Transcript

July 18, 2024, 9:03PM

Patti Silva 0:05

OK, alright, this is Patty Silva, Council chair.
We are going to call the meeting to order July 18th, 2024.
Just to reminder, if you're going to speak, please just say your name and your title, Council member, or if you're a member of the public, whatever, whatever you call yourself, so welcome everybody.
Hope everyone's been staying cool.
I wanted to give an opportunity for anybody from the public if they'd like to say anything to the Council or share anything.
Are there any members of the public?
I don't.
I don't see any.
All right, we're going to move on, so.
1st is the uh, the June meeting minutes, which we are now into that new format where there is a recording of our meeting and a transcript which I don't know if anybody had a chance to look through it yet.
But I I had a few laughs.
I know transcription is not perfect, but if if you if you wanna lighten your mood a little bit, I mean obviously it doesn't do well for, you know, the authenticity of what we're saying.
But the video recording is there for that, so that those will be posted on our page on the DDS website.
So, umm, that being said, I was just looking through our bylaws to see what we required as far as posting minutes and that sort of thing.
And I did go ahead and send the bylaws to everybody, just so you would have a copy to refer to if you wanted to.
But on page one and two it talks about.
Let's see here Article 3.
What?
That there's the meeting of the minutes.
Let's see.

Uh, but and also in our policies, it states under 4A that the minutes of the Council on developmental services meetings shall be available on the DS website.
So my thought was that maybe we could form a subcommittee just to take a look at these and go through them just to make sure that they're updated to reflect what we're going to be doing.
Now as far as posting the meeting minutes and video?
Umm so I I don't see that this would be anything really time consuming.
It's.
I think it's pretty simple.
Jordan, you have your hand up.
You have to unmute.

SA **Scheff, Jordan A** 2:51
Jordan chef uh DDS, commissioner, and I'll try and be good about that tonight.
There was one other thing that when Wes and I were talking about processing the minutes and recording.
If people can remember when not speaking to mute their microphone because the transcription service picks up the background noise and and makes it a little muddier to decipher the other thing, I wanna remind whoever might participate in that group as far as.
Minutes are concerned.
The only thing required to be recorded in minutes and we will continue to do so separately from the transcription and video, is a list of attendees and any official votes that are taken during the meeting, aside from commencing in a journey, so that will still get posted as as the Minutes, but it will not reflect the Minutes, won't be the full conversation that the video and the transcription will lend themselves to that that was that was the intent.

PS **Patti Silva** 3:42
That.
Hello.

SA **Scheff, Jordan A** 3:51
So when you're talking about whether or not a bylaw changes made, and I don't know if one is or not, just that as we understand, as I understand minutes, that's all

that's required.
Attendance and official action records of votes on official action.
Thank you.
Now you're muted, Patty.

Patti Silva 4:18
OK, Patty Silva, Council chair, Kevin Bronson.
You have your hand up.

Bronson, Kevin 4:22
Yeah.
Kevin Bronson, DS Patty I didn't get.
I saw the email.
I didn't get a chance to look at what you shared around, but I'm happy to take a look at it with Jill Kennedy and see if things are necessary to make adjustments.
However, we can talk offline, but happy to help you with that.

Patti Silva 4:44
OK.
Yeah, I don't think it's anything.
Patty Silver, Council chair.
I don't think it's anything.
Umm, very labor intensive at all.
I think it might just be a matter of changing, you know, a few words.
And so I don't know what do you guys think?
Should we just have a couple Council members look through the bylaws and then see what we need to do?
And Kevin, if you have any other you know suggestions I know in the past whenever we've had a bylaw change which hasn't been very often, it was very, it was a simple matter because you know it's just you go through it, you put it forward to the Council, they look through it and then we would approve it at at a a next meeting, something like that.
This really kind of procedural, Kevin, you have your hand up again.

Bronson, Kevin 5:32

Yeah.
Kevin Bronson, DDS.
Yeah.
I just, uh, what we the way that we run policies at at the agency is that the subject matter experts, right?
So it would be the Council would draft, make the initial draft and then send it over to myself and Jill.
And then we can conform it to make it sound proper.
And then you guys can review it again.
So that was my offer.

Patti Silva 5:55
Great.
OK, great.
That that sounds good.
Is there anybody who would be willing to just go through this?
I'm I'm willing to do that if if anybody else wanted to join me.
Like I said, I I don't.
I don't think it's going to be very intensive at all.
So maybe just, you know, a one meeting kind of a shot.
Anybody.
Ohh Diana.

Diana Mennone 6:24
I'd be happy too.

Patti Silva 6:26
Thank you, Diana.
Alright, so we'll just we'll get a time together and just go through that real quick and then we'll shoot it over to Kevin.
Does that sound good to everybody?
Do we need to make a motion?
I think this is just a subcommittee or I don't know, Kevin.

Bronson, Kevin 6:43

Kevin Bronson, DS It's always safe to make a motion and yeah, you would have to because you're creating a subcommittee.

Patti Silva 6:47
OK.

Bronson, Kevin 6:50
That chair should make a motion to create a subcommittee for this intent.
This purpose and then the you guys can vote on it.

Patti Silva 6:58
OK.
Does somebody want to make a motion to form a subcommittee?
Alright, Christine.

Christine (Guest) 7:09
Christine Haynes worth Strauss.
I moved that we create a subcommittee to review the bylaws and fragment to conformance with practice and with.

Patti Silva 7:20
Is there a second?

Christine (Guest) 7:21
Instead.

Patti Silva 7:22
Yeah.
Thank you, Adrian.
OK, seconded by Adrian.
All in favor of the motion?
Aye.

Diana Mennone 7:32
I.

Patti Silva 7:33
Hi any opposed?

Adrianna Ramirez- aramirez@ctfsn.org 7:35
My wife.

Patti Silva 7:35
They looked OK.
Motion passes so.
Diana and I will get together and go through the bylaws and and see what we can come up with and pass along to Kevin for for their review.
All right.
Thank you very much everybody.
Umm.
Next on our agenda is the ombuds person report, Shannon Jacopino.

Jacovino, Shannon 8:02
Hi, this is Shannon Jack of you know, DSM buds person.
I sent my report out this morning.
I got 1 Crest question from Christine.
Just sort of asking about if there are particular areas where I'm seeing an increase in calls and what I would say is this is that the majority of the calls that I get are from people whose loved ones are in Group homes.
Umm, you know the issues kind of run the gamut from just sort of trying to work out and negotiate an issue with the group home and maybe running into a snag.
Umm, you know when those calls usually just involve reaching out to the case manager and discussing the issue and just seeing if we can get things to a place where it's agreeable to both the provider and the family to, you know, more, I think serious concerns, umm, for agencies that are struggling with staffing, struggling with high turnover with group home managers, other kinds of managers and nursing and in those areas there are more serious concerns about umm people's health and safety, the ability to follow through with individual plans, the ability to you know provide proper medical.
Attention to people and you know in those cases, I again work very closely with the

region, with the case manager.
Uh, usually in more serious cases, the assistant regional director, maybe the resource manager and nursing as well.
And so I would say that I'm getting more of those calls than I did.
You know, a couple of years ago when I started the job and I think that it is, you know, the providers are struggling with not only maintaining, you know, keeping staff, but also keeping managers and, you know, for people who are familiar with group homes, you know, having a good manager is really critical to everything in a group home.
So you know that is the pattern that I'm seeing.
And I do think it's concerning, you know, I I recognize that I only hear from people or having problems and that that's not happening everywhere.
Occasionally I get to talk to people who are very happy with how things are going and it's it's nice to hear.
But I am concerned about the staffing crisis and and how it's impacting people's, you know, the quality of the services that they're getting.
So does anybody else have any other questions or comments?

Nicole Milo 10:53
I would it be OK if I just sort of piggyback off of that Shannon in regards to the staffing?
Umm, you know, I know I've sent some emails around umm and I think I think I need to give a little bit of context how it's all related.
Umm for the last three years I've been taking a lot of research and a lot of calls from families, most of them, as you are getting to know me, are the highest level of need. Individuals.
Excuse me umm as I choke. Sorry.
Umm so.
I am seeing the same sort of complaints and.
I think the Commissioner sort of hit the nail on the head in in one of our previous Council meetings, which was, you know, we can get things done and get money, all we want thrown at us, but if we don't have the proper infrastructure, we can't replicate and help in these areas to even provide the services properly.
So if I were to kind of agree with what you're saying, but also in context.
Umm, it is so pervasive in every area, but it really starts with the staffing piece and

that is why I have really been advocating to look at other places that are really able to do it and find solutions because I don't necessarily think in regards to the higher level of needs.
We're we're talking group home, residential placement, different things like that.
The infrastructure has to be partnered with the amount of colleges and universities that are providing the proper education to staff and then replicate and train, and we just don't have it.
Here we have, you know, the southern down in New Haven, but we're sort of scattered all around.
And so that was sort of one of the main reasons why I've been pushing this because and by pushing this, I mean asking a agency that is being successful now they have the largest endowment in 60 year history in the nation.
That was just given to them and it is for the purpose of helping states replicate a successful model and provide the necessary infrastructure to be able to stop it and to train other agencies.
So I would just kind of add to what you're saying, that heaviness and kind of what we're all feeling and then not having a solution.
I thought it was sort of, you know, win for everybody across the board and it's the only solution I see to help at the foundational level for infrastructure replication.
So I don't know if that kind of helps to give some context to some of the suggestions of having Mel, Mark present in the future, but I really I'm really encouraging it.

JS **Jacovino, Shannon** 13:55
This is Shannon Jacopino DSM buds person.
Thanks, Nicole.
I would definitely like to learn more about the programs there myself.
Umm.
Mike has his name.

