we get to that or?

LAUREN WOMACK: Yeah. Just looking at these different technology tools to see if they would be something that we can start using for trainings and to get feedback from the public on what things we should be addressing.

EBONY HAVEN: So I know we did have a subscription to Survey Monkey. I'm not sure if we're still active or not. But we've done Survey Monkey before, not specifically to what you're saying, but I don't know if we would need-- do you remember how much the Survey Monkey subscription was? I don't know if we would need 52,000-dollars or however much y'all would want to allocate towards.

LAUREN WOMACK: No. Just a little bit to look into different platforms and things like that. That might not even be a money thing.

JILL HANO: Dues and subscriptions are handled in-house.

LAUREN WOMACK: Say that one more time, Jill.

JILL HANO: Dues and subscriptions would be handled

in-house.

EBONY HAVEN: So that's what I'm saying. I don't think this is something that we could put like contractual money towards.

LAUREN WOMACK: Okay.

ERICK TAYLOR: What is the money we got to basically use or target?

LAUREN WOMACK: Our goals and objectives. Brooke.

BROOKE STEWART: I wanted to ask so we have 50,000-dollars left. Is it totally off the table for the training that we removed earlier?

LAUREN WOMACK: The 2.2?

BROOKE STEWART: Yeah. The first responder. Is that totally off the table?

LAUREN WOMACK: I mean, if we can't think of anything else to use it for I guess we could put it back on.

BROOKE STEWART: I understand it won't be as much money as it was but maybe we can just have like less trainings but at least have some trainings.

BRENTON ANDRUS: I mean, if you do less trainings you look at the possibility of not statewide coverage. Just looking at certain individual places. I mean, if you want my honest recommendation I think that initiative has run its course.

BROOKE STEWART: Okay.

BRENTON ANDRUS: I'm not saying that the need isn't there. It sounds like there may have been some other things at play that maybe we need to see where that legislation is at and what's actually going to happen. Because I'll tell you I'm actually really worried like we're at this point right now we don't have trainings scheduled for this initiative. And so I don't know if that's indicative of a slowdown. We did cover 1400 people over the last four, five years. That's a good bit of officers and EMTs and firefighters trained. So did we train everyone that's interested or I don't know. It's hard to say but I'd hate for y'all to put a whole lot of money towards something that you're not getting maybe the full effect of what you're looking for. It's also been hard to pin down what change has actually come out of these trainings. Like we don't have the data to support a decrease in arrests or what are those policy changes, things like that. I know



that's a question we had last year. But to be fair, I really like the trainer. He's a great guy. If he's still around I don't mind working with him.

BROOKE STEWART: And did we already add money to the LaCAN option? I know we were exploring that.

BRENTON ANDRUS: Y'all added to Partners today. We added to LaCAN last year though. We bumped up LaCAN last year.

LAUREN WOMACK: We can do that again?

BRENTON ANDRUS: It starts getting complicated if you go higher with LaCAN. I forget all the rules behind it but you start hitting a cap with the funding.

MELINDA PERRODIN: Do we look at the overall budget to see like what areas we did so far. Because I don't think we covered anything in education.

BRENTON ANDRUS: Goal three is empty this current year too.

STEPHANIE CARMONA: Contractual wise the only activity we had in goal three was that education and employment that y'all decided that y'all are discontinuing. For the recommendations from the council they did give a couple recommendations. The first one I think the training on the procedure on how to file a formal complaint had to do with the special education audit that came out. Kind of going back to what was said earlier about any kind of trainings really, I believe that probably FHF would have a similar training to this. Because that has changed, and I don't know for certain, I don't know what their trainings look like. But I feel like they would come out with a training for this.

On the fetal alcohol spectrum disorder awareness could be something that we look at. But just to talk on the last two, the one that says objective 3.2 speaking with the chambers of commerce, we've done that already. We worked with the chambers of commerce for, I don't even remember how many years. Let me look because I don't want to say the wrong thing. We worked with them for two fiscal years. It was part of our five-year plan, one of the activities, provide financial support to conduct seminars with the chambers of commerce throughout the state on the benefits of hiring people with developmental disabilities. So we did it for 2022. Fiscal year 2022 and fiscal year

2023. This fiscal year, kind of like what we talked about with the videos, we can still push those out. We do have them recorded.

MELINDA PERRODIN: I remember you mentioning you really don't have anything for it. Is it possible to look into getting a contract for early childhood? Maybe that could be some funding. Maybe look into Early Step. Because I know Early Step does a lot of consulting work. Maybe, you know, some early childhood for students with disabilities because I know that was an area that y'all identified that needed to be addressed.

