**OLMSTEAD CONSUMER TASKFORCE MEETING**

**September 14, 2018**

**10:00am – 3:00pm**

**Pleasant Hill Public Library, 5151 Maple Drive, Pleasant Hill**

**Conference Call-In: 888-290-7502, Participant Code 29273924#**

**MEETING NOTES**

1. **Welcome and Introductions**

Welcome New Taskforce Members!

**Taskforce members present:** Jenna Battan, Alexandra Bomhoff (phone), Randy Davis, Mike Dierdorf, Dawn Francis, Sean Goedken-Abramowitz, Heather Hanzlick, Tracy Kenniger, Derek Laney, Gary McDermott (phone), Kathleen O’Leary (phone), Harry Olmstead, Mary Roberts, Len Sandler (phone), Renee Speh

**Taskforce members absent:** John Fitton, Kris Graves, June Klein-Bacon, Kay Marcel

**State agencies:** Connie Fanselow, MHDS

**Guests:** Katie Campbell (Inspections & Appeals), Jane Hudson (DRI), Brooke Lovelace (DD Council), John McCalley (AmeriGroup), Kinsey Poulos (Office of Ombudsman), Lisa Schneider (ICAP)

**CDD Staff Support:** Julie Christensen

1. **Review, Additional Items, and Approval of the Agenda**

***Randy moved to approve the agenda. Mary seconded. No discussion. Motion passed (no nays or abstentions).***

Agenda approved.

1. **Review, Corrections and Approval of the Minutes of the July Meeting**

***Randy moved to approve the agenda. Paula seconded. No discussion Motion passed (no nays or abstentions).***

Minutes approved.

1. **DHS Update** – Connie Fanselow

The MCO Contracts are now signed with AmeriGroup and United Healthcare; implementation is now in progress. The new MCO contracts and summaries are available online:

<https://dhs.iowa.gov/sites/default/files/Amendment7_Summary_Aug2018.pdf>

The new MCO coming into Iowa will be Centene (operating in Iowa as Iowa Total Care), and will begin operation July 1, 2019.

The set of complex service needs rules are being worked on by MHDS.  A state workgroup met during 2016, and prepared recommendations for serving individuals with complex behavioral health needs. During the 2017 legislation session, a bill (HF 2456) was passed to put recommendations of the workgroup into law.  The legislation made changes and additions to the array of services mental health and disability services regions are responsible for developing and making available across the state.  The new rules were published for notice in August, and a lot of public comment has been received. MHDS is currently reviewing the comments. All comments received will be considered, summarized and responded to in writing when the rules are published for the second time.  There was also a request for a public hearing on the new rules. The Department is currently working on scheduling this. The date and place will be announced publicly at least 20 days in advance via the Administrative Bulletin. It is anticipated that some changes will be made to the rules.

Mary: Is there an updated on the proposed rule changes regarding changes about CCO & daily rate vs. 15-minute unit rate? The Taskforce is aware that there is a proposed rule change.

 Connie: Will ask the question, and find the right person to respond.

***Mary moved that the Taskforce formally request information on potential rule changes re: CCO, and SEL daily rates vs. the 15-minute unit rate. Paula seconded. No discussion.***

***Motion passed (no nays or abstentions).***

Tertiary in-patient hospital – There is a workgroup formed to develop recommendations on how this will work, how many, and where they should be located. It was noted that the group is considering changing the term “Tertiary” and, instead, using “Psychiatric Intensive Inpatient” hospital treatment. The workgroup has had two meetings so far. They are meeting next week, and a report is due Nov. 30. More information about the Tertiary Care and Commitment Workgroups: <https://dhs.iowa.gov/mhds/community-integration>

 Harry: Could you clarify the term “tertiary”?

Connie: In this context, it refers to a specialized level of treatment for a complex situation that goes beyond what is ordinarily offered in psychiatric inpatient setting.

Harry: Noted that Len sent out chart regarding tertiary care.