NM **Nicole Milo** 14:05
And I and I think it's important to to to say to the Council, it's the full continuum of care that I don't see one particular agency being able to cover from, you know, little all the way up through adult and then being able to expand on that.
I just for specifically for for profound autism.
You need the continuum of care and consistency across all settings so that can be a

real struggle for agencies as well to be able to have that continuity across state programming across you know different places and settings so.

Jacovino, Shannon 14:42
Thanks, Nicole.
Mike has his hand raised.

Michael Beloff 14:46
Michael Beloff, Council member and, and Nicole, I think one you should know, there are agencies that do offer, you know what used to be called cradle to grave services. Keep in mind that with changes to how birth to three services are offered, there are only.
Currently, I think 13 agencies providing birth to three services throughout the throughout the state and due to how DDS provides services, there is not a tremendous amount of dollars for supports during the years between 3 and 22.
Umm that said, I think that yes, having access to additional training for staff can help with service delivery and with.
A training and with quality of care and service.
I think the big challenge right now is because of the base rates payable to individuals at 1725 an hour for base support staff, which provide the majority of.
Of of staff for adult services, it's hard to get college folk college graduate folks working for 1725 an hour.

Nicole Milo 16:04
Umm yes, no.

Michael Beloff 16:05
Umm.
So those are not going, you know, until there is a movement at the legislature to provide significant wage increases.
Umm, it may be challenging to fill out the staffing.
Listen, I can remember, and I've been on an agency board for 20 years.
There was probably about 7 or 8 years where the base rate was stuck at about 12 bucks an hour, and there were at least five or six or seven years.

Nicole Milo 16:31
Umm.

Michael Beloff 16:34
And forgive me for not knowing the the correct number where there were no increases from the state level for direct care staff.

Nicole Milo 16:44
Umm.

Michael Beloff 16:44
We've been lucky in recent years, except for this year, where base wage rates have gone up and certainly there are agencies that are fundraising to be able to provide additions on top of the base radius from DS.

Nicole Milo 16:57
Uh-huh.

Michael Beloff 16:58
But well, I think it's it's, we do need to have perhaps better.
Umm, coordinated training for staff?
And maybe for the executives at staff to understand at agencies to understand what that best practices are.
Umm, I think the housing shortage, the the, the, the staffing shortage is gonna be there until we can get the legislature to raise base rates.

Nicole Milo 17:16
Umm.
So correct me if I'm wrong, just so I kind of understand.
I hear what you're saying, but I'm gonna be totally honest with you when we're dealing with the law and level eights, there are no beds.
There's no agencies, there's no room.
So we have these individuals placed out of state and institutional settings.

I want them to come home to their families and I'm sure everybody on this Council does.

Michael Beloff 17:44
What are are?

Nicole Milo 17:47
So if I were to lay that as the context of what I'm saying is that we cannot provide that level of care and and also simultaneously have the proper pay scale structure. So we need an agency that has the financial backing to fill that gap.

Michael Beloff 18:08
Sure.

Nicole Milo 18:08
OK, so.

Michael Beloff 18:08
And and and and and this is Michael Bell, Council member, just for the transcription.

Nicole Milo 18:11
Yeah.

Michael Beloff 18:12
Nicole, are you talking about individuals between the ages of three and 22, or you talking about adults?

Nicole Milo 18:18
I'm talking about all I'm talking about across the board, so if you're dealing with with extreme behavioral challenges with.

Michael Beloff 18:27
No, no, no.
I no, I I understand that.
I'm very familiar with autism.

Nicole Milo 18:30
So school let.

Michael Beloff 18:30
What I'm asking is the end.
Are there individuals post 22 that DDS is funding out of state in a residential facility?

Nicole Milo 18:37
Mm-hmm.
Yes.

Michael Beloff 18:42
OK, I I was not aware that that was that was still happening or not.

Nicole Milo 18:46
And unfortunately, there's not a lot of awareness about it, and I'm dealing with these families who are in extreme crisis and trauma, and it's very difficult.
But the state can save money if we bring them home, but we can't bring them home if they're continually saying that their needs cannot be met properly.
And this is where it's frustrating because I'm not speaking for my own son.
I have got him set up.
I'm actually speaking on behalf of the most serious cases of families with autism diagnosis, dual diagnosis, medical complexities.
Some of them are funded by their Elias and some are funded by DDS.
There's been a lot of stuff in the news lately and from from the information I've been gathering, there's both pros and cons, but I really, really want to urge this Council to get more research, more education so that we can bring these individuals home because the numbers are only going to increase as they age out, you know, just based on sheer statistics alone, I mean, we're going, we're not prepared for them and I think we need the baseline of starting with these most severe situations.
These are mostly young adults, you know that have either just recently aged out or in their 20s, and it's really sad and and I think we can do better and I'm trying to help bridge the gap so that we can do better and we can get them.
And you know, I talked to a family today.

They're in Houston, TX in a hospital placement because there is nothing for their daughter she can't get on the autism waiver because there's a long wait.
So they got their LA to fund.
They've tried every placement on the East Coast and they're in Houston, TX right now.
That's like not acceptable.
So like so I've been racking my brain gathering information and then saying OK, we can't pay.
Staff agencies don't have enough money.
Why not go to an agency that just got a massive endowment and their whole mission is to help other states replicate and create that infrastructure?
And I think it would be amazing at the very least to just gain some expert information that I'm not equipped to provide.
I'm not the expert, I'm just somebody with 20 years experience with my own son being out of state and other families that have been in the same situation so.

Patti Silva 21:24
I'm Patty Silva, Council chair.
I'm Adrian.
I know you have your hand up.
Could I just briefly ask Jordan to just to speak up on this a little bit.
As far as Melmark presenting at a Council meeting.

Scheff, Jordan A 21:40
Uh, thanks, Patty Jordan, chef Commissioner, DDS so.
I understand the intent and the energy presented.
There's some issues around asking them to present if in fact they are someone we might consider working with going forward because of the ethics in the contracting standards work, so a means to do that.
There's a couple of logistical things.
So we can't just say unless we have that they're under certain circumstances, we could look to bring in an outside vendor from outside the state without an RFP process or an RFI process for the acronym folks on RFI Request for Information and.

Nicole Milo 22:22

Aren't they already a qualified provider?
Because we have Connecticut people that are placed there.

Scheff, Jordan A 22:26
Now there are children's program and we don't, we don't we we make we don't have them on the master.
Well, we may have them on contract we but but but we can't, we can't ask them to come in and provide those services.

Nicole Milo 22:32
For adult services, maybe not. Yeah.

Scheff, Jordan A 22:40
That would likely be provided in CLA's license settings without an RFP process, and if we have them in before the RFP, they would be disqualified from participating in the bidding process.
So we have to find we have to thread a very fine needle with whomever we might consider.
And I'm gonna stop saying their name just because I don't want the.
There are other entities besides Mel.
Mark who do what?
Mel.
Mark does and I'll also suggest that having done some of the research you requested me to and talk to my colleagues in other places, not everyone is as fond of what they do as as you are.
So I think a lot of times like some people aren't fond of an agency I ran, but other people are right.
So there's different takes on that and that includes from the government side of things.

Nicole Milo 23:22
Sure.

Scheff, Jordan A 23:26
So I was able when I was at the beginning of the month at NASA's to talk with my

colleagues in Massachusetts.
So, having said all that, I I we have a group work and I wanna clarify a couple of other things.
We have people with lawn sevens and eights placed all around Connecticut, both in day programs and residentially.
So while it is a struggle for some of our newer folks coming in service into service at those levels and during the current staffing crisis, it is not true that no one with a 7 or 8 can has services here in Connecticut.
We do it and we do it a lot.
Umm so and I can get that data for you.
I'm I'll also share that we monitor our out of state placements and look to bring individuals home on a recurring basis.
We have staff assigned just for oversight.
Ongoing litigation with a number of bodies.
I won't talk in detail about the report that you're referencing that has circulated in the news.
I will tell you that not all out of state placements are created equal and some are good and some are bad and I wouldn't use one wet blanket to throw over all of them if there was one particular uh agency that was underperforming and at the same time, while some of the advocates eyes on that program, umm, have concerns, the families are reportedly are very happy with the supports there is there there.
There's no urgency on the families to bring those individuals home.
You are absolutely correct that there's a revenue loss when we place people out of state, we don't get the Medicaid revenue.
So we don't get $0.50 on the dollar, but often those institutional type settings and they use that in the broad sense of institution, those bigger programs like that that take out of state placements, the rate is not uh.
So exorbitant when you, you know, when you compare to our in state rates, the $0.50 on the dollar loss isn't huge and it's a much smaller number of individuals.
And I see Christmas on the call tonight.
We can get you some of the lawn data you were talking about and Christa overseas, a lot of the movement between institutional settings and our traditional waivered supports and has a case manager dedicated to just that in our MPP program, so.
I I I think what might be helpful in Nicole so that I can better understand what it is

you're hoping to see happen is maybe we can have another one of our one on one conversations and we can talk about what it is you want.

Nicole Milo 25:48
That would be.

Scheff, Jordan A 25:50
And then I can try and help thread the needle.
Uh to it.
Once I can determine whether you're looking for a service provider in state or a training and consultation model to come to the state, cause training and consultation can be procured very differently than someone to operate group homes and I'm very happy to do that at some point in mid August or so, although I'm going to travel to Baltimore.
No, no, that'll be all right.
Well, we'll W will help us find the time on that.
Nicole, my calendar is a little crazy, but I just want to no while while it is a solution and their reputation is very good, I I don't mean to say anything negative towards them as a provider and all of the families that we have placed there have been very happy with the supports and services there.

