

BIG CHANGES AT DSPD! READY OR NOT ...HERE THEY COME!

The following is a transcription of the webinar held on May 19, 2009 at 7:00 p.m. Sanderson Center for the Deaf and Hard of Hearing, Taylorsville, Utah. Minor grammatical changes were made and minor changes were made in order to help this document make sense. Additional resources are available online at www.dspd.utah.gov and www.utahfamilytofamilynetwork.org.

Presenter: Alan Ormsby, Director of Utah's Division of Services for People with Disabilities

Welcome by Helen Post and introduction by Jennifer Kuhn.

Thank you all for taking the time to come out. I know that it is difficult and challenging for many of you to travel. I feel that it is my privilege to be able to be here and address you tonight. I am also really excited that the Utah Parent Center has made this presentation available online as well for all those of you that couldn't travel to be with us tonight.

Before I get started I just want to tell you a brief story if I could. [Alan showed a picture of his children – Max and Lily]

Alan's daughter Lily is 2 ½ years old and is fast as lightning. Recently Alan and his family were at the Mayan restaurant in Sandy, Utah. Lily was bending over and smelling the flowers that were close to 9400 South which is an extremely busy road. As their turn to enter the restaurant arrived, Alan's wife yelled – "Lily, let's go!" Since Lily is a very active toddler, she began to run and she ran toward the busy road. Alan ran after Lily and caught up with her just as she was within about 3 feet of the road. If Alan would have picked her up, their momentum would have carried them into the road. So instead, Alan pushed her back to stop her forward motion. She fell and hit her head and got a large goose egg. Alan felt awful. Of course all of this happened in a very public place and everyone saw it. After they had finished their meal and were on their way home, Alan's son Max said, "Dad, every time I look at you and I look at Lily, I can't help but think you are a criminal."

That is a little bit how I feel tonight. I hope by the end of our time together tonight that you will understand that I am not a criminal. I am doing the best that I can and my leadership team is doing the best that they can. I have been working really hard with my leadership team. Two members of the leadership team were in attendance, Georgia Baddley and Lori Giovannoni. They have been working hard to work with the very difficult circumstances they faced.

The Legislature also worked very hard. We were originally looking at 15% cuts across the board to all entities within the state government. That would have been devastating. The Department of Human Services asked for special treatment and they got special treatment. I will first talk a little bit about the cuts, how they happened, how big they were and what DSPD is doing. Then I will talk about the future philosophy for the Division and then I will open it up for questions. I don't anticipate speaking for more than 20 – 30 minutes so I can give all of you an opportunity to ask as many questions as you can. That is one of the things that I feel really strongly about of in my capacity as a leader – is being open and being transparent. I really do feel like I am your servant. You pay my salary. I am here for you. I really do try everything possible to put the needs of the people we serve first.

Now, let's talk a little bit about the budget cuts. Prior to the last day of the session, we were looking pretty good. Our Division was confronted with about a \$300,000 cut to our personnel. Our funding is matched federally almost \$4 for every \$1 that the state puts in right now under the Obama stimulus package. Now when you think about it, \$300,000 doesn't sound like a lot of money until you consider the

federal match being added to that – it is about \$1.5 million, a pretty significant cut, but we were prepared for it. We had put a soft freeze on hiring. We had started doing some efficiencies. We had trimmed some contracts and looked at every possible budget and were in pretty good shape going into the last day of the session. Well, on the last day of the session I got a phone call at about 7:00 p.m. from my boss, Lisa Michelle Church, who said “can you come down and talk to me?” And I figured “Oh, this can’t be good” and it wasn’t. We were hit with a targeted cut of an additional \$607,000 of in-state funds - and again it is matched 4 to 1 by federal dollars. So our total cuts added up to \$907,000 and that amount is matched 4 to 1 so it is really almost a \$4 million cut. The way that it was taken – the cut was targeted specifically to our administration and support coordination and we weren’t allowed to take the cuts across any other division or entity. We couldn’t take it from the Developmental Center; we couldn’t take it against services. So that cut of almost \$4 million had to be balanced against about a \$15 million budget to support our administration and support coordination. So there was really no option for us but to really think creatively about reorganizing, re-engineering and thinking of ways that we could meet those cuts while doing as little damage as possible.

I said to my staff and to others, “It is like we are given a universe of evil choices and we have to choose the least evil of those choices.” And so I was really pleased that my Division leadership team was able to meet with me in a leadership retreat and we were able to talk through all the various options – we had a very principled approach. Our first principle was – how do we do this while preserving services to the people we serve to the greatest extent possible. The second principle was – how do we preserve livelihood for our employees as much as possible. We recognize that our employees are probably going to have to face cuts, but how do we do it in the most caring and considerate and least impactful way. And then the third thing we considered was – how do we prepare for the future because the Obama stimulus plan – which has been really amazing for us and really has helped us – it runs out in the middle of next year. So this year we are going to do okay and next year we’re going to have some significant cuts and the year after when that stimulus plan goes away, assuming that we are left with the state dollars we have been given, we are going to be looking at very, very difficult times. And everything I am seeing as far as the economy is concerned and state revenues are concerned, we are going to be facing some difficult times in the near future, so we had to prepare for the future.

