

## REALTIME FILE

Deaf Access Solutions  
Olmstead Community Meeting  
April 28, 2020

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Start Time: 12:30 PM ET

>> I've posted the instructions on how to get captioner and interpreter in the chat box. I've also let people know to be muted when they come onto the call. And of course you can be unmuted to ask a question. But I do not want one person to ask a question and then it turns into 50 people talking at the same time.

>> Hi this is one of the sign language interpreters.

>> Good to see you.

>> Good to see you too.

>> I'm trying to figure out how to resend the instructions with both of your names. Because right now I think I just have yours.

>> Okay. I'll also sign at the beginning in case we can't get the clear instructions that we have two interpreters and then I'll turn my video off so they know to click on her.

>> Okay, great. Thanks.

>> Hey, Ed, if you can hear me, I have a logistical question.

>> Yeah?

>> Is it possible to make more than one person a host?

>> Yes. Give me a second here.

>> Okay.

>> Hi this is Silvia, can everyone hear me?

>> Yes, we can hear you.

>> I'm trying to get on the camera but something is happening and I'm unable to connect.

>> Oh no. Are you getting an error message or what is happening?

>> It's just blank. It has my initials but that's it.

>> So do you see a bar in front of you that has the microphone, the camera, the thing to share a screen, do you see all of that what I'm talking about.

>> Let me see. Okay. I press it but I'm still not visible.

>> But you're not getting any sort of error message or anything?

>> It has access to camera not allowed.

>> Oh yeah, if you're doing it from like a tablet or a phone --

>> iPad, from the iPad.

>> So go into your settings on your iPad and click on where the app is and allow it access to your camera.

>> I see the camera but --

>> Oh when you go into settings, you know where the settings thing is on your iPad? Are you okay with not being visible then to people?

>> I would like to be. I'm all cute.

>> I wish I was there to help you. Let me figure out if I can help you. Hello, I see we have a few community members already joining. We have to wait until 1:00 to start. Possibly a few minutes after 1:00, it's just now 12:52 so hang tight. We see you and we'll get started soon..

>> Okay Jessica, I got it.

>> I see you now.

>> Yes.

>> Hey, Jessica.

>> Yes? It should be under the participants thing.

>> Great, thank you.

>> I see it but it's grayed out so I can't click people.

>> We can just ask that people mute. Yeah, cool.

>> As you're coming on if you could please mute your phones or computers, that would be great.

>>> Are we all logged in?

>> If you're not on mute, you should try to mute yourself.

>> That's okay, I wasn't clear if I was late or had a tech problem.

>> We haven't started just yet, we're waiting for people to log on. It's good to see you by the way, hi.

>> Good to see you.

>> Hey, Jessica?

>> Yes.

>> You want to take this time to remind folks about the chat section.

>> Sure. So while we're waiting for people to jump on because it looks like quite a few people are coming on here now what we want to do is remind everyone how we're going to be communicating during this Olmstead town hall. It's very important to know about this. Could you please mute your phone? Excuse me? As I was saying everyone, we want to hear from you so during this Olmstead town hall the way that we're going to communicate with each other is to actually use the chat box. Everyone is going to be muted when they arrive and when there are portions for questions we're going to ask you to use the chat box. And Caroline is going to be monitoring the chat box for us. If there is a question that we do not see or a question that you don't feel was answered adequately enough you can always contact us after the meeting and I will give you some guidance as to how we're going to communicate with everyone on this call because the whole point is for us to continue the conversation around Olmstead after this call. We hope that this community town hall will be the first of many meetings with people in the community around Olmstead. So we want to hear from you. So just because your microphone is muted, it doesn't mean that we don't want to hear what you have to say. And with that since it's about 12:05 I think it would be good for us to go ahead and get started. I'm going to share my screen now with everyone. We've created a powerpoint that will help us to walk through the agenda together and to kind of go through the discussion. So I will share it and I want everyone to tell me in the chat box or just nod if I can see you if you can see this screen. All right. Can everyone see the screen? Awesome. So for those who have joined from the community this is the Olmstead community town hall. It is a meeting around the district's Olmstead community integration plan. And it's a chance for us to partner with the community and get some feedback from you. First let's go over a few housekeeping rules. Due to the size of the group, please keep your phone muted until it's time for question and answer sessions. Please look in the chat box for instructions on how to see captions or the interpreter. Our two interpreters for today are Emma and Erin and they will communicate with you if you are using an interpreter as to which one of them will be interpreting or when they switch off. There will be multiple opportunities for question and answer via the chat box throughout the town hall. As I mentioned before, I'm going to mention again, we want to hear from you so please use the chat box. Someone from ODR will be monitoring the chat box for questions. So because the focus of today's call is to answer your questions about the district's Olmstead plan, we will not be able to answer individual questions around Covid-19. We are going to have a section on Covid-19 as promised in the event brite. I would like us to follow up with individuals directly. Again could you please mute your phone? The follow up after today's call is going to include a few things that ODR is going to send to you. One is going to be a list of all of the agency points of contact who have participated today, opportunities to become involved in Olmstead planning. Because as I said before this is going to be the first of many meetings we're going to have with you. And ODR's Covid-19 resource disability guide. This is something that ODR has been working on since the start of the emergency to try to compile the resources available from the government to the disability community and that will be coming out to you all very soon. So why are we here today? We're here to provide those of you who don't know about the Olmstead plan or may have heard a little bit about it information on the plan and what it might mean to you. And to answer your questions and give you an opportunity for input. It's important to note that the district is actually in the process of developing a new Olmstead plan. And we're going to talk a little bit about what that really means. But what we want is community involvement all the way. We have the opportunity to together create a new Olmstead plan that will be launched in 2021. What we want is for this to be a partnership with many of you to hear your ideas and thoughts of what you want to see in the plan. We also want to take a little bit of time in this call to provide useful resources to everyone here around Covid-19 for the disability community. Lastly we want to continue to partner with you throughout the Olmstead planning process and we'll talk about specifically what that means at the end of our call. This will not be the last time that you'll hear from ODR. So what is

