

# Goals and Objectives

Revised August 12, 2018



**Goal 1:** VTDDC will reduce barriers to competitive employment, inclusive education, and effective health care services for people with developmental disabilities in at least two (2) underserved rural Vermont communities characterized by significant economic poverty.

## THIS IS VTDDC'S GOAL FOCUSED ON UNDERSERVED GROUPS.

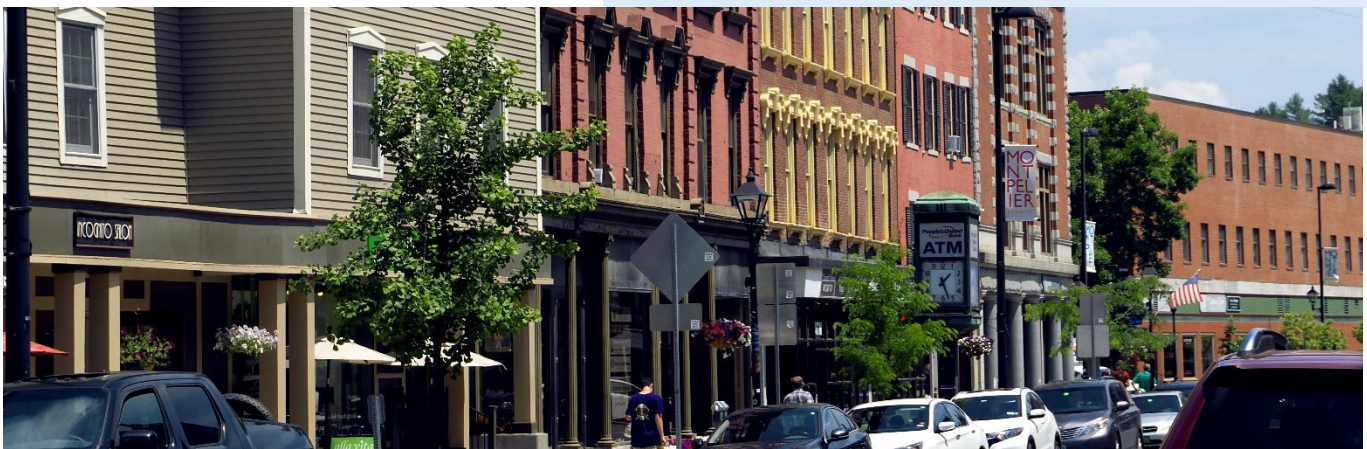


### What does Goal 1 mean?

People with I/DD face many barriers to living independent, full lives. This is even more challenging for people who also live in certain communities where there are few resources for example, isolated rural areas in Vermont or groups of recent immigrants to our country.

The Council cannot tackle every issue, but there are excellent opportunities right now to break down some of these barriers in two important areas health care and employment.

**The Council wants to improve health and create job opportunities for Vermonters with I/DD living in underserved areas.**



## **Objective 1.1**

- In collaboration with partner organizations, bring health outcomes for people with developmental disabilities closer to those of people without developmental disabilities, especially in underserved, rural, low income Vermont communities.



### **What does Objective 1.1 mean?**

Adults with I/DD often experience poor health and have difficulty getting their needs met in medical settings. There are many reasons for this: for example, doctors who treat adults are usually not trained about developmental disabilities or accommodating different ways of communicating. We can teach them these skills!

**The Council will support projects that improve health and health care for people with I/DD, starting with an underserved part of the state.**

## **Objective 1.2**

- Promote the use of available programs for competitive employment, education, and healthcare for Vermonters with developmental disabilities especially those living in underserved, rural, low income Vermont communities.



### **What does Objective 1.2 mean?**

There are many programs that help people with I/DD to find and keep meaningful, well paid jobs, and even build careers, without losing necessary benefits like Medicaid and social security. A good example is the new ABLE Savings Program. Employment is the best way to get out of poverty!

**The Council will ensure that people with I/DD in two underserved communities know about and take full advantage of pro employment programs.**

### **Objective 1.3**

- Support initiatives that position Vermont as a leader in developing and expanding entrepreneurial opportunities and innovative approaches to job training for people with developmental disabilities, especially those living in underserved, rural, low income Vermont communities.



#### **What does Objective 1.3 mean?**

For people living in underserved communities, we may need some “out of the box” thinking to create job opportunities. For example, could the State of Vermont give small businesses a tax benefit for hiring people with disabilities or provide a loan for a person with a disability to create a craft business?

**The Council will work with the State and the business community to try out creative new ways to expand job opportunities for people with disabilities.**

### **Objective 1.4**

- Promote peer-to-peer training and support -- including supported decision making and independent options counseling -- as a highly valued part of person-and-family-centered care planning for people with developmental disabilities and their family members, especially those living in underserved, rural, low income Vermont communities.



#### **What does Objective 1.4 mean?**

Self advocates are in a unique position to help one another. They can offer support in decision making, health coaching, and care planning. Sometimes this is a form of “natural support,” meaning it is not a paid service. Sometimes this should be paid for by Medicaid, similar to peer support in mental health.