So those were the three principles that we focused on. We asked ourselves “so – how do we do this?” The first thing we looked at was furloughs. To be able to reach \$907,000 in state funds we would have had to furlough every state employee who works for the Division who doesn’t do direct services (like those who work at the Developmental Center) we would have had to furlough every single person in the state 38 days. We couldn’t do that. That would have been just devastating. That is just a little more than one-fifth of everyone’s income and it would have destroyed pretty much everyone that works for us. So I said, “That’s really not an option that we can look at.”

The second option was to just do direct cuts and do a massive reduction in force. We would increase the caseloads for our Support Coordinators. Support Coordinators’ caseloads right now are 1 to 30 or 1 to 33. We could have increased that to as much as 1 to 50, and then we would have cut 40 – 50 Support Coordinators. But that violated our first principle which is to preserve services. I don’t think a Support Coordinator can do the kind of quality work. And it really did violate our first principle and we couldn’t really do that without damaging services to the people who are receiving services. Because how do you do high quality support coordination when your caseload jumps from 1 to 30 to 1 to 50. I just don’t think you can do it and it violated the second principle – preserving livelihoods as much as possible. We would have had to let go 50 Support Coordinators and another 20 and 30 people that provide support to Support Coordinators.

After exploring all the options, the option that we came to was if we accelerate the trend that is already existing of privatizing support coordination, will that give us the kind of savings that we need? And we determined that it would. We would have to close some offices. We would have to let go some of the

people that support those Support Coordinators. We would have to trim back some of the services, for instance on intake and on the waiting list – we may not be able to provide as many services as we once did. So that was the conclusion that we came to – was that the best possible way for us to meet all of those conflicting needs- the least evil choice in our “evil choices universe” – was to move forward with encouraging people to voluntarily become Private Support Coordinators.

We had to have at least 24 Support Coordinators opt to become privately employed by July 1, 2009 – so in a couple of months. It does look like we will have enough do that so that we won't have to actually do a reduction in force of Support Coordinators. But we will have to cut is some of the support professionals; so people who are our secretarial staff, people who are on our intake and waiting list functions. We are going to cut one of our Regional Directors. We are going to completely collapse our regions so that our administrative structure is much leaner and tighter. We are going to have to let go one of our Administrative Services Managers. It is going to be a really difficult thing. We are reorganizing all of the work that supervisors do. So supervisors will no longer be as focused on supervising day-to-day employees. They'll be spending more time doing contract monitoring and insuring quality. So it is a pretty dramatic difference and a pretty big change in the things that we are doing.

As I mentioned we are also going to have to cut offices. Currently statewide, we have about 25 offices. We are going to be trimming that back to about 10 or 11 offices. We are still going to have statewide coverage. Right now we have offices in Cedar City, St. George, and Kanab. We are going to be closing the Kanab office and will still have the offices in Cedar City and St. George. It is something that we are going to have to be able to meet these cuts. We know that is a difficult thing.

I think that is all the details I wanted to go into as far as the implementation strategy. By the way, if you are interested in seeing a copy of this implementation strategy it is on our website. Again, I think it is very important to be as transparent and as open as possible. This plan is on our website and our website is www.dspd.utah.gov and it is on the front page with a hyperlink.

One of the things that we tried to do as well in this planning process was to engage stakeholders. We knew with a change that is this significant that we would want to talk this through with our employees, with the Provider Network, with families, and with the people that we serve. I went around the state and met with our employees and with our Provider Network. We also had a public opportunity for people to come and provide us with their feedback. We got good feedback from that meeting. There were probably about 100 people at that meeting so it was a really good opportunity to get feedback. The other thing that was a pretty significant concern to me was that the Legislature chose to eliminate our Board. Our Board was not only a policymaking Board, but it was also an opportunity for people to work through the Board and give us information. We had a terrific Board who were really hardworking, really dedicated, really smart people who were really connected to their communities who heard from people around the state and then gave that information back to us. But we are missing that now and that concerns me because I think it will be critically important when we are considering big changes that we get feedback from all of the people who will be impacted by those decisions and changes. So that is one of the reasons I was excited to do this meeting and why I am willing to meet with anybody who wants to meet – because I think getting feedback is really critical.

The stakeholder engagement provided us with great feedback. The consensus of all the feedback we received was that the proposed plan that we have was really the best way to move forward – that it would be difficult, that it would be a big change, but all things considered, it was the best possible option. So we are moving forward with encouraging people to become privately employed Support Coordinators. Currently we are requiring that at least 24 volunteer to become privately employed, otherwise we will have to look at a reduction in force. It doesn't look like that will be a problem – we should see at least 24 go private. Over the course of the next year we will be encouraging more to continue to do that. We think that the end number that we will need to serve in transitions and for people who just can't be served

in any other capacity will be somewhere between 12 and 20 state employed support coordinators, but otherwise it is going to be a privately provided function.

