Department of Developmental Services

At a Glance
Jordan A. Scheff, *Commissioner*
Elisa Velardo, *Deputy Commissioner*
***Established* – 1975**
***Statutory authority* –**
Conn. Gen. Statutes Chap. 319b – 319c
***Central office* – 460 Capitol Avenue, Hartford, CT 06106**
Number of full-time employees – *1,914*
(total permanent FT filled count as of June 30, 2024)
Number of individuals determined eligible – *17,481*
***Organizational structure* - Services and supports for more than 17,000 individuals and their families are provided through a network of public and private providers across Connecticut. In Fiscal Year 2024, the Office of the Commissioner oversaw and directed the following divisions: Equal Opportunity Assurance; Legal and Government Affairs; Executive Affairs; and Regional Services. The Office of the Deputy Commissioner oversaw and directed the following divisions: Fiscal; Health and Clinical Services; and Waiver Services. The department operates three regional offices, and provides or funds residential, day program and family support services. The Independent Office of the Ombudsperson for Developmental Services and the Council on Developmental Disabilities are housed within the department.**

Mission
The mission of the Department of Developmental Services (DDS) is to partner with the individuals we support and their families, to support lifelong planning and to join with others to create meaningful opportunities for individuals to fully participate as valued members of their communities.

Statutory Responsibility

The Department of Developmental Services (DDS) is responsible for the planning, development, and administration of complete, comprehensive, and integrated statewide services for persons with intellectual disability and persons medically diagnosed as having Prader-Willi Syndrome. DDS provides services within available appropriations through a decentralized system that relies on private provider agencies under contract or enrolled with the department, in addition to the state operated services. These services include residential placement and in-home supports, day and employment programs, early intervention, family support, respite, case management, and other periodic services such as transportation, interpreter services, and clinical services.

Public Service

The department continues to engage in a number of activities designed to improve services and the management of its public and private programs. DDS also continues to be involved in initiatives designed to meet the increasing expectations of the Centers for Medicare and Medicaid Services (CMS) concerning health and welfare, and quality improvement protocols for the operation of Home and Community Based Services (HCBS) waivers.

Five Year Plan

In February 2022, DDS released a new Five Year Plan. The plan encompasses the department's goals for the next five years, charting a course for continued progress. These goals have been influenced and shaped by involvement from the department's many stakeholders over years and through many channels. Most recently, feedback was gathered during the Commissioner's "Seeds of Change" tour during mid-2021. This stakeholder engagement initiative offered important insight from individuals, families, advocates, providers, staff, and others and helped the department to clearly identify challenges, gaps, and improvements to be made. The department will continue to seek ongoing input in the upcoming five year cycle.

The new Five Year Plan also puts a focus on the Charting the LifeCourse (CtLC) framework. DDS continues to work toward full implementation of the framework and its tools across DDS services and those delivered through sister agencies and other entities. Throughout the "Seeds of Change" process, DDS sought to frame agency planning using the same framework to think about growth, progress, and priorities.

Data Sharing and Collaboration

This year, DDS successfully updated race, ethnicity, and language (REL) categories in compliance with Public Act 21-35 Section 11, requiring the development and implementation of standards a for the collection and reporting of REL data. DDS established permissible use to access the Medicaid eligibility source data from CT Social Services in accordance with our Agreement to operate the Medicaid Waivers for individuals with Intellectual Disability. By using the individually self-identified information gathered through the Medicaid eligibility redetermination process we can leverage existing information to assess equity of services and supports in the DDS system using key demographic features. DDS has utilized this newly acquired information to create an initial Equity Evaluation Framework in collaboration between the Division of Business Intelligence and Information Management and the Director of Equity and Inclusion and has proposed enhancements for the coming year to provide more insights into potential barriers to service or access to resources. In addition to adopting the standard categories, DDS modified paper-based forms for the Eligibility Application to include new categories and instructions for users. Training was conducted and a REL Date Entry User Guide was created for DDS data entry staff to ensure reliability in the coding of self-reported REL information using the updated eligibility forms.

