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**AUCD
TA INSTITUTE AND DIRECTORS RETREAT
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>> SARAH DeMAIO: All right, Anna, I'm ready when you are if you want to start recording.

>> ANNA COSTALAS: All set.

>> SARAH DeMAIO: Good morning or good afternoon to everyone, depending on where you're joining us from. On behalf of the UCEDD Resource Center and AUCD, welcome back to the 2020 UCEDD TA Institute. Now virtual.

We have heard very positive feedback about the event content and format from yesterday. So we thank you, all, for your continued patience as we work through this in the virtual format and for your active engagement.

I'm going to start with a few quick reminders for those who joined us yesterday or some tips and tricks for those who were not with us yesterday, all of today's meeting materials are available on the event webpage. I think somebody from the URC team will be adding that link to the chat box shortly.

The content from the plenary discussions, when we're altogether in this large group setting, will be recorded. The discussions in the small group Breakout Sessions will not be recorded but will be documented by staff who will be taking notes. Both the recordings and the notes will be available after the event on the event webpage. If you're joining online, rather through a phone line, you can see a range of personal mini grant options that is either at the top or the bottom of your screen. We encourage you to explore and use those features. The buttons in the Control Panel allow you to mute and unmute yourself, share or stop sharing your video, toggle on or off the closed captioning which is available either as subtitles or as a running transcript.

There are buttons to allow you to open the chat window or open a panel, listing all of the participants who are online.

We encourage you if you are not already to mute yourself, your audio line if it is disruptive you will either be muted by one of the staff or you will possibly be disconnected if there are continuing issues with that. We also encourage you to share your video as much as possible and remember that even if we are sharing screens as we are now and you might not see yourself on screen, if your video is turned on, others could still see you. So be aware of that and if you take a moment to open the chat box window, I would encourage you to announce yourself to the group by sharing your name and institution. Also please note that you can either chat to the entire group, to just the host, or to any individual participant.

Finally, when you open the participant's panel, you will notice at the bottom of the screen there's available a range of engagement options. You can offer applause or thumbs up or thumbs down to any content that you hear today or you can raise your hand, which will signal to Anna or other hosts that you would like to be taken off mute and contribute either to one of the large group discussions or to some of the Q&A options that we have later today.

We have trimmed the agenda as tightly as possible to minimize the amount that you are sitting in front of a computer screen.

So take whatever breaks you need to address anything that comes up for you.

A quick review of today's agenda. You may remember from yesterday that this year's theme is sort of revolving around all of the milestone anniversaries and Dawn gave a pretty comprehensive list of those in greeting us all yesterday. These milestone anniversaries mark a tremendous number of changes in the network and offer us an opportunity to reflect on where we've been as and a disability community. Where we are now. And where we are going.

Today we will start with a whole group discussion about the Collective Impact of the activities of the UCEDD network, the ongoing challenges and the upcoming opportunities.

That discussion will have live notetaking which will help us to identify themes or areas for cross pollination amongst the network.

Those themes will be the seeds for our small group discussions later in the afternoon.

After the discussion topics are identified in our whole group discussion, you will have a chance to select one of those themes to join in a small group discussion via SurveyMonkey survey.

After you make the selections, you will have a panel selection in what's happening at Home and Community-Based Services. And we will -- I did want to mention before we move on, there has been a change to the agenda that I wanted to flag for the Directors Retreat. I just sent an email to the whole listserv. But I would also

encourage you to either look at that email or download the agenda from online. After a number of requests from network members and discussion with the Planning Committee, we have decided to cut the final section of small group discussions from today's retreat agenda and replace that with a group discussion about how each of us -- each of you all in AUCD are responding to the Coronavirus and COVID-19, the revised agenda is available, as I said, in your email or online.

Also as a confirmation to everyone we'll be using the same access point, the same link and phone number for access throughout the day for both the TA Institute this afternoon or this morning, wherever you are, and then also for the Directors Retreat later in the day.

So as I mentioned, the first section of our agenda today is a Collective Impact whole group discussion. It will be facilitated by Ilka Riddle, who is director of the University of Cincinnati Center for Excellence in Developmental Disabilities at Cincinnati Children's Hospital Medical Center in Ohio. During this discussion, Dorothy Garcia from AUCD will be taking notes on screen. So that we can kind of capture the discussion and the themes as they get identified.

Ilka has asked me to share a number of discussion questions with you before we get started. And with these up on screen, I'll hand the mic over to her.

>> ILKA RIDDLE: Okay. Great, thank you, can you guys hear me okay? All right. Super. So good morning, good afternoon, good evening, wherever you are. I was part of the Planning Committee and I'm really excited about the theme that we have. Yesterday we had amazing panelists and speakers to kind of reflect on where we are coming from. And how we got there. So today is much more about where we currently are and then how we as a DD Network can have collective impact.

And so I don't know if you guys remember quite a few years ago Tony Antage (phonetic) kind of felt that we really as a network needed to come together to create something usable regarding transition of youth with disabilities. And so he took a lead in a collaborative effort across multiple UCEDDs with the help of AUCD to create a document on transition, where are we with transition for youth and what are some recommendations.

So I use that kind of as an inspiration for today's discussion in terms of are there other things that we can do as a network together to have collective impact on the Federal level or on the national level and to kind of see where we land with our small groups in terms of what people or think they can do or commit to. So what's important to remember before we go into the discussion is to really think about is this feasible and actionable without additional funding. To think about, okay, what could we create that might make sense, is it a tool, is it a product, is it something on the webpage? But what is it that we as a network could come together around or what are the different things we could come together around as a network to kind of move the needle and move us forward.

When we started planning the conference we thought it was really important that we start out with a whole group discussion and really look at where are we currently, what are still some of the major challenges or barriers that we face? Obviously we have come a long way and have made great progress but we're facing a lot of challenges and barriers and I think Larry yesterday gave a good summary of what California is still facing. But then we also want to look at some strategies or partnerships that UCEDDs have utilized to kind of move the needle in their state. So is there something that you feel you can share with the whole group that has really moved you along in your efforts and your state.

And then to think as a group where we see opportunities to work together to kind of move the needle further.

So I have never facilitated a whole group discussion virtually so I think when we talked with Sarah, we were thinking that maybe it works best if people raise their hand virtually, if they want to contribute, so that we kind of can ask people to contribute one after another and we don't have people just unmute themselves and talk over each other.