Let's talk quickly about a couple of other significant cuts that happened to us. We also were cut \$265,000 in our non-waiver services. So there is a small number of people – about 260 people – that the state serves who are on state-funded only services. For one reason or another, they don't qualify for our waivers – they may have too many assets, their income may be slightly too high, it may be that they are just outside of the level of care required to meet the Medicaid waiver. For these 260 people, we provide services for them with only state dollars. We got just over \$500,000 and they have cut that in half by \$265,000. So there will be some people affected by that, but again if you personally are receiving Medicaid waiver services, you won't be affected by that. And we are doing everything possible to trim services rather than cut people entirely from services. There are some people who we have identified that can now qualify for the waiver so we will be transitioning them to the waiver. There are some people whose needs have changed and they no longer need our services, so those people will be cut from services because they no longer have a need. But for everyone that still needs our services, we are going to do everything possible to not cut them completely, but just reduce the services that they receive so that they still be able to receive at least some level of services.

The final big cut that we got was to our providers. We have a real partnership with the Provider Network and we appreciate the work that they do. Their rates were cut 3.5%. That may not sound like a huge number, but consider that in addition to that 3.5% cut the Federal minimum wage is going up in a couple of months. So at the same time that they are going to have to pay their people more their rates are being cut and it is going to be pretty devastating to the Provider Network. So we are doing everything we can as a Division to work with them. If there are paperwork issues that we are requiring of them that may not be critically important, we are looking at all of that to see if we can streamline processes and make it easier so that the Providers have a better opportunity and a better option rather than having just spend time and energy on administrative processes.

The most important thing that I want you to understand is that the Division, the Leadership Team, and I understand that change is hard. Change really is tough no matter what and it is especially hard when the circumstances are forced upon you. The economy in Utah just is not what it needs to be and because of that the Legislators had an impossible task. And like I say, they did a good job considering all there is in competing options and opportunities available to them. But at the end of the day, these cuts happened. They are real and we have to deal with them and we have to work through them so we can implement them in the best possible way.

So let me take just two minutes and talk about some future kinds of things and talk about the vision of where the Division – I hope – will go. One of the things that I think will be critically important is being able to have an objective way to determine a person's budget. Budget setting is a very complicated issue and currently we don't have an objective tool to always be able to determine what a person's needs really are and to determine if their needs and their budget match up at every given point in time. We are undertaking a couple of things. We are working to try and build an objective, strength-based assessment tool that will assess a person's needs. But at the same time acknowledge that people with disabilities have dreams, they have things that are important to them and we – when we are building services – need to acknowledge that.

And we are not talking about sending people off to Space Camp or on a sky diving adventure. But if a person with a disability says "I really have a love for animals" and we are going to put together a supported employment plan for that person anyway, why wouldn't we search for an opportunity to provide that person an opportunity to work with an animal? Those are the kinds of things that we are not really capturing that well right now. We have person-centered planning, but it is not really fully

implemented system-wide and I think that is a really exciting opportunity and that we can implement it system-wide and hopefully we can meet those needs in a way that also acknowledges a person's strengths.

The other thing we are doing along those same lines is a utilization review. We are looking right now at all of the budgets in the state. We started with the top 10% of budgets and we are right now looking at the next 10%. The next step will be people who are "outliers" based on a mathematical prediction of what their budgets ought to be. Those people who are serviced from that prediction, we are going to look and figure out "why are they so far from that prediction?" Then the next step will be to look at the people that are significantly below that prediction and why. Is it that their needs have been neglected? Are they being met in other ways? If they are being met in creative ways can we figure that out systemically and apply that across the board? So we are trying very hard to get the person's budget and their needs to match up at every given point in time. We also recognize that sometimes service programs are built based on behaviors that may only happen once every two years or every 5 years and in those situations, we may not need to build quite as intense of a program. But we do need to be able to respond quickly if someone does have behavior or someone has a problem. We need to be able to move in quickly with additional funding and provide the wraparound services and assure the providers that the funding will be available to them when things do blow up. Right now we can see people's budgets and they always move in a line like this (an upward slope). But needs fluctuate – they move back and forth – but budgets don't always follow that because needs spike, we throw money at it when it dips, no one comes forward and says "The needs of this individual have changed" because Providers know that if they say "the needs of changed", we are going to take funding away and they may not ever get it back. So we have to have a more responsive system so we can follow those ebbs and flows at every given point in time and really make that budget setting as rational as possible.

So those are some things we are doing that are kind of future-based. We are engaged in that process right now. We think that the objective, strength-based budget setting tool should be available early in September. The utilization review process is going on now. Those are just some exciting things that are coming down the road.

So with that – thank you very much and I will just open it up to all of you for questions.
Staff will be sitting by Alan to moderate the questions.

What is happening with the waiting list?