Nicole Milo 26:17
OK.

Scheff, Jordan A 26:32
So again, I don't want to throw a wet blanket on out-of-state placements, but the capacity issue is in Massachusetts as well as here in terms of people with difficult challenges in life, finding proper services and and Massachusetts and Connecticut have played a little game of Leapfrog over the last six years in terms of wages.
We got ahead of them, then they got ahead of us.
Then we got back ahead of them, and then now they're back ahead of us.
And that goes back and forth.
It particularly impacts providers on our border.
Where you know, so people in Torrington will go work in in Pittsfield instead because right now it's a, it's a buck or buck and 1/2 more an hour.

And there are other all across Springfield versus Enfield and all of that.
So we lose potential employees to our Massachusetts neighbors when we play this game.
Elite Prod because they can pick up an extra buck an hour.
Some of those providers are also multi state like Community enterprises and places like that.
There's one that we use that's an out of state provider technically, but their data services are just north of our Putnam office in Massachusetts and we are contracted there.
So it's it's a little more complex and you know that it's complex.
We've had lots of good conversation around this, but maybe we can take one more round at that and try and find a path to kind of deliver on the information sharing part without tainting any ability were we to consider contracting with a provider or doing an RFP to bring home uh individuals from out of state in some sort of grouping that would allow us to do that.

NM **Nicole Milo** 27:43
I do.

SA **Scheff, Jordan A** 28:04
And that's probably an 18 month to three year process depending on the availability of housing stock.
So none of this happens fast.

NM **Nicole Milo** 28:11
Yep.

SA **Scheff, Jordan A** 28:12
That's just a quick sort of overview based on on that conversation.
I don't wanna shut it down, but I wanna be very difficult and I say this from experience.
My predecessor in an intent to do a very good work on our half brought in someone who they thought could help with some of our software issues and was contracting not with a service provider but a system provider.
And then when we did the RFP, they were precluded by ethics from being

considered, even though they had the solution we wanted.
So we got burned once about 10 years ago.
Nine years ago and I I wanna make sure that if we are good to go that route and there are viable solution, we don't do anything to upset that Apple cart.
Thank you, Patty, for the opportunity.

Nicole Milo 28:57
I appreciate that, Commissioner, thank you for for giving that information that I wasn't aware of.
So that's helpful.

Patti Silva 29:08
And Patty Silva, Council chair Ohh Jordan.
Did you wanna say anything more?

Scheff, Jordan A 29:14
A Jordan chief commissioner?
Just pointing that Adrian has been very patient with her hand raised while I while I dot on my stump for a moment.

Patti Silva 29:17
Yep.
And that's where I was going.
Adrian, go ahead.
Sorry about the delay.

Adrienne (Guest) 29:23
With Adrian Benjamin, Council Member I know we're on the Ombudsman report, so I don't know if this is the if we should continue this very important discussion here or in another point.
But I did want to point out that somewhere somehow hark where my daughter is.
It's a large agency based in Hartford with nine group homes and one CLA and some and other things that I don't know exactly what they're called these days used to be the ohh the the model where you can have 25% people with ID and 75% what's that

called?
Somebody knows what that's called anyway?

Michael Beloff 30:02
It was I dash.
It's now supported housing.

Adrienne (Guest) 30:06
Right. Thank.

Scheff, Jordan A 30:06
Supportive housing, Jordan chief commissioner.

Adrienne (Guest) 30:08
Right, right, right.
So Hardik is one of those places as well as nine group homes and one CRS and they raised their wages to $19.00 an hour a few months ago and we are getting staff.
It makes a difference now.
I don't know how they did it because it wasn't done through the through the government, but somehow they're doing it.
And obviously, fundamentally through the government, how they're rearranging things, I don't know.
But we have.
I can't believe that my daughter's group home is staffed and the 3 1/2 years she's been there, it has not been fully staffed until this last few weeks.
So something good is happening when we raise wages.
I just wanted to bring that up now.
Are these folks?
None of them have college degrees, of course.
They have that heart and that interest and the and the commitment to doing this kind of work.
Obviously they won't all necessarily be there two years from now.
Who knows?
But it is I see progress.
I don't know if other agencies have done this, but heart did.

So the I also have a whole little important info to give about an an advocacy thing for us to do about direct support professionals, federal legislation that we need to work on between now and August 12th.
So Oh my God.
So I can bring that up later with the Commissioners.
Report or some other report. But anyway, so stay tuned.
Thank you.

Patti Silva 31:40
Thank you, Patty.
Solver Council Chair Michael you have your hand up.

Michael Beloff 31:46
Michael Beloff, Council member and I'm sorry, Ricky, sorry that I keep talking, but to to to piggyback on Adrian agencies do and can fundraise and use their fundraising dollars to supplement the base wages that DDS provides that that DDS is authorized to provide through the funding for the state.
And in addition, there have been some additional dollars through ARPA, some of which have more limited.
A functions like just funding through to retirement plans as opposed to direct wages.
But agencies can be creative, but it's a challenge because when you choose to fundraise to supplement DDS based wages, you have to do that every year.
It's not a one time thing.
So and depending on the agency and their payroll, which tends to be by far the largest expense at any agency, you have to be careful how you choose to raise wages above base weights because it provides it means you have to do at least X amount of fundraising every year to maintain those rates.

Patti Silva 33:06
Patty saw the council chair.
Thank you, Michael.
That's makes a lot of sense.
And Adrian, we will get back to you or other item a little bit later on Jordan, you have your hand up.

Scheff, Jordan A 33:17

Jordan chef commissioner in Michael.
Spot on and a lot of what he articulated there.
I'll also add that other and I don't know if it was hark or others, occasionally just do the math what they chew up and over time with vacancies is maybe maybe have a much cheaper option to offer a buck more an hour and reduce their over time.
And so I think there are a number of agencies who are above our minimum in a variety of ways as Michael articulated and right we the, the, you can't use one time funding in a in a bargaining unit environment and and guarantee that.
So my my my guess is that hark found another creative solution beyond fundraising, cause otherwise you do have to fundraise at that level in perpetuity.
The If you're in because they're a union shop at heart.
So I do think that there's a number of ways to get there, but one of the ways is simply to raise your rates to reduce your over time and turn over, and that you pay a little more.
But you save a lot more kind of effect, uh.
And it.
Circle around to that later.
Thank you.

Patti Silva 34:29

OK, Patty.
Council chair Adrian, did you have your hand up or you took it back down?
OK.
Shannon, was there anything else?
Because we kind of, you know, split off, I just want to make sure that you're finished with your report or if there was any other questions that anybody had.

Jacovino, Shannon 34:47

This is Shannon Jacopino DSM buds person.
I'm all done.
Unless anybody has any questions.

Patti Silva 34:54

Alright, doesn't look like there's any other questions on that.
Umm, Next up is umm commissioners update Jordan.
Do you have some exciting news to share?

SA **Scheff, Jordan A** 35:07
Thank you.
And I appreciate that.
Patty Jordan, chief commissioner at DDS, before I share my exciting news, I I I'm gonna be brief this evening as I haven't been here a lot and I'm still getting up to speed.
Over the last month, and Krista has agreed to join us and as a young man in her house who will be very excited to see her when she's finally done working.
So I'd like to get to her.
So she can go be with him.
Umm and, but in the meantime let me give you just a a quick update and I'll share my my exciting news at the end because it's hard to follow it and I apologize for that, Krista.
But you know where I'm headed.
So I was effectively out of the office for a month and for the first time since I'm a very young man working at a shoe store at 16 years old.
I've been away from work for that long.
Four days of it was at a fabulous conference where the eyes were on Connecticut a lot.
As we talked about a number of the things that we're doing to improve services and while umm, I appreciate all the concerns expressed through these meetings, when I go away and amount of state, you should all know that they come to, to they come to connect, they come to Connecticut's leadership and to California's and to New York's and Tennessees and a few Pennsylvania now with Kristen Aaron's there looking for advice on how they can do better and they're great leaders all across the country.
We do our we're ranked pretty high in a number of areas.
So we get a lot of attention there and it's it's flattering and that's reinforced for me as I then spent two weeks with my daughter at a neuro rehab clinic in LA that I'm going to tell you a little bit about and I think a number of you will be very interested in that.

And and Nicolai, I think you'll be very interested in what I describe in a few moments.
Umm, but when I came back I I then had my annual family vacation and now I'm back to work.
And while there was somewhere around 1500 emails for me to plow through the staff that I have worked very hard to recruit and.
Keep that recruit and then may retain our amazing while, while certainly there were problems while I was gone, most of them were handled uh or, you know, there were very few things that they said.
Oh, we're not gonna do anything about it till Jordan comes back.
So while I have a lot of emails still to catch up on, things went generally well in a lot of errors.
Or we have some ongoing issues that we that you all are aware of with regards to our transition to GTI.
And there were certainly some individual case issues while I was gone, but there were no big blowups and there was a lot of Kumbaya amongst my leadership team and the those who they supervised.
So as a as a a Commissioner who's always worried when he goes away, even for a long weekend, about what's gonna happen while I'm gone, it was very nice to be able to have that space and separation.
And you might wonder how separated I was this morning.
I scrambled after being back a week to finally find my swiping badge.
So I could access the office.
I couldn't remember what safe place I put it in and the 1st morning I was back I panickedly panicked and texting Wes, I have a meeting at 9 and I have no idea what my password is to my laptop.
How can I get that fixed?
It was that kind of separation, and while staff may regret giving me that time and space because I came back energized and I with a whole lot of ideas about stuff I want to add to their plates, they're very happy to see me.
Uh.
Engaged at the level I am and part of that has to do with the success of our visit to this neurorehab clinic and I'm going to try and get through it for the first time without crying.
But I make no promises ohm.
A few of you have seen some of the video of it.

