

2021 TA Institute

Breakout Notes

Topic: COVID-19- Room 1

Attendees: Karan Burnette, Angela Martin, Christopher Murray
Eric Kurtz, Colleen McLaughlin, Kristen Dahl, Mark Thomas, John Tschida

What did you see?

- No medical school in university so not geared up to do public health but opportunities to connect with public schools since admin home is in school of education
- PA: Learned about staff's ability to switch to tech; Staff lacked tech ability to create online curriculum
- MI was hit hard, how much do we plan/shift work for next year? Commit to full online?
 - Need to tap into the network to learn about higher level tech
 - Saw more representation at virtual trainings of people from parts of the state that don't usually attend these events
 - Challenge to solve infrastructure problems
 - Able to employ more people with disabilities/lived experiences
 - Hard to get computers for staff
- SD – well-connected, actively cross over in all areas of life, sectors (employment, human services, education etc.)
 - Same issues are now more pronounced
 - Better off now with addressing issues (mental health, tech etc)
 - Tribal communities – relationship are strong but initiatives have halted; Lack of access to internet, cell service
- Budget: necessarily but insufficient. What about state funding?
 - OR- located in a university with increasing financial strain, benefits rates keep going up, affects everyone, state of Oregon benefits
 - PA- not allowed to spend discretionary fund
 - No state dollars, return on indirect, second year with no increases, University is not providing cost of living adjustments for faculty

Topic: COVID-19- Room 2

Attendees: Tawara Goode (Georgetown), Ryan Groeneweg, Derrick Willis (Ulowa), Suzannah Iadarola (Rochester), Maureen van Stone (Maryland), Rhonda Eppelsheimer (OHSU), Canyon Hardesty, Kimberly Mosley, Josephine Cruz, Lesley Cottrell, Dawn Rudolph, Liz Weintraub, Emma Fox

What did you see?

- OHSU: Amazing relationship to capitalize on for working on existing projects and finding new ones (DD network partners/directors started meeting with us weekly!)
- IA: A need for social connection amongst the DD community
- NY-Rochester: Difficult to transition UCEDD leadership during the beginning of the pandemic
- DC: Impact of public policy (and its lack of representation of disability populations) on I/DD population in our small geographic population—particularly the equity impacts and isolation, geography/economics of DSP workforce

What did you do?

- OHSU: We got to know the ins and outs of each of our partner organizations and what their priorities are
- IA: Partnered with our DD council (already have a regular meeting with them) to do regular outreach through a FEMA disaster preparedness grant that we applied for
 - LEND trainees trained on social isolation check-in calls to contacts from the DD council in IA
- DC: Advocated for local reporting on COVID-19 health impacts on the disability community (and collaborated with local DD council/city council to get that data), gathered personal stories of PWD and their experiences of health disparity during the pandemic

What next?

- OHSU: Figuring out how our health and hospital system can interpret the needs of our partner organizations and work meaningfully with each person within the organization (now that we better understand each person's role and the orgs' missions)
- IA: We have a spot at the disaster preparedness table in IA and are thinking of ways we can continue to represent the Disability community and UCEDDs in that space
- DC: Continuing to focus on health and public policy impacts on the I/DD community (especially as it relates to health disparities) and burgeoning the DSP workforce (training and salary!)

Topic: COVID-19- Room 3

Attendees: Denise Rozell, Natalie Martinez, Marni Johnson Martin, Katey Burke, Susan Fox, Philip Wilson, Sandra Friedman, Denise Rozell, Sandy Magana, Tamar Heller, Olivia Raynor, Amy Grattan

What did you see?

- Funding opportunities for telehealth overnight- billing, coding, technology... but consumers seem to like not having to drive, there are less cancellations, so likely here to stay.
- Learned a lot about remote work and having a hybrid work environment
- Better reviews for classes than in the past
- Learned a lot about different types of technology-what worked or what didn't work.
- Challenges with regulations, billing, who pays. What will future regulations look like?
- People had trouble working from home with their computers or needed office equipment.
- Staff difficulty transitioning to computer based work- was challenging for some and did not value the computer based world. Losing good staff but the world is moving on
- Healthcare transition. Get students to post secondary settings. Been a challenge to work through it. Funding sources were hard to obtain.
- Staff have been pretty busy and productive. How can I tell them they have to go back to the office when they have done their work?