As you can imagine, the budgets for the waiting list are basically nonexistent. We still do have an emergency services process. If a person meets those requirements to be considered for emergency services they will go before committee and we will look to see if we have funds for those emergency services but for the individuals who don't qualify for emergency funding, the waiting list is – unfortunately – going to just grow and that really is a tragedy.

Is anyone going to be coming off the waiting list in the foreseeable future?

The short answer is very few. There will be court-ordered cases where we will still meet court-ordered cases and those few emergency services cases – we will still do that. The way we typically fund people that come off the waiting list – there are two things we do – the first is attrition. But attrition is really limited right now and whatever attrition there is, we probably are going to have to use it to meet mandatory additional needs. If the needs of people who are currently on the waiver increase, we have to meet those needs, by law, so attrition will probably be used almost exclusively for that. The other way is that the Legislature provides us with additional funding and they didn't do that so we are in really dire straits as far as the waiver is concerned.

Is there information on the DSPD website on how to become a Private Support Coordinator?

There isn't right now, but we could easily do that. But if you call the Division and just say "I need to speak with someone about getting information", we can connect you with the right people. A Private Support

Coordinator has to have certain requirements. The company doesn't necessarily have to have all of those requirements, but the individuals who are providing the services do have to have a degree and appropriate and a certain amount of experience – those kinds of things.

What will happen to “representative payee”?

First of all, Adult Protective Services is not going away. They did get some pretty significant cuts, but they are going to be okay. They will still be able to meet their statutory obligations. There were about 45 people working for Adult Protective Services and now there are probably about 35. But they are going to still be functioning. I want everyone to understand that. While they will still be functioning, they will not be doing representative payee program anymore. And we are not going to be doing that either. Social Security has been notified. [The Division] was only doing “rep payee” for about 25 people and Social Security has been notified that they are going to have to find alternative representatives for those individuals.

Is there private or grant funding available?

[The Division] does everything possible to go after those grants. A lot of those foundation grants have dried up – they just aren't out there anymore.

Would the DSPD Board have to be re-instated by the Legislature?

Yes. For a policymaking Board, we have to have something from the Legislature.

Would DSPD contemplate reopening offices that will be closing in the near future?

I don't think we would contemplate reopening offices because most of the employees will hopefully by July 1, 2010 (so a year and three months from now) hopefully most of our Support Coordinators will become private support coordinators and will be responsible to have their own office space, so I don't anticipate that we would reopen offices.

Who is going to provide guidance to individuals that are looking for Private Support Coordinators?

The Family to Family Network has actually produced a draft of a document that will help guide people as they work to find Support Coordinators and make the decisions related to the services that are being provided. It sounds like it is being finalized right now. The best resource for families is other families and “word of mouth”. If there is a Private Support Coordinator that is doing a good job for you, that is a good thing. We want to know that. Families that we work with will want to know that.

Let me talk for just a minute about this transition period between Support Coordinators who work for the State and Private Support Coordinators. Currently – and always – a person who is receiving services has a choice in who coordinates their services. If your Support Coordinator is doing a good job for you and they are a State Support Coordinator, you are more than welcome to stay with that State Support Coordinator. But if you think that that person is not doing as good of a job as you would like them to do for you, you have a choice. I think that is critically important. One of the things that really I am really concerned about is that if a State Coordinator has become a Private, they should not be soliciting your business. You as the family and as individuals that are receiving services should be deciding who is providing those services. YOU should be choosing who your Support Coordinator is.

They can provide you notice that they are leaving the state, but they shouldn't turn around and say “...and I want your business” or they shouldn't be going to your day support site or whatever that may be. You should be inviting them instead of them pushing you – hopefully that is happening. And we have seen some instances where Support Coordinators that were transitioning were being pushy. Hopefully we have gotten that resolved and hopefully that is not happening. I have not had a report of that happening in the last month or so, so I hope that that issue has been resolved.

If you love your Support Coordinator and your Support Coordinator has decided that they are going private, you can absolutely go with that person or you can choose to go out on your own and find a Support Coordinator that will meet your needs. As I said, the Networks are working on a document that will help you ask the right questions as you look for someone to meet your needs.

What happened at the Legislature and why was DSPD targeted?

At the last minute, the Health and Human Services Appropriation Committee – which sets the budgets for our programs – believed that the \$2.5 million that was slated to be cut from the State Hospital should be restored. And to restore that \$2.5 million they made cuts to the Division of Services for People with Disabilities (\$607,000). They also cut the Office of Recovery Services \$1 million. They cut the Executive Director's office \$682,000, and they cut the Division of Adult and Aging Services by an additional \$260,000. That is where the cuts happened. As to why – you would have to talk to the Legislators that made those decisions and find out what their rationale was.

Where will state-employed Support Coordinators be found after July 1, 2010?

They will still be located throughout the state – there will be 12 – 20 State Support Coordinators. There will probably be a small cluster along the Wasatch Front and then one or two in most of the outlying offices. The offices that are out there – the program offices – there will still be 10 – 12 program offices. So we won't lose all of our rural offices all together. That has been a real concern for me – I am very anxious about providing adequate coverage in the rural areas.