ACTION ITEM:

* Julie to include chart with the meeting notes.

There is another workgroup focusing on the commitment process and substance use process. They have a report due Dec 31. They have formed five subcommittees to divide the work: merge code references between mental health and substance use, mental health services and commitment alternatives, filing process and transportation for commitment, hearing process, and post-discharge process.

Harry: Has the committee been looking at individuals who are medicated and incarcerated, and are unable to return to the community because of not having appropriate supports for meds?

Connie: Believes this is being considered for the jails, but not the prisons.

Heather: Noted that medical necessity is often not considered when there are interactions with the criminal justice system (e.g., detention centers).

Dawn: Noted this is not just at the jails, but also happens in other systems (e.g., medical facilities).

Len: This came up at the IFA conference. There is not a good data collection system to fully understand the scope of the problem.

Harry: Noted that another area that needs to be looked at is sexual offenders as they are discharged.

An IDPH group is looking at substance use disorder rates for substance use treatment. IME (LeAnn Moskowitz) is on the workgroup. Rick Schults and Theresa Armstrong are attending as well. The group has met once, and has another meeting next week. The group is reviewing rates and adequacy of reimbursements for in/outpatient, equity and access, and whether the number of community mental health center providers is sufficient to meet needs. More information about the IDPH Substance use disorder rates Workgroup:

<http://idph.iowa.gov/substance-abuse>

The new Children’s State System Board was created by an Executive Order issued earlier this year. The group is tasked with taking the recommendations of work done over the past few years to create a children’s system that will address multi-occurring needs (in or out of MH). The Governor appointed, 25-26 members to the group, including heads of several state agencies and four non-voting members of the Legislature. The group has had one meeting so far, and the next meeting will be Sept. 27. A report is due by November 15. Members are currently working in small groups. Co-Chairs are Jerry Foxhoven (DHS) & Ryan Wise (DOE). The AEAs may assist in getting input across the state through public listening sessions. More information about the Children’s System State Board information available online:

<https://dhs.iowa.gov/about/mhds-advisory-groups/childrens-system-state-board>

 Dawn: Is anyone from the Taskforce on the Board?

Renee: Was on the group that created this Board, but is not currently on the Board. She is able to answer questions if members of the Taskforce have them.

An internal DHS/IDPH group is currently meeting about creating a statewide 24-hour crisis hotline. The Regions were supposed to set these up, but that meant there were differences by region. It will be easier to access if there is one number that can be marketed and used across the state. The workgroup is currently gathering info on existing structure and costs, and will have recommendations for moving forward by end of year.

IDPH issued an RFP for services funded by substance use block grant:

<https://www.iowagrants.gov/insideLinkOpps.jsp?documentPk=1531489200718>

Within DHS, a collaborative group MHDS and IME is working to design a complex service needs system for children – which would be a model for kids with significant needs. Part of this will be to offer enhanced services to families who have their child at home (to avoid out of home placement). Additionally, there is a need for residential settings that are more homelike for those who need more structured services and supports and highly trained staff. The number of kids anticipated to need this intensive level of service is relatively small (approx. 100) across the state.

Paula: Hearing that services are available, but families are reporting the nearest is in Nebraska. Would like additional follow up w/ more information for appropriate referrals.

Renee: Additionally, some kids have MH and physical disability – but there are limited options for them because service providers can only address one or the other.

Heather: Interested in more information on the analysis of cost vs. impact as the state moves forward. Also noted concerns about equity across the state.

Dawn: Expressed frustration with the MCOs. Gave personal story of a friend who has had challenges navigating the service system. Was released home when it was not appropriate to do so.

1. **IME Update** –

Brian Wines was invited to attend the meeting to address questions that came up at the July meeting, but declined to attend. IME did not feel that the questions provided were specific enough to receive approval for him to come and address them.