DDS has continued the work started last year for several American Rescue Plan Act (ARPA) projects, including establishment of a new Business Intelligence software system using Microsoft Power BI. The Power BI program has brought development of new forward facing dashboards for licensing of group homes and citation resolution, internal dashboards for tracking and trending incidents and critical incidents, as well as ensuring timely follow-up of open items, and are working

on dashboards to help us respond more effectively to emergency situations, including natural disasters requiring evacuation and relocation of individuals with complex care needs. Plans to modernize the Management Information Report (MIR) and update annual quality assurance reports are some of the upcoming projects in the Power BI Program this year. ARPA has also supported DDS' access to Connie Health Information Exchange through the provision of Admit, Discharge and Transfer (ADT) Messages helping DDS identify when someone had a reportable event and giving access to key health information to health care professionals tasked with the care oversight of DDS supported individuals.

DDS has also worked to best report status of projects and progress towards goals. To that end, DDS has aligned performance measurement activities focused on project status tracking and project outcomes tracking across ARPA, the DDS 5 Year Plan and the Supporting Transformation Empowering People (STEP) initiatives. DDS has created a forward facing mid-term strategic update that is an important part of our communications plan to share and show results with our stakeholders.

Positive Behavioral Support and Trauma-Informed Care

DDS continues to promote the use of evidence-based clinical, behavioral, and trauma-sensitive practices in order to best serve individuals who present with challenging and complex needs. In FY24, DDS continued to provide trainings for behaviorists employed by private providers in order to improve service delivery and program oversight. Dr. Tolisano provided trainings on various topics to state agencies and private providers. These included crisis intervention, positive behavior supports, neurodiversity, and psychotropic medications. Dr. Tolisano completed his tenth year of training to the providers of Connecticut's Emergency Mobile Psychiatric Services for children and teens. In December of 2024, DDS will collaborate with the traumatologist, Karyn Harvey, on training for the Children's Services Division, as well as learning about trauma-informed approaches to Administration and Behavior Support Plan Writing.

Self-Advocate Coordinators

The Department of Developmental Services' Self-Advocate Coordinators (SACs) play a vital role in leading the department in supporting individuals, families, community partners, and all support staff. The SACs voice support, guide, question, and strengthen the department practices, policies, and culture. The SACs remain connected by being role models, providing on-going training, and promoting advocacy. The SACs support individuals in their understanding of what it means to live a self-determined life and be part of our CT communities in an ever-changing world. The SACs located in all three regions, are employed by DDS to inspire people to take a "STEP" (Supporting Transformation to Empower People) in the direction to living their best life. Through their passion for advocacy, the SACs are instrumental with promoting as well as executing the department's five-year plan. In FY 2024, DDS welcomed two new SACs, one of whom is bilingual. There are now two bilingual SACs who continue to promote DDS materials in both English and Spanish.

FUN, ADVOCACY AND BRAINPOWER (FAB), COMMUNITY OUTREACH AND MORE

The DDS Self Advocate Coordinators (SACs) are available to support all Self Advocacy (SA) groups around the state of Connecticut by providing monthly resources for a fun and informative SA meeting. Every fiscal year, the SACs select monthly topics for July through June. Any SA group

looking for ideas to support their meetings can go to the Self-Advocate Corner on the DDS website. FAB ideas assist in making the SA group a time to: have Fun through making friends, become a great Advocate, and learn information to increase knowledge and Brainpower, to assist in understanding various topics to make their life happen! One item that was of interest to have a resource for as a FAB topic was emergency preparedness. The SACs created an accessible PowerPoint Presentation (e.g., voiceovers with audio descriptions of the information).

AGING MATTERS

The Aging Matters Conference was held in-person on May 8th, 2024. The SACs continue to partner with the CT State Department of Aging and Disability Services & The CT Chapter of the American Association on Intellectual and Developmental Disabilities to spread the word about the conference. One of the South Region SACs remains an active participant of the Aging Matters Committee to lend ideas to the planning of the annual conference, which included breakout sessions. This year's conference was entitled "Taking Control Against Fraud: Building Awareness to Use Technology Safely."