LAUREN WOMACK: I'm sorry. Go back. About the accessible sexual education. It ended. So if we wanted to do like a new training, the training y'all had did not work out well or?

BRENTON ANDRUS: So the one that we did in the past was you had to be 18 or older. I know some of the focus of what the council has talked about over the last year has been more school age. This one was more focused on adults. Because again, we're looking at that self-determination aspect. We're looking at the healthy relationship component. There was exploitation, not just sexual exploitation, but other types of exploitation. But also sticking with adults whenever you talk about sexual education for children it gets complicated for parents because you're trying to teach something that may or may not align with what that parent thinks about. So at that time the contractor did not offer, and I don't know if they do now, but they did not offer training for anyone under the age of 18.

LAUREN WOMACK: Because personally that was hard with having a disability, you know. It's harder to have those conversations with parents and parents might be afraid, you know, how do I explain this in a way my child or even adult child that they respect themselves where they don't get taken advantage of but they do have a choice. It's probably really a tricky subject.

STEPHANIE CARMONA: To go with that I did some research. I reached out to two, it was actually three councils, that had a similar activity on our plan within the past five years. One of the councils said that this was received very well. That council, I

think, was like California. Very progressive. So it was received very well. And another council, I don't remember which one it was, said that they really didn't get a lot of people, participants for this. I also reached out to two like curriculum writers, I guess, that have curriculum for this. So one, a contractor, I got some information. They do a wide variety of trainings. The thing is it is just curriculum. So if it were something that, or at least for the two that I looked at that I could find even something accessible for these school-age children with intellectual and developmental disabilities, for it to be accessible it was more of a curriculum that you would pick. So this one contractor has a couple different curriculums. They have one for parents in order to speak to their children about sexual education. They have one that's geared more towards high school. I think she said like 15 and up was what it was geared towards. And then they also have other ones like building healthy relationships. They have one specifically for people with high support needs. But there is a bunch of lessons involved in it. And there's not a trainer, I guess is what I'm trying to say. It is just the curriculum. So if this is something that you're, and this is kind of what I put here, if this is something that you want to continue it's going to need to be with either someone that will do the training and has the curriculum or you'll have to try to get someone to be trained on the curriculum to then turn around and provide this training. So either way some kind of funding would have to be allocated for that.

LAUREN WOMACK: I have to use the restroom real quick but I'm liking Melinda's idea about the Early Steps. Melinda, do you want to maybe.

ERICK TAYLOR: Let's look into Early Steps. Get something started with that. That's a good idea and I think that will work real good.

MELINDA PERRODIN: Have y'all ever looked into, this is just a suggestion, that will probably help cover employment and education. Like have some type of job fair and post-secondary education combining together like for high school students. Like the ones that are interested in attending the UL Life Program. You know, or those that want to do (inaudible). Have

y'all ever considered doing some type of outreach where you put all that together?

STEPHANIE CARMONA: We have not in that capacity. I will say that YLF has a day where they get, like they don't have employers, but they have LRS come. They also have LAPIE which is Louisiana Post-Secondary Inclusive Education. So they are also there as well as some other organizations. And the delegates at YLF are able to learn about those things. And YLF is specifically for high school students. Another thing that when I spoke to Melissa at LRC or LRS she said that they do a virtual job fair every year. And speaking with her and her staff they are going to send that information once it's planned so that way we can also push it out to everybody. So if anybody wanted to attend that virtual job fair.

ERICK TAYLOR: Have y'all ever thought about doing something with high school students with disabilities transferring them over getting them ready to go to college?

STEPHANIE CARMONA: We did.

ERICK TAYLOR: How did that work out?

STEPHANIE CARMONA: We have a couple I want to say we have like nine post-secondary inclusive education schools.

ERICK TAYLOR: Can we put more funding towards that?

EBONY HAVEN: Programs.

BRENTON ANDRUS: We got legislation passed to establish in law essentially what we were doing via the council so I think we can put more money. I think we would have to advocate for more money within that fund that we had created. But we've already kind of established in law. We had the post-secondary inclusive education committee, what did they call themselves?

STEPHANIE CARMONA: Advisory council.

BRENTON ANDRUS: Well, that's what it is in legislation. I don't remember what it was. Was that what we called it?

EBONY HAVEN: Oh, the alliance.

