



## DS Task Force Workgroup Recommendations

Below are the recommendations from DS Task Force Workgroups: Oversight, Accountability & Transparency (OAT), Safety Net, and Community Resources. The recommendations were prioritized in a survey distributed in July 2021 to all 158 members of the DS Task Force and workgroups. System & Fiscal Reform and Services Access & Equity Workgroup recommendations have already been reviewed and prioritized by the DS Task Force.

The top three priorities for each workgroup are in blue font.

### OAT Workgroup Recommendations:

1. **Shift the system to revolve around the person so an individual determines their own outcomes instead of the system dictating outcomes.**
2. **Align outcomes and measures with the Home & Community-Based Services Final Rule, including where individuals spend their time and the availability of new alternatives post pandemic instead of returning to segregated settings.**
3. **Outcomes & measures should be meaningful to individuals and ensure individuals have equal access to supports through regional center services.**
4. Explore modifications to Individualized Family Service Plan (IFSP) and Individual Program Plan (IPP) process, to focus more on outcomes, ensuring consistency of person-centered practices across regional centers.
5. Services should address post-pandemic needs and focus on mental health and wellness.
6. Future surveys and/or data collection for self-advocates & families should utilize person-centered language, ask questions in a qualitative way, provide clear directions so self-advocates & families understand how to respond and capture if individuals are made aware of other service options/possibilities.

### Community Resources Workgroup: Employment-

1. **Increase availability of services that utilize innovative strategies and practices to increase employment options**
2. **Continue to use alternative services and blended service model, flexibility and whole-person wrap around services for employment and other services that occurred during the pandemic**
3. **Provide employment education across the system – to individuals, families, providers, regional centers, state agencies, employers and community partners**
4. Outreach to the business community and possibly a media campaign to highlight employment of people with I/DD
5. Begin individuals' employment discussion and planning earlier in both the IEP and IPP

processes

6. Create short term action items related to employment and a focus group for long term policy strategies
7. Improve training and support on employment for staff (providers and RCs)

## **Community Resources Workgroup: Community Placement Plan (CPP)/Community Resources Development Plan (CRDP)**

### **Recommendations-**

1. **Provide more information on & more effectively communicate housing solutions and navigation for families, especially communities of color**
2. **Explore new residential and day service models and staffing based on flexibility, what each person needs, and blending services, to include funding structures that allow for more professionals to be brought in to SLS or day programs**
3. **Develop service models for the aging population to keep supports in place, integrate services for older parents and children with I/DD, and provide training to prepare people who may no longer live at home**
4. Develop family-owned housing statewide, establish consistent guidance on the use of Accessory Dwelling Units (ADUs) and Jr. ADUs as SLS or other innovative housing options
5. Enhance interagency collaboration to reduce duplication of efforts and barriers to innovation/development of service models intended to increase choice and decision making
6. Identify technology solutions to assist with housing, SDP, remote services, remote employment & device maintenance
7. Improve quality assurance and oversight, possible from a third-party certification entity and done differently for smaller providers to reduce financial impact

### **Safety Net Workgroup Recommendations:**

1. **Focus on prevention and de-escalation**
2. **Increase the number of specialized providers and knowledgeable, trained staff**
3. **Create more accessible mobile crisis services; focusing on in-person and training for staff, families & others involved**
4. Develop local crisis services and expanding various models to include transitions
5. Identify First Responder outreach and strategies that can be expanded or replicated