Olmstead? Olmstead is actually a supreme court case that happened in 1999 where two women who were from the state of Georgia were living in institutionalized care in nursing homes. Both of these women, their doctor had said that it was okay for them to go, they had agreed to the placement in the community being the best for them. But at the time the state of Georgia did not have the supports in place for these women to successfully transition into the community. This made it all the way to the supreme court, the highest court, and what the supreme court said was that under the ADA title II, state and local governments have a responsibility and an obligation to make sure that they have the supports and services in place for people with disabilities to make meaningful choices about how they wish to live in the community and to ask for reasonable accommodation as part of their life in the community. Community integration is nothing if not the basis of the ADA. Everything in the ADA says people with disabilities should have equal access. And that includes how we live, how we work, and how we experience our community. So that being said, the district's Olmstead plan is our response to the supreme court's decision in 1999. Now this plan that we're creating now, it's certainly not the first Olmstead plan that the district has had. It is actually, we've had a plan since 2012. And we have specific agency partners. We'll talk a little bit about the plan specifically as we go forward. But first I would like to introduce the partners who are participating with us in the Olmstead plan in order to ensure as the supreme court said that people with disabilities are able to live and work in the community of their choice. So with that, I'm going to pass it to a few other people who are also on the call. And these again are the partners who work with ODR to establish the district's Olmstead plan. And first I'll actually start with us. ODR because we're not a services agency, we don't have a direct rule of specific services we provide in the Olmstead plan. But because we are the district's Americans with disabilities act compliance office, we are actually here to ensure that it's coordinated and provides services for people with disabilities to live in the community. Joining me today on the call is actually our director Matt McCullogh and he is here listening in as well. He helped coordinate the district's Olmstead plan and part of that is pulling in community members like you. The next agency who participates in the district's Olmstead plan is the department of health care finance. And our representative here today from DHCF is here. I'll turn it over for her to say a few words about what DHCF's role in the Olmstead plan is.

>> Good afternoon everybody. I'm Leyl a Sanigol. Our mission is to improve the health outcomes of low income residents of D.C. by providing access to a full range of services. This definitely includes health care coverage for our D.C. residents with disabilities and long term care services are an important part of that coverage. When it comes to the district's Olmstead plan, health care finance, D.C.'s medicaid agency funds community based long term care, rehabilitative services, also enrollment services delivered by our partner agencies in the plan. You're going to hear from them in a minute like the department on disability services, department of behavioral health, and department of ageing and community living. So we provide some funding for these services through medicaid. In addition we also operate D.C.'s elderly and persons with disabilities home and community based services waiver program along with home health services for people who are in D.C. medicaid. To talk a little bit more about the services that we provide, services in D.C. medicaid's elderly persons with medical disabilities, home and community based waiver program that help people to transition and move from long term care facilities like nursing homes back home include universal assessment for medicaid long term services and supports, transitional case management, and community transition services of up to \$5,000 for household set up. That's for things like furniture, things like pots and pans. It could be for a security deposit as well. But once people are actually in the community, D.C. medicaid also covers services that help them stay there. Some of the services are personal care, skilled nursing, occupational and physical therapy, as well as assisted living. So combine these services and support activities of daily living like bathing, getting dressed, walking, and also instrumental activities of daily living like meal preparation, house work, and laundry. And then some of the other services like their names imply are more specialized like skilled nursing, sometimes respiratory care, someone is on a ventilator, or also support physical therapy regimens. This is just a small sample of what we do, the services we provide. Thanks, Jessica. We are glad to be a part of the plan.

>> Thanks so much, Leyla. Next we'll move on to the department of ageing community living and Adam Mingal.