What I can tell you is we we rolled the dice.
Yeah, they're not in into your point, Nicole, with the family in Texas.
This is the only clinic of its kind in the country that does what they do in the manner that they do it.
It's the only intensive outpatient movement disorder clinic that has a targeted FND functional neurologic disorder treatment, and I appreciate the personal privilege at this meeting with everybody's time to let me just share a little bit.
My intent, though outside of my scope, is Commissioner of DDS is to work with my partners because no one should have to go to California to get what we got, and certainly kids on Medicaid are almost never in the position to do what we just did and and and very often children on Medicaid are exposed to more trauma and more contributing factors and more anxiety than my daughter was exposed to.
So they probably are a number of people out there with and who aren't even able to access a diagnosis without being able to align with very specific professionals.
Whatever it is they're doing at this place in California, there's some special sauce.
Umm, it was nothing short of life changing.
Gonna do it.
Krista, I'm gonna do it.
Shannon and Shannon's helping me by staying off camera.
So, uh, yeah, last night.
You really cemented so much of what we did as their the clinic founder did a live Instagram interview of her.
Umm, that is just a overwhelmingly powerful cause.
The young lady I watched online last night.
It's not the young lady I've known the last three years.
And I missed her.
And not only.
Not only was she on form last night, like I haven't seen, I think the Stella I saw last night is better than the Stella ever experienced my life because she has this humility and empathy and caring and understanding that has come with her experience.
And it's these magical staff out there.
So I'm going to get to the clinical part.
They do things very differently than anything I've seen, and I praise.
I praise the work that the the the pain clinic does at CCMC and all the work they did for my daughter.

There they are, a fine institution and fabulous clinicians.
But the the what they do there is very different in a lot of different ways.
So almost every OT or PT has a student, a graduate level student working with them, so there's always two people in the room with Stella, sometimes three.
In addition, the psychologist assigned to her, her team participates in those OT and PT exercises.
They have a when when she's there for that six weeks, they have a Stella channel where all of the communication and all of the stuff they can follow each of the clients that they're really hyper focused on and they have a number of teams and they do other movement disorders like ALS and Parkinson's and Ms and.
FMD, which is different than FNV and things like that.
In any case, all of those things, as she said last night, it was about they gave her.
Strategies, not solutions.
They didn't spend six weeks trying to fix her problem.
They spend six weeks trying to give her skills to live with her issues.
Uh, we do believe.
And she does believe as she gets better at using those supports and strategies.
Umm, her life will just improve more and more and more.
But she went from just surviving in barely and at times it was really dark, barely surviving to thriving and living in six weeks.
So while I wasn't here to take care of all the things here, I'm blessed with staff who took care of one of the other very important things in my life, which is my commitment to the the, the 17,000 people here and they gave me the space and time to focus on her.
And it was time, well invested.
And with that, I'm going to compose myself and beg Christa to follow me in what is going to be very difficult circumstance, given that story.
But I know a number of you have reached out to me throughout the last three years and for goodness sakes, Adrian was President.
And I think when this started or.
Council chair.
She's seen my tears before.
She's been a shoulder for me and an ear to vent and given her background, someone who could help me help me make some connections.
And in fact, I returned the favor as she has a friend in similar straits, and I could share

the resources that we have stumbled across accidentally with them as well.
It's a magical place.
It's a place called reactive and and so they did this interview last piece of the pie in October.
They are training.
Listen to this.
They are coming east to train clinicians affiliated with Johns Hopkins and the other hospitals in the DMV area.
They are asking Stella to participate as a case study and a volunteer working there.
It just doesn't get better.
So that's my joy.
Even though it's uh to your field, pretty amazing and thank you for letting me share.

PS **Patti Silva** 44:15
Patty Silva, Council chair, I thank you for sharing with us.
I I think that.
This just goes to show the strength of stellar spirit and the family behind her.
So I think as parents, we can all relate and are very thankful for for the wonderful experience that she's been having and that you guys have experienced too. Umm.

SA **Scheff, Jordan A** 44:42
Jordan chef Jordan, chief commissioner.
She left that clinic, came home when?
Her family vacation, and she and her sister rented an apartment in Virginia.
She lives as a grown to 20 year old.

PS **Patti Silva** 44:55
And can you share possibly with the with the Council, maybe offline or whatever the the real that they did?

SA **Scheff, Jordan A** 45:07
Yeah, I will work with Kevin tomorrow.
I'll share I I will try and share a link to ways but but I need help getting it from my phone to an email that I can then get to you and I wanna make sure with Kevin.

Patti Silva 45:16
I.
That's what I.

Scheff, Jordan A 45:21
It's OK that I'm sending it over a A state state email because it's an Instagram link, but I think we'll be successful.
You'll get 2 videos, one is just about a 10 second intro that shows her from three years ago at 20 seizures a day to starting at the clinic where she could barely walk a straight line for 12 steps to playing volleyball with her PT, OT and psychologist in the rec.
Room 6 weeks. Umm.
A lot of work to do, but I.
Yeah.
Then the second piece is a 40 minute interview.
Katie Katie said to me today.
Does everybody in your house know how to command an audience, or is it just like it's a family trait?
Stella Absolutely had a commanding presence and made the clinic director Cry Umm as she put into her words.
And it was great cause Stella is grown up around these words.
Talking to her about being an advocate, talking to her about how important it is for somebody with lived experience to share their message and to help others.
Umm.
So yeah, I would I.
It does trickle down and I will absolutely figure out how to share that, Betty.

Patti Silva 46:32
Yeah, I I was trying, but I I think I'd have to figure out a different way to do it too.
So umm, anyways, that's just wonderful.
We're so happy for you.
Next time, I'll warn everybody to have some Kleenex.
So back to reality now, Commissioner, was there anything that you wanted to share it in your Commissioner report?

Scheff, Jordan A 46:59

Let let me just let let let me just a couple quick things that I didn't highlight.
So GT I was having issues with the transition before I left.
Umm, we have done a number of forms about that.
We have additional calls with them and training and there are still several troubled.
Uh, several trouble.
The number of cases more cases need an escalation than we would like at this point.
At the same time, at the South region rack this week or last week, a number of families expressed how great it is that things are going really well, that they like the suite of tools available in the app, that they like the customer service response time, that there are a couple bigger programs, self determined programs, very bigger budgets with a number of staff involved.
And unfortunately, they have struggled on those fronts and we are their director and other Commissioners from here in the state will be meeting so that we can try and rectify that and then we will be announcing some dedicated resources to continue to assist with that transition in the weeks to come.
I would say that that's probably the biggest issue.
I'll I'll share quickly because we're gonna run out of time legislatively.
There was a special session right before I left or right after I left, and it did what it needed to and it had no impact on DDS that has been reported to me and I think I have that right, Kevin.
So it opened and shut and there were no changes to anything that we updated you on at the close of the regular session.
And other than that I I just haven't dug through all my emails enough to know a whole lot more.
Other than that, things went pretty well in my absence, minus some of the, you know, the the normal stuff.
And then GTA a the GI transition continues to be problem for our families.

Patti Silva 49:01

Uh Patty Silva, chair.
And what about?
I know you're still coming back to, you know, thousands of emails update on the

guide for individuals and legal representatives.
The abuse and neglect.

Scheff, Jordan A 49:16
So so that's posted at Jordan.
Chef TDs, Commissioner, that is posted to the website.
The only thing missing from it is some that I'm aware of that we had offered, or where some defined timelines for completion that I was hesitant to put in place because our private providers and our own staff are behind all I'd be doing is setting them up to fail by instituting timelines.
We know they can adhere to at the moment, so we're talking about strategies to catch the whole DDS universe up on their timelines, and then we can go about go forward position.
That's putting timelines in.
I'm not aware of anything else missing from the guidelines and to those who worked on that.
Adrian and Shannon and others.
If you wanna take a peek, Kevin will make Kevin and West will make sure you have the link again, because I think we sent it out once already, but we'll send it out again if you think there's something that we had promised to include that has been omitted, we'll circle around and take a look at that.
But it exists on the website currently.
Kevin can also assist if we think it's positioned poorly within his scope.
Uh, with the Webmaster to move it to certain places.
But there are some standards that the state has established for what can be on front pages and what can be on primary pages and what can be on secondary pages.
So he only has so much latitude with the governance put in place over unifying state websites, and I think I articulated that kind of the way the message came to you, Kevin.
Kevin is nodding affirmatively for the transcription.

Bronson, Kevin 50:44
Yeah.
Kevin Bronson DS.
Yes, correct.

Uh, there are certain things we can do.
Can't do, but we could always try to whatever.
Try to see what what we can do right with the limitations we have.

Scheff, Jordan A 50:59
With that patio close, Jordan chef TDs, Commissioner, I'll close my ohh the report was and to take any questions on about Stella or anything else.

Patti Silva 51:10
Hey, Patty Silva, Council chair.
Does anybody have any questions for Jordan?
OK, alright.
Thank you, Jordan.
We will move on to Christa with her presentation and get her back to the guy that's waiting for her there.

Ostaszewski, Krista 51:32
Good evening everyone.
My name is Krista Ostaszewski.
I'm the health management administrator at DDS.
Did I just freeze and everyone see me?
Am I frozen?
OK, that was strange.
All of a sudden, everything froze.
The minute I start talking, of course.
So again, Chris Dostojevski Health Management Administrator, I oversee the DS waivers and I think I'm here today to talk about GTI, but I also heard that there may be some interest in talking about the new program that rolled out at the beginning of May, which is, which allows for legal guardians and parents of school age children to be the paid caregivers.
So I am happy to talk through both of those items or just GT if that is what the Council would like.
I know the Commissioner did mention some of what we've been working through with GT, the new fiscal intermediary, but I'm happy to provide additional details on answer questions.