BRENTON ANDRUS: The alliance whenever we were doing it. Now it's an advisory council that is in state law.

ERICK TAYLOR: So we can't put nothing towards that?

BRENTON ANDRUS: I mean, you can't put anything in that fund. I don't know what else, I don't know what you would contract with because that council is kind of supposed to be doing what the alliance was doing to some extent. I'm not sure how you would go about repeating that particular initiative.

ERICK TAYLOR: Why we can't look into the Early Steps?

BRENTON ANDRUS: We can.

STEPHANIE CARMONA: It was just one of the things that for goal three, I believe Melinda was saying that-- I'm sorry. I don't remember. I know it had to do with Early Steps.

MELINDA PERRODIN: I know that one of the areas we had brought up was early childhood so that's why I made a suggestion maybe to look into getting a contract with Early Steps. Because I know Early Steps provides trainings and they do consultant work or whatever. Because I know it was said that the council needed to address early childhood. So I was just giving a suggestion how to do this.

REEKESHA BRANCH: So possibly contract with Early Steps.

BRENTON ANDRUS: One of things though, so when you're creating new initiatives you're going to have to kind of detail what exactly you want done. At least enough to know-- because some of this is wording also. Yes, we want to contract with Early Steps. Well, what are they doing, how do we word it in the plan and have enough information that we can put in an SOP to say what we want to do. Because if we just say we want to contract with Early Steps or we want do something post-secondary education, or we want to abuse and exploitation or whatever it is and we leave it at that we can't move forward.

LAUREN WOMACK: Right. Because it's not a goal.

BRENTON ANDRUS: We don't know what it is. We don't have a planned activity around it. So that's what you have to do here is really kind of fine tune what it is that you want to accomplish out of that area so we can word it such a way we know exactly what we need to do.

ERICK TAYLOR: What do we have on the table that we can put some more funding in where we can spend some of this money that we have?

LAUREN WOMACK: Technically we could go back to the other ones that we took the money out of. That's one suggestion.

ERICK TAYLOR: But we're not getting (inaudible)

LAUREN WOMACK: Yeah. I don't agree with that either. I'm just saying it's technically one of the things we could do.

EBONY HAVEN: I would maybe stick with Melinda's suggestion because we don't have anything. We don't have any contractual activities in education or employment right now.

LAUREN WOMACK: Okay. I'm sorry. Brooke.

BROOKE STEWART: I was just going to comment on the Early Steps. I wanted to know would the fetal alcohol syndrome fall into the Early Steps. I can't remember what all Dr. Wilson, I believe, was talking about with that. If we go that way maybe we can go into the fetal alcohol thing that he wanted to address if we do Early Steps. But I'm not opposed to doing education.

EBONY HAVEN: I think with the fetal alcohol spectrum disorder he wants to bring more awareness. And so I don't know if you all would want to look into like training families of Early Steps on how to recognize the signs of fetal alcohol spectrum disorder. I guess that's something that we can look into collaborating with the Human Development Center on. And I have a meeting with them, I have a meeting with the network later this month and Phil organized the meeting so he wanted to discuss that particular item so that's something that you guys could look into.

BROOKE STEWART: I just brought it up because he talked a lot about like us and the partnership between the HDC. Like LADDC and HDC's partnership. So I was like maybe this is an opportunity to like have a stronger partnership with HDC since we do have these extra funds.

BRENTON ANDRUS: In that instance I don't know what they need and we're certainly not going to know that right now. We could do something to the extent of just collaborating with Human Development Center on their work to bring awareness around fetal alcohol. And if

you want to look at funding we can just come up with an arbitrary number and that is what we can tell Phil, this is what we have to help with our collaborations.

BROOKE STEWART: That sounds good to me.

EBONY HAVEN: I'm trying to determine what goal it would fit under.

BRENTON ANDRUS: It could be all of them. So let's say if you put it in goal three. We don't have a whole lot of stuff going on for education. Part of the collaboration that we would want to do with them is can we focus more on the education side of things. What is their plan as far as outreach and what they're trying to do to bring awareness. Where can we collaborate when they're focusing on the education aspect or the school side of things. Or you can put it under two.

LAUREN WOMACK: Maybe we could do training to pediatric, like pediatricians for fetal alcohol syndrome or partnering with-- it's hard when you don't really see.

BRENTON ANDRUS: Safe bet might be to have it under goal two as opposed to three because you can write it generic enough where it talks about the collaboration with them on their campaign for awareness. And then whatever funding we have that's when we can go back like, all right, we have X amount of dollars to collaborate with you on this. What it is that you need from us. What can we help them. And then that would guide the contract. Or however we would do that. And then in the status report you'd get more detailed information about the specific things that were accomplished with that funding.