What did you do?

- Figured out how to patch in interpreter services for telehealth visits
- Weekly townhalls, lots of virtual to keep people engaged.
- Special fund for donations for people because there was a lot of needs within their community
- We need to evaluate what we do. We need to get the technology to the people that need it. - Amy Grattan
- Giving faculty an extra two years of tenure.

What next?

- The re-entry back into the office. There are critical positions that need to be in the office. Need to be respectful of people's needs but how do have those innovative conversations in the office

Topic: COVID-19- Room 4

Attendees: Amy Hewitt, Daniel Armstrong, Julie Schears, Ilka Riddle, Jerry Alliston, Deborah Spitalnik, Dan Zhang, Alan Cobo-Lewis, Wendy Parent-Johnson, Kiriko Takahashi, Jamie Koenig

What did you see?

- Challenge- Keeping students engaged remotely and still hold a meaningful graduation
- Loss of opportunities for experiential learning – no longer able to go to the homes of people with disabilities
- Families calling us- online schooling for children with disabilities doesn't and won't work
- Sometimes, there were too many resources, emails, and people offering input. It became overwhelming for the staff.
- Most of research portfolio involved community interviews/engagement.
- Renegotiating and rebudgeting was very difficult and ongoing.
- Hiring freeze. State only just gave the budget. Can't hire permanent director.
- Mailman: Had invested in telehealth and teleeducation and planning 5 years ago, so was able to fully convert everything to virtual in 7 days.
- Developed training program for doctors and nurses in adult hospitals for providing treatment to people with disabilities
- With clinics, found that online evaluation and assessment was actually more accurate. Were able to essentially do home visits with all children, rather than observing in an unfamiliar setting.
- Active in 3 communities with low-income and high minority population. They were most affected by COVID-19 and many did not have high-speed internet access
- Working with university around restrictions was very difficult. Hard to control budgets. Had to resist furlough.
- Some of biggest naysayers of working from home came around

What did you do?

- Worked to accommodate as many students as possible.
- Quickly pivoted from in-person to online. Included training staff about how to do that well. Still able to reach families with information and support them. But some learning didn't work online
- Hard problem-solving for online school. Not much to really offer them
- COVID-19 workgroup- connected with many new partners as a result.
- Had to be very reactive to meet immediate needs but just because it worked, doesn't mean it should be continued.
- Went back to funders. Changed 75-80% of projects, whether by changing methodology or offering an entirely new project.
- Great opportunity to really think about and work harder on accessibility of material and technology.

- Communities did have cell phones, though, but couldn't understand Zoom. Developed Zoom training using common access platforms like Facebook.
- Learned so much about access. Put to rest a lot of myths around accessibility. Ex. Can't work with them because don't have internet – but there are other options

What next?

- Follow the long-term employment impact for students quickly shifted to online
- Enhanced problem solving and spreading it to help other organizations adopt strategies to be more accessible and bring more people in
- Building a more flexible work environment with the return to the office. Build a culture that allows people to take care of themselves and balance their personal and work lives
- Mailman: Looking to not have in-person again. Use those savings to give people raises and go towards other projects
- Some expensive programs will be able to stay virtual, allow for broader reach
- Hope that some AUCD things, like the TAI or DPS, stay virtual, but in-person conference

Topic: COVID-19- Room 5

Attendees: Parthy Dinora, Marc Tasse, George Gotto, Karen Ward, Marty Blair, Lori Garnes, Melanie Fried-Oken, Marcia Moriarta, Mark Shriver, Sally Gould Taylor, Rebekah Young, Rylin Rodgers, Michelle Aguigui, Katie Johnson

What did you see?

- VA- challenges to figure out our lane in this rapid transition
- MS- how to keep young adults in transition program engaged
- NM- has created a deeper connection for staff and our connection to community is even higher than before
- NE- state partnerships have really strengthened
- Guam- procurement process and hiring process has to go through HR which has slowed us down; need to spend down money but can't
- OH- hiring freeze, need preapproval
- Challenges with being underspent on grants

What did you do?