But I think we have to see how that goes. So I think we'll give it a try.

So with that, I really want to get us started. And so the first question we wanted to pose to the whole group is, if you think about where you are and where we come from, what are some of the challenges and barriers that you still feel in your state make it really hard sometimes to kind of move forward or to kind of have the impact that you would like to have?

Sarah, can you see if anybody has raised their hand?

>> KARA: I can get us started. This is Kara. Sorry I had to unmute myself so I don't know if other people have to do that on the phone. So I think for us in Ohio one of the things we're trying to leverage which we sometimes feel are some of our weaknesses to somehow make them be strengths. So a lot of our policymakers in Ohio still view disability from more of a moral model approach so we have had the last couple of governors cite their motivation for a lot of their evidence around disability to be a lot of faith based and a lot of the language they have used in their press conferences, the language has been pretty difficult to listen to in terms of helping the broken and that they are really feel like they are led to do this because of their faith-based beliefs.

And I guess in the past I would have only seen some of that as problematic, especially if I just looked at the language. But what we have been able to do is harness that interest and that commitment in a way that I feel like has opened some doors for at least discussions around things like needs for healthcare and some of our Medicaid efforts in the state.

I do find it still becomes problematic when you're not helping people and instead you're allowing people to live lives they want to live in the community so we have also partnered strongly with our advocacy group which is Disability Rights Ohio which is

reminding people that the non-helping the other aspects are just as important. But I guess for me it's been from seeing things as only negative weaknesses and trying to work with people where they are and trying to understand the needs of people in our states.

>> ILKA RIDDLE: Thank you so much Kara, I appreciate it. I think Deb would like to talk about the topic.

>> SARAH DeMAIO: After her we have Kimberly Mills, who has also raised her hand.

>> ILKA RIDDLE: Super, great. Deb. Are you there?

>> SARAH DeMAIO: Deb had written into the chat box she would like to raise the topic of person-centered thinking and the relationship to HCBS services.

>> ILKA RIDDLE: Okay.

>> SARAH DeMAIO: I'm going to go ahead and unmute Kimberly I'm not sure if Deb is having audio connection issues but I'll try to unmute Kimberly.

>> Hi folks Kimberly Mills, Virgin Islands. I think one of the challenges -- and I think it's something that's shared with rural communities at least recently having an opportunity to chat with Brent similar challenges, but basic infrastructure.

There are many ways that we can have meaningful impact. But excuse me, some of the basic aspects that just -- excuse me -- make a person's life a little better and a little bit more livable such as accessible transportation. Accessible transportation past 5 p.m. Transportation to providers or even existing providers.

We just really have deficits in the territory in the Virgin Islands in particular.

And I think it's a challenge that other rural communities also have.

It doesn't mean that we can't do great work and we certainly are doing great work but some of those bigger infrastructure challenges can be difficult.

>> DEB SPITALNIK Am I unmuted now.

>> ILKA RIDDLE: Yes.

>> SARAH DeMAIO: Yes we can hear you.

>> DEB SPITALNIK Thank you and good morning, everyone, I wanted to raise the issue of the impact of UCEDDs on person-centered thinking and support. And how that has contributed in states to Home and Community-Based Services because I think it could be related to an issue reflected of the different modalities or mandates in which we work and also we've had -- in our states.

And I would love to see whatever we look at in terms of collective impact that as valuable as we have all found the transition document, I would love to see something that was network wide to, again, demonstrate our national impact and that we are in the states and territories. Thank you.

>> ILKA RIDDLE: Thank you, Deb.

>> SARAH DeMAIO: All right just to read out who has their hand raised we have Wayne, Sharon, and then Tafa had messaged me to say she wanted to raise her hand

which is perfectly fine. You can message me I will get the message and then Derrick Willis has also raised his hand.

>> ILKA RIDDLE: Okay great.

>> SARAH DeMAIO: So I'm on muting Wayne.

>> Okay Ilka can you hear me okay.

>> ILKA RIDDLE: Yes super thank you.

>> Okay. I think one of the things that's critical to this has to do with the partnerships that the UCEDDs develop within their network as far as the state.

We meet monthly as far as the DD Council and the PNA so that the directors of those programs for purposes of coordinating. And then work closely with the Arc on legislative issues that are going on within the state. Three years ago we became the designated state entity for the SILC, for the State Independent Living Council and therefore that put us in relationship with the Centers for Independent Living. That's been important through us and then through the DD Council they financially fund our state self-Advocacy Network people first it's actually the UCEDD staff member the state liaison for People First in Nebraska so when it comes to the area of self-determination, that's been important.

And I wouldn't want to forget, too, the importance of being embedded inside of what goes on with the Department of Health and Human Services in your state. We're the contractee to do the national core indicators for Medicaid and for DD, which also puts us in a program evaluation situation for the state. And that's also been a very important relationship as it has to do with these types of activities.

So I think it's one of the wonderful things about the AUCD Conference is you get to see what everybody is doing. And it's pretty easy in those cases to replicate some of those types of things and that's how we have gone about building our program here in the state.

>> SARAH DeMAIO: Thanks, Wayne.

>> You're welcome.

>> ILKA RIDDLE: Thank you.

>> SARAH DeMAIO: Next up we have Sharon. I'm going to unmute. I'm sorry; I'm unmuting you now.

>> Great, hi, can you hear me.

>> SARAH DeMAIO: Yes.

>> Great, thanks so on behalf of Michigan, some of the challenges we face is we have a lack of qualified providers for individuals with complex developmental disabilities between those with dual diagnosis. There is the issue of wages and conditions for direct care workers. We have a very siloed system in Michigan that makes it hard to coordinate efforts. And then also, just some of the social determinants of health, especially (inaudible) issues.

And then we have a number of proposed systems changes in Michigan and Angela

Martin I'm hoping you can chime in here and share a little bit about those.