**The Council wants to advance peer to peer support.**

## **Objective 1.5**

- Support families advocating for best practices in special education services for their child, including improving access to legal services, in underserved, rural, low income Vermont communities.



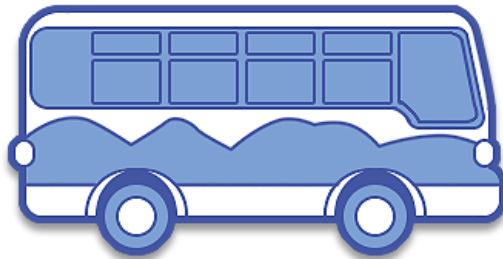
### **What does Objective 1.5 mean?**

Parents and guardians of youth with disabilities will be trained about the ins-and-outs of Vermont’s special education system. They will know their rights, ask for services their children need, and work alongside teachers and professionals.

**The Council wants more families to know their rights under the Individuals with Disabilities Education Act.**

**End Goal 1.**

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**Goal 2:** VTDDC will nurture and support a powerful movement of self-advocates and family members prepared to advocate for policies, programs, and funding that realize the vision of the Federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 [42 USC 15,001 et seq (2000)].

**THIS IS VTDDC'S GOAL  
FOCUSED ON  
SELF-ADVOCACY.**



**What does Goal 2 mean?**

The closing of the Brandon Training School occurred more than 25 years ago. Since then, self-advocates have organized a strong statewide network and families have built a well connected support organization. But is this enough? Have these groups realized their full potential as a powerful force for systems change?

**The Council wants to reach deeper into Vermont communities to identify and build a relationship with more individuals and families who are motivated to take up the cause of disability rights.** This is a partnership project that must be led by self-advocates and family members, as well as the organizations that represent them.



## Objective 2.1

- Identify and collect information about Vermonters who have a developmental disability, including those who meet the federal definition of “developmental disability” [42 U.S. Code §15002(8)] but who do not meet the State of Vermont definition of “developmental disability” for the purposes of receiving home- and community-based services (HCBS) [18 V.S.A. §8722(2)].



### What does Objective 2.1 mean?

There are roughly 86,000 Vermonters who have a developmental disability, as defined by federal law. Disability services and organizations know very little about most of these individuals and their families.

**The Council will conduct an outreach campaign to identify and build a relationship with as many of these Vermonters as possible.**

## Objective 2.2

- In collaboration with VTDDC’s Network Partners – Disability Rights Vermont and the UVM Center for Disability and Community Inclusion – and other advocacy groups, conduct multiple leadership training opportunities where self-advocates and family members come together to learn how to model and advocate for inclusion, self-determination, productivity, and independence.



### What does Objective 2.2 mean?

The Vermont Leadership Series has begun to take hold as an intensive, introductory training in the values of the disability rights movement and advocacy skills. Opportunities that could be explored include more advanced training, single workshops, and leadership development targeting underserved communities.

**The Council wants to continue to collaborate with partner organizations to develop the annual Leadership Series, as well as seek opportunities to offer other leadership trainings.**

## Objective 2.3

- Engage self-advocates and family members through the dissemination of information and alerts; through soliciting their input about the issues impacting their lives; and through assisting them in practicing advocacy skills, including at the local and regional level.



### What does Objective 2.3 mean?

People become engaged in advocacy when they see an issue that directly impacts their lives. Often this is something close to home for example, an inaccessible school playground rather than a policy decision at the State House.

**To build a powerful, grassroots movement, the Council must engage people where they are at, helping them to speak out about issues they identify as important.**

## Objective 2.4

- Build a repository of stories from self-advocates and family members in multiple formats (audio, video, or written) that can be used as advocacy and training tools.



### What does Objective 2.4 mean?

Telling your story is a powerful tool for advocacy and shaping public opinion. The Council has helped produce and save stories in the past. But technology is moving faster and faster, opening new opportunities every day like online learning and social media.

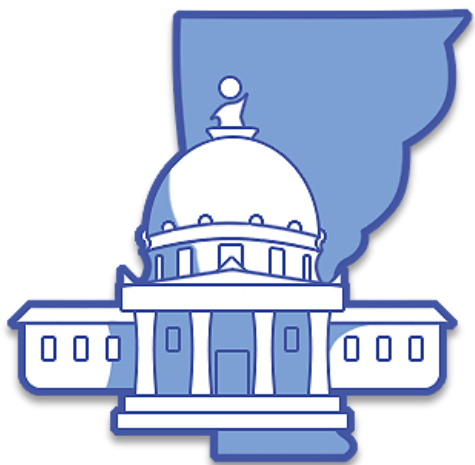
**The Council wants to collect and use the stories of Vermonters with I/DD as tools for teaching and advocacy.**

**End Goal 2.**

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**GOAL 3:** VTDDC will vigorously seek changes in Vermont’s many service systems so that Vermonters with developmental disabilities – including those who are currently not identified as having a developmental disability under Vermont law [18 V.S.A. §8722(2)] – and their family members have greater and more equitable access to supports that foster the four values in the Federal Developmental Disabilities Assistance and Bill of Rights Act of 2000: Community inclusion, self-determination, productivity, and independence.