>> I'm Adam Mingal with the department of ageing and community living or DACL. I'm going to talk a little bit about what our agency does including the services we offer and how it relates to the Olmstead planning that's going on right now. So DACL plans, implements, and monitors programs in health, education, and social services for D.C. seniors, adults with disabilities and their caregivers. Our ageing and disability resource center or ADRC is the front door to existing services in D.C.. So whether you want to explore available programs or resources or need assistance with long term care planning, you can call our information and referral assistance line which is the number for that is 202-724-5626. And we can help you create a plan for the future. So the agency works in partnership with more than 20 community based organizations across the district to offer over 40 free or low cost programs to help all D.C. residents in any age, stage, or ability. Some of the programs and services the agency offers include transition assistance to help facilitate safe exits from nursing homes or institutions, benefits from health insurance counseling including prescription drug counseling, legal services through legal counsel to the elderly, LGBTQ programs, our safe at home program which is a very popular program, nutrition services which include both congregate and home delivered meals. Right now because of Covid all of our congregate meal seniors and people receiving meals through community sites are now getting meals delivered. Adult protective services which recently came over to us from the department of human services and they investigate allegations of abuse, neglect, self-neglect of adults. Our senior wellness centers which are closed temporarily due to Covid. And we hope to open those when the public health emergency is over. And transportation to and from essential medical appointments for qualified seniors and caregiver programs. As I mentioned the majority of our programs are operated by our community partners and we oversee those programs. Every ward in the city is assigned a lead agency to coordinate service delivery with the network. So these include terrific Inc. Seabury resources for the ageing for wards 5 and 6. And finally east of the river family strengthening collaborative for wards 7 and 8. So our role in the Olmstead plan is kind of multifaceted. I would say our most prominent role is coordinating transitions for seniors who live in nursing homes and are interested and able to live in the right community with support. We visit nursing homes as part of that mission. Our transition specialists work one on one with nursing homes to help them apply for benefits that might be available and help them understand decisions they need to make for transitioning into the community. Also Olmstead is our safe at home program allowing people to live safely in the community through adaptations like grab bars and things like that. The meals program that I mentioned and also understanding your health insurance options which include or can include medicare, medicaid. Understanding which of those might be appropriate for a person can be rather complicated so we have a couple numbers for folks if they're interested in reaching out about their individual concerns or situations. So our health insurance program is reachable at 202-727-8370 and D.C. health link is 855-532-5465. And if you're not able to write all of these numbers down we're going to send all of this out with the other agencies materials after the meeting. So don't worry about that. Finally I'm going to touch on some of the data we're proposing to track as part of the Olmstead plan. And these are again things that we want to hear feedback from the community on and they're kind of a draft at this point. But we think they're relevant to the agency's place in the Olmstead plan. The metrics we're looking at right now in tracking and some of these we already tracked are the community of transition team clients that transition from nursing facilities, the number of resident counsel meetings that someone attends and presents that on transition. The percentage of transition clients without housing are able to locate and secure housing with the assistance of DACL. The number of safe at home adaptations performed in a given year, the number of clients in our state health insurance program, the number of outreach events globally that our agency hosts or funds, the number of senior wellness center attendees, and that's a service suspended because of Covid. But we're hoping very soon when it's safe for those to resume operations. And finally the number of clients receiving nutrition assistance. So that's kind of a high level overview of what DACL offers, our role in the Olmstead plan and some metrics we're considering tracking. And we look forward to getting feedback from community members going forward. So with that I'll turn it back over to Jessica.

>> Thanks, Adam. I did notice while you were talking Heather from DACL posted some of the numbers in the chat box for individuals that Adam was mentioning in his overview. So some of that information will be there. But as he stated it will also be sent out to everyone who attends this call afterward with some of the materials. Before we move on to the next couple of agencies, I want to ask again that if you don't have your microphone muted to please do so. And you can do that by clicking the microphone next to your name and turning it from blue to red. All right so next we're going to move to the department on disability services to have them give an overview of how they fit into the Olmstead plan and we'll start with Ed Bynum. Ed, are you there?

>> Just getting my stuff together. Actually I think Dr. Roberts is going to present if that's all right.

>> Okay so we'll turn it over to Charlotte Roberts then.

>> Hi, everyone. Again on behalf of the department of disability services we really are thankful for the opportunity to meet with you all today in this very unique but I guess it's a platform that we're all relatively used to by now. I just wanted to take this time to give a very brief overview of the services that we offer within our agency and how we kind of fit into the Olmstead landscape and then I'll ask any other agency partners that we have on the line to chime in if I seem to miss anything. So really in a nutshell the department on disability services just provides the residents of D.C. with information oversight and



coordination services for people with disabilities and those who support them such as service providers and employers. Person centered thinking is a process behind, positive control and self-direction of people's own lives. We're working to implement this through training sessions and other agency wide initiatives. Social Security, disability insurance claims, but the two administrations that really oversee and coordinate services for residents with disabilities is the developmental disabilities administration DDA and the rehabilitation services administration or RSA. DDA insurance that residents with intellectual disabilities receive services and supports that they need to really leave self-determined and valued lives in the community. The way that they do that is through offering outreach in service coordination services, they help with the assistance of developing and managing a provider network that delivers these community based services, residential, vocational, employment, and also individual and family support services. And they also help to monitor the implementation of these services through a comprehensive quality management program. So with RSA they really focus on employment and really ensures that people with disabilities achieve a greater quality of life by obtaining and sustaining employment. There's economic self-sufficiency and independence that we all realize comes with employment. Competitive, integrative employment is the first and overwhelmingly performed option for adults with disabilities. RSA works tirelessly allowing for employment marketing and placement services, vocational rehabilitation, inclusive business enterprises and the support for the D.C. center for independent living. As I mentioned our involvement with Olmstead, maybe in 2007 or 2008, D.C. was tasked to work with other district agencies. We worked with our Olmstead partners to develop this cross-agency system that's based more on an individual's preference of their concrete goals while in transition from institutional based services to more long term supports in the community. Again we really are thankful for this opportunity. We're looking forward to the listening feedback from the community and our internal partners and we look forward to talking to you about it.

>> Thanks so much, Charlotte. Does anyone else from DDS have anything to add?

>> Hi this is Angela from RSA, Angela Spinella from the transition unit. I think Charlotte did a great overview for us. Thank you, Charlotte. And I will be answering some of the questions as we go along later in our town hall. So thank you for having us and we are thrilled to be a part of the Olmstead working group process.

>> Great. So now we'll move on to the department of behavioral health and that will be Jonathan Brooks and Raphaëlle Richardson.

>> Hello, my name is Jonathan Brooks. I'm with the department of behavioral health.