>> ANGELA MARTIN: Yes this is Angela. As Sharon mentioned, the assistance change right now Michigan -- the systems change right now in Michigan we have a single system which is behavioral health and developmental disabilities and there are good things with that in that folks that experience both disabilities or if they simply experience one of the disabilities, their supports are within the same system. But the challenge is now that the state is proposing a systems transformation whereby if we had a community-based system that was nonprofit kind of quasi-governmental and now they are proposing to move it to the health plan plans and I know other states have taken that approach and it's worked but the challenge because is that they are doing this on a really fast track with the goal -- and this is where I think us and the -- the UCEDDs network and our partners both the DD Network parts and Disability Network partners have been really partnering together to say that -- explaining the implications of that, a timeline of one year of change will have huge negative impacts. And what we already know from other projects that we've been involved with is that people with intellectual and developmental disabilities have unique experiences that are provided by unique providers. And health plans are typically not well positioned to do that. And so our message collectively has -- I think has some impact we continue to meet with leadership but those are some of the challenges and I think it is particularly impactful or potentially have a negative impact on the Home and Community-Based Services implementation.

So systems change can be good. But done in a well-thought manner, not thinking about finances first. But thinking about people first is what we're really trying to message to systems and governmental agencies.

>> SARAH DeMAIO: Thank you, Angela. I did want to point out that there's a clarifying question from Dana Yarbrough in the chat box asking, are we looking at external systems change or internal systems change challenges. Sorry; system challenges or internal challenges.

So Ilka.

>> ILKA RIDDLE: I think this is open to both. Dana because I'm sure that many of us deal with external as well as internal challenges of UCEDDs. So I think it's definitely worth bringing up. And then I see that Maureen has shared again another plug for working with your DD Network as well as the Arc. Your DD administration and self-advocacy organizations.

>> SARAH DeMAIO: And we have Tafa who is ready to share her comments.

>> Tafa TUPUOLA: Thank you, for America it's quite interesting we face a lot of challenges in getting public facilities and commercial buildings to be more ADA compliant. However, we're starting to see this trend with the traditional home where we do public gatherings to be more accessible for the disability and aging community. And I thought that was pretty interesting how we're starting to see this trend.

So we're trying -- so one of our activities that we're looking at for the 30 year

anniversary for ADA is to take snapshots in the community, how the traditional homes are now starting to look more ADA accessible.

In speaking about post disaster housing, we're starting to raise a lot of issues -- our UCEDDs have participated. We were invited to attend the Center for Homeland Defense and Security specific executive Leadership Program on post disaster housing and our UCEDD was the only one that was invited in the field -- in the discipline of disabilities.

And we raised a lot of concerns. It was hosted here in Hawaii. And we raised a lot of concerns about vacation rentals where families who need accessible homes to rent from while they are waiting for their homes to be rebuilt that they had a very difficult time accessing this information within their territories.

How can we make sure that we have that information available so families can hurry up and transition out of shelter into temporary housing while they are working on rebuilding.

And apparently this is an issue that was brought up to FEMA. FEMA was the host entity who funded the meeting.

And so conversation around that.

And I raise this issue because FEMA does not support many of the cultural home designs in the Pacific territories. Because we have kitchens outside. We have extended living rooms. So they don't meet the requirements of a building -- of a building code for FEMA that would qualify.

So as we were talking around this, how do we also include the conversation around accessible home designs that FEMA can -- trying to use that -- get the foot in the door to also push that ADA must also be a requirement for FEMA to consider that in order to be qualified for assistance, you also have to make sure that this is in compliance with ADA, as well.

We were able to shift the mindset about cultural home designs by pushing more of preapproved home designs that are accessible.

And see it as a predisaster planning concept.

So how do we get this conversation going where we try to promote more predesign or precultural design of homes before a disaster happens that the Government can actually adopt and let it be part of approved homes post disasters. So FEMA has now approved a couple of cultural home designs so this is a moving step milestone for the Pacific. Especially now that FEMA is now moving towards creating a Pacific home Council so we can all talk about the standards of the home design, making it more welcoming for our Pacific families.

>> SARAH DeMAIO: Thank you.

>> ILKA RIDDLE: Thank you so much, Tafa.

>> SARAH DeMAIO: Sorry; go ahead, Ilka.

>> ILKA RIDDLE: No, I thought it was a really great contribution. I think it goes

partially back to basic infrastructure but also what we discussed yesterday in terms of inclusion equity and diversity and consideration for different cultural components and how to comply with ADA. So I think that's a really important contribution. So thank you. Is Derrick next Sarah.

>> SARAH DeMAIO: Yes I've unmuted Derrick.

>> DERRICK WILLIS: Good morning, Derrick Willis, University of Iowa.

The area that I think about and I struggle with in our state is related to what was previously said with our provider capacity and the ability to address the complex needs, whether they are medical or behavioral.

We just don't have the number of individuals who No. 1, find this as an appealing job.

That find this as a way to make a living and livable wages. But also that have the qualifications and the ability to provide quality services to individuals that present with complex needs. I'll speak to it a little bit this afternoon. But as I look at this, this something that we could do together, is begin to look at this whole direct service provider and capacity needs and figure out, how can we credentialize, how can we strengthen and improve this area.

Also piggybacking on the conversation that we had yesterday with the diversity equity and inclusion action plan.

It seems to be an opportunity for us together to again, advance our work in this area.

I've been in the network for 17 years now. And we've made strides. But we still have a lot of work to do in that area of cultural and linguistic competencies. So those two areas are what I would propose forward.

>> ILKA RIDDLE: Thanks Derrick.

>> SARAH DeMAIO: We have a couple of comments from Kathleen Sheppard Jones. Marcia. To share. And then after that we've got Colleen and George, Colleen and George.

So I'm going to go ahead and read Kathleen Jones' comments that Kentucky has strong partnerships to include the Department of Education, vocational rehabilitation along with our DD Network partners. They are always seeking to engage with Medicaid and are hopeful for more collaborations there.

And adding on her Kentucky Medicaid comment, Medicaid has been very interested in our national core indicators data. We have created one-page resource documents around employment, relationships, and health that Medicaid is sharing as part of their statewide Town Hall.

So I'm going to go ahead and unmute Marcia. Wait a second. I've got to find you on the list. Maybe one of my colleagues has already unmuted you. Yes you're unmuted.

>> Yes you can hear me. Thank you. So what I've been thinking about in this

space where we can leverage more nationally is really thinking about issues of disability and the intersectionality with other experiences and identities and how we can leverage across service systems that tend to sort of see their port of entry as a different one.