Can you tell us why Support Coordination specifically targeted?

I don't want to speculate because I don't know. You can go back and look at the records for the Appropriation Committee. There definitely some statements that indicate that some of the legislators believe that the government is too big. They wanted to see people cut and they wanted to see services preserved. As far as the targeting is concerned, I think it is because they wanted to see services preserved and they wanted to see the Developmental Center continue as a "service function", but Support Coordinators they saw as an "administrative function" and they aren't – they provide services.

An opportunity was given to Representative Beck to comment on this process. She commented that this is something that has been going on for a long time.

There are legislators that believe that we shouldn't provide supports for anyone that has a human services need - that the government should build roads, provide for the common defense – and people that need human services don't really matter. Now I will tell you that a lot of our legislators don't believe that. We have great legislators on our Health and Human Services Appropriations Committee. But some of them do believe that Human Services is an insular kind of thing and we don't really need it.

My son is on the waiting list and he is going to be graduating from Hartvigsen in a couple of weeks. Is there any money available to help him?

The supported employment program that was designated for people who were not receiving Medicaid waiver services – that has been eliminated. If there is something that he has a need for, and he has a waiver, those services have not been cut. Talk to your Support Coordinator – let's do a "needs assessment" and find out if that is something that he needs.

Would you be willing to go on record and say that the Legislature has an institutional bias?

First of all, I don't think that is true, so I won't say that. I think that every individual legislator is different. Hopefully you have a relationship with your local legislator – hopefully we all have relationships with our local legislators – and hopefully we can prove that relationship. Help them understand why the services are so critical and so important. That is what we have got to do. We have got to advocate. A couple of years ago when I was the Director of the Division of Aging and Adult Services, Senate President John

Valentine said “Do you know why public education gets the money that they get? It is because they are here, every day. They talk to us all year round. That is why they get the kind of funding that they get.” Number one it is critically important and education is important and we get that. But one of the reasons why they get so much funding is because they are constantly working with the legislators and building relationships. I think it is critically important that we do the same thing. Kris Fawson is here from the Legislative Coalition for People with Disabilities (LCPD). If you are not already involved, I suggest you get involved. We are always going to have the challenge of scarce resources being chased by unlimited needs and if we are not out there explaining why these needs are so critical, we are not going to get in that mix.

Representative Beck again was given an opportunity to talk. She spoke about working with legislators and the importance of knowing who they are and the importance of contacting them. She understands that it is hard for all families to physically be at the legislature, but families can participate in lots of different ways. She encouraged everyone to get involved and be proactive – BEFORE the last day of the legislature. That is when they get bombarded the most and from the most directions. It is hard for legislators to know what is important if they don't hear about it all until the last day.

Why is the Developmental Center getting continual funding?

The Developmental Center fills a critical role that isn't being filled in the community. There has to be an option for people whose services have basically “blown up” in the community. Currently there is not an option like that elsewhere. The Developmental Center provides a critical function. I don't think we can ignore that.

Why is it so difficult for anyone to get into the Developmental Center?

There is a very, very limited statute that allows us to take people to the Developmental Center under very limited circumstances and if a person doesn't meet those statutory circumstances, they can't receive entrance into the Developmental Center. We could always amend the law, but, as you all know, that is a challenge in itself. The mandates were not set by the legislature; they were internal things that we set as principles.

Why were cuts made across the board?

There were no “across the board” budget cuts at all. No one that is in services right now is having their budget cut arbitrarily or at all. The only people who are looking at budget cuts are those people who are served on the non-Medicaid program – there are about 260 people statewide who are being served on that program. We have done an individualized assessment of every single one of those people. We have determined if their needs have changed. We have determined if they are now Medicaid eligible. All of those people have had their needs very carefully looked at and assessed. There are some utilization review recommendations where we are recommending a person with really intensive services and one-on-one services and support – we have recommended that we reduce that, but in no situation have we completely cut a person off from services. In the utilization review we are recommending changes. The providers have had an opportunity to give us information and feedback. The cuts are being made only after a recommendation has been implemented, not before.

Is it too late once a “Notice of Agency Action” has gone out for someone to advocate?

No – there is a robust process and we let everyone know what that is. A person can appeal – they have appeal rights. We absolutely let them know that in the Notice of Agency Action.

Kris Fawson from the Legislative Coalition for People with Disabilities (LCPD) made a comment that we need to not attack other service systems. All families are being impacted. We need to talk about the value that services bring and what we can do to support the services and keep the services that we currently have as well as work for additional services.

I would tend to agree with that. I think agencies and legislators respond very well when a person comes and says "These are the things that my family member has received and this is what has worked". I don't think they respond as well to criticism or "how could you do this?" or "you are an awful, heartless human being" because they're not. I work with legislators and I can say that even the ones that I don't like personally – ones that I would not opt to sit down and have dinner with – they are still good people. They try really hard. We don't see eye to eye on philosophy, but they try to do everything they can to be a good legislator. I think they do respond to positive rather than negative.