The mission of DBH is to develop, manage, and oversee a public behavioral health system for adults, children, and youth and their families that is consumer driven, community based, and supports prevention, resiliency, and recovery to the overall well being of the district of Columbia. DBH has a firm foundation in the community. The agency provides mental health and substance abuse services on the behavioral health platform. The ability to serve this group includes a wide range of people helping a large segment of our community. Addiction and psychosis can touch many of us and impact how our families function. However we must help. DBH in its primary role connected to the Olmstead plan is that it manages St. Elizabeth's which functions as the city's publicly funded behavioral health hospital. DBH also supports core service agencies that provide community services which cover the entire spectrum of needs. DBH's peer run centers provide evidence based practice within the district. The goal at St. Elizabeth's for transitioning individuals in care back into the community is the ultimate outcome pursued by treatment teams who support those receiving services. Imagine people who don't use computers or even know how to operate a cell phone. Treatment planning has the utmost importance because supports must be identified to help create an environment where barriers are overcome by the individual and the team supporting the community engagement. DBH collaborates with the office of disability rights and other D.C. agencies in order to support an annual Olmstead conference. The team last year focused on the forensic justice involved consumers. The vision of DBH includes that recovery is the expectation and placing people in community placements so that they succeed and have productive lives is a driving motivation for most employees who provide the support to this vulnerable population. Thank you.

>> Thanks so much, Jonathan. So now that we have had each of the agencies talk a little bit about what they do with Olmstead we're actually going to move into the Olmstead plan that we're now working on for calendar year 2021. And I would encourage everybody, I've been seeing some questions come up in the chat box. Please keep putting them in there because we'll get to them during the question and answer session. Also please remember to mute your phones because there has been a little bit of feedback. If you're not on mute, please do that now. Our Olmstead plan, the plan that ODR is currently working on with the other partner agencies and wants to work with you on, will have three priorities, housing, health care, and employment. And the reason why these three priorities work was because if you do not have a place to live, a way to support yourself, or access to good health care, it is very difficult to remain in the community and out of an institutional setting. The plan will do three things, it will track the number of district residents who transition to the community from long term care utilizing D.C. government supports. It will highlight the programs and policies to help people with transition, it will show what the district government is actually doing to transition people, and it will serve as a road map for people in transition and their families. What that means is that yes, it's going to be a written document, but it's also going to be a network of supports and services that someone can go to if they or a member of their family is in transition to receive help from many of the agencies that we've just heard from. The Olmstead 2021 plan is going to be a three year plan and it's going to highlight both the numbers of people who are transitioning into the community each year and the things that the district government is doing to help residents maintain and thrive in their life in the community. Because what matters is not just that people transition, but that they have a lasting transition. And so what we want to hear from you today are issues that you see facing D.C. when we track these three priorities, things that you want to see in the plan or questions that you have around this plan. And as we move into our question and answer session which is about to be right now, the first questions that we're going to address are not going to be the ones in the chat box, they're actually going to be ones that were submitted to us prior to the town hall. But we will still have time for questions and answers from you, so please keep putting those in the chat box. All right. You asked the first priority for the plan, you asked these questions. And I'm going to pose the question for everyone who may not be able to see it but then the appropriate agency or agencies are going to respond. The first is on employment. What are the scholarship or internship opportunities available for high school students in transition? And this question is for DDS or department of employment services. I believe we have someone from DOES on the line.

>> Hi it's Angela from DDS. I'm happy to start and if the DES representative wants to chime in after that's fine.

>> Just to let you know the division of post secondary education in the office of the state superintendent developed a list of resources to support middle and high school students in their support networks as they prepare for college and careers after high school graduation. They manage grants, scholarships, and other programs that support students college and career learning opportunities including the mayor's scholar undergraduate program and D.C. tuition assistance grant. That's also known as D.C. tag. Community partners as well as federal and national programs offer additional resources for students seeking scholarship information. Students and families can learn about and apply for scholarships using a link that I'm going to share in the chat box as soon as I'm done speaking. So I will share that link and Jessica, if you wouldn't mind sharing that out because I know some folks are on the phone if we could get that shared as a resource with any of the participants that are here today, I have a website I'll be sharing with everyone. Additionally the youth in transition services within DDS, RSA so our agency provides transition services as defined by the rehabilitation act of 1973 amended to coordinate a set of activities for students designed around an outcome oriented process. So these activities really promote movement from school to post school activities including post secondary education, vocational training, integrated employment including supported employment, continuing an adult education, and independent living. So DDS RSA works collaboratively with the local public charter at nonpublic schools to provide pre employment transition services including work based learning experiences. Sometimes those are known as WBLE's for students ages 18 to 21. Our high school internship program offers paid work based learning experiences for students in the community, psychological based projects, and virtual online workspace settings. Examples include CVS health externship, career preparatory program, and our workforce development center at river terrace education campus, a partnership we have with D.C. public schools. That's the resources I have. I will share that website that I referenced so that folks have that information and Jessica, if you could just please share that as well.

>> Great, I certainly will do that. I just want to check to add to what you're seeing if we have anyone from DOES on the call to add anything to this question?

>> Yes, you do. Hello, can you hear me?

>> Yes.

>> My name is Michael Covin. I'm actually the program manager at the D.C. department of employment services. I can add a little bit to that both professionally and personally. I actually have a teenage daughter that participated in an internship that she discovered with the DCHR. So I'll put that out there first because she did participate in that. So we're home schoolers and so I got introduced to some different resources. But we do have internships, we have paid internships through the office of youth programs. And a lot of people are aware of the summer youth employment program but they're not aware that the program is year round. So they have funds to do employment year round and paid employment. And what they try to do is keep the students in an area of their passion. For instance my same daughter is a dancer, and she was able to introduce the dance school, the office of youth programs and through that partnership they became a place where students in the underserved areas could participate in a dance class after

school and be paid for participating in the dance class. So we like to tell the students that if you find someone that is willing to hire you, bring that entity to us and allow us to make them a partner and to sign them up. It's just easier for the residents in D.C. to help those find those that want to be a sponsor. There's a lot of opportunities available for high school students and for others that we offer and I'm around and available and will leave that information for anyone to contact me personally and get connected with the department of employment.

