

FY 2012 – FY 2016 State Plan Development Process

TCDD Council Meeting

August 2010

Tab 13

Previous Discussion



Reviewed Plan requirements and timeline



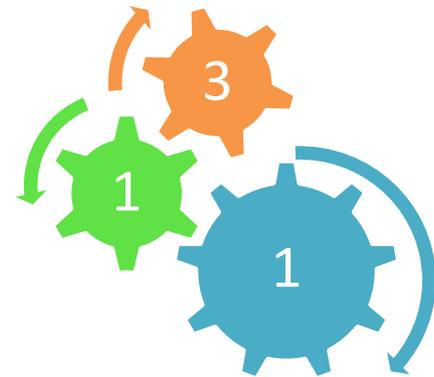
Determined to:

- Use a strategic model
- Reserve some resources for emerging issues

Strategic Model

Step-by-step, systematic plan to reach specific outcome(s)

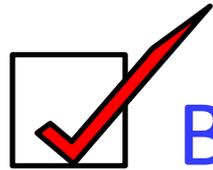
- Narrowed focus
- Data-driven
- Measurable objectives
- Logical



“Route to Success” (Pennsylvania)

Council Mission	Improve Knowledge Base	Select Clear Social Strategies	Obtain Stakeholder Involvement	Support Policy Entrepreneur	Use unanticipated events
Create Change					
ALL people w/ disabilities (diverse)					
Fully included in communities					
Exercise control over lives					

Today's Agenda



Briefly review required elements



“State of the State”

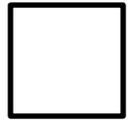


Strengths, Weaknesses,
Opportunities, Threats

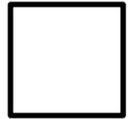


Discuss information & next steps

Future Agendas



Examine uncompleted objectives



Review focus areas of partners



Determine how much to reserve



Discuss Public Input

Reminder: Temptations to Avoid

- “Interesting” distractions
- Too much detail, too early
- Thinking TCDD can or should address all important issues
- Assuming there is a “right” answer



Required Elements

- Data-driven strategic plan
- Measurable goals for advocacy, capacity building, systems change
- Collaboration
- Public input into plan



Required Elements

- Address “unserved” & “underserved”
 - Racial & ethnic minority backgrounds
 - Disadvantaged
 - Limited English proficiency
 - Underserved geographic areas
 - “Specific groups within the population of individuals with developmental disabilities”

Areas of Emphasis

1. Quality Assurance
 2. Education-Related Early Intervention
 3. Child Care-Related
 4. Health-Related
 5. Employment-Related
 6. Housing-Related
 7. Transportation-Related
 8. Recreation-Related
 9. Formal and informal community supports
- 



“State of the State” - Overview

Context: “Pretend Texas is a town of 100 people”

(Per the US Census unless otherwise noted)

Overview of major issues identified by TCDD:
shortages, gaps, systemic problems.

What supports do people commonly say they
need and don't have?

Pretend Texas is a town of 100 people

AGE: 36 people are under 18 years old
54 are between 18 – 64 years old
6 are between 65 -74 years old
4 are over the age of 75

ETHNICITY: 47 are white, not Hispanic
37 are Hispanic
12 are black
4 are Asian
1 is American Indian

GENDER: 50 are male
50 are female

Texas as a Town of 100: Education

Of the 61 people who are older than 25,



- 7 people have less than 9 years of education
- 8 people have 12 years of school, but no diploma
- 15 people have a high school diploma
- 13 have some college, but no degree
- 3 have an associates degree
- 10 have a bachelor's degree
- 5 have a graduate or professional degree

Texas as a Town of 100: Disability



2 people have a developmental disability.

19 people between ages 16 & 64 will have a mental illness at some time.

2+ people have serious mental illness; the odds of their being in jail rather than in a hospital are 7.8 to 1.

Only 5 people will receive treatment.

Of 82 people ages 5-65, 13 have a disability (16%).

Of 10 people over age 65, 4 have a disability (40%).

Sources: Based on 1.8% national prevalence rate (Gollay), provided by the Administration on Developmental Disabilities; Texas Department of Health Services

Texas as a Town of 100: Health



25 people do not have health insurance.

13 people receive Medicaid.

0 primary care physicians in town accept Medicaid.

A Town of 100: Housing & Employment



65 people live in a home they own.

9 out of 100 houses are empty.

1 person is probably homeless.



46 people over age 16 have jobs.

4 people over age 16 are looking for jobs.

25 people 16+ yrs say they aren't seeking jobs.

16 people live below the federal poverty line.

Federal Poverty Guidelines, 2010

Family Size	Monthly Income	Annual Income
1	\$902.50	\$10,830.00
2	\$1,214.17	\$14,570.00
3	\$1,525.83	\$18,310.00
4	\$1,837.50	\$22,050.00

Source: US Health and Human Services, updated April 2010

Texas as a Town of 100: Transportation

78 of people working drive alone to work.