What is DSPD doing to support the Support Coordinators that want to go private and will the transition be seamless?

Well, we are doing everything we can to make sure that the contracts are expedited. We have met with the Support Coordinators that are interested in becoming Private Support Coordinators. We have given them model forms and documents and training and education about how to do this. There may still be a lot of confusion. I think that we have done whatever we can to help mitigate that confusion. We are still willing to meet with any Support Coordinator too. Anybody that says "I would like to become a Private Support Coordinator," we are trying to help them. Now, some of them won't be qualified. Some of them may not have the skills required and experience required and they may not be able to qualify. But if they qualify, we are trying to help them. Can we make this seamless? No, and I will tell you why. The person who is receiving services has the option of choosing who their Support Coordinator is. If we were to say to a Private or State Support coordinator, "You are deciding to go private, and you get the chance to build your business, and then you can take all of your clients with you, and then they will be in your business." That would violate a couple of principles as far as I'm concerned. It is a HUGE conflict of interest. First of all, I don't want people building their business on State time – that would be a pretty nasty conflict of interest. The second thing is those individuals who aren't satisfied; they need to be able to say "I don't want that person as my Support Coordinator." The message that I have consistently given to our State employees that are contemplating to become Private Support Coordinators is that "yes, we are going to try to do everything we can to assist you, but you need to build your business on outside time and you need to not solicit people inappropriately. You can let them know – notify them that you are moving, but then it is their choice and their option."

Many families on the waiting list are in crisis and have a "desperate need" and many of them need respite. Are there any alternatives or options available to these families?

Claire Mantonya, who is the Director of the Utah Developmental Disabilities Council, put through a very innovative bill this year to create a "Respite Trust Fund". There aren't any dollars in that trust fund yet, but I'm confident that she will get them, because that is what she does. Eventually it will happen. Right now there are very few options. If people can pay privately for respite, there is a little bit opportunity that way. For the most part is a really difficult issue. I do want to tell you that it is something we are thinking about constantly. We are looking at ways to change our waivers, provide lower levels of services to more people; provide fewer residential services if possible. So it is something that we think about and are concerned about. I wish I had a better answer for you. There were some really creative things we did a few years ago when we had some funding for family support and for respite programs, but unfortunately those "new" kinds of things are the first to go when budgets get cut.

A comment was made by a participant that she was having a really positive experience with her Support Coordinator and the services she provides and the increase in the quality of services that she has been able to provide since she has "gone private".

It's nice to hear positive experiences with the private Support Coordination instances and if other people off-putting instances, the good news is that they have options. I would hope that in settings like these, that someone would come up to you and say "What is the name of that Support Coordinator that is doing such a good job for you?" We really do hope that by putting that kind of competition into the system that we will see some of those results. And I know that it is going to be hard. I am not blind at all to the idea that for many of our Support Coordinators, this is going to be a big, big change. They don't want to start their own business, or they like working for the state, and I get that. And I wish that these cuts had never happened, but I can't turn back the clock, unfortunately.

Are you telling me that if I am not happy with my Support Coordinator, that I can request and make a change?

Everyone has a choice in the person they have as their Support Coordinator.

Comment was made by a participant that if "there is a service that you need that isn't being provided, get together with a group of like-minded individuals and see if you can't create that."

The government is not as good as the private sector is at creating services. We do our best. We try really hard. If I had to put my money on a group of parents versus the government, I would put my money on a group of parents.

Since the waiting list is not moving, should people still sign up for the waiting list? Since there is no coordination of the waiting list, how do people know if they are still on the waiting list?

Every year, people on the waiting list should get an "annual needs assessment", so at least once a year someone should contact them. Yes – I would say families need to be on that waiting list if they believe they are available for those services. Eventually the economy will improve and we will see movement along that waiting list. We are doing everything we can to think of creative solutions to help that waiting list move along. So yes, I would definitely tell families to get on the waiting list.

Are all of the intake workers being dissolved?

Right now we will have to cut 2 employees in intake. There will be about 8 employees left that work in intake and we will still man the phones, we'll still do the assessments and screenings. It will be an abbreviated screening. We won't do full eligibility determinations up front because it doesn't make sense if we are not moving anybody off the waiting list anyway. So when slots open then we will do full assessments.

Will Support Coordinators still be using the Support Intensity Scale?

Yes – it will still be used. The Support Intensity Scale will be a big part of that objective, strength-based needs assessment tool that will also be used for budgeting. We are going to incorporate all of the things that are in the system now – so we are not going to retrain on all of that. We are also going to add a component about "objective, strength-based recognition" and we are also going to add a component about budget setting. Yes – it is still going to be used, but it will be enhanced and updated.

Is Acumen going to still be a part of this?

Yes. I just met with Acumen yesterday; they are still going to be a part of everything. They gave me their commitment. Acumen is a great partner and we appreciate the work that they do. They provide fiscal intermediary services for about 80% of all the people who receive DSPD services so they are an important partner.