>> Great, thank you so much.

>> And Jessica this is Angela again. I also wanted to talk about the collaboration we have at the department of employment services office of youth programs.

>> Sure.

>> We work with them on the Mary and Barry summer youth employment program and since 2018 we've partnered with them to provide additional supports and services for students with disabilities participating in the summer youth employment program through jump start. And the jump start program supports students with more significant disabilities through travel training, job readiness and other pre employment transition services. They also do video resumes, so it's an opportunity for students who have significant disabilities to be supported through jump start and we have a provider that works that program for us in the summers.

>> Awesome. Next we're going to go to DBH for the next question which is what are the employment options for people with disabilities specifically in the behavioral health community?

>> Hi this is Jonathan again. I wanted to just touch on some of the programs that were mentioned over at RSA. The rehabilitation services administration that was just explained, those are resources for people with disabilities with behavioral health issues. Also the core service agencies in the city, they provide support and employment opportunities where individuals can be supported in getting into the job training process, obtaining employment, and being supported to make sure they maintain the jobs. Over at St. Elizabeth's they have the work adjustment training program which is a two year work program that was recently increased to the living wage which was a benefit that allowed their employees to earn a better wage and get some additional funds. But behavioral health provides not direct services through DBH but we do partner with agencies who support people looking for employment.

>> Is there support with someone with a disability in finding employment? DDS already touched on this some but I'll let you add anything first.

>> Sure, thanks, Jessica. So DDS has the VR program which provides vocational and rehabilitation services to help individuals prepare to regain or retain employment. We know persons with disabilities can face some challenges in today's modern workforce. We believe that people with disabilities given the right opportunities can work and be fully integrated into mainstream society and the workplace. So the VR services that we provide can reduce or remove barriers to employment. To be eligible for our services a person must have a physical or mental impairment that serves as a substantial impediment to their employment. And they have to be able to benefit from VR services in terms of employment. So we require that VR services prepare persons with disabilities to enter, engage in, or retain employment. Priority is given to those individuals who have the most significant disabilities. Once eligibility is established a VR counselor will help a person to develop an individualized plan for employment. We call that the IPE, so that individualized plan for employment identifies the vocational goal and the services that will be provided in order to choose that vocational goal. So in order to help people with disabilities obtain employment RSA provides comprehensive rehabilitation services which may include but are not limited to information and referral. We have assessment services, of course counseling and guidance with our VR counselors, vocational training, post secondary education, job searching, job placement, job coaching, and of course supported employment for our persons that we serve with the most significant disabilities. And so we assist persons with disabilities to locate that employment by developing and maintaining relationships with our local businesses here in our D.C. community. We also assist persons served to become tax paying citizens and to reduce reliance on entitlement programs. And so that is really in a nutshell how our agency supports persons with disabilities in finding employment. It's our number one goal here at RSA.

>> Thanks, Angela. And I saw while you were speaking that our representative from DOES raised his hand. Did you want to add something else to this?

>> If I could.

>> Yes.

>> I want to thank the office of disability rights for the work that you guys are doing. And I want to be a little vulnerable with the partners, the agencies, as well as the public. And I want to share that I think one of the reasons why our deputy director and myself joined the call is because of some of the work that we've done recently partnering with DDS and RSA and some of the trainings that we had determined that we needed to do more often. So if you come into the American job center our role in the Olmstead plan is I think just to be a consistent active partner and a good neighbor. Is part of that is being a good partner with DDS and being transparent. Part of the reason why in the past we hadn't been that great of a partner is we hadn't discovered that how each of our journeys were being governed. So DDS was looking for competitive and integrated employment and DOES was looking for employment. So now that we understand that we might not be doing the greatest for the person that we're trying to assist, we have become better partners so now our trainings are more discussing integrating people into competitive and integrated employment and not just finding them a job. So I think we'll be better partners moving forward.

>> Thanks so much for that. And I really appreciate your response.

>> DBH and DDS are working together more closely.

>> Thanks for that, Mat. And I definitely echo your comments. Where ODR can assist a person with a disability as far as employment is concerned, we can actually provide if you're a D.C. government employee or you work for D.C. government we can provide you assistance in getting reasonable accommodation on the job. And the way that we do that is through the district governments ADA coordinators, each agency has an ADA coordinator and they can assist people with disabilities who are currently working for the district government to get reasonable accommodation. Now you may say I don't work for district government so what does that mean to me? ODR can also help any individual who's a resident of D.C. to learn about their rights such as for example am I allowed to be paid sub minimum wage? What are my rights under the ADA when I request a reasonable accommodation at my job? What are the things that I should be thinking about telling my employer about my disability or not telling my employer about my disability? These are things we can help you think through by providing you technical assistance and guidance that relates to the law. Just so you all know I'm not able to see the chat box because I'm sharing my screen. But I do have all of the questions submitted thus far. Once we are finished with the questions that have already been submitted we'll walk into some of those. The next question is how does someone know their housing options in D.C.? So I will actually take on answering that question. There are quite a few district government agencies that you can contact to know what your housing options are. First you can contact the D.C. housing authority if you want to know what your housing options are as far as public housing or government assisted housing. They also actually have a cool website called D.C. housing search which shows you all of the properties that they currently manage as well as properties that accept vouchers from the district government. Dchousingsearch.org you can use as an apartment or housing search in order to tailor your search for housing to your specific accessibility needs or any other needs that you might have. The D.C. department of housing and community development is another place where you can go to learn about some of your housing options specifically they manage the inclusionary zoning program which allows for a certain number of units in newer buildings to be set aside for people with disabilities or other protected classes. And they can actually walk you through what the process would be for applying for that, getting placed in the lottery, and potentially receiving an apartment. Another thing that they do is they actually have quite a few programs for home buyer assistance. So if you are a person who's income eligible or you're a person with a disability or you are a government employee, the D.C. department of housing and community development manages a lot of programs that could help you potentially buy your own house. Another thing that they manage is actually the district's rent control act program. And if you do not know whether your current housing falls under rent control, you can actually contact either the department of housing and community development or actually the office of tenant advocate. For more information under what qualifies under rent control and how you can actually request rent control given a new law that was passed in 2016. And then the last option that I'll speak on is housing counseling services. I know that I mentioned several different options as far as where you go for district government agencies. Housing counseling services is not a district government agency, but what it does do is provide webinars and in person classes on a lot of these programs that I have mentioned like the inclusionary zoning program and how to determine whether you qualify as well as rent control and how to determine whether you qualify as well as getting your credit or other things, credit into shape in order to think about buying a home or some short, you can actually visit housing counseling services right now today and they have several webinars that you would be able to take that are online even during this public health emergency regarding what your rights are in housing and how to qualify for some of the programs that currently exist. Next is health care. The first question we had asked is why does it take so long and sometimes take a hearing to get the services you need, specifically home health services? And this one goes to the department of health care finance. So Leyla, would you like to answer this question?

