Human Service Agency Overview of Family Support

A. Background
The Department of Developmental Services (DDS) has been providing flexible family support services since 1995. These services are provided to children and adults living at home with their families who are eligible for services from DDS. In July 2002, Chapter 171 of the Acts of 2002, “An Act Providing Support to Individuals with Disabilities and Their Families,” was signed into law. This legislation specifies that all named state agencies, with substantial consultation from families and individuals with disabilities, need to prepare and submit on an annual basis an individual and family support plan that explains how the department intends to provide flexible supports to families and individuals. This is the eighth Annual Plan for Family Support to be submitted by the Department.

The Department is organized into four regions with Regional Directors and 23 Area Offices with Area Directors, all under the umbrella of Central Office. Each DDS region has a Director of Family Support, who works with the Assistant Commissioner for Policy, Planning and Children’s Services, the Central Office Director of Family Supports, and the Project Manager for the Autism Division. Assistance and supports to individuals/families is provided by the Department’s Service Coordinators. Each Area Office has a Children’s Coordinator position who generally works with children under the age of 18 years and their families, and a Transition Coordinator who works with individuals generally between the ages of 18 and 22. Individuals over the age of 22 who have met the adult eligibility criteria for DDS services are assigned a Service Coordinator and participate in an Individual Service Planning process.

B. Overview of Family Support
The primary goal of family support is to provide a variety of options to families of individuals with disabilities that enable them to stay together and to be welcomed, contributing members in their home communities. The Department’s Family Support system is based on the principle that individuals and families know their own needs. For this reason, and because of the individuality of each family, the range of services available under the program is broad. This approach allows families the flexibility to identify the resources that will be helpful to support their family member in her/his home. Families are always encouraged and supported to identify resources within their community that can offer assistance. Family Support Centers and other family support program services are designed to be responsive to the dynamic and changing needs of the individual with a disability and his/her respective stages in life within the family context.

The Department has developed Guiding Principles for Family Support. These principles serve as the foundation for the delivery of services through the Family Support Centers and all of the other family support program services funded by the Department.
Family support strives to achieve the goal of helping families stay together through:
- developing families’ natural capacity to meet the needs of family members;
- offering additional supports such as staff resources, goods and services, and financial assistance; and
- enhancing the capacity of communities to value and support people with disabilities and their families.

Operating principles that guide family support activities are:
- Individuals with disabilities and their families are recognized as primary decision makers about their lives and supports.
- Family support focuses on the whole family and recognizes that benefits to the whole family also benefit the person with a disability.
- Family support requires flexible options that are responsive to families’ unique needs, strengths, and cultural values.
- Families are afforded opportunities for increasing control in the planning, implementation, management, and evaluation of satisfaction of family support services.
- Families are encouraged and supported to develop their natural capacities for innovation, initiative, and leadership.
- Family support operates in ways that respects individuals with disabilities and their families as valued members of their communities.
- Family support should be equitably and fairly available throughout the state.
- Family support is pro-active and encourages family independence and capacity-building.
- Family support builds on existing natural and community supports and maximizes the use of generic resources.

This past year has been a period of significant changes related both to the re-structuring of family support services that needed to occur due to significant budget reductions in the appropriation account for FY’10, as well as the planning for the competitive procurement of family support services and the development of new Home and Community Based Waiver Programs for adults. For these reasons, the Department’s Family Support system has been re-designed and re-structured. The Department’s development of new Home and Community Based Waiver Programs required the “unbundling of services” and the consequent need to create new ways for individuals enrolled in the waiver and their families to purchase services that may have been provided historically through stipends or ‘flexible funding’ allocations. To address some of the changes that resulted from the unbundling of these services, the Department established a separate procurement to qualify agency providers to deliver new Home and Community Based Waiver Services that will complement the redesign of the Family Support system. Many of these services have historically been provided through the Department’s Family Support System through flexible funding, such as respite, adult companion, individualized home supports, and homemaker services, among others. The creation of these services through the Waiver programs will enable the Department to increase its Federal Financial Participation (FFP), a requirement of the legislature. The qualification of agency
providers is designed to maximize individual/family choice in providers and to support the Department’s overall commitment to self-determination. Additionally, these new Waiver programs provide individuals and families increased options for self-direction of services through a new model called *Agency With Choice* or through use of the Fiscal Management Service, Public Partnership Limited (PPL).