Mary: Asked to read the questions so they are included in the meeting minutes, as she believes the questions were specific:

* Families are being told their adult (over age 18) dependent child living in the family home is not eligible for more than 7.75 hours/day of reimbursed service. The part of code which states those not eligible for SCL daily rate have up to 20,440 15-minute units available is being ignored.
* Some families have been told if their child needs more than 7.75 hours/day of reimbursed care, they would need to move to a more restrictive setting (a group home, for example).
* Daily rate not being available to those adults choosing to live in their family home is counter to the "Reasonableness of the Plan of Care" section of Fact Sheet #79F.

Mary also read selections from Iowa Code (see attached document (IAC 78.14).

Dawn: Suggested that the Taskforce write a letter.

Tracy: Would be helpful to discuss after Jane Hudson shares her comments. DRI has more extensive experience with this, and might be helpful with putting this together.

***Gary moved that the Taskforce draft a letter, to be submitted to the Executive Committee for review, to be sent to IME requesting formal clarification related to these questions. Randy seconded.***

***Discussion:***

Derek: Would guess that Brian would say the intent of daily rate service when first designed was everyone had an individual daily rate. Daily vs. hourly rate designed to allow for supports for people with low hourly needs to avoid institutionalization. Currently Daily (24 hours), and quarter hourly rate (<24 hours of care).

Mary: 15-minute rate is different than the daily rate (by hour), and this amounts to thousands of dollars a month.

Derek: Daily used to be >8 hours, now >14 hours. Agrees there is a discrepancy,

Mary: MCOs are deferring to the lower cost.

Paula: Suggests checking with Julie Beckett about this, as she understands that there needs to be a change in the Federal rules to address this.

***Motion passed (no nays or abstentions).***

 Paula volunteered to work with Tracy and Mary on this.

1. **DD Network Updates**

The DD Network is established under the Developmental Disabilities Act. By law, there must be one of each (DD Council, Protection & Advocacy, and University Center for Excellence on Developmental Disabilities) in every state.

DD Sister Agencies are mandated to collaborate. One recent example – the three organizations had a joint meeting with Centene (new MCO).

* 1. **Disability Rights Iowa** – Jane Hudson

DRI’s main cases are managed care related. People are not getting appropriate notifications of decisions. For example – there was a situation last week where notification of decision was not given. DRI submitted a letter to United. Jane noted that the MCOs are responsive to letters, but that the ownness is on individuals to know how to advocate and/or get legal representation.

DRI tried to file a class action, but AmeriHealth Caritas was the primary defendent, so the judge dismissed the case.

DRI is also working in the area of AT. A guide for farmers with disabilities on available technology options to assist them is being developed.

DRI is also working on an initiative to connect food industry employers to people with disabilities as a potential workforce. DRI noted that, according to a recent report, Iowa anticipates a 14% increase in need in the coming years. An event will be taking place on November 13, in collaboration with DMAC culinary institute. Christine Hà, the winner of MasterChef and who is also blind, will be the guest speaker.

ACTION ITEM:

* The invitation will be sent to the Taskforce via email.

DRI gets a lot of cases regarding guardianship. Guardianship is often assigned at age 18 without individuals or families necessarily having understanding of what that means. Individuals with disabilities often come back later requesting to be able to make their own decisions.

DRI is also promoting voting accommodations, including ensure that curbside voting signs at every precinct in Iowa. You can vote from your car curbside if requested.

Heather: Are there resources available?

Jane: Yes. The fact sheets are on DRI’s website, but are also being rewritten.

ACTION ITEM:

* The revised fact sheets will be sent to the Taskforce when completed.

Caucuses is another big issue. Iowans can now do absentee ballots. DRI will be meeting on this. DRI has been engaged in the past around other accommodations needed (e.g., ASL interpreters, etc.). A ballot marking tool is also available where you can mark print and mark your ballot from home. However, you still need to take the ballot to the polls, as this is not an electronic voting system.

Harry: What about the ID issue?