>> Yes, thanks. Hi, everyone, it's Leyla again with health care finance. When you think about the length of time that it takes to get home health services, you need to consider the whole process beginning even with the regulations at the federal and local levels that are establishing the standards for us going all the way to once you get the

assessment and your right to appeal if you don't agree with a determination on the level of care. So I'll run through that process to give people a sense of what it is and then I think that's going to give us the answers to how it could take a long time in some cases and I would say this varies a lot from person to person depending on where you are in the process. So in talking about our regulations the regulations at the federal and local level provide a standard for parts of the process like determining someone's level of care for home health services and also ensuring that people can choose the home health agency, the one that they want. In some cases a person may also have to go through the process of enrolling for medicaid. If you're starting there, you may have to provide proof of residency, proof of income, proof of medical needs. That process in and of itself can take up to a couple of months depending on how quickly you can submit the required documents. For someone who's already enrolled in medicaid for home health services like personal care aide services, D.C. medicaid contractor liberty has set time frames from the receipt of a complete prescription I emphasize complete there because that already is one of the things that you could be going back on forth on, the completeness of a prescription order form. And if required a pre admissions resident review. Once those are actually received, completed, then there are time frames that liberty has to send its nurse out to assess someone's level of care. That varies depending on the setting for somebody starting out. So for hospital discharges liberty has 48 hours from the time it completed the form and passed the receipt for the nurse to do an assessment. We're talking about people in the community for people in long term care facilities enrolling in home based services, liberty has five business days from the receipt of prescription order form to do an assessment. Once the complete orders are received, liberty reaches out to people who want the assessment for over three consecutive days to try to schedule the assessment appointment. For instance if contact information is incorrect or for some reason the person doesn't respond this can result in delays as well. So you look at the scheduling of the assessment itself. Once the assessment is scheduled liberty makes a referral to home health agencies that the person chooses. Each agency then accepts or denies the case and based on our review, that referral and the agency decision on whether or not to take that case typically happen in the same day. With agencies even responding within minutes of each other through D.C. care connect which is our case management database at health care finance used by the providers of home health services. So then once an agency accepts the case and financial eligibility and eligibility in general for medicaid is updated. So those are the process steps when everything goes through smoothly. There definitely are times when someone may not agree with the liberty nurse's determination of level of care. And what I'm getting at there, it typically means how many personal care aid hours a person has been assessed for. Whether it's 12 hours a day, 16 hours a day, even eight hours. There may be some disagreement there. And in those instances D.C. residents have a right to a fair hearing process. Then a fair hearing is requested, scheduling those hearings is done by the office of administrative hearings. And in that case the scheduling is subject to office of administrative hearings protocol. So those steps in the process affect the level of time it takes to receive those services. I'll leave it at that. I know it's a lot of information.

>> Thanks so much, Leyla.

>> You're welcome.

>> Now we're going to move on to some of the questions that have been posed in the chat box. I just want to give everyone a reminder that for right now we cannot answer Covid-19 specific questions but we will because you posed them we will get back to you about them. We're not just going to leave you hanging. We want to focus the majority of this call on the district's Olmstead plan generally. And so if you could just bear with me one second because since I can't see the chat box clearly since I am sharing my screen I'm actually going to read from my phone some of the questions that have been submitted.

>> Jessica, we can actually have Caroline read them and then you can point them to the correct person.

>> Yes, that's fine. Caroline, can you read the questions?

>> Okay, not a problem. I'll actually go into, let me look now in our chat section and see what we had. Still just kind of reading. I see the chat section does have some of the phone numbers from some of the presenters from earlier. So it is still a good resource for everyone to be able to look at.

>> Christina, I have the questions up to 1:40 so I can start with some of the ones that I already see.

>> Okay, great.

>> So the first that I have here is what can you tell us about the data of the population using personal care assistance or support that are successfully living in the community? Leyla, did you want to maybe speak to that question?

