



**Montgomery County Commission on People with Disabilities
Developmental Disabilities Advisory Committee
Meeting Summary – October 14th, 2019**

Larry Bram, Co-Chair • Karen Morgret, Co-Chair

Welcome, Introductions and Review of September Minutes

Minutes were approved as written. Minutes from past meetings can be found online at:

www.montgomerycountymd.gov/HHS-Program/ADS/CPWD/CPWDIndex.html, under the tab Developmental Disability Advisory Committee.

October 2019 – National Disability Employment Awareness Month

October is National Disability Employment Awareness Month. County Executive Elrich will be presenting a joint proclamation on Nancy Navarro on Tuesday, October 15th at 9:30 a.m. at the County Council Office Building, 100 Maryland Avenue, 3rd Floor Hearing Room, Rockville. (Video:

<https://www.youtube.com/watch?v=3qTpg1BWOG0&feature=youtu.be&t=1530>)

Transition Pilot Proposal – Claire Funkhouser

Claire clarified that the Transition Workgroup is a separate ongoing group that includes representatives from multiple non-profit and government agencies and parents. The Transition Workgroup is sponsoring the Transition Fair that will be held on November 2nd from 9:00 a.m. to 2:00 p.m. at Montgomery College Rockville Campus in the Small Gym. George Tilson, formerly VP at TransGen will be the keynote speaker followed by exhibits.

One of the areas of concerns noted in the Council Work Group on Needs of Residents with Developmental Differences System-Wide Recommendations is the transition from school to adult life. At the April 2019 DDAC meeting, Bernie Simons, Deputy Secretary, DDA, invited this Committee to develop a transition pilot program for Montgomery County. A subcommittee convened comprised of representatives from non-profits, government agencies and parents to develop a proposal.

The proposal was sent to Committee members for review and comments. Judy Pattik, Regional Director, Southern Maryland Regional Office, DDA, sent several comments back. She did not agree with issue #1 and the high turnover rate as Health and Human Services (HHS) does not have the same numbers compared to private agencies. Claire suggested removing HHS from this statement. Judy also did not agree with issue #2 as training for Coordination of Community Services (CCS) should be billable. There are questions from CCS agencies regarding this and the subcommittee will reach out to DDA for clarification. The other concern Judy had is with issue #5 and the statement that “Youth with significant disabilities seem to linger on waiting lists and are not being picked up by providers for various reasons.” While this has been the experience heard from individuals on this Committee, the language will be reworded to be broader.

The Committee is suggesting creating webinars and newsletters that can be targeted towards CCS workers, towards parents, or to both. The proposal is requesting funding of up to \$40,000 from DDA to implement this project over a period of four years, which includes approximately \$20,000 for the first year for a contractor to produce webinars, write newsletters, and prepare questionnaires. It was questioned if this is enough funding. The Committee reviewed rates used for contractors in order to determine this figure. In terms of funding the proposal, DDA may have to contract it out. Another option is for a non-profit to be the fiscal agent.

Jennifer Mizrahi stated that RespectAbility produces webinars on employment, all of which are screenreader accessible and have live captioning. They are able to produce them with far less funding than \$40,000. She suggested resources that are currently available such as adding Google translate to webpages and YouTube captioning and transcription. Jennifer suggested creating a website to provide information about all the various non-profit organizations in the County which could then be sent to all parents who have a child with an IEP or 504.

Jason's Connection (www.jasonsconnection.org) is a non-profit company that created an online community that connects people and their family and/or caregivers experiencing diverse challenges and unique needs, including disability, mental health, and aging to quality resources, information, supports, and each other. Resources can be located via zip code. Jennifer suggested having local resources added to this website.

Susan Hartung asked if information could be placed in Montgomery County Public Schools (MCPS) media centers so transition teachers can refer parents there or if it could be shared in IEP meetings. The Committee has discussed displaying information in the high schools.

Claire said this proposal has been presented before the Transition Workgroup and Karen Leggett is aware of the goals this subcommittee is trying to achieve.

This proposal cannot be sent to DDA through this Committee. It will need to be presented to the Commission on People with Disabilities and if approved sent to DDA with a cover letter. Betsy Luecking, Staff, stated that the Office of Intergovernmental Relations (OIR) will need to approve the proposal before it can be sent to DDA. This Committee can present the proposal before the Commission at their next meeting on November 13th.

There was a question concerning caseloads and at what point should there be lobbying and advocacy efforts made to increase funding and create more positions. Sara O'Neill, MMARS, explained that the private agencies are not bound by County funds whereas HHS does have funding restrictions. If there is a need, MMARS is in a position to hire more staff. County Executive Elrich recommends a budget, which is released in March, and it is approved by the County Council. The budget is then sent to the Office of Management and Budget (OMB). It was suggested that contacts and budget timelines be sent out to Committee members so they can reach out.