The Department has specific funding designated for the delivery of family support services through the Family Support Appropriation Account in the state budget. In FY 2010 this account was funded at $46.5 million, of which about $35-36 million was for family support and the remainder for community support services. The budget appropriation for FY 2011 is $45,004,298 million dollars.

Through the Department’s procurement of family support services this past year, contracts were awarded for designated Family Support Programs which are described later in the plan under *Focus Area III- Family Support Resources and Funding*.

C. Process for obtaining substantial input from families on current family support services:

The Department uses both formal and informal approaches to seek input from families and individuals with intellectual disabilities in order to help assess the Department’s current system of family support services, and to get input on policy development and future directions which assist in informing the development of this Annual Plan for Family Support. Department leadership is committed to expanding and strengthening avenues to obtain input and engage individuals and families in discussions about the Department’s services, priorities, particularly in more difficult budgetary periods, as well as to understand how services can be more responsive to the needs of individuals and families. Below are listed some of the key ways the Department obtained feedback and input this past year.

The Department’s Statewide Family Support Council is one important way ongoing input and consultation on family support services, practices, policies and needs is obtained. This Council was established in 2004, and is comprised of parents from across the state who have children and adult family members with disabilities. They advise the Department on issues that affect the well-being of families who have family members with disabilities living at home, and offer input and guidance on family support policies, services, and supports. The Council meets four to six times a year with the Commissioner and other departmental leadership staff, with conference calls scheduled at other times to discuss emerging topics and issues. This past year the Council provided important consultation related to priorities and decisions about how to best utilize the reduced family support budget appropriation and ways to manage the fiscal reductions to the DESE/DDS Program.

A key focus of activity with the Council and other stakeholders related to the planning and design of the competitive procurement of the Department’s family support services that were required to go out to bid this past year. Council input helped shape aspects of the services and design of the Family Support Center model that was proposed. In
addition they reinforced the importance of continuing to fund some of the specific specialty family support programs and making flexible funding available to families to help them purchase services and goods that are beneficial in supporting their family member at home. Council members also offer input and guidance on communication approaches with families and review relevant information materials as they are developed. The Council will continue to play an important role in guiding and providing feedback about the implementation of these new family support programs and services, and their input will be sought as the department works on developing quality assurance processes for these services. During the past six years the Council has evolved into an important vehicle for communicating the perspectives of families as policy and service decisions are being made.

The Commissioner and other Central Office leadership staff meet regularly with representatives of family and individual advocacy organizations to seek input and obtain feedback on services and future directions. This includes representation from the Arc, Massachusetts Families Organizing for Change (MFOFC), Advocates for Autism in Massachusetts (AFAM), the statewide self-advocacy organization, MASS, and the Developmental Disabilities Council. Monthly meetings are also held with the leadership of ADDP, the Association of Developmental Disability Providers.

There is regular information-sharing, discussion, and solicitation of input from the Department’s Statewide Advisory Council (SAC) and the regional and area offices’ Citizen Advisory Boards (CABs). Over the past several years there have been strategic efforts made to strengthen communication and develop a closer partnership between the SAC and CAB’s which has had a positive impact. There has also been a focused effort to expand membership on these groups to include more self-advocates and family members with children and adults living at home. These advisory groups play an important role in helping to inform and educate the public and other decision-makers about the needs of individuals and families and the importance of and benefits of the flexible services and supports that are provided.