Will I be notified if my current Support Coordinator decides to become private?

Yes. You'll have information about that situation. The Support Coordinators themselves can provide you with notice. If they don't, we will notify you. Somehow you will be notified that that is taking place and that you have a choice in the person is that will be your Support Coordinator.

Can you give examples of providers and how will the 3.5% affect them?

Our providers are people like Acumen, RISE, TURN, Danville, Columbus...we have contracts with about 150 different providers. Some of them are really small and some of them are pretty big. Those are the kinds of providers we are talking about. How will it affect them? It is going to be really challenging. They are doing everything possible to gear up for it and get ready for it. I think they are going to be just fine until the rise in the minimum wage hits, and then I don't know what is going to happen to be honest with you. I think it is going to be really, really challenging for them to retain the quality of people if they have if they look around and say "This is hard work, and I don't get paid very well." That again, is one of the things that we are constantly thinking about – are there other ways that we can encourage the legislature to provide more funding for people who provide the direct services. The other part of direct services that is really challenging, I think, is that there are a lot people who will be retiring in the next 5 to 10 years. Those people are going to start needing direct service professionals. There is going to be a big transition from the people who are currently providing those services and they may go into providing services for older adults.

What can I do if I am not happy with my Support Coordinator and I can't get a response from them?

You have a Support Coordinator, and that Support Coordinator has a supervisor. I would suggest that you talk with your Support Coordinator and find out who the supervisor is. If you aren't happy with your Support Coordinator, you are welcome to ask for another one. There are options for Private Support Coordination. Call me (Alan) at (801) 538-4135 or send me an email at akormsby@utah.gov and I will see what I can do. It is my job to help you find a solution – I may have to tell you "no" too, but at least you know that you have talked to someone who has looked through the entire system for you and has looked for other opportunities.

Will services ever get to the point that families are asked to make up the difference in the cost of services?

No, they cannot do that. Medicaid rules are very, very strict about whether or not you can force someone to do a co pay and the short answer is no.

If rates are being cut, doesn't that mean that meant that the amount of money in our individual budgets will be cut as well?

The hours of service are not being cut, the rates are being cut. The services should stay exactly the way they should be. The amount of funding available overall is being diminished and it will be felt at the Provider level.

How will the Support Coordinators become Private Support Coordinators?

There are two ways for a State employee to become privately employed. The first is they can choose to get their own contract. That is a practice that takes between 60 and 90 days. The second way is they can join an existing private support coordination company – they can become an employee of one of those companies. That would be perfectly seamless. There would be no transition there for someone who wanted them to be their Private Support Coordinator.

Would the Private Support Coordinator make less money if they decided to become an employee of a company instead of starting their own?

They may or may not. I don't know. I haven't seen any of those contracts, so I don't know.

Will meeting space be available at the new building for community events and parent meetings?

I am not sure if all of you are aware, but will be moving into a new building in December. I would assume that the answer is yes. I am sure that can be arranged. The new building will have plenty of meeting space and we will work with groups to make arrangements. I will find out the answer and will let you know.

What about Self-Administered Services? Are employees going to be paid differently?

I assume that the person asking this question means employees of the Self-Administered Services model. I don't think that rate cut is going to affect the funding that you have available to pay people that you have working for you under the self-administered model. I'll find that out for sure and we'll post it on the website. I think you set the rate of pay so I don't think it will change anything.

I have a small budget. I will have to pay extra for Private Support Coordination now?

No. Let's say you get a budget of \$5,000. Let's say you buy some services with that – some respite services. Your support coordination – if you had to pay for that – would be almost the full \$5,000, so that is not the case. Nobody is being cut that way.

Did the Division consider furloughs when looking at ways to save money?

Furloughs were considered. They just didn't get us where we needed to go – they weren't adequate to meet the significant cut that the legislature gave us, we couldn't do it with furloughs. It would have been 38 days – and keep in mind that would be 38 days on a 4 day work week. That is almost 10 weeks. Can you imagine your boss coming to you and telling you that you would have to take 10 weeks of unpaid vacation? We couldn't tell our employees that almost a 1/3 of their income would be cut off. We just couldn't do that to our employees.

Kris Fawson from the Legislative Coalition for People with Disabilities made a comment that families need to let their legislators know what they are doing with the money they have been given and let them know that there is a gap in the services available and those that the families and individuals need.

Is saving money the reason that cutting Support Coordination works and the reason that the Division has chosen that plan?

The way that DSPD will save money by encouraging people to become Private Support Coordinators is that we can close that line of offices. We can trim the number of people that provide support to the Support Coordinators. We can cut back on our supervisors and change their role. It also shifts the funding from the allocation unit that it is currently in to services. That is how we are able to save some money is by shifting some those things.

How will Private Support Coordinators get trained and stay up-to-date on the services available and how will collaboration be facilitated?