HHS has a cap of 500 clients. All CCS positions within HHS are filled and coordinators have a caseload of approximately 42 cases. In order for all CCS programs to address the needs of transitioning youth (TY), coordinators need to have lower caseloads in order to spend more time and energy on individuals transitioning from school to adult services. The rate that DDA pays for TY versus CCS individuals may differ and perhaps a rate increase for TY may be the answer. There was a suggestion that certain tasks could be completed online in a systematic way to allow employees more time with TY, such as informing parents of their options prior to the transition meeting.

DDA does not have a mandated maximum caseload. HHS has a cap for clients while private agencies do not. DDA has said the State is over-saturated and there are not enough individuals that are willing to do case management work and some coordinators move from provider to provider. The job is challenging, the pay is not enough, and it can be difficult to keep staff. MMARS has a caseload between 40 and 45.

The proposal addresses the caseload issue by increasing education of the parent population so that they are not as demanding of the coordinators. It was noted that it can be frustrating for coordinators to have a sense of workflow and organization in their work day when DDA has had so many changes over the past few years and no increased administrative support. Changes were rolled out in a way that each agency had to figure out how to implement those changes.

The proposal also asks DDA to develop a standardized DDA checklist with deadlines and timelines for coordinators to utilize with their clients in transition and their families. The County used to have one individual responsible for TY and the County was responsible for all case management. Everything is now fragmented.

Bernie has stated that the reason for the slower sign up of TY with provider agencies is that parents feel no sense of urgency. There may be other issues such as capacity of providers, not having clear deadlines, inconsistent CCS follow-up, and individuals needing to be assigned a specialist.

DDA has not discussed providing additional administrative help to service providers for upcoming changes which could put more responsibility on CCSs. DDA has hired extra positions within their regional offices.

Panel Presentation from CCS – Medical Management and Rehabilitation Services (MMARS), Service Coordination, Inc., and Montgomery County Department of Health and Human Services (HHS)

MMARS – Sara O'Neill and Virginia Thorogood (www.mmars.com)

MMARS provides comprehensive case management services across the state for individuals with developmental disabilities. MMARS provides independent care management and coordination services to both the public and private sectors. MMARS began providing case management in 1997 and contracted with DDA in 2014. They serve the entire state of Maryland and try to match coordinators with individuals based on needs of the family as well as geography. It is beneficial to have the coordinator living in the community that they are serving. Coordinators work with all available community resources and listen to the families and individuals to develop a plan together for what that individual wants.

MMARS is currently going through some restructuring. They are creating more Team Lead positions that will transition into Supervisor positions so they can be more equipped to appropriately train CCSs. MMARS is moving some of their seasoned CCSs to CCS 2's to handle more challenging issues. They are also adding three additional Quality Enhancement positions. MMARS is aware of the high turnover rate for CCSs and is working to provide incentives to retain staff. MMARS has an assessment team that only handles assessments and they are working on developing a waiting list team as well. Since 2014, Virginia has overseen the entire TY process and works with DDA regional offices throughout the state. She has now been moved from a Supervisor role to the TY liaison for MMARS. TY cases are divided out to different supervisors, but Virginia works with DDA on individual issues and dispenses information back to the CCSs to ensure the information being provided is correct. She also oversees the enrollment process of each TY and provides additional assistance to the CCSs to facilitate a successful transition. MMARS has close to 1,200 clients in Montgomery County with 2,706 clients statewide and 207 TY.

MMARS has five supervisors with three team leads that will eventually move over to supervisors. There is a Comprehensive Assessment Team as well as a Quality Assurance Team with six positions and three more being added. The goal is for coordinators to have a case load ratio of 1 to 35. The waiting list has a higher caseload of approximately 100, but those individuals only require an annual face-to-face monitoring.

Service Coordination, Inc. – Holly Fanning (www.servicecoord.org)

Service Coordination, Inc. (SCI) is the largest CCS agency in Maryland serving over 11,000 in the state. Team members work with a weighted ratio between 30 to 34. Coordinators work on a more personal, interactive and involved-basis with individuals. SCI is rapidly expanding in Montgomery County. They are implementing a new TY process throughout the entire agency called TY Enhanced Services that will require the Coordinator to meet milestones each year so they can move on to next steps. The process will make the CCSs more responsible. There are still issues of individuals not receiving social security income or medical assistance because they may not know how to apply. SCI has two offices with one in Frederick and the other in Owings Mills. CCSs are hired within the community that they serve. For example, every person on the team in Carroll County lives in Carroll County. SCI began with the Arc of Frederick County in 1982. They became a private non-profit agency in 2005 and began providing targeted case management services in 2014. SCI began serving Montgomery County and Southern Maryland approximately two years ago. Like any of the other CCS agencies they are billing for TY services. SCI has noticed concerns of individuals getting into services. SCI will be restructuring a bit.