During the planning and the development of the three new Medicaid Home and Community Based Waiver Programs for Adults, the Department consulted with key stakeholder representatives (Arc, MASS, MFOFC, ADDP) to obtain their input on the array of services to be included in these applications, the options for participant-direction of services, as well as other implementation considerations. Some of this feedback was instrumental in the re-shaping of some of the services and addition of other services that were identified by stakeholders as important for inclusion.

Leadership staff in the Department, along with staff from the Office of Medicaid, consulted with family members and other stakeholders on the development of the renewal application for the Autism Waiver Program for children that was recently submitted to the Centers for Medicaid and Medicare. When approved, the renewal of the Autism Waiver Program will go in to effect on October 1st, 2010. This process provided an opportunity to review what had been working well in the current program and to identify areas for enhancement or modification to improve timely access to services.

This past year the Department revised its licensure and certification process as a result of recommendations made by a workgroup comprised of providers and DDS staff. This
workgroup gathered feedback in meetings with self-advocacy groups, DDS Quality Councils (which have individuals and family member representatives), DDS Regional and Area Boards, the Statewide Advisory Council and other stakeholder groups to gather input regarding the strengths of the system as well as recommendations for change. Self advocates and family members provided critical input regarding what they considered important indicators of quality services and supports.

Strategies and efforts will continue to evolve, through both organized and informal mechanisms, to gather ongoing feedback about the Department’s array of family support services and the implementation and effectiveness of this Plan.


The following section provides a brief description of ongoing efforts as well as new activities the Department has undertaken this past year, and includes where relevant, initiatives for development in the upcoming fiscal year.

I. Family Empowerment

What is the agency currently doing to promote or enhance family input or direction in the development of agency policies and procedures, program development, and evaluation of services?

This past year the Department was engaged in several major policy development and program development planning activities in which representative family members and individuals with disabilities had the opportunity to provide input and offer direction. One of these activities was the development of three new Home and Community Based Waiver Programs for adults. Input from individuals, families, and other stakeholders influenced the array of services that were included in these Waiver programs, and specifically resulted in the addition of several therapies and other related support services. These Waiver programs are the foundation and primary source of services for adults which will provide new and expanded opportunities for adults and families to engage in the self-direction of services.

The second major area of program development involved the procurement of the Department’s family support services. As part of the planning for the design and focus of these services, input was sought from members of the Family Support Council as well as other family advocacy and stakeholder groups. This input was instrumental in the development of the focus and scope of services in the Family Support Centers and Cultural/Linguistic-Specific Family Support Centers, as well as the array of other family support programs that were awarded funding. In the upcoming year as these new services begin, family members will be included on planning teams to provide input on the implementation of these services to ensure they are family-friendly and responsive to the needs of families. This will include the development of a collaborative process to get input into the creation of quality assurance processes for these funded family support programs. Additionally, the
Department’s Family Support Council and other key family advocacy groups will have the opportunity to review materials as they are developed as a way to seek broader input and feedback.

How will agencies change how they are currently doing business to make their agency and services more family-friendly and provide opportunities for families and individuals to have greater input and influence?
The Department’s new Home and Community Based Waiver Programs provide increased and enhanced opportunities for individual and family empowerment. The Waiver programs provide individuals increased choice in service providers, choice of service delivery method, and portability of services, which means individuals can, under most circumstances, choose to have their services moved to another service provider.

The Waiver programs expand opportunities for individuals and families to engage in self-direction of services. There are two forms of self-direction available to individuals and families based on the amount of control they prefer. One option is the Agency With Choice, which is a new provider model that allows individuals/families to have an increased level of self-determination when they share responsibility for the hiring and management of employees who provide services to them. Individuals/families who want to completely direct their own services can do this through the Fiscal Management Service the Department contracts with, Public Partnerships Limited (PPL). In the upcoming year educational forums will be sponsored for individuals and families to provide information about the options for self-direction available to them.