There is an attempt right now to form an association [for Support Coordinators]. They met with the Utah Association of Community Service Providers (UACS) to see if they can fit under that umbrella. They will probably be forming their own association (that is the last that I heard). As far as training is concerned – mandatory training will still come from the state. We'll still be providing a whole lot of training efforts for

the Private Support Coordinators. They will also probably receive training from the Health Department as well. So as those mandatory changes come out, they will get the training they need.

Will Private Support Coordination be the best option for families?

I cannot say that. Everyone's needs are different. The most important thing is that you do have options and you do have a choice. Whatever you individually think is the best way to use that choice is up to you.

Representative Beck made a comment about the importance of contacting our legislators – they are doing the best they can to meet the needs of individuals across the state.

We have got some really great legislators, and they will take the time to listen to you – especially if you can get 2 or 3 people with the same message. Legislators will really listen if there are 3 or more people – you have a constituency. What do legislators want? They want to get re-elected and they will work hard for you especially because they know that you and those other 2 people are representative of 200 or 300 people in their community.

How many individuals will be kept on the Brain Injury waiver?

The Brain Injury waiver has not been cut and that is some really good news. Let me share with you some good news. At the beginning of the legislative session we were looking at total cuts of the Brain Injury waiver and total cuts of the Physical Disabilities waiver. Those programs would have been eliminated along with lots of my employees. So the fact that we are okay on the Brain Injury waiver, we are okay on the Physical Disabilities waiver, we are okay on services for people who are receiving community services. The only services that are really being cut are the 265 Medicaid people – and I am going to have to let go probably about 15 of my employees. But, boy, am I glad that I only have to let go 15 and not 227! That would have decimated our services! Again – thank your legislators for those good things that they did because it was a challenge.

What about the 1,700 people that are waiting for services?

Unfortunately, for those families, there is not good news. The despair is growing. I am sorry. I really am. I wish there was some good news I could give you. The one piece of good news that I can give you is that we are working really hard internally to make some changes to see if we can't provide some services to those individuals who need it, but are not yet at that "blow up" stage. If you look at all of the things we do as a Division, so many of them are driven by the waiting list. If we could just find ways to provide a limited service package to those people who can be served with a limited service package and not have to wait until the situation explodes, I think we would save a lot of money. I think as a state system we could do a lot of good with that and save a lot of money. So those are the lines that we are progressing under to see if there is anything we can do to change how the labor is written and to provide a limited services package. We are definitely concerned about that and we are working hard to come up with some answers. Families need to work together and find ways to support each other. Working and networking as families is going to be really important and really helpful.

How many Support Coordinators will have to "go private" in order for this to work?

None. No one is going to "have to" go private. We will not force anyone to become a Private Support Coordinator. By July 2010 there will be a really limited number (somewhere between 12 and 20) who are still state employed. So for those there are about 140 currently who are state employees, those people are going to have to make some hard choices. But it is their choice. We are not going to force them to do anything. Do I recognize that it is going to be a tough choice for a lot of people? Absolutely, but it is a choice. The other option would have been that on July 1 we would have cut 50 and then we would have probably had to cut 30 or 40 more. At the end of the day, we would see caseloads of 1 to 67 like they are in California. It is going to have a big impact. We are definitely not blind to that.

Families were encouraged to contact the Utah Parent Center and the Family to Family Network in order to be connected to other families and provide support to each other. There are local supports across the state and families were encouraged to make those connections.

The Family to Family Network is alive and well. If you need to get connected, visit the link at: www.utahparentcenter.org. Families are probably the best possible resource for other families— especially in these hard times.

How can we contact the Legislative Coalition for People with Disabilities?

Send an email to Kris Fawson a kfawson@q.com. It is a fantastic organization with lots of great information. Contact them today!

Is there anything in the upcoming special legislative session that will impact DSPD?

Not directly. There is an attempt being made on our behalf and the Department of Health. They made some math errors in calculating the AARA (the Obama stimulus package) – they overestimated the amount we would be getting. They left us and several other organizations, including the Department of Health, without enough funds to be able to draw down the state dollars that were expected. It is anticipated that they will probably look at that, but really nothing else.

What will be left of DSPD now?

That is a very good question. We are looking at a very significant cut, but it is also a very targeted cut. It is not going to be the end of DSPD. Our total budget is about \$200 million – between state and federal funds. We were cut about \$4 million. The way that it was targeted makes it especially painful. The good news is that services aren't being cut. We're not making drastic cuts anywhere. So what will be left of DSPD? Well, a lot. There are 950 employees currently. There will probably be at least 120 less by July 2010. So there will still be 830 employees. We are still going to be here. We will still provide the help, the support, and the statewide leadership. We will still ensure that contracts are monitored, that providers are doing the right things, to monitor support coordinators – whether they are private or state employed – to make sure they are doing their jobs and people are getting the services they need. We'll be here. We'll be strong, we'll grow through this. It will be difficult and challenging, but we'll be just fine.

Thank you very much. I appreciate your time and your attention.