And here in New Mexico we have so much going on I could probably spend the entire time talking about it is one of the areas in area of maternal-childhood and early Childhood that's been growing and successful is making cross systems connections and programming where we have side-by-side collaborations with Part C and our Mcvee (phonetic) and state funded prevention based and home visiting programs and really trying to target families where there's high risk for disability and/or developmental delay already in young children but also a lot of adversity, toxic stress and trauma.

And kind of not seeing them as different spaces and different service systems that people have to either find their way to or be referred to with a lot of strain and stress often for families. But combining efforts so that the Part C early intervention person or therapist will be working with a home visitor who is really aligned but also being paid from a separate service system. So it speaks to some of what Derrick is saying, too, is how do we build a workforce and build a skilled workforce inclusive of of course language and diversity issues. But really, we just need people who know early intervention development. And understand both kind of the environmental and reality-based experiences people are having in addition to the needs of young kids who may be at riving or have disabling conditions so that's one area that I think we're getting traction here in New Mexico and certainly as a UCEDD we've been fortunate to do some demonstration projects and continue to provide the services with a goal of illuminating the systems development if that makes sense. So that's my thought.

>> SARAH DeMAIO: Thank you. Next up we have Colleen. I'm unmuting you now. I'm trying. All right I think you should be able to speak.

>> Hi.

>> SARAH DeMAIO: Hi.

>> So I think one of the -- one of the challenges is that we have been confronting is really the need to promote more inclusive opportunities for adults with developmental disabilities as well as students with developmental disabilities.

On the adult side of things, really building capacity within our community to help people live fully inclusive lives, including people with the most significant disabilities and behavior challenges.

And how we craft messaging to promote this across the board, especially in light of a large advocacy contingency going back the route of developmental centers, ICF, and sheltered workshops.

So that's the challenge. And I think we just need to continue to push more towards the community inclusion piece and developing effective strategies to be able to do that.

I know in New York and in some of our surrounding states we're confronting some of those issues right now.

>> ILKA RIDDLE: Thank you so much, Colleen.

>> SARAH DeMAIO: So George Gotto is the next one who had his hand raised. I'm going to unmute you now, George.

>> All right I was going to say exactly the same thing that Colleen just said. We earlier this week had our quarterly Steering Committee meeting with our -- with the People First of Missouri and one of the topics that they brought up was they are tired of being asked to participate in different projects or write letters of support and then never have a meaningful role in any of the activities that they sign onto and we've been thinking about this a lot in Missouri. If we really mean our promoting inclusion, how do we promote inclusion in our work, whether it's research or training and how do we do that meaningfully? And then I'll just add that we experience almost every other challenge that has been mentioned, also.

>> SARAH DeMAIO: Thank you, George. I think Dana has wanted to speak so she's been unmuted.

>> Awesome, thank you, hi, all it's Dana in Virginia, Virginia Commonwealth University and I just had one internal and then an external. Internally I think for us a big challenge is growing the bench. We have -- we are finding this balance of modeling and of course someone calls right when I unmuted.

(Phone ringing.)

>> Sorry about that. We're trying to find a balance between modeling and mentoring the new folks coming into the field with this recognition that sometimes they want to be at the top of the mountain without having done the work to get up the mountain so we're trying to find that so that's been a bit of a challenge as we look for new project directors, new researchers new principal investigators and even new leaders in our Management Team.

Externally, you know, we work really closely with our state and local partners and we're continuing to have the same conversations every year. Our systems are built on the needs of a different generation. People. That use the system. And perhaps that even work in the system. And we are -- it is just not working often for Millennials. The calls we get from families and people with disabilities, the work we do in the community are that these systems are not flexible, they don't work for them. And the systems just take way too long to move. They cannot pivot quickly so that continues to be a focus of our work that's challenging when commissioners and deputy commissioners keep changing. We've had five or six in like 12, 13 months in some of our state agencies. So it creates that constant vision change. That constant chaos. It makes it really challenging to pivot when you can't -- when they have to keep pivoting internally and they can't even get to their external work.

>> SARAH DeMAIO: Thanks for sharing that. Aubyn raised her hand in the chat box.

>> AUBYN STAHLER: Sorry I wanted to follow up with what George was saying

the grant agencies are really pushing community collaboration which is fabulous and our community partners are really feeling like similar to George, we're getting asked for letters down the road but really it's not a partnership. It's an ask.

And so we've been kind of trying to capitalize on the fact that our university wants us to be more community engaged. And applied for some funds to do some training for our bench researchers on how to partner and how to meaningfully involve communities and partners and in a way that really isn't just asking them to do things for us and giving them a gift card or whatever.

(Chuckles).

>> AUBYN STAHER: So I'm hoping that we get some funding to do that. But I do think it's a huge challenge. And I think it's gotten bigger since it has now been tied to external funding for researchers who don't have experience working with community members at all and especially community members with intellectual and developmental disabilities. I think it would be a great topic to continue to figure out.

>> SARAH DeMAIO: Thanks. We've got a few hands up. Rhonda had requested to go next. Marty Blair made a comment in the chat box I want to make sure it gets flagged he said earlier to reinforce what Marcia had said regarding the MCH network and wanted to reinforce what Marcia said regarding the MCH network and we are reengaging in the same system leveraging with the IL system looking for ways to meld their various approaches. Colleen sent me a private chat saying she wanted to revise that supporting inclusive lives for individuals with complex disabilities capacity in the community to effectively support this continue to reduce and eliminate reliance on segregated settings and institutional settings.

All right. And I think -- so we've got Rhonda. Then Larry and then Derrick and I think that might be it.

>> ILKA RIDDLE: Yes. So --

>> SARAH DeMAIO: We're going to sum up.

>> Okay. Good morning, everyone. I just can echo so much of what has been said here already. I think for our -- in our state in particular, in our UCEDD, we have been about the work of moving from a really internally focused UCEDD to actually getting better at serving the needs of our state and developing relationships that will allow us to do that.

So that takes time. It's hard. And it's been challenging in a service system that has had a lot of turmoil over the last several years, as well.

We've been able to get in. Get our foot in the door in a few areas and pick up some contracts that I think are actually helping our state make more informed decisions around the data we're collecting. And providing. I think the other challenge is really having a strong and stable DD Network partners group. That's been in flux over the last several years, as well. And so kind of really how do we re-establish that strong network partnership. I appreciate some of the comments that folks have made here.