- MS- work through virtual options and discovered new platforms (like discord)
- MT- Focused on AT Program and money from state to distribute hotspots quickly
- NM- close partnerships with state partners and university; able to shift work scopes and are now doing a lot more to connect with people
- OR: Advocacy for PWD heightened visibility within medical center
 - Provide guidance for university hospital on visitation protocols
 - Run one of the vaccination sites- weekend just for PWD and their carers and had UCEDD members serve as advocates
- OH-Nisonger: Scarcity of medical resources- UCEDD brought in to make sure PWD were being prioritized—elevated UCEDD and rights of PWD in OH
- Guam- first virtual conference had less turnout since PWD didn't have access to the technologies, but now they worked with local TV stations to have it be live
- Guam- opportunities on wheels to do loan services from village to village

What next?

- MS- state reopened sooner but worked hard to have outdoor activities and mask wearing
- Access is better and there's a larger feeling of community which will impact us well into the future.
- So much good has happened and how do we make sure they stay
- Reopening, we don't want to go back to the way things were before (how do we maintain relationships, sense of community, access to technology)

- PA- quick adaptations might not have considered the negative impacts so we want to make sure we are thoughtful; eg. using trauma-informed care in virtual engagement; accessibility centered in new modalities
- ND: only getting laptops with docking stations from now on; plan which trainings we provided that were double or triple the number of participants vs. which ones still need to be done in person to have a good result
- MO: Hiring spree; hiring new staff who are all over the state of MO who have never worked in person and it gives our center more of a “state-wideness” to our work
- MT: looking forward to coming together from time to time but using the technology to share what we are doing in ways we weren’t doing before
- Guam: Do recordings and share with local media in future to reach more people

Topic: COVID-19- Room 6

Attendees: Cindy (ICI-MA), Sharon (MI), Sandy (WY), Beth (DE), Valerie (OK), Kelly (NH), David (SC), Anne (WI), Jesse (VT), Dan (GA)

What did you see?

- (OK, SC) Need for Self-Advocate engagement, especially in rural areas, need new contact points
- (MA) State exerting lots of control, mandates
- Encouraging people to be in control of their space and set boundaries with skeptical service providers
- (WY) State agencies reaching out to ask for more without more \$
- (WI) Drop in contact initially with families, resulted in new ways for community engagement
- (ICI-MA) Employment space: violation of peoples rights, some places people worked it out but open questions about self-direction of decisions, some people are feeling fundamental inequality
- (NH) special ed: lots of districts and schools are using pandemic as an excuse for violating rights, may be a long road to work back to where we started.
- (SC) increased participation in trainings since they're virtual. Cheaper to run, greater engagement, able to bring in presenters
- (VT) some people prefer this new way of being – IF they have internet access. For people who don't have internet access, they've been completely lost. It's heartbreaking. e.g. disproportionate exclusion at schools

What did you do?

- (NH) worked with P&A about special ed law,
- (WI) Changes to definitions to media and equity – captioning, social media, recording, (AAC group has run 4 ECHO groups since start of the pandemic)
- (SC) Rather than just switching to remote events, switch to recorded resources. More asynchronous learning and information dissemination.
- (MA-ICI) facilitating stakeholder input on day services for state DD agencies. This accelerated state move toward an AT waiver, need was so much more apparent in pandemic – surveys, focus groups, provider forums, etc.
- Ramp up past activities
- (GA) May forum turned into a virtual forum – doubled participation, reduced cost, 4k hits to facebook live archive. Increased staff capacity due to lack of travel time.
- (WY) ECHO brand has been launched, expanded and strengthened partnerships

What next?

- MI – considerations for what to keep,
- Try to figure out how to balance the virtual vs. face to face,
- Please share how to do hybrid (more than just a distributed workforce, but for big events); How to hybridize the events and activities; Cost of virtual access in hotel room space is huge
- How to make informed decisions about solutions
- Be very intentional about purpose of in person vs remote, e.g. value of in person relationship building and having tough conversations.
- ICI state is pushing out a virtual workforce – big unknown for how that will play out for service recipients