Jane: Agreed that this is an issue. A provisional ballot can be filed, but this is a laborious process. She noted that individuals can also revise their signature on site at the polling place. It is not necessary to show ID until 2019.

Paula: Has a fact sheet on provisional voting been created? And is there any effort to have a hotline in place on election day to trouble shoot issues?

Jane: DRI does not currently have one in detail, but this is a good idea. There is a hotline through Secretary of State. DD Partners can also discuss this further.

Harry: Noted DRI’s collaboration with the Office of Ombudsman to develop a handbook related to the appeals process for managed care.

Jane: Noted the process currently is that people file an appeal directly with the MCO. If the appeal is denied, then DRI can then get involved. The handbook is available online, and hard copies are also available.

ACTION ITEM:

* Paula will bring copies of the handbook to the next meeting.

Regarding the Boys Home – restraints is currently an issue, and DRI is involved in litigation on this issue. 125 boys currently reside there, but they are not receiving adequate mental health supports and there are issues with medications.

Regarding special education – DRI is engaged in mediations and due process. Noted that a lot of youth have autism (many boys 6-8 yo). DRI is using these situations as an opportunity to speak with parents about transition as well.

DRI is monitoring representative payees across the state (via grant from SSI Admin).

DRI also developed an EPSDT rights guide, and will be taking these cases as well moving forward.

Jane shared that if individuals needs support, they can call DRI (1-800-779-2502 or Relay 711) or use the online Intake form on the DRI website (https://disabilityrightsiowa.org/contact-disability-rights-iowa/let-us-help/).

Renee – Expressed gratitude to DRI for their advocacy on behalf of children.

* 1. **Iowa Developmental Disabilities Planning Council** – Brooke Lovelace

The DD Council is required to have 60% of membership be individuals or family members.

Make Your Mark Conference is coming up. This is the first year that the conference is completely full! Brooke will make sure that information about the conference gets to the Taskforce next year.

ID Action is one of the Council’s initiatives. ID action is now called Iowan’s with Disabilities in Action. They are in the middle of doing voter training for the upcoming mid-term elections around the state. During the next two years they are going to be doing a 99-county sweep where they are going to go out and educate others on people about Iowans with Disabilities and Action but also doing a needs assessment of each county to see what advocacy needs  each area may have. If people are interested in hosting something in their county they can contact Iowans with Disabilities in Action

Heather: There was not a voter guide specific to Autism – Iowa was the first!

Paula: Suggest that everyone sign up for the InfoNet (electronic newsletter).

Brooke: InfoNet can also be delivered via snail mail for those who request it. InfoNet helps people stay current with what the legislature is up to, including proposed bills.

Heather: Noted that how to approach MCOs regarding exceptions to policy is not well understood, and suggested bringing her personal experience to the conversation could be helpful as she’s developed some strategies that others could benefit from.

Paula: Added that ASK Resource Center’s Family to Family project will be conducting in-person training on the appeals advocacy process.

Derek: Acknowledged that, prior to the MCOs, when advocating for exceptions to policy it used to be that this was heard by someone who was sympathetic. However, this is not the case with the MCOs who are hearing this information with an eye on efficiency and cost savings.

* 1. **Iowa’s University Center for Excellence on Disabilities, Center for Disabilities and Development (CDD-UCEDD)** – Julie Christensen

There are 67 Centers in the U.S., with at least one in every state and U.S. Territory. Iowa has only one UCEDD and it is housed at the Center for Disabilities and Development at the University of Iowa.

Each UCEDD is funded in 5-year cycles, and has to reapply for funding each cycle. The Iowa UCEDD just received a new 5-year grant from the Administration on Community Living, which began on July 1, 2018.

As part of the renewal process, the CDD-UCEDD team spent about 18 months working on a needs assessment. This included an environmental scan and review of key documents from state agencies and other stakeholders, a series of community conversations with individuals and families across the state, and a survey of direct support providers. This information was then analyzed and brought back to our advisory group, which guided us in identifying four focus areas for the new 5-year plan: Employment, Health & Wellness, Education, and Community Living.