And I think it was interesting, I was talking to a community agency director a couple of weeks ago. And how we have -- there's a sense that we're not all kind of chugging together or have identified those real common things that we all can be working on more strongly and in a unified way.

So we've got some plans to think about how to start getting that relationship piece in place. And how to action -- put into action really strengthening our overall network.

And then Dana Yarbrough talked about the internal growth and development of a UCEDD. I'm certainly living in that tension of as you continue to develop and you're busting at the seams, how do you have capacity to take on the next thing.

So really trying to be thoughtful and planful about how we as a UCEDD grow. And doing things that really are going to have high impact and outcomes versus pinning wheels. So there's a lot of discernment that comes into play, as well.

>> ILKA RIDDLE: Thank you so much, Rhonda. Sarah, I think we are really out of time. If we want to try to talk about how to divide into small groups later. Would you agree?

>> SARAH DeMAIO: Yeah.

>> ILKA RIDDLE: Okay. So what I tried to do while everybody was sharing was trying to kind of take all of your comments into consideration to figure out what would be potential interest groups for the small group work this afternoon. For people to come together around can we do something around these issues as a network and what would that look like, would that be a tool, a product, a publication, whatever it is. So I really tried to be as inclusive as I possibly could on the topics. So this is what I came up with as potential workgroups. Please feel free to tell me if that looks okay or if you really want to modify something. So I think one thing that I heard was really pretty strong was around working with various partners and making it work. So that includes things like working with your DD Network partners with your state agencies, with your self-advocacy groups with your Arcs so there maybe could be one breakout room around okay working with partners, is there something around the topic of working with partners that we could create that would be helpful to everybody.

The other thing that I heard certainly was around person-centered thinkings and supports related obviously to Home and Community-Based Services. And that might be a good fit, also, that we will have a panel in a few minutes regarding Home and Community-Based Services. So that might be another breakout room.

I also tried to see -- there was discussion around social determinants of health, ACEs working across different systems and addressing and working with partners who come from the non-disability world but have maybe similar issues. So maybe there could be something around the cross systems connections addressing broader social determinants of health and ACEs, I think that might also kind of address some of the addressing complex needs behavioral medical.

Another topic that would be No. 5 I believe is around promoting inclusive

opportunities. And what does true inclusion of everyone in communities look like. And I think Colleen rephrased what she had said. I thought that was an excellent title for a workgroup. It was a little long. But I think that could be another topic. And then I also had a topic around workforce. How to address the issue around direct service providers, reimbursements for providers, credentialing for providers and capacity.

And then the final one that I pulled out was maybe around rural and territories in terms of infrastructure, housing, transportation but also cultural considerations. I'm not 100% sure if this is the best phrasing. And I'm happy for people to provide input on those.

Those were kind of like the larger groups that I came up with based on what has been discussed.

Any thoughts from anybody since you will have to choose one of those groups this afternoon to participate in.

>> DOROTHY GARCIA: Ilka, did I capture all of those groups in here?

>> ILKA RIDDLE: I believe you did. Sorry; I still have the chat open so it's kind of covering it.

>> SARAH DeMAIO: Maybe what we should do is give people 15 seconds and say give a thumbs down if you do not see one that you feel like you would want to join. We need to continue this discussion. But I think we have a pretty good cross-section of the network and the discussion.

So I'm going to -- I see a few thumbs up.

>> 6 is supposed to be rural, right?

>> SARAH DeMAIO: Yeah, yeah.

>> DOROTHY GARCIA: Oh, thanks.

>> SARAH DeMAIO: Then can you drop those into the chat box so I make sure that I can get them up on the PowerPoint slide -- actually I just wrote them into the PowerPoint. As understood them. The language may be a little different. But I think that the theme is the same.

So --

>> ILKA RIDDLE: And I just -- can I just interrupt real quick? I'm sorry; Mark actually had a really important question and I wanted to clarify that the question Mark posed is the -- do we want to connect these with the internal framework and the answer would be yes so how these are the topics that kind of we want to discuss in terms of how we can have collective impact. So for example, if we are talking about promoting inclusive opportunities, is there something that we as a network, as partners, could create, publish, I don't know, develop a tool, whatever it is. So we want to be somewhat realistic and have actionable steps coming out of the small group work and tie these topics back to cumulative or collective impact. Thanks for the question.

>> SARAH DeMAIO: All right. Maureen are those in the SurveyMonkey? Can you send a chat when they are ready in the SurveyMonkey? And I'm going to share

my screen. So that everyone can see our list.

All right. So Maureen sent the chat. Everything is ready in the survey link.

So similar to what we did yesterday, we have this -- it's a little bit different.

Because these have all been determined at the moment. I'm seeing this got a little messed up. But I think you all can follow along. We've got the six sessions. You need to complete the SurveyMonkey link. Rather than having an hour and a half, you have ten minutes to complete that.

And at 1:30 p.m. we're going to close that. And Anna is going to start putting people in.

While we are all listening to and hearing from a wonderful panel of presenters who are going to share on HCBS.

So just for those who were not on the line yesterday, I'm going to give kind of the instructions and talk through why it's organized the way it is.

So the first question the SurveyMonkey asks you to identify yourself by your screenname as it appears in Zoom. This is because some people have their name. Others have an abbreviation of your name. It might be your organization or your university that has the Zoom name. Or it might be your phone number. If you are calling in. And you're not online.

So we need you to put in whatever is listed in Zoom.

The second question is asking for your contact information so that we can problem solve and follow up with you if there are questions or concerns or we're having trouble identifying your responses.

The third question is asking you to select one of these Breakout Sessions to participate in during the small group discussions later today.

The link is in the -- is on your screen. It's in your agenda. And it's in the chat box. So the link is [SurveyMonkey.com/r/tai](https://www.surveymonkey.com/r/tai) -- for TA Institute -- 2020breakout2.

Yes. You need to click open the chat box on your Control Panel in order to access the link.

All right.

So as I said, you're going to have about another five minutes. But we are going to proceed along with the agenda. And get started.

I'm getting some questions privately about whether we received it. I'm not going to be able to answer everybody about whether they received it. If you didn't do it correctly what's going to happen is you will end up not being placed in a room. And you'll be sitting in the lobby when we start the breakouts and then you can just talk to Anna and say, Anna, I want to be in this room. And that room will -- she'll be able to place you there shortly after the breakout starts. So you won't miss anything.