>> Sure. And I'm going to start with some data that we've been tracking through D.C.'s money follows the person demonstration for people who are transitioning from nursing facilities largely and so early on we were working with people who are transitioning from intermediate care facilities for people with intellectual and developmental care facilities back to the community. One thing that we've been tracking now for about ten years is the rate of reinstitutionalization for people who have moved home and whether or not they're actually going back into a nursing home, back into a hospital, back into a care facility. Specifically when we're talking about reinstitutionalization we're looking at whether or not people have stayed in a hospital, in a nursing home after they've moved home for more than 30 days. And we're pleased to say that of those people who have helped to transition we continue to have a very low rate of reinstitutionalization. It's hovering around 2% for the ten year period. It's been one of our most successful performance indicators that once people move home they're actually staying there. So that's showing a good amount of success. With our elderly persons with physical disabilities waiver program and also with our home health services for people who receive D.C. medicaid, we are also actively tracking incident data. What I mean by that is critical incident data to monitor people's safety ongoing, in fact I just looked at some this morning. And so we are tracking, we're actively tracking whether or not people are being hospitalized, experiencing falls, or if there are other incidents that are ongoing. And when we see those if we're working with our providers, personal care assistants, 101 when it comes to that individual and also when we look at people receiving services from those providers. For example with falls, that's an area that we see quite a number of incidents, we'll work with our providers on changing that person's centered service plan so that it meets that person's needs individually. What can we do to decrease falls, that type of thing, that's the level of work that we're doing in our elderly person with disabilities waiver program and also with our providers. I'll leave it there for now.

>> Okay. The next question is and it's actually an example, it says a county in New York has a collaborative program to rapidly transition folks who are already in transition during this time. Will D.C. do the same? And that's kind of to you too, Leyla.

>> I can provide an initial response based on my work with the community transition program at ageing and community living. And then also invite Adam Mingal to chime in if there's anything new. But I will say especially during the public health emergency, D.C. medicaid has requested flexibilities from our federal partners when it comes to providing as many services as we can remotely as well as changing requirements, expanding and loosening requirements, for example for the signature on the prescription order form, for example that's not required during Covid. So we've included these types of flexibilities to ensure that the processes that we already have in place to transition people are moving forward. So people who are in transition are continuing to transition. We have had a pretty successful transition. We've been providing community assistance through the beginning of the transition assistance program and are continuing to coordinate and facilitate transitions as much as possible during this time for those people who still want to transition. So by requesting the federal flexibilities, we are able to continue those processes and services we already had in place.

>> Adam?

>> Jessica? Oh go ahead.

>> It's Adam, I think.

>> Sorry, Adam.

>> No problem, Mat. I was not familiar with the problem mentioned in Monroe county, New York for people already in transition for rapid transition. We'll see if there's anything that we can draw from this to kind of inform our processes right now. But right now I'm not familiar with it but we will look into it and circle back.

>> So Jessica, we should also talk about people that experience homelessness. And can we look at ODR covering human services and people who are at risk of homelessness from access to housing programs, would you be willing to talk about that?

>> Sure. So as Mat said ODR works a lot with the department of human services with people who are currently in shelters who may have disabilities or who may be experiencing other things that need accommodation. So we work with the department of human services ADA compliance specialist, her name is Dr. Sheila Armstrong, to ensure that people who are about to be transitioned from a shelter know their options. We also make sure they're connected with any services or programs they may be eligible for from D.C. housing authority and the D.C. department of housing and community development. One of the things we would like to do with this Olmstead plan is focus on how the collaboration can be greater when we're assisting people with disabilities who are homeless and moving from shelter into the community. How we can forge a greater collaboration among all of these agencies to ensure that people know what their options are when they're leaving a shelter and also that they're able to leave shelter and to get the reasonable accommodations that they need in the housing where they are placed.

>> Thank you, Jessica. So there was a question. And I know they work with behavioral health because thank you.

>> Hey, Mat, this is Angela. If we're talking specifically about the DDA services, I'm sorry, I don't have a whole lot of information. I can certainly take that back to the DDA



side, but I apologize, I don't have enough information being on the RSA side and on the transition side. So I will certainly take that question back to the appropriate POC's. Charlotte, if you or Ed have anything to add, otherwise I'm happy to just shoot that over to them.

>> Thank you, Angela. I was actually getting some feedback. It's hard for me to hear the question. It was unclear. But we can definitely collaborate and respond accordingly at another time.

>> Thank you guys. So basically people are interested in doing more health in DDS particularly partnership with the department of behavioral health. And maybe someone from DBH can speak to this, Jonathan or Raphaele.

>> Is anyone from DBH there?

>> Hi, Jonathan is still on the call. What was the question again, I'm sorry?

>> The question is how does DBH and DDS collaborate to support people with emotional and developmental disabilities in transitioning I'm assuming from St. Elizabeth's?

>> Well actually when people are identified with DDS services I know at one point there was an individual at the hospital who transitioned to an independent living situation in an apartment with a roommate and had supportive staff available through DDS. So the challenge is just being designated as a person to receive disability services while at St. Elizabeths.

>> Thank you for answering that. And we'll definitely circle back to this question, all of us to make sure that we can get a little bit more answer from DDS on the exact collaboration. I believe if it's the question that I saw, it was if we're talking the number of people in St. Elizabeth's hospital receiving services from DDA, that's not the measure that we track but it is definitely something that we could look into how we would track that.

>> And just with that, Jessica, so just with that coordinated case management and case monitoring, any time it's someone that is receiving services from multiple agencies or they could be receiving services from us or St. E's or another entity, we always make sure that through just calculate case monitoring and follow up we make sure that all of the services and supports are delivered timely and routinely. So through the routine case monitoring and review of those adjustments or transitions that need to take place, our service coordinators are at the forefront of that. And they're our quality assurance monitoring whenever we go out and get those facilities and settings that people are receiving services in, our incident tracking helps us understand how people are fairing and if there's a transition that needs to take place. So any time there is that cross collaboration in service, support, and delivery, just our quality assurance and our case management system assures that we're understanding how people are fairing and if there are services that need to be received at other agencies we do triage with our service coordinators to make that possible.

