

# UCEDD Directors Meeting

February 17<sup>th</sup>, 2022 3-5pm ET

## Breakout Room Notes

**Breakout Room Title:** How UCEDDs are using public health workforce funding

**Facilitator:** Lori Garnes

**Notetaker:** Dawn Rudolph

### Notes:

ME: UCEDD has been working with the state office of public health to include data on PWD in their efforts, to no avail, so proposing to use these funds to hire and place a person in state government (office of public health, or office of health equity) – hopefully this strategy will succeed in setting up system to collect and access vital data

MT: half the \$ pooled with DDC & P&A to develop a position to outreach to rural & indigenous communities. Other half to go to school of public health to support students to work in public health office

SC: 2 efforts: (1) supporting public health workforce through LEND program, not duplicating anything, build up public health pipeline and hoping to grow to other universities across state to recruit undergrads from under-resourced communities and (2) support the P4 project (developed in another state) collaboration b/c UCEDD and Dept of Ed supporting young children exposed to trauma. Develop infrastructure necessary to identify kids who need help

NC: 2 efforts (1) family resources, especially Spanish, to update website to be more user friendly and accessible and (2) work-study students on undergrad level to work in UCEDD for a year to be introduced to public health and the UCEDD, encourage future participation in LEND

TX-UT: pooling funds with technology access program, hire a public health worker for 2 years, and part time self-advocate community health workers in rural and racial/ethnic minority communities

OR-OHSU: DD Council & UCEDD pool money, getting really reliable health data on PWD in state. Contract with center for health systems excellence (Medicaid data analysis) to do analysis of available data, and develop agreements for how to access that data, and if data is not available identify what policy changes need to happen to get that data available

HI: partnering with DD Council, providing clinical supervision to provide disability and diversity foundation, also work with Hawaii public health workgroup – support graduate research asst who will go into public health workforce and will supply UCEDD with disability information for more efficient dissemination of plain language



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CNMI: create position to increase outreach, support and dissemination to address resilience, stress relief related to COVID response. Also go into schools and continue to share info about COVID and keep safe.

MA-Shriver: mental health services, ECHO-based model reaching out to emergency responders for ER- and hospitalization-diversion strategies for PWD. Also using for analysis of vaccine data. Vaxabilities – pairs sensory trained clinicians with vaccinators to support vaccination for individuals with sensory and/or high-support-needs related to vaccination

ND: nursing home staff, adult home staff, and DSPs are leaving field in droves while remaining staff are overworked. ECHO model will outreach to supervisors to teach how to appreciate employees, support them better, self-care, and follow-up with training for direct workers regarding resilience techniques, and launch into referrals for other mental health services as needed

OK: work with college of public health and school of social work who handles data resources for the university. Integrate public health content into curriculum across health science center and university

AK: hire public health researcher to do needs assmt of public health workforce re: working with people with variety of disabilities, then develop resources to address needs, and hire self-advocate to support project

CT: fund a doctoral level student in public health program to focus on disabilities for research project and embed in public health curriculum in state

SD: graduate or post-grad fellowship in public health, also pooling \$ with DDC & P&A to work with Dept of Family Medicine – has Frontier & Rural Medicine (FARM) – med students to residencies in small rural communities and hospitals across state, tap into that network to embed disability content. There is a training program for community health workers at small tech school – working to recruit students from training program to give disability training and experience needed.

PA: continue to build health equity work, together with 2 different groups in college of public health got \$6M from CDC to develop health equity collaborative for PWD, individuals with mental health, and older adults – will hire self-advocates with lived experience with any of these identities and be authentic members of teams working on deliverables from CDC project

GU: pooling funds with assistive technology unit – hiring technology assistant to manage trailer to do outreach in different villages and rural areas to deliver assistive technology services, also expanding newborn hearing screening with outreach trailer. Purchase equipment for northern and southern clinics where population often doesn't have private insurance. Creating videos & other marketing to deliver info re: trailer services and different schedules. Supporting 311 call center established by DD Network that was set up with CDC funds

**How to share information about how these efforts make impact? How will AUCD's Public Health Competencies will be used in these efforts [Including People with Disabilities-Public Health Workforce Competencies \(aucd.org\)](#)**



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