Umm, I also just want to say thank you to the Commissioner for sharing his inspirational story of his daughter.
It's been a real, really amazing.
A journey to listen to and to see Stella grow.
It's incredibly inspiring, so it's also hard to do a presentation after that.
Hard to follow up, but that's OK.
I'll do my very best.
So Patty, as the Council chair, would you like me to focus on GTA?
I believe that's what the agenda states.
I'm happy to go through that if that's what you would wish me to focus on.

PS **Patti Silva** 53:13
Uh Patty Silver, Council chair.
We had initially had GTI on, but we're informed that it's kind of been covered from our past meeting and there are still some things that are being worked on.
So that's why I think the latest version of the agenda has you doing paid caregivers presentation.
If if you are prepared to do that.

OK **Ostaszewski, Krista** 53:31
Ready, ABS.
I I was prepared to do both because I wasn't sure what the agenda was going to read as, so I am happy to jump right into paid caregivers.
I actually have a brief PowerPoint presentation that I can share and go through and then we can talk through any questions.
If you just give me one moment, I'll pull that up.

PS **Patti Silva** 53:53
Can't Patty council chair?
Umm, just really quick, Christine has a hand up.
I don't know if.

C **Christine (Guest)** 53:59
Hi is it?
Does Christine Haynes with Strauss?

Sorry, I thought you talking about TI till I got the second agenda.
So I just wondered if we could just take just a quick moment to just, umm, could you talk tell us what issues are still the big issues that are unresolved or the clusters of issues that are still outstanding that you're working on it just a little more defined?

OK **Ostaszewski, Krista** 54:18
Yeah, absolutely, Christine.
So Chris Dostojevski, Health management administrator.
So just briefly, as noted by the Commissioner, GT independence is our new fiscal intermediary for the state.
They are the fiscal intermediary for DS as well as Department of Social Services for their CFC program.
The transition from the old FI to the new FBI occurred the end of March, and that transition, like all transition, came with challenges.
Such a large transition with thousands of employers and eat thousands of employees comes with lots of different moving parts.
So we knew that the transition was going to be challenging, but we had a lot of different resources to make sure that there was enough capacity to make sure that there was attention across the board to ensure that families get supports and services and that direct support professionals are being paid timely.
Uh, we are seeing that there are still some concerns with enrollment new direct support professionals being enrolled with the new FI and I think where we're pinpointing the concerns is that the process is different, right?
We've had the old FFIs for a very long time.
Everyone was very familiar and comfortable with their process.
We now have a new FI and the new FI is very focused on electronic forms and making sure that there's documentation and process and the process is different.
So we're really working hard to make sure that we're streamlining what that enrollment process looks like, but making sure that we're also meeting Medicaid requirements, state and federal requirements around Department of Labor.
So there's been a lot of work to make sure that obviously there isn't a timeline issue right there isn't there isn't prolonged process for enrolling department DSPS but also making sure that we're meeting the the requirements of the program.
Again, I think one of the biggest issues is that the process is different.
Everyone is getting comfortable to a new process, new forms, new email addresses,

new points of contact.
Umm.
And that's something that not only families are getting more comfortable with, but so is DS.
We are working really hard to put together communication documents right to make sure that our case managers have the information they need to share with families and that families also have accessible communication documents for all things FI related as well.
I think a lot of those tools are going to be very helpful.
It just takes time to get them to a place where they can believe and be shared with families and case managers.
So we're continuing to work on that.
The other piece that continues to be a struggle is the customer service wait times.
We know the wait times are higher than we want them to be.
GT has stated that in public forums and we're actively working to put more resources towards.
Reducing weight times and making sure that customer service staff are trained properly so they're giving accurate information to individuals, families and staff.
Again, it's a new program.
It's a new FBI.
It's a new process, so we're meeting with GT multiple times a week to try and work through all of these details and try and make sure that we have clear processes in place that not only GT is following, but that DDS is also making sure we're sharing with families.
So we're reviewing policies, procedures, guidelines, all of those fun things.
But again, once we come to an agreement between both the AFI and DDS, those are going to be tangible policies that everyone can point back to that we can make sure are being implemented consistently.
So we're seeing incremental improvements.
There's absolutely still a lot of work to be done, but I think there's commitment on both the state and GTS end to make sure that we will continue these efforts until people are receiving the supports and services they need and that they're receiving them timely.
That was a lot for a short answer, so I apologize.
I hope, I hope I answered appropriately and happy to take additional questions on

this.
Ohh.

Patti Silva 58:46
Patty Silver, Council chair and Adriana has a handout.

Adrianna Ramirez- aramirez@ctfsn.org 58:54
Thank you, Patty.
Adriana Ramirez, Council member Chris I just had a quick question.
The at the Forum for the GT I they mentioned having eighty additional employees coming in and I I don't know I can't remember recollect correctly if they were all coming into Connecticut.
I know they're looking at opening a Southington.
Are they all coming into Connecticut?
When is that happening?
Is that what is that support specifically for?

Ostaszewski, Krista 59:19
Yeah.
Great questions.
Thanks andriana.
So this is Christa Ostaszewski, health management administrator.
So I believe what you're referencing is the CT.
The Connecticut based pod, so as most are aware GT is a national company.
They work in a few different other states, providing fiscal intermediary services, but they are going to have a Connecticut presence.
So they actually have an office currently in Waterbury.
It takes walk-ins.
It's open to the public.
They're opening a second location in Southington.
My understanding Adriana is that location should be open in the fall and in both of those buildings they're going to have Connecticut based pods.
So what those pods are gonna do is those are going to be Connecticut based GT employees.
That will be experts on all things Connecticut, right?

So they are going to be the Connecticut based experts.
Our understanding is it's supposed to be approximately around 80 staff.
We're still working with GT to get a specific number, and GT is currently training that staff now, so we are hoping that by a I think the plan is by the end of August those pods will be up and running.
Our understanding is that when a Connecticut phone number calls customer service, it'll be routed to those pods again.
So the Connecticut calls will go to Connecticut.
Experts at the fiscal intermediary and again those Connecticut based experts will also be stationed in Connecticut based building, so GT will allow for there to be walk-ins and assistance to be provided in person.
Were there other hands? Ooh.

Nicole Milo 1:01:07
Umm.
I oh, sorry Christine.
Go ahead.
I didn't put my hand up.

Christine (Guest) 1:01:12
Sorry.
Hi Chris, I can't imagine what you've gone through this whole process.
I know it has been exhausting and exhaustive probably, but I I I guess I just was looking for more of an encapsulation of actual issues.
I didn't realize that DPS was bringing DSPS on.
Board was an issue still, but I know that like Uber, Lyft reimbursement, Michael had mentioned that in the past, do we have like and you don't even if it's not, I don't want to keep everybody tonight either on this.
But if you could just send a quick up the bullet point, maybe I'll just say these are the outstanding issues.
We're still dissolving like Uber, Lyft, you know, hiring DSP's, just so we know.
When we hear from the other parts of the Community what you're saying actively?

Ostaszewski, Krista 1:01:53
Yeah, Christine, absolutely.

We can put something like that together.
I I will do.

Christine (Guest) 1:01:57
That would be very helpful.

Ostaszewski, Krista 1:01:58
Just wanna clarify.
Yep, absolutely.
I do wanna clarify too quick things.
So the challenge around DSP's is the enrollment process, right?
So I'm not saying that DSP's can't be enrolled because they absolutely are.
But what we are finding is the challenges, the new process for enrollment, right, the paperwork, the questions, signing documents via DocuSign, it's a new process, right?
Everyone's trying to get comfortable with it and we're finding that it's still taking a little bit longer than what we're hoping.
So that so which transportation is still something that we're working through?
We've got some really good solutions that hopefully will be going live within the next month.
It's gonna provide a lot more flexibility for individuals that have transportation on their budgets, but we know right now transportation continues to be a challenge.
So absolutely, Christine.
And what we can do is put together some other bullets and just share those with the group, just to identify some of the other sort of pending issues that we're continuing to work through, absolutely.

Patti Silva 1:03:13
Patty Selma, Council chair at Nicole.
You have a hand up.

Nicole Milo 1:03:17
Oh yeah.
I'm not muted.
Nicole Milo, Council member.
Thank you, Christa.

So I have a question and I wasn't sure I was listening to the GTI issues, but you mostly with the paid caregiver that you guys were sort of working some things out, some details of it out before you present more.
And I guess one of my questions with that is and you know we have the the cost standard reference guide and I'm trying to learn the whole system from a self direct perspective and also from an agency allocation perspective.
So if a caregiver is going to be paid, do we yet have the maybe however, you guys are gonna cap it at a certain amount, what is there going to be arrange?
I'm sort of looking to see what your thoughts are on that.

OK **Ostaszewski, Krista** 1:04:12
Yeah.
Thank you, Nicole.
Christopher Chesky helped management administrator, so I apologize because I think while you were explaining your question, Nicole, the.
Audio went in and out, but I think what I was hearing is that you were actually asking about the program to pay legal guardians and parents of school age children and the requirements around that.
Is that accurate?
OK, so if everyone is comfortable, that actually might be a nice transition to the PowerPoint presentation I was going to do on that topic.
Does that sound OK?
All right, perfect. Well.

NM **Nicole Milo** 1:04:46
I'm sorry I jumped the gun a little AD.