2 of those working use public transportation.

2 of those working “walk” to work.

The remaining people carpool to work.

Texas as a Town of 100: Other

- 47 people say they attend religious services at least once a week.*
- 69 say they have internet access at home. **
- 33 people speak a language other than English at home.

Sources: * Pew Forum; **Austin-American Statesman, 2/17/2010

Texas as a Town of 100?

By the end of the FY 2012 – 2016 State Plan,
The population of the “Town of Texas”
will probably have increased by about 8 people.



People in Texas tell us they need...

More and/or improved basic services:

- Transportation
- Housing
- In-home support, including personal assistant
- Information, technical assistance, support
- Employment and/or meaningful activity
- Inclusive education and/or childcare
- Appropriate healthcare, especially mental or behavioral health
- Assistive technology

Major Service Gaps identified by TCDD

- Fewer people with DD served than expected
- Waiver service waiting lists continue to grow
- Individuals may be on waiting lists 0-9 years
- Possible increase in demand of 4% each year
- People continue to be admitted to institutions because of a lack of needed community services; about 43% admitted to State Centers (Schools) in 2006 were children

(Source: TCDD 2008 Biennial Disability Report)

Top 5 Pressures Resulting in Admission of Children to Institutions

- Cuts in community services due to funding cuts
- Lack of timely available appropriate alternatives
- Lack of supports for families of children with challenging behavior or mental-health diagnoses
- Forensic or court-ordered placement
- Parental choice

(Source: TCDD 2008 Biennial Disability Report)

Shortages

- Almost all publicly funded, community-based services /supports for people with developmental disabilities
- Many generic public services commonly needed by people living on very low income (ie., transportation, childcare, healthcare, etc.)
- Some basic needs that people living on low-to-median income need (ie., affordable housing and healthcare)

Systemic Barriers Identified by TCDD

- Funding concentrated on higher cost institutional services, instead of on more popular, less expensive community-based services
- Poor coordination of public transportation service
- Fragmented, confusing service delivery system
- Public schools not accountable to one state entity
- Access to & quality of services varies dramatically

 And, people tell us they need...

Support for and promotion of:

- self-determination
- self-advocacy
- increased control over one's life
- stronger families
- Changing attitudes when necessary
- Community inclusion
- Positive relationships



What is needed to create change

- A combination of strategies
- Power – from money, people, or knowledge
- For policy change, a “policy window” when economics, taste, leadership, and/or demographics work for you
- Action, in addition to policy change, information, and/or training
- People who can create change because of who they are or what position they hold

A Combination of Strategies

	Power - Knowledge	Action	Power – People, Knowledge,	People who can influence	Policy Window
Council Mission					
Create Change					
ALL people w/ disabilities (diverse)					
Fully included in communities					
Exercise control over lives					





Strengths of TCDD

- DD Network Partners: with AI, UT CDS, A&M CDD
- Representation of State Agencies on the Council
- Access to information & resources nationally
- Flexibility to choose & fund different strategies
- Can partner with a wide range of organizations
- Varied expertise (staff and Council members)
- Leadership & Advocacy efforts: Good start on initial statewide analysis of training gaps, support needs, and recommended benchmarks



Weaknesses (“Need to...”)

Improve ability to measure impact of efforts

Increase diversity in activities to reflect that of state

Improve, promote use of evidence-based practices

Attend to or develop the next generation of leaders

Improve understanding of the *whole* state

Improve sharing/dissemination of information

Expand inclusion of non-traditional partners

Opportunities

- Increase outreach via non-traditional partnerships
- Facilitate change by partnering with providers
- Young adults with disabilities who are included
- Maximize positive events: Texas' participation in
Core Indicators; Pilot efforts in self-determination
- Learn from and build on past successes

Past Projects Causing Lasting Impact

2-1-1

Inclusion Works! Conference

Home Of Your Own (HOYO)

Special Needs Master Trust

Any Baby Can

EveryChild, Inc.

In Home & Family Support program (grant to initiate 1988-1990)

TX Correctional Office on Offenders w/ Medical and Mental Illness

Projects Promising Lasting Change

Positive Behavior Supports Project

Texas Advanced Leadership & Advocacy Conference (TALAC)

Just Transportation Alliance

Project DOCC Medical Training, Transition Medicine Expansion

Project IDEAL

Demonstration of Peer-to-Peer Support

Texas Microboard Collaboration

Texas Community Integration Project



Threats

Difficulty of DD Councils to demonstrate outcomes

Statewide, nationwide budget crisis

Trends suggest more need, less resources, in future

Increased competition for funding may increase
conflict between organizations that could benefit
from collaboration



Discuss information & next steps

Choosing focus for the future:

- Mission statement & values
- Can we measure impact?
- What are others doing well and how can we support?
- What do we do well?
- What is “winnable”?

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