Informational materials will also be developed to support the understanding and implementation of these new service options. A publication, “A User Guide for Individuals and Families on Choice, Portability, Provider Selection, in the Massachusetts Medicaid Home and Community-Based Waiver Program” has recently been completed and will be shared with individuals and families and will be posted on the Department’s web-site. This publication was developed collaboratively by DDS staff and stakeholders, including provider representatives and individuals with disabilities.

In the upcoming year, the Department will continue its commitment to strengthen the roles of individuals and families in providing input and consultation both informally, through forums and other activities at the Family Support Centers, as well as formally through the Family Support Council, the Statewide Advisory Council, and the regional and area Citizen Advisory Boards.

II. Family Leadership

What training opportunities does the agency currently offer to families/individuals that would enhance their repertoire of skills?
The Department provides funding for five regional Family Leadership programs designed to provide education, leadership training and mentoring for families with
children and adults with disabilities living in the community. A key feature of this family leadership training is that all of the training and mentoring is developed and provided by families who have a family member with a disability. The Department has partnered with Massachusetts Families Organizing for Change to implement these Family Leadership programs. One vehicle for family leadership development is the sponsorship of a Family Leadership Series, which occurs across approximately 6-8 days over a several month period. This past year an Advanced Leadership Series was held to support families in further developing and building their knowledge and skills to move into new leadership roles.

The Department’s newly funded Family Support Centers are expected to sponsor an array of educational events and trainings on relevant topics of interest to families of both children and adults. Each Center is expected to offer a minimum of six trainings per year that will address the common topical areas relevant to families across the lifespan. Family Support Centers are encouraged to collaborate with other providers and organizations, and should support families to participate by providing assistance with child care, transportation, etc. It is also an expectation of Family Support Centers to promote parent networking and mentoring, such as parent support groups, 1:1 parent connections, and sibling support opportunities.

What new ideas or proposals would the agency initiate to give families/individuals more opportunities to develop and/or exercise their leadership skills?
Families should have opportunities to further develop and/or exercise their leadership skills through the Department’s Family Support Centers which are expected to actively engage families and seek their consultation to identify interests and needs in developing activities and the array of service options to be offered through the Center.

There are new Home and Community-Based Waiver Program services, Peer Support and Family Training, which participants in the Waiver programs can purchase with their individual resource allocation. These service options can provide interested and qualified individuals and families the opportunity to provide training and mentoring to others.

III. Family Support Resources and Funding
What are the current resources/funding that the agency allocates to family support? What are ways that the agency provides flexible funding to families that allow them to customize their services?
Family Support Centers have been designed to establish a local presence and act as a hub for offering a wide range of general family support services and activities to families of children and adults who are eligible for DDS services. There is at least one Family Support Center available in each DDS Area across the state, and in some areas more than one Center or larger Centers, to respond to the size of the population and the needs of families. These Family Support Centers replace the
family support programs that the Department has funded in the past to provide information and referral services, family support coordination and administration of flexible funding/stipends. In FY 2011, there are 33 Centers funded at approximately 6.8 million dollars. Family Support Centers will also administer flexible funding/stipends to families who are prioritized to receive an individual allocation. These individual allocations can be used flexibly by families to purchase allowable services and goods as defined in the Department’s updated Addendum to the Family Support Guidelines and Procedures.

Family Support Centers are expected to provide an array of services and supports to families that include: information and referral, including access to technology, support groups, family trainings, parent networking and mentoring, facilitation of social/recreational events, among other activities. Information and Referral services can include individualized consultation and support over a course of a few meetings for families who need and can benefit from more “hands-on assistance.” Centers will also provide Service Navigation for families which includes comprehensive and individualized information, guidance, and support to families to address their needs, connect them to potential resources, assist with problem-solving and help them navigate the service system. Family Support Centers should be highly integrated within their local communities. The Centers will be expected to develop strong local affiliations and partnerships with other state and grassroots community agencies, to become experts in generic resources and services, and work to maximize natural supports.