>> Thank you, appreciate it. So there's a question, my question was that --

>> I'm sorry, I only caught half of what you said.

>> So there was a question, what are being kept for accessible housing placements in D.C.? Are there any measures? How do we ensure that folks get an accessible unit?

>> This is something that's come up actually at all of our community meetings that we've had is trying to look into a way to track data with a lot of the programs that I mentioned that D.C. participates in to help people with disabilities get into housing and look into a way to track data to ensure that people with disabilities are actually getting the units and buildings that are meant for them. It's not something that we currently track but it is something that is on our radar. We have only about ten minutes left in the scheduled call. So I think at this point we have a couple of quick presentations that we wanted to move into. As I had mentioned earlier we are not specifically addressing Covid questions on this call but we did want to provide everyone and have a couple of our government partners come online and speak to things available to the disability community right now and the district government's response. So with that I'd love to turn it over to Delores Scott to give a few words about how you can be prepared during this public health emergency and the district's response to Covid.

>> Thank you for that, Jessica. Again this is Delores Scott. At the district of homeland security and emergency management agency we recognize the importance of working with you in the disability community. To be brief now in response to Covid-19 we take a whole community approach. You may ask well what does that mean? Well first of all it means having disability interpretation working in our emergency operations center, reviewing the district's Covid-19 plans, services, and facilities, and helping to ensure -- for example we conducted accessibility checks at the drive-thru and the walk up testing sites and also the acute care site for Washington convention center on or about the first week of May. Now I'm going to talk about how we engage Olmstead. We use that to communicate directly with the community. ODR's monthly newsletter now has a section on emergency preparedness. And in this past September we formed a disability community advice group. D.C. association for the death, D.C. chapter of the national federation of the blind, legal counsel for the elderly, paralyzed veterans of America, project action, quality trust for individuals with disabilities, and universal legal services. Now during our normal course of business we meet quarterly. However in response to Covid-19 we now -- the purpose is to share the district's resources in connection with Covid-19 but also to learn of any unmet needs in the disability community. And finally before I close we invite you to the mayor's open D.C. virtual town hall. The town hall takes place tomorrow April 29th at 5:00 p.m. Please join her and her co chairs of reopen D.C. Thank you.

>> Thanks, Delores. And you will see actually on the screen the power point that we're all looking at now, I included the link to this to register for reopen D.C. on the bottom of the page around Covid-19. The power point will be sent out to everyone today so you will have these materials. If you attended the webinar you will receive this powerpoint so that you will be available to look back on what we discussed. And then we are going to turn it over now to the office of the people's council -- counsel to talk with Silvi a Garrick. Silvia, are you there?

>> Can you hear me?

>> Hi, we can hear you.

>> Good evening to everyone. On behalf of the people's counsel, thanks for our continued partnership. For those unfamiliar with the D.C. office of the people's counsel it is an independent agency of the district government. By law it is an advocate for consumers of natural gas, electric, landline services, and D.C. water customers. Before the D.C. public service commission, the communications commission. Pertaining to our service and support regarding the Covid-19 at the start of the public health emergency we reached out to utilities and recommended that in close a moratorium on the disconnections and late fees. They will work with residents that have had their services disconnected to have their services reconnected. They're willing to set up payment arrangements as well. And you can call them at 202-833-7500 or call your consumer advocate at 202-727-8071. Consumers can request to be placed on payment arrangement. They can call at 703-750-7944 or also call the D.C. office of the people's counsel, your consumer advocate at 202-727-3071. Verizon D.C. will waive late fees for 60 days as of March 16th through 13th. They will not terminate service to customers. They can be reached at 1-800-483-7988. Once more 1-800-483-7988. The D.C. council developed a Covid-19 emergency amendment act 2020 that prohibits Verizon D.C. from disconnecting local telephone services, also stops shut off of D.C. cable and internet service providers. OPC consulted with the counsel to ensure that the electronic, natural gas, and water are not disconnected. With D.C. water, residential customers will be able to get assistance by calling 202-535-2000. We advise consumer support in order for the office to work with you to establish a reasonable payment arrangement instead of calling the utility first just call us and we'll step by step provide information to the office and we in return will contact the utility company. Please beware of scammers and robo calls. If someone should call and state to you that they need your financial information or they're going to disconnect your services, I've already provided you information regarding the utilities, they are not going to disconnect services. So please do not switch your services. If you have a concern call the consumer advocate to give you some guidance. If you so wish to email the office you can do so by sending info@opc-dc.GOV. Thank you, Jessica. And I'm open for any questions.

>> Thank you so much, Silvia. Does anyone have any questions for Silvia before I move on? Is there any in the chat box? While we're looking at that really quickly I wanted to go over a few other ways that you could get some of your questions on Coronavirus answered during this time. You can go to coronavirus.dc.gov which everyone knows about. It is the district's point of contact website for the Coronavirus health emergency. You can also attend the DDS disability community forums which happen every Friday at 10:00 a.m. in the morning I believe it's 10:00 a.m. And will happen through May 15th. And you can also reach out to any of us. Everyone who attends will be receiving points of contact from all of the Olmstead participating agencies this week so you can reach out to any of us with specific questions you may have to benefit yourself individually, a family member, or if it's just related to Olmstead planning. And then lastly I want to reiterate what Delores had said. You can come to the reopen D.C. virtual town hall where the mayor is going to discuss how we are going to gradually open D.C. as we recover from the health emergency.

End Time: 2:30 PM ET