All right. So next on our agenda, as I mentioned, is a panel to discuss, get a little bit deeper and follow up on some of the things that Derrick brought up about Home and Community-Based Services.

Denise Rozell from AUCD's staff and URC staff is going to be facilitating that panel. And she is going to introduce our speakers.

>> DENISE ROZELL: Hi everybody this is Denise. Can I just check first, I see Melonee, who is one of our speakers, I know Derrick is on, Tina Campanella and Thelma, are you there?

>> Just joined.

>> DENISE ROZELL: Oh, excellent. Thank you. Excellent.

So here is what we're going to do, folks. Very much like what we did yesterday on the panel, we have four amazing panelists to talk about Home and Community-Based Services. And we have a series of questions we have asked them to think about.

I think just as Dawn did yesterday I'm going to put the questions out there and go because we don't have a lot of time. I'm going to go one to another. So I think I'm going -- I'm warning you, Tina, I'm going to start with you. And then go to Thelma because you guys are together.

And then over to Melonee and then onto Derrick. Okay? So just a forewarning.

So our four panelists, Tina Campanella is the Chief Executive Officer for Quality Trust for Individuals with Disabilities. I have had people raving to me about her for the last three days when I was told to be the facilitator of this.

I am told she knows everything there is to know about this in the DC area. Okay. You get the idea.

Thelma Green is a service recipient of Home and Community-Based Services. She is in the office with Tina today. I also, Thelma, have been hearing raves about you for the last several days and about the fact that you're a phenomenal self-advocate in and around this area. So I'm thrilled to have you on the panel. I'm thrilled to have all of these people. We have a really outstanding panel here Melonee Clark is the outreach and resource Program Coordinator for the Arc of Prince George's County so a lot of perspectives and Derrick Willis who we have heard from today the director of Iowa's UCEDD and Co-Chair of the MCC all three bring different perspectives -- I don't mean different they come from different places to look at this issue and I think that's so important that the Planning Committee worked really hard to put together a panel like this.

The questions we have given them are on Home and Community-Based Services.

What does it look like on the ground for people with disabilities in 2020? And how do we envision the future?

What are next steps and issues left to resolve? So where are the gaps? And then what are the key issues for advocacy? What should we keep our eyes on?

So Tina, I'm going to toss it to you and ask you to speak for -- we have about -- a little under a half an hour. So you know, seven minutes. Five to seven minutes. I'm not -- it would be faster rather than do each question and back to the beginning but just to say can you talk about what's it look like on the ground right now what does it look

like for the future what do the gap looks like and what are the issues we need to be watching and advocating for Tina I'm going to toss it to you.

>> TINA CAMPANELLA: Okay. Can everybody hear me okay.

>> DENISE ROZELL: Yes you sound great.

>> TINA CAMPANELLA: If I can take a little break -- I'll go back and forth with Thelma for each question I think that might work best for you do you think.

>> THELMA GREEN: Yeah.

>> TINA CAMPANELLA: So for the first question, the things that came to my mind right away is that I think what it looks like right now on the ground is still way more traditional than we would like it to look. And by that I mean way more like an ICF Lite model as opposed to the real self-directed and customized model that we had all hoped that the HCBS waiver would usher in and help us to create.

And that's especially true for people with significant disabilities. I think people like Thelma, you know, are strong advocates and they can be way more involved in directing their services. But when people are more limited in their ability or their confidence about advocacy and they have a more complicated life situation, God forbid they have people in their lives thinking they are going to take over, things look very different for them.

And so you know the concept is supervision. Get more attention than things like autonomy and independence and coaching and those sorts of things. And part of that is due to the workforce I think and the limitations of our workforce.

But not to blame the workforce. I just think there's too much responsibility placed on the people who do the workday to day without a lot of support for them day to day to do a better job. So I don't think it's the workforce at fault. I think it's really our structure is not designed to really support the people who do the day-to-day support, to do the best job possible. And then I think that's really driven by a larger issue for me. And that is the lack of advocacy or knowledge base within the provider community. About what it really takes to do self-directionally and how do you do self-direction not just with people who won't let you not do self-direction. But with everybody.

So I'm going to stop there and say, Thelma, what do you see on the ground? I think you were talking earlier about an observation that had similar elements.

>> THELMA GREEN: Yeah. Earlier what I was telling Tina is like the self-advocacy if -- because we need the support to live our best lives possible like ya'll do. If an aide is out sick, they need to be able to have someone else to jump in. And be able to help. And right now I think if your regular aide is out, your cue which is someone who works with the agency that is assigned to you as something like a social worker. And they will have to come out.

>> TINA CAMPANELLA: Does that happen to you often?

>> THELMA GREEN: No, that's not what happens to me. But that's what I have been told. That's how it works.

>> TINA CAMPANELLA: And Thelma has a really good person who works with her on a regular basis that knows her really well. But if someone came in who didn't know you as well, how would that work.

>> THELMA GREEN: That means I would have to train them all over again because I'm not going to have anybody dictate to me but I also work with my providers and they know what I'm going to put up with and what I'm not.

>> TINA CAMPANELLA: What did you share about what you observed other people experience?

>> THELMA GREEN: Like some people, if their aide don't come in, then like if they are out sick, then their cue, which is the person who works with the provider that's assigned, each provider is assigned a certain number of people to a person. They call a Q.

>> TINA CAMPANELLA: Right.

>> THELMA GREEN: And that Q, him or her has to come out and do the stuff that the aide is supposed to do.

>> TINA CAMPANELLA: Right. So when I thought about the future, really what I thought about really would take on I think the issue I identified in particular that everybody would have a voice. And that we would be able to implement the concepts of autonomy and control for everybody in services. I think it's pretty fundamental that we be able to communicate with each person. So I actually see communication as a key to the future. If we figure out how to get functional communication for every person with a disability that -- well, every person with a disability period.

>> THELMA GREEN: But especially for those who can't talk verbally that uses other devices.

>> TINA CAMPANELLA: Absolutely or just can't talk verbally. We also rely very heavily on people to express themselves with words and when people can't express themselves with words, we say they are non-verbal and then sometimes it gets left there. Or in best case situations people might actually have a communication passport or some kind of rudimentary means but I don't know that it necessarily translates into people having real functional communication.