Cultural/Linguistic-Specific Family Support Centers are intended to respond to the unique needs of specific cultural and linguistic family groups in specified areas or regions of the state. For many of these families English is not their primary language, and as a result face linguistic barriers in accessing services and require more individualized and specialized assistance to learn about and access the service system. These Centers will offer a similar array of services as the Family Support Centers described above. In FY 2011 funding has been awarded for 10 Cultural/Linguistic Family Support Centers for a total amount of approximately 1.2 million dollars.

Autism Support Centers provide an array of information and referral services, resources, and supports to children and young adults with autism spectrum disorders. The array of services and supports includes information and referral, family clinics, support groups, access to the latest information on autism, family trainings, parent networking and mentoring, and social/recreational events, among other activities. In FY ’11 there are five large and two small regional autism support centers funded at approximately 1 million dollars.

The Intensive Flexible Family Supports (IFFS) Programs are designed to help families who are experiencing severe stress which could lead to the child being at-risk of an out-of-home placement. The service consists of an intensive case management service designed to help families integrate the variety of available
resources to support their family member in crisis, and flexible funding to purchase additional supports or goods. Annually, about 425-475 children between the ages of 3-18 and their families receive services through these 22 programs statewide. In FY ’11, the planned funding amount for these programs is about 2 million dollars, and it is expected that a similar number of individuals/families will receive services through these programs.

The Medically Complex Programs support families who are caring for children/young adults up to the age of 25, with significant cognitive, physical, and complex health care needs who are living at home. It is a comprehensive wrap-around support which consists of an intensive medical wrap-around case management activity that helps families integrate the variety of resources and supports they are receiving and offers flexible funding/stipends to assist the family in the purchase of additional supports and goods not covered by health insurance. This program complements and is supplemental to other MassHealth, state plan and third party insurers. This program provides vital assistance to families who need help in coordinating all of the in-home care they receive, which helps to prevent pediatric nursing home placements. Annually, these programs provide services to about 275-325 individuals and their families. In FY ’11 these five regionally based programs will be funded at approximately $650,000 and will provide services to a similar number of individuals and their families.

Planned Facility Based Respite Programs for Children provide planned out-of-home respite services for children to provide short-term temporary relief for families, and includes overnight, weekend, and/or vacation stays. These programs also provide individuals with a variety of recreational, social, cultural and/or educational activities during their stay. There are two planned facility based respite center programs for children funded across the state, one in the Central/West region and one in the Metro region, for a total of approximately $385,000. It is expected that approximately 110-120 children and their families will be able to utilize this service in the upcoming year.

Family Leadership Development provides education, mentoring and support to families to enable them to care for their family member. A major focus is a comprehensive and intensive family leadership series which provides information and education about “best practices” for services for people with disabilities. A second goal is to help families gain knowledge about policy making at the local and state level to help them assume leadership roles in their local community and the disability community. In FY’11 there are five regionally based Family Leadership Programs that are funded in the amount of approximately $275,000.00.

The Autism Division at DDS, established in 2005, oversees a small model Autism Waiver Program. In fiscal year ’10, the Division received about $4 million dollars to provide services and supports to children with autism. Of this total budget, the Medicaid Home and Community-Based Services Autism Waiver
Program received an allocation of $3 million to provide intensive supports for up to 110 young children with autism who meet the established eligibility requirements. More than 120 children were enrolled in the Program over the course of the year. These children receive a comprehensive package of services to address their identified needs of up to $25,000 per service year. Some children have left the program due to issues related to loss of Medicaid, or turning nine, the age cap for participation in the Program. There are also staffing costs covered by this allocation as each child works with an Autism Support Broker and Autism Clinical Manager.