EDUCATION, TRAINING AND COMMITTEES

The SACs provided training to stakeholders in 1:1 advocacy, IP Buddy Supports, being Self-Determined, how to advocate (10 Steps of Being a Good Self Advocate), exploring self-directed supports, promoting employment opportunities, promoting healthy relationships, sharing the various living options available, learning to hire and manage your own staff, understanding abuse and neglect, promoting the Individual Plan used by all people supported by the department, promoting LifeCourse strategies and materials, promoting Peer 2 Peer Waiver supports, and being available to listen to advocates of all ages to find their voice. All SACs are valued members of various regional and statewide committees including: Diversity Equity and Inclusion (DEI), Aging Matters, Youth Leadership Program, interview teams, SELN, employment, Provider Qualification, Job Development Leadership Network (JDLN), and People First of CT.

The SACs continue to be part of interview panels for DDS staff members across the agency. In addition, SACs assigned to the regional Quality Assurance units have been taking part in policy revisions. In 2024, specific policies included: Respectful Language and People First.

The SACs continue to partner with a Planned Parenthood of Southern New England Educator who have been trained to teach the curriculum that has been written By, For, and With Self Advocates. The series is conducted in each of the 3 regions at least 2 times a year. The "Healthy Relationship Series" curriculum the department is using promotes healthy relationships for all individuals.

The SACs worked with the Director of Assistive Technology (AT) to spread the word on all things AT via a new program called AT and Me. This is a program for individuals supported by DDS to learn how to use technology to live more independently and improve daily living skills. The aforementioned will be achieved by the SACs promoting the program, encouraging individuals to apply to take part in the program, educating individuals on ways to use a multitude of devices. Instruction with use of the peer-to-peer modality will allow for comfort, learning at the participants' pace, cooperation and supports meaningful connections.

Improvements/Achievements 2023-2024

Individuals Served

As of June 30, 2024 there were 11,038 individuals enrolled in the Home and Community Based Services (HCBS) waivers for persons with intellectual disability.

DDS funding priorities continue to address individuals with an emergency need for supports and services and for existing HCBS waiver participants with increased needs or a change in their need. As of June 30, 2024 there were 598 individuals on the DDS Residential Waiting List including 50 Emergencies and 548 Urgents.

As of June 30, 2024 there were 8,5361 individuals supported in residential settings. In addition, 14,695 individuals were supported in day and employment settings.

Money Follows the Person

DDS is a partner in CT's Money Follows the Person (MFP) demonstration grant that is intended to assist with the rebalancing of CT's long-term care system, so that individuals can return to living in the community. As of FY24 the DDS MFP unit has assisted 347 individuals who have moved from long-term care settings, Hospitals, Private ICFs, Southbury Training School and DDS Regional Centers into community settings under MFP.

Respite Program

DDS Respite Centers provide 24-hour care for extended weekends in comfortable home-like environments. The department has 11 respite centers that served more than 680 individuals statewide in FY 2024, including more than 30 children under 18 years of age.

Case Management

Throughout Fiscal Year 2024, DDS Case Managers have continued to provide quality Case Management services to individuals and their families. Activities primarily include support around 4 major areas; Needs Assessment/Reassessment, Annual Planning, Service Coordination/Referral, and Monitoring/Follow up. This past year, a new Children's Services Division centralized Case Management for those age 22 and under. The Case Managers in this unit have specialized training to support young individuals in transitioning to adult services. Additional support and structure has been added to the 3 regional helplines as well. In May of 2024, a Curriculum Manager specific to supporting Case Management education and access to information was added to maintain and strengthen skillsets statewide.

DDS Case Managers shepherded many new and changing initiatives for individuals and their families. These include programs to bolster employment opportunities, as well as multiple efforts to offer assessments for and acquisition of assistive technology that promotes independence. Significant support also came from Case Managers in the latter half of last fiscal year as the department transitioned to a new, single Fiscal Intermediary.

Lastly, while the use of FileBound (the department's intermediate electronic document management system) continues to expand, DDS has begun to explore options for a future Care/Case Management system along with a complete document management system. The goal is to eliminate the use of paper

records as well as streamline operations completed by staff day to day. The preliminary work included an evaluation of systems from other states as well as partnership with DSS for the submission of an Advanced Planning Document for federal funding. This multi-year project will continue into the coming fiscal years.