Highlights of some projects that the CDD-UCEDD leads or is involved with include:

* Iowa Compass – Iowa’s disability-related information & referral source. The Iowa Compass team have made significant improvements to the website.
* Money Follows the Person – The CDD-UCEDD coordinates MFP in Iowa. MFP aims to provide time limited supports to assist individuals with disabilities who are interested in transition from institutions to living in the community.
* Kessler Foundation Signature Employment Grant – This project is looking at the impact of using iPad technology to provide job coaching supports for people with disabilities.
* CDC funded Disability & Health Grant (in partnership with IDPH) – The CDD-UCEDD has been a partner with IDPH for many years on this project, which aims to improve health & wellness outcomes for Iowans with intellectual and physical disabilities.

Additionally, UCEDD staff are working with DRI to gather feedback from prospective workers with disabilities related to their thoughts and interest in working in the food industry prior to DRI’s November event. This work will also expand to gather input on the retail and banking industries, which were the two other areas highlighted in the report that Jane referred to.

1. **Taskforce Nomination of Alternate**

Annie Gallagher has resigned her position on the Taskforce. This opens up a spot.

Mary explained that the nominating committee has already identified two alternates from the list of individuals who applied to join the Taskforce this summer. Mari Reynolds is the first alternate, and excerpts from her application were read to the group.

***Harry moved to accept Mari Reynolds as a Taskforce member, completing Annie Gallagher’s term. Randy seconded. No Discussion. Motion passed (no nays or abstentions).***

ACTION ITEM:

* Julie to notify Mari and invite her to the November meeting.
1. **Taskforce Committee Reports**
	1. Executive Committee Report (Dawn)

Website – Kevin Dalin just rotated off the Board, but had been working with Caitlin on the Taskforce website and hosting. He is still willing to complete adding text that was already discussed, and will do so for free. However, Kevin feels that the blog may be a challenge and is wondering if this should be eliminated?

Harry: A solution for the blog would be if members of the Taskforce agree to do this once a month, possibly having a theme. The new coordinator could work with members to make sure this gets done.

Paula: Suggested tabling the discussion of the blog until new staff is in place.

***Paula moved to pay Kevin for hosting the website, and to revisit the blog and other content when a new coordinator is In place. Harry seconded. No Discussion.******Motion passed (no nays or abstentions).***

Committee signups – Dawn noted that committees meet via conference call in between full Taskforce meetings. The group reviewed current committee membership. New and returning members were encouraged to sign up for a committee that is relevant to them and where they can provide value and expertise.

ACTION ITEMS:

* Let Julie know what committee(s) you are interested in participating in.
* Julie to update the committee rosters for the November meeting.
	1. Medicaid Committee Report (Harry) – monitors Medicaid privatization, including monitoring of various advocacy and “watch dog” groups.

The committee has not met since the July meeting. The committee had started to contact executives from the MCOs to schedule time with the Executive Committee to discuss concerns. To date, this has only happened with AmeriGroup. This might be a good time to connect with United and Centene.

Dawn: Can help facilitate this with Centene.

Harry Should this be just the committee or should the full taskforce to be part of t he discussion?

Dawn: initial small group meeting, then invite them to come to meetings regularly.

Paula: Is there a framework used for these meetings? And should responses be published?

Dawn: Tracy Kenniger set up the original structure; will get information from her.

***Paula moved that the Taskforce write a letter to United requesting them to meet with the Medicaid Committee. Harry seconded. No discussion. Motion passed (no nays or abstentions).***

 ACTION ITEM:

* Consult with Tracy as starting point

The committee also has interest in inviting Mike Randol to come to a meeting. However, it will be necessary to prepare specific questions in advance.

Paula – Suggests waiting until the results of the upcoming election. Discrepancies around how much money is being spent is the only immediate issue that comes to mind.