OK **Ostaszewski, Krista** 1:04:49
No, Nicole was like I planned to do there because it was a perfect way to transition right into the PowerPoint presentation.
So I'm gonna share right now.
We'll get right to that and I think that'll be able to answer your questions by going through the PowerPoint.
OK, everyone can see my screen.
Everyone can see my screen.

Bronson, Kevin 1:05:13
Yes.

Ostaszewski, Krista 1:05:14
OK, great.
Fantastic.
So this is the same PowerPoint that I did do at some of the Commissioners forums.
A few months ago, I'm gonna run through it very quickly.
It's nine slides, but it will go by very quickly and then I'm going to actually give you a first glance at some updates we did to the website today to better promote the ability to pay legal guardians and parents of school age children.
We're really exciting the website and a piece just launched today, so perfect timing because now we can share it with the Council as well.
All right.
So we're gonna talk a little bit about the ability to for legal guardians and parents of school aged children to provide certain wavered supports and be compensated for those supports.
So we always start the conversation about talking about why we're moving in this direction.
We moved in this direction because one component of it was the legislature mandated us too, so we had a a legislation that passed in 2023 that required us to amend our waivers in order to be able to pay legal guardians and parents of school age children.
But we also were already having conversations about moving in this direction.
Not only was that happening in the state of Connecticut, but it was happening nationally.
What we learned was that, umm, during the pandemic CMS on the federal level allowed us to pay legal guardians temporarily, right?
That was a short term and temporary option that we were allowed to explore, but by exploring that option, CMS learned that there were absolutely benefits to moving forward with paying legal guardians to provide supports.
And I think by allowing that flexibility short term, CMS was able to be more comfortable moving in that direction.
And it also allowed the department Connecticut to say there's really some benefits to

doing this.
So we were already having conversations both state and nationally about moving in this direction and the legislature just pushed us there a little quicker.
Uh, so we're really excited about this direction.
We absolutely see the benefits not only for assisting individuals, but in a time where there is absolutely a workforce crisis, there's real benefits to making sure that natural supports have the ability to provide ongoing support and and that's done by making sure the people providing the supports or compensated appropriately.
Our waiver amendment process took a while as waiver amendments do, so we officially launched this program on May 1st.
It's important that I note we had a soft roll out of this program and when I say soft rollout, I mean, we were not shouting it from the rooftops, right?
You're a legal guardian.
You can provide supports and be paid now, and that was a conscious decision because we just implemented our transition to the new FI at the end of March.
So if you think about timeline, we just brought a new fi on board and then we launched this new program on May 1st.
We wanted to make sure that not only was the new FBI not overwhelmed, but our case managers and families weren't overwhelmed with all of these changes and all of these new programs.
So we absolutely went live with the program on May 1st.
Our case managers were fully trained.
We did some forums where I presented about the importance of this option being available, but we did do a soft launch.
Uh, we now have information that's being accessible publicly about the about the program.
We're really excited to get that up and running, but it wasn't up prior and that's because we wanted to make sure that we were really trying to balance out all the new sort of programs that families in case managers were trying to work through under self direction.
So the DDS philosophy and approach we are really approaching this new program as part of the larger service delivery array for everyone supported in the department.
So what that means is this program isn't offering new supports and services.
It's not offering new money.
What it's offering is another option on how services and supports can be provided,

right?
So when an individual becomes active with DDS, they receive a needs assessment.
We define where where their needs are and what supports can help meet those needs.
The next question after that's defined is how are those supports gonna be provided now, right?
Are they going to be provided by a private provider?
Are they going to be provided by a direct support professional that will hire?
This is now going to add another option to that menu, right?
And that option is going to be is the legal guardian or parent going to provide that support and be compensated for that support?
So here's a really brief summary of our waiver amendments and the requirements associated with the program.
We were not able to amend all of our waiver services to allow parents and legal guardians to provide supports and services.
CMS and the federal level said we could only amend services that had a personal care component to them.
So not all services can be provided by a legal guardian.
Parents, only those that have a personal care component in them.
So the five checks that you see here are the five services that we were able to amend.
That's individualized home support, respite, individualized day personal supports, and senior supports.
Those are the services that can be provided by legal guardians and provided by.
Ohm Ohm, parents of school aged children.
There was a few other pieces of criteria that we needed to include in our waiver amendments and in the program requirements.
The first piece was that CMS required that for parents of school aged children right, looking to provide support to their young, minor children, we had to determine that the care being provided was considered extraordinary.
That is a CMS requirement and CMS language.
So if a parent of a school age child is looking to provide care and be compensated for that care, we have to determine that the care being provided is considered extraordinary.
So for parents of school aged children, we had to implement an age dependency assessment form where we take a look at the care and determine if the care being

provided is considered extraordinary.
Umm, that is not a requirement for legal guardians.
Providing support to adults, this is specific to parents of school age children and I say school age because as everyone, I think everyone here knows, right, individuals with intellectual disability can stay in school up to their 22nd birthday.
Uh, a minor is defined at as once you're 18, you're considered an adult.
So for this, it's parents of school age children up to the age of 22.
A few other pieces of limitation in the program.
The first is that we had to limit the number of hours that that a parent or legal guardian could provide support.
So there is a cap on the number of hours that can be provided.
I'm going to go into detail on that and a few more slides, so I'm not gonna talk through that right now.
The provision of waiver services has to be in the best interest of the participant.
That's a requirement for all waiver services we provide.
It has to be within the best interest of the participant, so if the team has discussed a situation where a legal guardian has asked to provide and be compensated for supports if the team decides it's not within the best interest of the participant, DDS does not have to fund the arrangement.
So we've talked to case managers about what that may or may not mean, and I I think we have some really good formal and informal processes that help umm and support teams who may have concerns about legal guardians or parents providing supports and being compensated for supports.
There's concerns about isolation.
There's concerns if there's an open or pending abuse and neglect allegation, there's concerns if the parent has other responsibilities that may take away from their ability to provide supports to the to the loved one that they're caring for.
So there's different sorts of situations that need to be reviewed, and that's all a part of the discussion that that is a part of the program.
Another important piece that's good to talk through is the waivers prohibit employers of record from providing any paid supports outside of their roles and ER.
So what does that mean?
If you're in the OR and you're a legal guardian, you cannot provide and be paid for.
Supports.
You have to relinquish your role as an employer of record if you want to be a paid

legal guardian.
So you don't have to relinquish your role as a legal guardian, right?
You can continue to be a legal guardian.
You can provide supports and be paid for those supports, but you can't maintain your role as an employer of record.
Remember, employers of record are the employer.
They sign off on timesheets.
They negotiate rates for their employees.
If you're an employer of record and you're also being paid to provide supports, there's some major conflicts of interest there, so CMS required that employers of records are not, uh, prohibit, or are prohibited.
Excuse me from providing and being paid A to provide those supports, so that is explicit in the waiver and we have no flexibility there.
OK.
Compensating parents of school aged children?
We talked about the age, appropriate dependency form and the need to make sure that we're demonstrating that there's extraordinary care that is the first step if you're a parent looking to provide support for a child, the first step is going through that age dependency assessment form in case managers have been trained on what this form is and essentially it looks at the child's needs.
They wanna make sure that the child's needs are related to the disability.
The support needs are related to the disability and are not related to parental supports.
All supports that can be provided by a parent to a child, have a combined cap of 800 awake hours annually, right?
We're looking at when I say annual, we're looking at the individual's budget year, but 800 hours of combined supports essentially turns out to be about 15 hours a week of support.
There is the ability for an exception to go over, but CMS required us to define what a cap on hourly support would look like for parents and for legal guardians.
So for parents, the CAP is 800 a week hours annually.
OK.
Compensating legal guardians I'd mentioned earlier on the age appropriate dependency form is not relevant for legal guardians who are providing supports to an adult, so that is not something that is required for legal guardians interested in

providing supports.
The one piece here that's important to talk through is the cap on support hours.
So for legal guardians, providing supports to adults that combine CAP is 2100 hours of awake support annually.
Again, defined as an individual's budget budget year 2100 awake hours a year ends up being about give or take 40 hours a week.
So we're looking at full time employment.
There is an exception to go over the CAP, but we did need to to find a cap in the waiver about how high that would be.
Nicole, I saw your hand go up.

Nicole Milo 1:17:48
I just wasn't clear if the same areas of service delivery were covered for adults or residential was included in that.
I didn't see a breakdown.
I know if I missed something.

Ostaszewski, Krista 1:17:58
Yeah, I'll go back to the waiver services.
So it's individualized home support, so that is residential.

Nicole Milo 1:18:05
So that's across age.
That's across age setting across school age and adult.

Ostaszewski, Krista 1:18:09
That is correct.
That is across age.

Nicole Milo 1:18:11
OK, got it. Got.

Ostaszewski, Krista 1:18:11
Yep, absolutely.
The one thing I will mention, Nicole, is not all these services are appropriate for

everyone, right?
So specifically, respite is one that we've talked about a lot with our case managers.
Respite is to provide the natural support system with an opportunity to rest.
If you're a parent living with a child and you're looking to be compensated for supporting that child, respite would not be appropriate, right?
Because the respite is to make sure that you have a break.
So in those situations, respite would be appropriate.
If the individual is not living with the legal guardian or the parent, then the parent could be paid for respite because they're respecting the entity that is taking full time care of that individual.
That is something that we've talked with case managers a lot, but it is something that needs to look at, be looked at on a case by case basis.
So what I would recommend if there's questions about what services would be appropriate or not appropriate at talking with your case manager and the team is the best next step.

NM **Nicole Milo** 1:19:19
There, there's currently a lot of families that can't get a placement in a in a group home or residential that our planning their whole life around residential budgets to be able to be self allocated and which would include the legal guardian.
So this might be something for a future topic to kind of go over if it could be considered.