Federal Reimbursement

As of June 30, 2024, there were 11,038 persons enrolled in the DDS Home and Community Based Services (HCBS) Waivers. The HCBS waiver program allows for federal reimbursement for residential habilitation, day programs, and support services provided in the community.

Information Reported as Required by State Statute

Affirmative Action/Equal Employment Opportunity Office

The DDS Equal Employment Opportunity (EEO) Office is charged with ensuring that the principles of Affirmative Action and Equal Employment Opportunities are undertaken with vigor, conviction and 'good faith' to overcome the residual effects of past practices, policies and/or barriers. The EEO Office directly reports to and is under the authority of the DDS Commissioner. The EEO staff conducts investigations into internal discrimination complaints, renders findings and is involved in a variety of resolution activities. The EEO staff develop, implement and monitor affirmative action program goals and objectives. The EEO staff monitor compliance with state and federal affirmative action/equal employment opportunity laws and regulations. The EEO staff provide training to all new employees and supervisors on affirmative action topics. The EEO staff consult with managers and administrators on affirmative action matters.

Council on Developmental Disabilities

The CT Council on Developmental Disabilities is an independent, federally funded agency, established by Governor Malloy's Executive Order No. 19 and operating under the federal Developmental Disabilities Assistance and Bill of Rights Act of 2000 (PL 106-402). The Council is composed of 24 members appointed by the Governor. The Department of Developmental Services provides fiscal and administrative services to the Council. In FY 2024, the Council received approximately $734,000 for work on its current five-year plan, which covers fiscal years 2022 through 2026 and is organized around these nine specific objectives:

OBJECTIVE 1.1: By 2026, increase the access for at least 150 individuals with developmental disabilities to assistive technology pertaining to the areas of emphasis as defined in the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) through collaboration with at least five (5) state departments and agencies and analysis of their existing programs and benefits.

OBJECTIVE 1.2: By 2026, provide assistive technology to individuals with developmental disabilities for the purpose of enhancing quality of life by providing start-up funding for sustainable service models in at least five (5) organizations.

OBJECTIVE 1.3: By 2026, increase the sustainability of services and programs being offered to the developmental disability community by providing technical assistance on social enterprise practices for generating sustainable funding sources to recipients of Council funded grants.

OBJECTIVE 2.1: By 2026, assist marginalized communities to access and understand the available programs and services pertaining to the developmental disability community offered by state-wide governmental agencies and departments, local boards of education, and other local agencies by providing information and support to at least 20 local advocacy organizations.

OBJECTIVE 2.2: By 2026, inform individuals with developmental disabilities and their caregivers about their civil, housing, employment, and educational rights through at least ten (10) information sessions and the creation, compilation, and distribution of pamphlets, graphics, and other digital media in collaboration with at least six (6) civil-rights or legal advocacy organizations.

OBJECTIVE 2.3: By 2026, collaborate with at least five (5) self-advocacy groups to assess and address the needs of the developmental disability community with the intent of developing self-advocacy, self-determination, and professional skills.

OBJECTIVE 3.1: By 2026, provide the Governor with an annual review and analysis of all existing statutory councils pertaining to the developmental disability community with the intent of encouraging and enhancing accountability, diversity, and efficiencies, in addition to, identifying under-supported, redundant, or inactive councils.

OBJECTIVE 3.2: By 2026, train and educate at least 150 parents, caregivers, and siblings of individuals with developmental disabilities to build connections, cultivate leadership and advocacy skills, learn about the responsibilities of being a caregiver/care-coordinator, and develop healthy self-care practices.

OBJECTIVE 3.3: By 2026, provide trainings to at least 150 professionals including but not limited to educators, law enforcement officers, public officials, public employees, and medical professionals on disability awareness, appropriate responses to challenging situations, and how to identify and interact with people with developmental disabilities.

Regulations:

The department continues the process of amending the licensing regulations for Community Living Arrangements and for Community Companion Homes and reviewing the contracting regulations concerning Individualized Home Supports and Continuous Residential Supports. The department also is revising and updating its Medication Administration regulations to include online training options, electronic health records, and to reflect current best practices. The prioritization of reviewing and revising agency regulations continues.