EBONY HAVEN: So 2.2.4. And right now I just have it as collaborate with the LSU Human Development Center to bring more awareness of fetal alcohol spectrum disorder.

LAUREN WOMACK: Treatments or best practices.

BRENTON ANDRUS: Just looking at what was from the planning committee consideration. If you say to bring more awareness to fetal alcohol spectrum disorder and assist professionals with diagnosing and treating individuals with FASD. That would use kind of the language.

EBONY HAVEN: Would diagnose and treat?

BRENTON ANDRUS: To diagnose and treat, yeah.

LAUREN WOMACK: Can we put anything in there about training them?

STEPHANIE CARMONA: I'm not sure.

BRENTON ANDRUS: This if you attach a dollar figure to it then at that point we have it vague enough where they can tell us what they need our help to get accomplished and not bind us to oh, it has to be a training. You might be able to use the funding to create fliers that they're going to be handing out. That might be our contribution.

LAUREN WOMACK: Whatever they need in their capacity.

BRENTON ANDRUS: It sounds like we'll find that out later this month. And usually in the past things that have been more collaborative, kind of more upper-level stuff we've left not as drilled in so we had that wiggle room to address things that would arise within that particular activity. Some stuff you want to be very specific but I think this one would be fine. The council may tweak it in April.

EBONY HAVEN: You have 50,000-dollars left.

LAUREN WOMACK: I don't know about the council but I really like the seizure and epilepsy training. I don't know how much we would want to allocate to help them in their efforts.

BRENTON ANDRUS: They were here for the epilepsy and seizure..

LAUREN WOMACK: To like support them in their mission.

EBONY HAVEN: Lauren, do you guys want to make a decision about what approximate funding you want to recommend for this particular activity.

LAUREN WOMACK: I say about 30.

BROOKE STEWART: I say whatever's left.

LAUREN WOMACK: And then I would think maybe whatever we have left maybe to the epilepsy for them to do training and we can see-- what did they actually say. For training for schools and compliance because there actually is current legislation but they said that schools were not complying with the current legislation.

STEPHANIE CARMONA: This is me speaking as an ex-teacher, not as a staff person. Every year I had to take epilepsy and seizure training for seven years. I



will say that the training we had to take it if a student in our class had epilepsy. It was kind of like through the nurse. Kind of like medical training, like an EpiPen training. Kind of like that thing. So if it was a random seizure and the student didn't have epilepsy then a teacher could potentially not be trained on it depending on where they are. So I'm not sure what this legislation says specifically but if I had to guess I would think that LDOE will say that the training is up to each district on how they present that training and who receives it. Unless that legislation says something very concrete. And I don't know what it says.

LAUREN WOMACK: One thing I did have a question about I know we're trying to, like everything is going to go towards open meetings having like a Zoom or a web-based component. Is there a way that we could write something with the policy or put a price tag on like equipment for these meetings. Because some agencies are saying they just don't have like the capacity. Is there equipment that the DD Council could own and say okay, well, you have, we do have the capacity. We have the projectors or the stuff.

HANNAH JENKINS: Ebony, would that be through the events activity?

EBONY HAVEN: Talking about equipment for like meetings?

REEKESHA BRANCH: Like a projector, microphone.

LAUREN WOMACK: To make everything go with the new bill. Because even like the workforce equipment is dragging their feet because they say you're the Workforce Commission but you can't make it a web based because you don't have the equipment. Something doesn't sound right about that to me.

EBONY HAVEN: Yeah. I think that would have to go through the events contract.

HANNAH JENKINS: We have an activity but could you add more money to the activity.

LAUREN WOMACK: To specifically look at web-based technology to ensure open meeting laws are compliant.

BRENTON ANDRUS: For who?

EBONY HAVEN: Talking about for the council?

LAUREN WOMACK: Like have another set so if like another organization's having a meeting and they're

like oh, we don't have the wherewithal or in our budget to make this meeting.

EBONY HAVEN: Provide funding for them to get their?

LAUREN WOMACK: No. We would own it.

BRENTON ANDRUS: Loaning out our spare equipment to an organization if they didn't have the equipment needed to do the open meetings. That might be a fed question.

LAUREN WOMACK: Just a thought.