And so therefore, kind of what I see going forward is us making communication a priority. Really utilizing that communication as a foundation for decision making and maximizing autonomy. And I think it will require us to make the most of the technology that's at our disposal. Because as you said, Thelma, there is technology out there that could help people who don't use words to communicate in different ways that you know I just don't see in regular use. And that's not only just here in DC. I get to visit other places in the country. And I just don't see it in use. It's in use for some people. But I think a lot of places there's way more opportunity, simple technology, it doesn't have to be really fancy. It doesn't have to be very expensive. But that's -- but that sort of thing and I think to do that our advocacy has to be about raising expectations.

>> THELMA GREEN: Like technology first.

>> TINA CAMPANELLA: Yeah, like technology first efforts that are happening here in DC but among all professionals. I still see a lot -- too much of people predicting the future saying this person will never -- finish the sentence. And I think we just need to say, people with disabilities are people. And they could accomplish a lot and part of our responsibility is to make that happen. So what would you like to see for the future, Thelma?

>> THELMA GREEN: Well, I would like to see for the future that people use more technology, especially when they can't talk verbally. Like maybe pictures or tablets or some way they can type up their words like Bob Williams does. Because I hate when people say, oh, they can't talk. They can't do that. When Bob does one thing it takes away nine other senses.

>> TINA CAMPANELLA: Do you have a vision for what people with disabilities will have in the future?

>> THELMA GREEN: That's what I'm saying, if they can't talk verbally, then I see in the future where they should have other ways to communicate.

>> TINA CAMPANELLA: What about other aspects of life? Do you have a vision for how people might get jobs or be in the community or move around the community?

>> THELMA GREEN: Yeah, and that's another thing. Even when people in group homes, they need to be able to go out and be able to mingle with people in the community. And in their neighborhoods. And be able to talk and have some freedom. Not everywhere they go some staff is with them 24/7.

How are you going to have any space for yourself if someone is under your foot 24/7?

>> TINA CAMPANELLA: And what would you advocate for us to do differently in order to make that happen?

>> THELMA GREEN: For one thing, advocate to the providers so that they can listen and teach their staff -- mainly to teach their staff to listen and give the individuals the result as a decent -- as a human being. And not a kid.

>> TINA CAMPANELLA: Got it. Cool. Anything else? Words of wisdom?

>> THELMA GREEN: Words of wisdom is hopefully they will be able to find other people to work with, people, if a person is out, if their aide gets sick or something, they should have someone else to be able to fall in.

>> TINA CAMPANELLA: Yeah I think what Thelma is really emphasizing with some of her comments is continuity of support in the workforce is sort of a linchpin to kind of all that I've been talking about so as usual Thelma gets to the heart of the matter with fewer words. So I think that's for us.

>> DENISE ROZELL: Cool. I really appreciate both of you talking about how everything with everyone, my friend and colleague Liz Weintraub always says (inaudible). Both of -- I heard both of you saying all of -- everyone needs control and a

voice and everyone needs to be able to self-direct and not just a few we have gotten to the stage of the few but we haven't gotten to the all. And all means all.

Okay. I promised I would not be the speaker on these. So I'm going to transfer now and see if we can put the spotlight on Melonee. Perfect. There she is. So I introduced you earlier, Melonee, what do you see on the ground, issues left resolved, gaps, what do you see for the future? What do you see for advocacy?

>> MELONEE CLARK: Awesome Tina and Thelma did a great job so I want to focus on what I see on the ground for transitioning youth and I have a lot of families and students between the ages of 14 all the way up to 26 and maybe a little bit older and right now what I see on the ground is just a lack of knowledge about Home and Community-Based Services. Trying to explain that to providers when they are working with families they have not a clue so they only know about special education and that law. And a lot of them have spent a great amount of money. In trying to advocate for their loved ones and they know all about the law. And so those people who are providing them support such as their medical provider, their doctor, and their educator, they are not familiar with the Home and Community-Based Services. And they are not often practicing inclusiveness. So now you have someone who is leading a system that might have been into the system since toddlerhood, early intervention and they are leaving with not the tools and the information and so their planning is totally different, they have a different expectation. And so what I would envision for the future is to help close that gap of knowledge and maybe working on some incentives to educate medical providers more, whether it's the pediatrician or the specialty, therapist, those related services that -- especially those who have -- who go see doctors and they have really specialty care. Because they often are giving families and the youth information that's more limitation and not, you're going to have a great life. Your life is going to just look like your siblings and you're going to have all of these opportunities.

They often don't share that because they often don't know that.

So I feel like what I see is just a lack of knowledge. Youth and families have fear, anxiety, and they just clearly don't know the Home and Community-Based Services what it is. They are just like -- they are so overwhelmed with the transition process and when they get to that.

So I remember about five years ago when the phase was rolling out the pushback amongst families, it was incredible. It was scary. And then now, those who have gone through it are really starting to enjoy it.

So that's one thing. The second thing is I see some people entering into self-directive services not with the spirit of self-directing. They are getting into it because they don't like the options they see but they don't know the value of a Community of Practice. And that is sad. And so those are my two biggest things that I see on the ground.

And also another issue is youth between the ages of 18 and 21 who are leaving

school truly unprepared. They don't even know that they are graduating at 18. And they are just like, the system is just pushing them out. So those gaps -- I guess we call them the gap kids, that's a big issue. That we must resolve and one of the key things I think we should focus more on is increasing opportunities for them.

So while they are in their middle years that they are -- there are continual programs and services that are going to help them increase their self-advocacy knowledge, self-determination skills, independent living skills, employment, like more customized employment, entrepreneurship. So that we -- you might not be going to college or the community college for a certificate program to get into employment right away. But you are getting these skills so that you truly are doing the mission and values of Home and Community-Based Services.

What key issues I feel for advocacy we should keep our eye on, definitely the increased wages of direct support. Whether you're in traditional services like my agency does, we are having difficulty keeping staff. With the wage issue. And now people are not being picked up and experiencing the community and their parents are impacted, too.

So giving people information, especially families, I'm really big on that, before they leave middle school. Like really before -- I was one of the fortunate ones that got it before my daughter left elementary school I got it in early intervention and it changed my trajectory so I'm a big believer in parent university, like education, like we need to treat this like a course that families can get and get those professionals in the financial area, in like people like Tina in Quality Trust having them come out and families really go through a little certificate program when they walk away they have a core knowledge. Not just me offering a two-hour workshop with 25 people in there and they all walk out the door overwhelmed and they shut down. You know.