**THIS IS VTDDC’S GOAL  
FOCUSED ON  
SYSTEMS CHANGE.**



**What does Goal 3 mean?**

Health care reform, changes in the Developmental Services System of Care Plan, the new Home and Community Based Services Rule these are all opportunities to advocate that the systems people with I/DD rely upon have the funding they need and use those resources equitably and wisely.

Unfortunately, we have seen the quality of care in many Vermont systems erode over time. Too often schools, agencies, and health care providers focus on responding to crises, instead of preventing these costly events through steady, dependable support to people with long term care needs. Formal home and community based supports are only provided to a tiny fraction of Vermonters living with I/DD.

**The Council wants to focus its systems change work on increasing access to home and community based supports, especially when these services can prevent costly crisis intervention later.**





### Objective 3.1

- Through a public awareness campaign, disseminate information widely about the prevalence, accomplishments, stories, and needs of the estimated 86,000 Vermonters with developmental disabilities, including those who do not qualify for home- and community-based services (HCBS) through the state Developmental Services System of Care.



#### What does Objective 3.1 mean?

In Objective 2.1 above, VTDDC will reach out and identify people who experience a developmental disability but are outside of formal service systems. This information needs to be shared in thoughtful, strategic ways.

**The Council wants Vermont policy makers to know about the contributions and the needs of the vast majority of people with developmental disabilities in our state estimated to be 86,000 strong who do not receive home and community based services.**

### Objective 3.2

- Advocate that the Developmental Services System of Care place greater emphasis on pro-actively supporting individuals rather than reacting to crises, expand the percentage of individuals eligible to receive home- and community-based services (HCBS), and receive adequate resources to provide high quality support.



#### What does Objective 3.2 mean?

Vermont's System of Care Plan for Developmental Services guides the delivery of home and community based supports to roughly 4400 Vermonters with I/DD (2015). It sets out the priorities that determine who is eligible for these services. Over the past decade, the list of priorities has grown more narrow, with an increasing emphasis on individuals at imminent risk of harm or of being institutionalized.

**The Council wants to advocate that home and community based services be available to more people with I/DD, especially those who could benefit from prevention oriented services like job support.**

## Objective 3.3

- Promote access to existing care coordination services for Vermonters with developmental disabilities through provider training, appropriate accommodations, and targeted outreach.

### What does Objective 3.3 mean?



Vermont has been experimenting with coordinating traditional medical services and other crucial supports for people at high risk for disease. This strategy seems to be improving health and people's lives.

We know that Vermonters with I/DD are "medically underserved." This means that they are sick more often, have more risk factors for poor health like being overweight, and die younger often from preventable causes. This makes people with I/DD excellent candidates for care coordination programs, but so far, few have taken advantage of these opportunities.

**The Council wants to work with health care reformers to ensure that well trained care coordinators make their programs available to people with I/DD and work effectively with them.**

**"The social determinants of health" is a term that refers to the ways that housing, transportation, school and other community supports impact a person's health. Care coordination includes all these factors."**



## **Objective 3.4**

- Strengthen VTDDC’s capacity for cultural and linguistic competency (CLC) and, through participation in Vermont’s Community of Practice for CLC, advocate that all disability-related services be welcoming and accessible to diverse groups of Vermonters.



### **What does Objective 3.4 mean?**

In Vermont people with physical disabilities may receive home and community based supports through the Choices for Care program. However, this program typically provides less funding. Designed for seniors, it does not include job support as an available service.

**The Council believes that Vermonters with a developmental disability, as defined in federal law, should receive the services that meet their needs regardless of what program provides these supports.**

#### **NOTE**

VTDDC follows federal definition of the what is considered to be a “developmental disability.” According to federal law, a developmental disability is “a severe, chronic disability” of an individual that:

- Is caused by a mental or physical impairment or both.
- Began before the individual’s 22nd birthday
- Is expected to continue through the individual’s life
- Results in functional limitations in 3 or more areas of “major life activity,” which are listed as: self care, receptive or expressive language, learning, mobility, self direction, capacity for independent living, and/or economic self sufficiency.

AND

- Can be seen in the individual’s need for individualized supports or other forms of assistance.

The Council’s mission is to improve the lives of any Vermonter that meets this federal definition and their family. This includes people who do not receive home and community based services and people who receive supports through other Vermont disability programs such as Choices for Care or the Brain Injury program.

## Objective 3.5

- Advocate to expand family support funding, including funding for respite.



### What does Objective 3.5 mean?

Family support funds are relatively small amounts of money used to help family caregivers to be successful in supporting someone with a disability for example, paying for a lift that allows someone to be transferred to their bed without harm to either the individual or the caregiver.

Vermont provides very little funding for family support, typically under \$1,000/year. The amount has been reduced over time. The types of support provided are also very narrow for example, there is very little training available to family caregivers or support for parents who themselves have a disability. At the same time, family support is incredibly cost effective. Family members can be tireless allies and caregivers!

**The Council wants to advocate that the State of Vermont invest in family support across the lifespan of the individual with a disability.**

## End Goal 3.

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