BRENTON ANDRUS: We certainly have lots of sound equipment for in-person meetings that we don't utilize. I don't know about that. We also run into complications with it being state purchased equipment and we can't just hand that stuff out.

EBONY HAVEN: So just for sake of time the transcriptionist and the close captionist she has to log off by 5. So we have nine minutes to appropriate this 22,000-dollars that's left. But also we haven't even touched the noncontractual activities. I want to just make sure we're aware during that nine minutes we have to do all of those things. We have to allocate this 22,000 and we have to get through the noncontractual things. At least the things that Stephanie is recommending that you all add. I think that's really important for you to include in your draft. If you want to discuss the other stuff at the full council meeting if we don't get to that then we can discuss it at the full council meeting, the ones that we recommended. Most of the noncontractual activities I can tell you staff's recommendation was to continue those items.

LAUREN WOMACK: Y'all want to just add the extra to the fetal alcohol spectrum disorder?

EBONY HAVEN: Yes.

LAUREN WOMACK: Melinda, that's okay with you?

MELINDA PERRODIN: That's okay.

LAUREN WOMACK: We're just going to go with that.

MELINDA PERRODIN: Chronic health, cause I know that was another area they say that they need to address was chronic health. But adding to the fetal. Just something else to consider.

LAUREN WOMACK: Let's go ahead and do that.

EBONY HAVEN: The whole 52,000?

JILL HANO: Is the acronym FASD right?

SPEAKER: Uh-huh.

LAUREN WOMACK: And we did go through at least once the staff suggestions that did not have money allocated.

EBONY HAVEN: No. We didn't get through all of them. But I can tell you that Stephanie had recommendations on the end of the status report, the planning report to include in each goal our federal partners recommend that we have an activity for emerging issues. So if there are emerging issues in community living or self-advocacy that we have an activity for those emerging issues that come up in our state.

LAUREN WOMACK: And I'm just going to read this piece out for the sake of time. Under objective 1.1 we are going to include advocate for system changes based on emergent advocacy issues. This is recommended by ITAC. Under objective 2.1 we're going to advocate for systems change based on emergent healthcare issues by ITAC.

STEPHANIE CARMONA: That was recommended by ITAC also.

JILL HANO: The website overhaul. I'm sorry. I had to step away for a minute. But the website overhaul we put in the plan, right?

LAUREN WOMACK: Yes, we did.

JILL HANO: Okay.

LAUREN WOMACK: And then Brenton, can you tell me what we need to do next.

EBONY HAVEN: So we're just going to go over the plan really fast. And I'm going to change this up here. I'm going to change this because this will be 25 of course. So for Partners we decided to increase the budget to 115,000. We're keeping LaCAN the same at 240. For advocacy events we're keeping that the same at 30,000. We have decided to recommend an overhaul to the council for the website and plain language. So you all allocated 55,000 for that. Youth Leadership Forum will stay the same at 45,000. The voting training will stay the same at 30,000. We're going to collaborate with OCDD on abuse, neglect and exploitation. You allocated 50,000 towards that. We did add a goal or an activity to advocate for systems change based on

emergent issues for activity one or goal one. We're keeping People First, that People First initiative for the self-advocacy network at 25,000. We had to take out the funding for the council member training.

For goal two we have kept navigating systems at 30,000 and we added the activity to advocate based on emergent issues. We took out activity 2.2.1 the first responder training. We kept the emergency preparedness training at 50,000. We also added activity 2.2.4 to collaborate with LSU HDC to bring awareness to fetal alcohol spectrum disorder and assist professionals with diagnosing and treating FASD. And you all allocated 52,000 towards that. And then we discontinued the activity to build capacity regarding education and employment which was 87,000-dollars. So those are the changes. I wanted to go over them before y'all made a motion.

LAUREN WOMACK: If someone has a motion related to the topic.

ERICK TAYLOR: Motion to move it.

LAUREN WOMACK: I second it. Am I allowed to second it?

STEPHANIE CARMONA: The chair cannot second, correct? I'm asking. I don't know. The chair can't second, right?

BRENTON ANDRUS: It's usually saved for like a tiebreaker.

LAUREN WOMACK: You second it? Okay. Melinda seconds it. Is there any discussion? Any public comment? Any objections? Any abstentions? Then I close the meeting?

STEPHANIE CARMONA: So that was by unanimous consent, correct?

LAUREN WOMACK: Yes.

EBONY HAVEN: So we don't have any public comment. Nobody's here from the public to make public comment. So by unanimous consent you all can adjourn. If there's no objections we can adjourn.