

Monday Morning – First Exercise: Challenges to the Field and to UCEDDS

1) What can you do to incorporate some of Lynne's management ideas in your UCEDDs?

- what is participatory management?
- take risk. Complete acceptance that people make mistakes.
- Physical team building - time away to have discussion on the "hole within themselves".
- trust that people will do what they have to do.
- empower staff
- change the philosophy of working with people with disabilities.
- give up the scheduling of training. allow participants to

What could you do to support providers to incorporate some of those ideas into their organizations?

- Training to support these ideas
- Changing the vision of safety - allow the dignity of risk
- "Whatever it takes"
- Training, practical application, peer support, lots of TA
- start small one house at a time.
- Focus on personal - hire people with the same values.
- Cultural interviews for new hires
- Willingness and openness to learn. - Good to Great
- Emotional intelligence
- It's important not to pre-select the people. It's important to also shape the individual
- highlight how the direct support provider is supported. Don't allow the employee to take the person home for Christmas. Clear boundaries around the "holes".

2) UCEDD

University structure limits participatory management for team

Management meetings can focus on

Program

Projects

Start with level you have power to change

CAC

Families and individuals with disabilities are at the table

Recruit higher people with passion, style and culture you desire to have on your team.

University structure is very prescriptive.

PROVIDERS

Helping them to ask the right questions

Working with Medicaid/Department of Inspection and appeals to redefine quality outcomes and documentation requirements.

3) What you could do to incorporate Lynne's ideas?

Hold Company/Unit retreats

Trusting that a participatory approach will work

Listen well-build trust

Consider all ideas

Communicate back

Help them come up with solutions

Communicate explicitly so all understand why things are done

Build trust

Back staff up

Encourage innovation – take away fear of failure or fear of reprimand

Be approachable – make people feel comfortable coming to you with ideas, issues and concerns.

Be driven by the needs of people with disabilities, not funders.

Listen non-defensively

Change your own corner (team) of the organization

WHAT COULD YOU DO TO SUPPORT PROVIDERS

Use stories to convey ideas, concepts – how to do this.

Being interpreters of the data.

Have Lynne keynote at annual provider conference and association annual meeting.

Training and technical assistance.

4) WITHIN UCEDD

Have open door policy for thoughts, ideas,

Interests expressed for future projects

Hard to find creative \$ support of ideas – how to justify funds for retreats, physical challenges, etc.

Model within our spheres the participatory management philosophy

Culture – bringing in “newbies”

Allows new thoughts and thinking outside the box.

We tend to use same people/philosophies over and over

Teach people it is ok to step outside of the box.

Providers

PCP with prodder, MHMR, CFPS and SSLC “downsizing”

Conversations started years ago.

Volunteer evaluative services to provider community. Create relationships with providers

Work with DD agency

Work for, with and on behalf of

ID Date points so providers can ID successes to recognize small steps

Be liaison to the state when needed but teach them how to do it for the future

5) People with disabilities want love, choice, jobs per Seagle’s stories, \$, culture, religion

How do you want to live?

Independent vs. Interdependent

Participative management

Risks, teach, discuss

Enhance team options