The remainder of the Division’s funding provides some community based programs at the seven DDS funded Autism Support Centers, supports teacher training programs by autism specialty schools, and provides other social/recreational autism programs. These social/recreational programs reach at least 1200 families from across the Commonwealth. Community programming to train first responders through the Autism and Law Enforcement Education Coalition (ALEC), remains a successful initiative, with funding assistance from the Division. Over 2000 individuals this past fiscal year received training on how to react to and work with children with autism during an emergency. The consistent budget of the Autism Division reflects positively on the acknowledged need for services of this growing population of children. In FY’11, the Autism Division’s budget remains at approximately $4 million. FY’11 also marks the end of the current Autism Waiver Program’s three year model program and marks the beginning of the Autism Waiver Renewal Program that lengthens the supports and services to children from three years to five years of services.

The Department of Elementary and Secondary Education & Department of Developmental Services Community Residential Education Program is a successful collaborative initiative. It is designed to provide an increased level of supports to children who have been deemed in need of services to prevent a more restrictive educational placement, and assists families in their child’s return from a residential school placement. The intent of the Program is to increase family capacity to support their child in the home and community, as well as to provide an individualized plan of supports that promotes skill building, independence, and social integration across the spectrum of the child’s home, school, and community.

In fiscal year 2010 this Program experienced a series of funding reductions which resulted in some decreases in individual family allocations. During fiscal year 2010, 389 children participated in this program. Due to significant funding constraints, there are approximately 97 individuals/families who have received partial funding over the past two years. There continues to be a high demand for participation in the Program with more than 200 children on the waiting list. A moratorium on new applications for the Program has been established due to the budget limitations in recent years and the inability to move families from the existing waiting list into Program services. Participating families continue to
provide positive feedback about the services they can access through this Program and how beneficial these resources have been to more effectively support their children at home, however, families also describe the additional challenges and stressors they are facing as a result of funding decreases. At the writing of this Plan, the amount of funding for this Program in FY ’11 is in flux.

IV. Accessing Services and Supports

What are current examples of ways the agency is educating families on how to access services in a timely and effective manner? What are some illustrations of different services and resources which promote good access to information and referral?

A core expectation of the Department’s newly funded Family Support Centers is to provide timely Information and Referral services to families of children and adults within their geographic area. This should include assisting families to identify resources and service options available in their local communities, to learn about other financial and/or state services for which families may be eligible, and to provide guidance on how to navigate the service system. These Centers are also expected to expand use of technology to provide a variety of ways to share information with families, such as on-line newsletters and training calendars, webinars, social media, etc. as well as create and maintain a “library” of resources.

A publication, “School Days to Pay Days: An Employment Planning Guide for Families of Young Adults with Intellectual Disabilities,” was developed by Department staff with the support of the Institute of Community Inclusion and the Work Without Limits federal grant. This guide provides helpful resources, information, and guidance, and is being distributed both to families with young adults of transition age and school systems, and is posted on the DDS web-site.

What new initiative(s) will the agency undertake to promote good local access to information and resources?

The Department will work collaboratively with providers of Family Support Centers, families, DDS staff, and other information and referral entities to promote best practices and information-sharing about effective approaches for facilitating access to local services. An area of focus will be enhanced use of technology to provide trainings and resource information to individuals and families.

The Department will develop a listing of the Family Support Centers and their contact information for posting on the Department’s web-site to promote easier access to this information and referral resource. The Department will continue to expand use of our website as a vehicle for sharing resource information with individuals and families.
V. Culturally Competent Outreach & Support

What are the current activities or services that the agency offers that ensure culturally appropriate access and supports to ethnically, culturally, and linguistically diverse families and individuals?

The Cultural/Linguistic-Specific Family Support Centers will provide bi-lingual and bi-cultural assistance to identified groups of families for whom English is not their primary language, and as a result face linguistic barriers in accessing services and require more individualized and specialized assistance in navigating the service system. In addition, it is an expectation that all of the Family Support Centers funded by the Department will conduct broad outreach and provide services to families from diverse cultural, ethnic, and linguistic communities in the geographic area they are serving. This can involve creating partnerships with community organizations and other resources in order to provide culturally responsive services. Department staff will work collaboratively with providers to share positive practices and support them as they further develop their capacity to provide culturally responsive services to increasingly diverse communities.