ACTION ITEM:

* Put on agenda for further discussion at November meeting
	1. Community Access Committee (Tracy) – monitors issues related to community access

This group has not met because all committee members have rolled off the Taskforce.

Mary noted that the rate issue (discussed earlier) is part of what this group will working on.

Randy: Suggest inviting the Veridian Credit Union to provide a report on the last 11 years.

* 1. Nominations Committee (Mary) – reviews applications for additions to the Taskforce, and brings recommendations back to the Taskforce for consideration and final approval

This committee is not a big time commitment. The work typically happens in late Spring, when applications are released. Voting takes place at the Annual Meeting in July, and new members begin their terms in September.

* 1. Olmstead Plan Committee Report (Dawn) –

This committee also hasn’t met, and members have rolled off the Taskforce. It was noted that the plan is finalized.

Paula: Does committee have oversight of the plan?

Dawn: The plan was for Theresa to report outcomes to the Taskforce as the data is available.

ACTION ITEM:

* Ask Theresa for an update on when information can start being shared related to outcomes.

1. **Gubernatorial Candidates** **Questionnaire on Disability and Aging Issues**

The committee has not yet finalized the list of questions to include as was planned.

Paula: Suggest sending questions out broadly and encourage that advocates ask these questions of their elected officials.

Dawn: Noted that the original purpose was to get responses written that could be published.

Paula: NAMI is doing a survey.

 Renee: NAMI posted responses on their website.

Julie: (Per Di Findley) The Iowa Caregivers Association sent questions to gubernatorial candidates. Hubbell has responded, but Reynolds has not yet responded.

The committee will come together to review the list of questions, and finalize these. They will then be sent out broadly.

ACTION ITEMS:

* Brooke will send out questions that DD Council has put together.

*NOTE: Per Brooke – Infonet sent out the following question just to candidates in the Governor’s race: One in seven Iowans has a disability, and many rely on support services that are funded through local regions or the state’s Medicaid program to live independently. How will you work to improve Medicaid and Iowa’s regional mental health and disability services system, including ensuring access to home and community-based services?*

* Julie will forward the final list of questions from the committee to the Taskforce.
* TF members to help distribute these questions.

Harry – Moved that the committee be redirected to develop a template of a list of questions in lieu of sending out surveys to candidates on behalf of the Taskforce.

 Do not have quorum at this point.

 Motion withdrawn.

1. **HousingIowa Conference** – Len Sandler (via phone)

Len attended the conference on behalf of the Taskforce. All materials are on the IFA website <http://www.iowafinanceauthority.gov/Public/Pages/PC236LN45>). Len was able to meet with the director of the tax credit program. A summary of the conference was sent to Julie prior to this meeting. Some additional comments:

* Discharge planning and homelessness – Iowa DOC has a good resource for this.
* Tax credits & supportive housing – there are fact sheets available.
* Was disappointed that disability & universal design were not on the radar and no mention was made of these in any presentations Len attended.

ACTION ITEM:

* Len’s summary email will be forwarded with the meeting notes

*NOTE: Len’s summary is below:**One of the most productive and successful sessions was a workshop on how to frame and communicate issues – including what to do and what to avoid -- to convey your message when crafting systems reform initiatives.*[*http://frameworksinstitute.org/learn-on-your-own.html*](http://frameworksinstitute.org/learn-on-your-own.html)

*The panel on homelessness and discharging people from correctional facilities and institutions was also informative if not depressing. The good news is that I talked with Latoya Lewis, a Housing Navigator with United Health Care. She might be a person to contact in emergencies or for planning ahead, particularly for the Des Moines area. Karen Hyatt was great, too. Ms. Lewis’s contact information is**ljlewis@uhc.com**, 515.468.0022, 1089 Jordan Creek Parkway, Des Moines, IA 50266.*