OK **Ostaszewski, Krista** 1:19:43
Yeah, Nicole, I think you know one of the things I've said when I've done this presentation before is this program is new.
It's not only new for DS, it's new for the state and it's still really new nationally from a Medicaid coverage perspective.
So we're learning a lot.
We've learned so much since we've launched this program, but if you think about it, it's only been live for three months.
Maybe so.
We still have a lot of learning to do and that may mean putting new requirements in place, putting policies in place, pulling back on something, making an adjustment to an amendment.

This is a new program not only for DDS, but for the state and really nationally.
So we're going to be learning together.
I think there's a lot of excitement about what this brings to the individuals and families we support, but I think it's also going to bring a lot of opportunity to explore other options as well.
Alright, I am almost done with this.
Presentation.
Let me just finish up the last two slides and then we can take some additional questions.
The next slide is just how to get the process started, right?
So the first step really is making sure that if you are a family interested in moving in this direction, they let your case manager know the case manager should put together a meeting with the team and make a determination if it's in the best interest of the Weaver participant.
If the team has decided that it is important to move in this direction, then the legal guardian or the parent would enroll with the FBI as a direct support professional.
That means they will have to go through the background check.
They will have to go through the training requirements, but that also means that all of the benefits that come to with being a direct support professional will also be applicable to a legal guardian or a parent who's going to provide supports and be compensated for those supports.
Right.
So the collective bargaining agreement, which identifies benefits over time, holidays, all of those benefits and rights will be applicable to parents and to legal guardians.
Like every other DSP, the team would work with the legal guardian and the parent to really start identifying in the IP the role and responsibility of the legal guardian or the parent in providing the supports.
What are the goals?
What steps do the parent or the legal guardian have to implement in order to make sure the individual is meeting the goals associated with the surfaces?
So really, the parents are the legal guardian becomes a direct support professional, and all of the requirements, all of the benefits of becoming a direct support professional are then applicable in this scenario.
This is my last slide and this is keys to success and it's funny because every time I do this presentation, I say it shouldn't be keys to success.

It should be key to success because the main key to success in this program is communication.
Ongoing, respectful and transparent communication between the family, the individual and the team, that is incredibly important to make sure that this process is successful.
We want to make sure that the individuals receiving quality supports and services we wanna make sure the parent who's now going to be a direct support professional is getting the support they need to provide supports appropriately.
We want to make sure the team feels comfortable to address with the legal guardian if supports and services aren't being provided properly.
The key to a successful program is communication.
Alright, that's my contact information.
Just in case you need to know how to spell my crazy last name, I'm happy to take questions.
Mike, can I?
Can I call him questions?
Thanks, Patty.
I wasn't sure.
OK, I think I can.
Uh, Michael, you're your hand up.

MB **Michael Beloff** 1:24:05
Hi, Michael Beloff, Council member and and 1st.
So this is fabulous.
You were you've been very helpful with some GI questions we had in our personal situation.
So you're doing a great job and not paying you enough with this, I think there's been a lot of confusion on families on how all this works.
I think part of one of the challenges is families don't understand how things work.
I think as families enter the system, especially new families, they don't really know why they have a budget.
They don't know the difference between CFC and IHS and day supports and what's a waiver, and I have these dollars and how you're telling you I can't use it in this way.
So I think there needs just in general to be some general education to families.

Ostaszewski, Krista 1:24:48
Umm.

Michael Beloff 1:24:52
As to you know how their budgets work, how it's being paid, what the restrictions? Because I don't know that that's being communicated effectively to families when they on board, especially at 22.
With that said, I think we wanna be careful on the respite side there.
There's been like a there's this Connecticut Facebook list of, like 9000 families on it that's been buzzing about parents getting paid and lots of misinformation.
I would be very careful when this goes on the website about it paying for respite.
Uh, families don't really get what you articulated very well, which is if your kids living with you, you can't be paid for respite, for you, to give yourself the respite.
It doesn't work that way, and that that is unclear to many families understanding about how it works when the kid is under 22 is going to be very, very helpful for that understanding.
One question I did have was, you know, many families look to self direction when and the agency can't provide staff, but is their ability to kind of split the ticket for families who wanna buy, like the family has to say an IHS budget and they wanna buy some hours from an agency and some hours self direction is there, would there be the ability to do that under this program?

Ostaszewski, Krista 1:26:16
Yeah, yeah.
Michael took.
Thank you so much.
So first of all, thank you for your kind comments.
We are doing everything we can to work through all of the challenges that families are facing with anything, including the new fi, so anything we can do to help, please just let us know.
Umm.
So just to answer your last question and then I'm going to work backwards a little bit, there is absolutely opportunities for families to decide how to best support their loved ones.

So that can mean having an agency provides some supports.
Having direct support professionals that have been hired, provide supports and happily who guardian provides some supports.
We've worked with case managers already to say hmm, let's take a look at this situation.
Does the legal guardian want to provide supports?
Well, not really.
Sure.
Not really sure if it's gonna work out long term.
OK, let's put a temporary opportunity in place for the legal guardian to provide supports for three months.
Let's see what other options are available.
If they're able to find additional staff during that time, there's lots of flexibility here.
We really encourage families and case managers to think creatively and to brainstorm, and we've also offered, I'm happy to be a part of those conversations to brainstorm options.
I know Shannon has been brought into some of those conversations to brainstorm options.
We tried to make this program as flexible as possible.
It's not all or nothing, right?
So it's not the legal guardian has to provide supports or one of the other options have to provide supports.
You can absolutely split, divide and look at different ways to make this work.
There may be a family that thinks this is the best option, and then it starts only to find out you know what.
This isn't really working out right by individual.
Isn't the my loved one isn't getting the community access that they were getting before?
This is a lot of work.
I'm not sure I'm can maintain this right.
Those are all things that are absolutely natural and are things that just need to be communicated to the case manager so we can look at other creative options.
You reminded me, Michael.
We did finally post information on the website, so I wanna share that information because one of the things that we posted as part of this program on the website is

we had a working group put together forward facing family friendly guides on this new program.
Those guides were also vetted and reviewed by a family group and we really hope that the factsheets come across as easily understandable, easily accessible but accurate in providing details around some of the complex pieces of this program.
One of the things that we really tried to articulate clearly was the respite component.
So I'm just going to share my screen for one moment.
I know Pam.
You have your hand up.
Just give me one more moment.
I'm gonna share.
Umm, the new web page just so you guys can take a quick look at it and then obviously I put one link in the chat, I'll put another one in the chat as well.
So you can explore it on your own and then reach out to me with any questions.
So this is our web page.
If you go under supports and services and then oops, access to supports, you go to our access to supports page.
If you Scroll down a little bit, we have a whole section on legal guardians and parents as paid caregivers.
This section is really brief, right?
Not a lot of information, but if you click on the link.
It's going to bring you to a larger page.
It's a little content heavy.
We need some pictures.
We'll get them up there eventually.
And this information starts to provide family friendly forward facing information on the program.
So there are two PDFs and these are fact sheets.
These are family friendly fact sheets.
These are the fact sheets that were also vetted by the family groups.
They're in English and Spanish, and they provide a really nice overview and summary of the program.
We have one for legal guardians looking to provide supports and we also have one for parents looking to provide some supports because they're a little bit different in how they're the criteria.

Criteria is provided, so we would I would absolutely appreciate the Council to take a look at all of this, provide us with feedback if there's places that we can improve, let us know this went up today so it is fresh.
Uh, I'm so we're absolutely looking for feedback and please don't hesitate to shoot me an email if you see some places where we can improve.
The other thing I just want to mention very briefly is we have a very quick frequently asked questions at the bottom after doing a few of these forums, I started to see sort of a trend in questions coming in.
We wanted to make sure that those questions were answered to others that had the same question.
So there's a few frequently asked questions right here at the bottom that we hope address.
Just sort of the general questions we were receiving every time we had this conversation, my contact information is on this as well.
So please don't hesitate to reach out if there's anything we can do for to improve it, or if there's more information that you think would be helpful up on the website.
Michael seems like that Facebook group that you were mentioning.
My my benefit from taking a look at this as well.
Appreciate it.
PM I'm so sorry.
I know you've had your hand up for a while.

PD **Pamela DonAroma** 1:31:51
It's OK.
No, it's it's fine.
My my dog ran away so it was probably good timing.

OK **Ostaszewski, Krista** 1:31:56
Ohh that's not good.

PD **Pamela DonAroma** 1:31:57
Pam down Aroma Council member my question has to do with, you know, many of the families that I'm that I know of also have CFC funding for personal care.
And so it would seem that it would be wonderful if they could be reimbursed for a

lot of the personal care.
So does this extend to CFC services?

Ostaszewski, Krista 1:32:24
So Pam, that is a fantastic question and it is absolutely a question that we get all of the time this program does not extend to CFC.
CFC is a DSS program.
It is a state plan program and right now they do not have the ability to compensate legal guardians or parents of school aged children.
They would have to make a state plan amendment to make that change, and my understanding is they have they have not moved forward with that.
I will say they have gotten this question as well, right.
I think what you just articulated PM is the question that we're receiving from a lot of families who have duly funded supports, right, CFC supports and DS supports.
So this is absolutely a question that they've received.
I know that they're looking into it, but there is that is not something that I believe they've moved forward with at this time, Commissioner.