The Department continues its commitment to making available translated informational materials and letters for individuals and families in multiple languages based on the needs of families in local communities.

The Department has active Diversity Councils in each of the regional offices as well as in central office that offer a variety of opportunities for education, training, and cultural experiences that promote increased understanding of different cultural and linguistic groups, and supports the delivery of culturally responsive services.

What new ideas/initiatives will the agency propose to outreach and meet the needs of culturally diverse families and individuals?

Department staff will provide opportunities to bring together staff from the Cultural/Linguistic-Specific Family Support Centers across the state for information-sharing, networking and strengthening of efforts to provide more culturally competent services to families.

The Department is exploring the development of a partnership with the Office of Refugees and Immigrants to help expand access to services to newly settled refugee and immigrant families.

VI. Interagency Collaboration

Department staff participate in numerous inter-agency activities with other EOHHS agencies to promote more effective service delivery and maximization of resources. Regional and area office DDS staff participate in local inter-agency planning teams to promote more effective communication, and when there are individuals involved with multiple agencies, to work toward coordination and
collaboration in service delivery. Representation on these teams typically includes staff from the Department of Children and Families, Department of Mental Health, Department of Transitional Assistance, Department of Public Health, and in some situations, representatives from local school systems.

The Department has worked collaboratively with the Office of Medicaid, and the Departments of Mental Health and Children and Families, on the implementation of the Children’s Behavioral Health Initiative (CBHI). DDS provided information and training to the department’s children’s service coordinators to assist them in being knowledgeable about the eligibility criteria and service options available in order to facilitate access to these services for children who may be eligible. Information on CBHI was also shared with all family support providers and a reference to sharing information with families about this program was included in the family support plans providers complete with families.

Leadership staff in the Department have been actively involved on the planning team charged with implementation of the Children’s Mental Health Bill. This has involved development of a Unified Planning team model, training for staff, and participation in unified planning team meetings when requested. Department staff have also worked on the One Child, One Plan EOHHS initiative.

Department staff has been actively engaged with staff from EOHHS and the Division of Health Care Finance and Policy (HCFP) to work cooperatively on the establishment of standard rates for relevant family support/family stabilization services. This work will be ongoing in the upcoming year.

DDS staff participated in a joint presentation on Chapter 171 with representatives from EOHHS and the other involved state agencies at the annual conference of the Federation for Children with Special Needs held in March 2010. This was an opportunity to share information with families about the flexible family support services each of the agencies offers, and to seek feedback and input on how services are responsive to the support needs of families, what else would be helpful, and ways agencies can work together more effectively.

What new activities or initiatives does the agency propose to demonstrate the above goals?

The Department took a lead role this past year in applying for grant funding from the national Respite Coalition to sponsor a LifeSpan Respite Summit which was held in March 2010. Approximately 100 people participated in this successful Summit, including family members, staff from state agencies and the aging and disability resource centers, respite providers, health care providers, and other community organization representatives. This Summit provided the opportunity to learn about lifespan respite coalitions in other states, including approaches and models different states have adopted to increase access and options for respite across the lifespan for caregivers. An outcome of this Summit was the submission of a grant by DDS as the lead agency, with the support of staff from the Office of
Elder Affairs and other human service agencies. This grant was submitted to the Administration on Aging, and if successful, will provide funding resources to support a statewide lifespan respite coalition, develop a database on varied respite options, and identify training approaches and innovative models to expand the network of respite providers. The funding decision for this grant application will be made by September 2010.

The Department will continue to collaborate and work in partnership with the Office of Medicaid in the implementation of the three new Home and Community Based Waiver programs for adults, and on the renewal for the Autism Waiver Program for Children.

Department staff will work collaboratively with EOHHS and the other designated human service agencies named in the Chapter 171 legislation to coordinate activities and efforts to expand flexible support services for individuals and families. This includes efforts to promote coordination of training opportunities for both staff and families across human service agencies on relevant topics as they relate to flexible supports and access to services.