*The slides are online under the conference title “Discharge Planning: Closing the Revolving Doors Between Homelessness and Institutions Karen Hyatt, Iowa Department of Human Services, Frank Kiener, Mercy Medical Center, Roxann Scheffert and Dawn Hansen, Iowa Department of Corrections, Major Cory Williams, Polk County Sheriff's Office.”*

*The Iowa Profile website is rich with information about towns, cities, and counties, and is a good tool to identify and evaluate information and statistics.*[*http://www.westernes.com/Iowa/*](http://www.westernes.com/Iowa/)

*So is Home Facts, which provides demographic portraits and reports about cities across the U.S.*[*https://www.homefacts.com/*](https://www.homefacts.com/)

1. **State Agency Reports**

Lisa Schneider, Client Assistance Program – Works as part of the P&A network, under Department of Human Rights. ICAP Does a lot of collaborative work with VR and other state agencies. Please use ICAP as a resource.

Terri Rosonke, Iowa Finance Authority (via email) – The IFA Board of Directors did approve the 2019 Qualified Allocation Plan for the Low-Income Housing Tax Credit Program as well as final adoption of the rule changes to the HCBS Rent Subsidy Program that were previously discussed at the July meeting.  Terri is working a lot on housing recovery in Marshalltown, in which the tornado disproportionately impacted extremely low-income households. IFA currently has 144 individuals on the waiting list for HCBS Rent Subsidy, but 85 of those have been notified to submit updated information to get started on the Program. Twelve of those 85 had a deadline of 9/17/18 to submit the information. Nancy will extend that deadline if they request it, but some of them may no longer be interested or in need. It is still difficult to figure out who the contact is for each individual due to changes in case management, but Nancy does have a good resource with both United HealthCare and AmeriGroup who are fantastic at providing information for those they can find listed.

1. **Taskforce Member Reports**

Harry: There are a lot of exciting apps coming out for people with disabilities. For example: Parking Mate allows you to report illegal parking in accessible parking spaces.

Dawn: As part of the State Plan for Independent Living, a goal is to continue to collaborate with other groups in Iowa on self-advocacy. The Iowa Statewide Independent Living Council will be partnering this year with Arc, ASK Resource Center, CDD-UCEDD (and hopefully the DD Council as well) on this initiative. Last year, the Together We Can conference included a self-advocacy track for the first time. This year, there will be two different opportunities: the Together We Can Conference (TWC) in Des Moines on May 4, and the Heartland Self-Advocacy Resource Network (HSRN – which includes IA, NE, KS, MO) Regional Self-Advocacy and Leadership Conference in Independence, MO on May 31-June 2. The SILC will be funding consumers to attend both TWC and the HSRN Regional Conference. The goal is for this to be a capacity building initiative in Iowa around self-advocacy. Sponsored advocates who attend these conferences will be asked to be a mentor to other advocates who are selected next year.

Paula: Noted that TWC is a collaborative conference (it is not ASK’s conference, as many assume). It is not a money-making conference. All funds are used to bring speakers in and make conference financially feasible for families to attend.

Heather: Are there SA groups?

Dawn: There are some that are loosely organized in pockets across the state. PATHS in Cedar Rapids is an example.

Julie: capacity building effort

ACTION ITEM:

* Let Dawn know if you are interested, or know of someone who might be.
1. **Public Comment**

Brooke Lovelace, Iowa DD Council – An E1st Executive Order was drafted last spring. The Taskforce wrote a letter of support. This has not been signed yet, but Iowa Coalition for Integration and Employment and Iowa Employment First Leadership Team (lead by Iowa Vocational Rehabilitation Services) are working on this in the hopes of having this signed as part of National Disability Employment Awareness Month (NDEAM) in October.

Di Findley, Iowa Caregivers Association (via email) – Provided a handout of the Association’s priorities for the coming year.

1. **Adjournment**

Adjourned at 2:34pm

***Next Meeting: Friday, November 2, 2018 10am-3pm***