Montgomery County Department of Health and Human Services (HHS) – Rosemary DiPietro (www.montgomerycountymd.gov/HHS-Program/Program.aspx?id=ADS/ADSResourceCoord-p234.html)

HHS is reviewing what is working and what needs to be strengthened within the organization. In 2014, ten merit CCS positions were allowed by OMB when the program was reopened. There is also one Quality Assurance position and one administrative support staff under the budget. HHS also has three CCS contract positions, two of whom have been with HHS for two to three years doing the exact same work as the merit employees. The third contract position was obtained within the last few months. HHS is working on how to deal with individuals coming off of the waiting list and how to address TY as well as those individuals in the community who are not receiving services yet. HHS' waiting list is approximately 58 people and have been moved to one coordinator's case load. This coordinator also assists with comprehensive assessments for individuals applying to DDA and with TYs.

Rosemary stated that during the month of September there is a high level of need for families of students who are one and two years out to receive information. The coordinator that works with TY cases has taken the time to really understand those cases. In FY19, HHS had 12 TYs, and in FY20 HHS has 12 TYs. 10 of the 12 FY19 TYs have started services, one is waiting for self-directed services approval and the other one is having difficulty finding a provider.

In terms of the two new DDA waivers (Family Supports and Community Supports) the waiting list coordinator is pushing to get individuals upgraded, have their needs identified, and their waiver eligibility sent to DDA. This increases the acuity of the waiting list for CCS and is working out well for them. 10 people were selected from this last round for the Family Supports Waiver. Of those 10, 5 had their waiver applications submitted and 5 were in the Autism Waiver and declined the Family Supports Waiver.

HHS sent a customer satisfaction survey to those they serve and their family members over the last three or four years. Feedback received shows individuals want more interaction with their CCS. Other feedback includes suggestions for open informational sessions, targeted informational sessions, ongoing updates, and being included in CCS meetings when plans are reviewed. In response to these survey results, HHS has developed a newsletter that will be sent to clients and families soon that will include stories and resources. There are 239 people on the waiting list that have asked to be served by Montgomery County. As HHS has a cap of 500 clients, they are not able to serve them, but staff do reach out to discuss what their options are with other CCS organizations and if there are any other services the County can provide.

Larry noted that this Committee was formed four years ago with the sole purpose of reinstating HHS as a CCS provider. He asked if this Committee should be advocating for a higher client cap. Rosemary said it is not the position of a County employee to ask that more people be served by HHS. Community Support Network (CSN) has been advocating for more staff. Rosemary has been very clear that in order to do the job well, more staff are needed. She has done some analysis of the infrastructure of private organizations compared to HHS.

There is concern that the contractor positions could be eliminated as there has been a time in Montgomery County Government when there were legal issues surrounding the hiring of contractors instead of merit employees, and those contractor positions were eliminated. Odile Brunetto, Acting Director, Aging and Disability Services said this very issue was on the County Council's FY20 budget reconciliation list, but ultimately was not funded.

It was asked if Rosemary had data on how much HHS bills versus costs of services. HHS is operating at a deficit at this point. They were hoping the costs would be neutral.

Update Employment – Dr. Camelia Fawzy, Adjunct Faculty, UMUC, Graduate School

DDA held a Maryland Employment First Summit on October 11th. Cami attended. There is a genuine interest in understanding DDA's transformation. Cami said there is a true commitment between DDA, the Maryland State Department of Education, and Division of Rehabilitation Services (DORS) to collaborate in moving forward with the system changes. Others from our group also attended the DDA Employment First Summit like Karen, Reda and Crystel. 2. I noted significant challenges experienced by service providers across Maryland in creating employment opportunities for their clients, representatives in attendance noting little progress in this area.

Other Updates: Tabled due to time.

Respectfully Submitted,

Carly Clem, Administrative Specialist
Betsy Luecking, Community Outreach Manager

Next Meeting

****PLEASE NOTE:** Meeting will be held 3rd Monday of the month due to Veterans Day on November 11th**

November 18th, 2019 from 4:00 p.m. to 5:30 p.m.

Health & Human Services, 401 Hungerford Drive, 1st Floor 1A Conference Room, Rockville, MD 20850