Scheff, Jordan A 1:33:24
Thank you.
Christa Jordan, chef Commissioner, DDS, as you all know, the DSS Commissioner is Andrea Barton Reeves.
She knows our families well, having been the prior executive director at Hark and been involved in the community in all sorts of ways.
DSS is closely monitoring our success with this.
It's a.
It's a big shift from CMS, who you know has us, who who brought EV to us because of their concerns about waste, fraud and abuse, and in part because of some some employees of record and some families and guardians who did that big wet blanket thing over all the rest of the families, you know, a few bad eggs spoil the bunch or whatever, whatever that expression is.
So they're closely monitoring and if we are successful and I'm sure we will be, they are likely to.
Mimic some of what we put in place to do similar things because they have other self determined programs there besides CFC within some other other supports and

services in ABI I believe, and they also think and I could be wrong or they are headed that way but.
Self hired supports is is the direction CMS is pushing all of our a lot of our LTS FTS services too, so I imagine somewhere down the line as we gain traction they'll follow suit, but it'll be a little bit of a waiting game.
But we're gonna we're gonna prove that this works.
Thank you, Kristen.

OK **Ostaszewski, Krista** 1:34:56
Thank you, Commissioner.
Other questions?
I'm going to throw my contact information in the chat.
Please don't hesitate to reach out, I'm happy to assist with GTI related questions.
Questions about the paid family caregiver initiative.
Anything that I can be of assistance of, please don't hesitate.
It was really nice being here today and nice seeing some faces I haven't seen in quite a long time.
Hope everyone is well.
Thank you.

PS **Patti Silva** 1:35:25
And he saw the council chair.
Thank you so much, Krista, for that information.
Umm, we really appreciate it.
Uh.
Does anybody have any other comments or questions of Jordan?
Do you have your hand up again, or is that legacy?

SA **Scheff, Jordan A** 1:35:40
No, that's a.
That's a fresh hand.
I just wanna say thank you to Krista myself when I talk about having amazing staff that gave me the confidence to be away for so long.
I'm talking about ladies like our and she's just unbelievable.
Her ability, that they'll how much she can produce.

How incredibly knowledgeable she is.
I don't know anyone else who can digest the complicated gobbledygook that comes from the legislature or CMS and make it clear to all those around here in a matter of moments or divine that it's a complete mess and makes no sense.
And let us know that before we start to waste our time, she's a blessing upon DDS and we are very grateful to have her.

PS **Patti Silva** 1:36:21
Thank you.
And uh, Patty Silver Council chair.
Adrian, you have your hand up.

A **Adrienne (Guest)** 1:36:26
Uh, hi, Adrian Benjamin, Council member.
I really have to go and I know it's late.
I'll just let everyone know there is an opportunity for federal legislation, legislation that will help our direct support professionals actually become professionals.
It's too complicated.
It's very wonky stuff, but basically between now and August 12th, everyone will need to send an email to their Congress person and senator.
But I will send you the info so you know what in God's name you're talking about.
The name of the bill.
How it will help DSP's and all that, so it's to help professionalize them and get them get more data on them to help build the profession.
Stop having them be overlooked and underpaid.
It's it's, it's a, it's a positive step, but I can't explain it all now and I'll send you the link.
So look for it in sometimes between now and August 12th.
Just send a quick email to your Rep there's a there's a way to do that.
It's not that hard, alright. Why everybody?
Thank you for everything. Bye.

SA **Scheff, Jordan A** 1:37:31
By Adrian.

Patti Silva 1:37:32
I Adrian OK, Patty.

Adrienne (Guest) 1:37:34
I'm late for another meeting.

Patti Silva 1:37:37
And he saw the council chair.
So if there were no more questions for Kristen, I think she might be gone already.
So that was a great presentation.
If you have any questions I she put her email address up there as well too.
So next on our agenda is topics for future meetings.
Umm, we have services, residential options for highest lawn individuals, maybe Jordan.
Once you and Nicole talk, maybe there might be more information to share on that at some point in our next meeting isn't until September 19th.
So we we have some time in between that.
So I don't know if if anything you know would be covered under your discussions that might be helpful with that topic is go ahead, Jordan.

Scheff, Jordan A 1:38:29
Jordan.
Yeah.
Jordan chef Jordan.
Chef TDs, commissioner on Nicole and I have already been trying to plot out a time to meet in August, so they're pretty productive when I meet and I hope that she and I can have sort of move forward and let you know one way or the other what we can share and September or not.

Patti Silva 1:38:46
Great. OK.
Thank you.
And then we also have uh resource management.
Umm, I don't remember what that was really about.

The results of quality review with Krista Josh.
This was kind of like our working list, so if there's something there that jumps out, go ahead, Jordan.

SA **Scheff, Jordan A** 1:39:06
And so on.
The on the thank you Jordan, Chief, Commissioner.
DS When I when when I presented on a panel discussion at Nas's the National Association of State Developmental Disability Directors.
The attention is really focused on Pennsylvania and Connecticut and the work that we are doing on that.
That's really behind the scenes.
It's not very public facing, but some really powerful tools that stems from the 2014 OIG audit on of the critical incident detection and reporting that the company that we work with has now added to that product in all sorts of amazing ways.
And I'm hoping by September, October we could, Josh and I together, Josh Scalora and I together are presenting in Baltimore in August, uh, on this subject again at the home and community based services National Five Day conference on and they they the company submitted an opportunity to present there a CMS and advancing state said only if kinetic comes and talks about their experience.
So when I say we're getting eyes, it's true.
I would love to show you what we have quietly and being investing some serious time in that I think.
Does something really extraordinary and I don't enter into saying these words lightly.
This software will help us save time, money and lives.
And it's unequivocal in the work that we've done there and it harnesses the power of Medicaid claims data connected to all of the other data sources we have throughout the state of Connecticut and within DS.
And I would love to show that off a little to you because it doesn't get a lot of fanfare, but I think that it will be the standard for many states around the country.
In fact, they incorporated loosely are requirement in the latest round of waiver assurances through the access rule that they've recently published that indicate people need to follow what we're doing.
So I'd like you to hear about it as you talk to your friends and around the country.
Who are advocates as well and wanna know why Connecticut's the very best.

This is part of it and I'd love to show it to you.
So that's the quality piece.

Patti Silva 1:41:26
OK.
That doesn't have anything to do with pulse like.
Does it translate OK?

Scheff, Jordan A 1:41:32
That is pulse light.

Patti Silva 1:41:34
So those would be the two together.
OK.

Scheff, Jordan A 1:41:36
Yep.

Patti Silva 1:41:37
So would that be something you'd be prepared to do in September or?

Scheff, Jordan A 1:41:42
Umm yeah, I because.

Patti Silva 1:41:43
We've been talking.

Scheff, Jordan A 1:41:43
Well, yeah.
Yes, I will work to make sure we can.

Patti Silva 1:41:46
Yes.

Scheff, Jordan A 1:41:47

We can share something, I may ask the vendor themselves, since we're already under contract with them to see if they would like to participate in that.
Their data scientist is a brilliant lady and their CEO and and I have been partnering on thought leadership around the country and in advancing protections for people with disability.
So umm I we will work to get something together for September.
Josh will kill me, but yes.

Patti Silva 1:42:14
OK.
And if not, we, you know, October's on pay too, alright.

Scheff, Jordan A 1:42:18
Yeah.

Patti Silva 1:42:21
OK, very good.
So is there anything else that anybody would have wanted to hear about coming up for September in case Jordan's gets pushed to October or?
Any anybody?
Alright, well, why don't we go with that for now?
Umm.
And in the meantime, Diana and I will work on reviewing the bylaws and and getting that information to Kevin.
And I hope that everybody enjoys their August off and stays cool and just something fun.
Umm.
And again, thank you to Jordan for sharing your wonderful news.
And it's it's so refreshing to have so many good things to talk about.
So thank you for that.
And if anybody else has anything to say, or before we sign off, yes.
Alright, Bella does umm OK.
Does somebody want to make a motion to ohh Shannon?
Did you want to say something?
OK, somebody wanna make a.

Scheff, Jordan A 1:43:35
She just wanted to say hi to Bella.

Jacovino, Shannon 1:43:37
I wanted to say hi to Bella.

Patti Silva 1:43:37
Ah. Ohh. Bella.
Hey, Bella, come here.
You wanna say hi?
You gotta be quick.
We're signing off.
Come here quick, quick, quick.

Jacovino, Shannon 1:43:51
Hi, Bella.

Patti Silva 1:43:53
Say hi really quick, OK.

Jacovino, Shannon 1:43:59
Hi, Bella.

Scheff, Jordan A 1:43:59
Hi, Bella.
Happy summer.
Time to you.

Patti Silva 1:44:04
Yeah, she leaves her camp on Sunday.
Two weeks.

Scheff, Jordan A 1:44:07
So how exciting.

Patti Silva 1:44:08

Yay.

Yeah, alright.

OK guys, did somebody wanna make a motion to adjourn?

Ah, OK Christine.

And is there a second?

Michael, all right, all in favor the aye.

Diana Mennone 1:44:27

I.

Pamela DonAroma 1:44:28

I.

Patti Silva 1:44:28

Alright, everybody have a have a wonderful August.

Adrianna Ramirez- aramirez@ctfsn.org 1:44:29

Aye.

Patti Silva 1:44:32

Motion passes and enjoy your family is OK.

Diana Mennone 1:44:36

Thank you.

Adrianna Ramirez- aramirez@ctfsn.org 1:44:37

Happy summer.

Patti Silva 1:44:37

Thank you, everybody.

Yes, happy summer.

Bye bye.

AA **Adrianna Ramirez- aramirez@ctfsn.org** 1:44:41
OK.

DM **Diana Mennone** 1:44:41
Bye.

AA **Adrianna Ramirez- aramirez@ctfsn.org** 1:44:42
Bye bye.

Tsegai, Wesaneit stopped transcription