So that's some of the things that I hope that we would keep our focus on is making sure people are familiar with HCBS before they leave out of their school journey and as they enter into their adulthood life, whether it's 18 or 21, they really have the knowledge that they need to plan a good life. So did I cover everything?

>> DENISE ROZELL: I have to unmute myself. That was fabulous. Thank you.

>> MELONEE CLARK: Okay awesome.

>> DENISE ROZELL: What I'm going to say, I'm about to toss it to you, Derrick, in just a second yeah particularly one of the things you talked about was the wages of DSP, Direct Support Professionals. I think that's a really important one and that we may want to come back to and the parent university idea I love too I'm going to toss it to Derrick I am going to say to you guys I have a couple of things in the chat box. I think we might have a few minutes for questions at the end. I'm hoping. So if you guys -- you all in the network, have questions or Tina, Thelma and Melonee and Derrick have questions for each other that's fine, too, or want to feed off each other that's fine, too but if you have questions you can stick them in the chat box or raise your hand. I think I

can see when you raised your hand. I'm going to have to get Sarah to help if I can't. So just be thinking about that because we might have a few minutes at the end. We'll see. Derrick, I'm going to toss it to you, and you have the questions and I'll let you start.

>> DERRICK WILLIS: Thank you. And thank you, Tina, Melonee, and Thelma for your remarks. Melonee, you were speaking my language, most of you know that for 14 years I worked at the UCEDD in Missouri the Institute for Human Development and my work primarily focused on working in urban communities and working in communities of color and Melonee you're exactly on point when you talk about people just don't have the lack -- they have the lack of information and the knowledge. And also Thelma I don't think you could have said it better in terms of what we need to do. Related to dignity and respect and how we address these issues as we relate to community living.

And when I think about community living, I think about a lot of us having the luxury of leaving our offices and going home and having the ability to live in a place that's comfortable, that's safe. That has amenities. And the accommodations that you need. So when I think about this work, I don't think there's any work that's more important for us to do in this network than to really kind of create this environment that provides this quality of life for individuals that give them these same things that we receive. And I think it's extremely important that we begin to put this as an issue and as an area of emphasis as I did in my UCEDD in Iowa I have four areas of emphasis and community living will always be a part of that as long as I'm here because I believe that's such a critical part of a quality of life for individuals.

So what's happening here is we a part of an initiative called Money Follows the Person. And about a year ago I was tasked with the -- I was tasked with the responsibility of sunseting Money Follows the Person we call it a lack of funding but as most of you know there has been extended dollars that have allowed us to continue the work so over the course of the year we began this journey in 2018. I wasn't here but my predecessor Bob and another lady Brook who is the director of our DD Council ran this initiative. And really have made a significant impact on the lives of individuals in the state of Iowa when it comes to community living.

So what we basically do -- what happens on the ground level is that we facilitate transitions for individuals ranging from toddlers to older adults. Then we focus on the individuals who are on our intellectual disabilities and our brain injury waivers so we use Medicaid eligible individuals and then to this date we've had over 1200 referrals from providers from family members from individuals themselves saying they wanted to live in the community. And then we have a team of transition specialists that now totals 6. At one time we had 12 plus a director. But as I said we were in the process of thinking that we were going to sunset this initiative.

But even when we sunset the initiative, we were going to move and shift our responsibilities and I was going to try to retain as many people as I can on my staff to

continue this work because I believe in it so much. But our shift was going to be building the capacity of others within our systems, our provider agencies, our MCOs to do that person-centered -- to do that individual assessments that have been mentioned before. So we still are going to go down that path but we still have a strong staff that continue to transition individuals into community from nursing homes and long-term care facilities to community life. And right to this date we have transitioned over 770 individuals from nursing homes and intensive care facilities to live in the community.

But what I've also challenged my staff to do is to begin to think about transition is one thing and I think that we need to take it another step, too, to define out and begin to talk about what is a meaningful life in the community. Because I have noticed that we have transitioned a lot of people into the community. But we haven't also worked hard enough to develop that meaningful life for them in the community. Because they can go from one facility into an apartment or into a home and still be isolated and still be not a part of the community.

So my challenge is for us to -- and I think it's a challenge for all of us as we do this work, is to begin to think about what is a meaningful -- what does a meaningful life look like for individuals with disabilities and their family members, as well.

Our goal will continue to be to increase the use of Home and Community-Based Services and reduce the use of facility based services in the state of Iowa we still has two facility-based services. And we target those to begin to look at those individuals with those complex needs and to demonstrate what it could be like and how to bring those individuals and create an environment for them in the community so we have transition specialists that sit down. The process of a transition takes roughly six to eight months because of the care and the attention that we give. And to listen. To find out what do people want what do they want to live what are their behavior needs and medical needs how do we create a care coordination system that wraps that around them so they can live in the community. So as we continue to do this work, we want to continue to focus on eliminating those barriers in the state law and Medicaid plans and work with our managed care organizations to -- and build the capacity of them to see that this is possible and continue to build -- to be build transitions for individuals.

What we have learned through the process is individuals need intensive coordination and ongoing support through this transition process. The systems are so complex, it's very difficult for families to understand and figure out. So having that transition specialist that walks with them, talks with them, gives them advice and guidance throughout that. The other thing we have learned, too, is you just can't put them in the community as I said so we 365 days of wrap-around services to them before we transfer them back into the brain injury waiver or ID waiver and transport those supports back to the agencies that have that responsibility. So once we transition, we stay with them for 365 days following up on them, finding out what their needs are, assessing, finding out if work is an option for them if they want to work how do we

connect them with those services, if they want to volunteer. So it's really around not only transitioning but also doing that follow-up piece.

I guess if I can shift to what are some of the next steps, what are some of the steps that we need to do first, there is some legislation that's out that is looking to make this feuding opportunity in Medicaid permanent. And I think it's in the prescription drug act that's out sponsored by Grassley and I'm sure we can get information out on that.

>> DENISE ROZELL: I'm finding the phone number for you Derrick keep going. Yeah, go ahead.

>> DERRICK WILLIS: But once that's permanent I think it will provide a lot more opportunities for people to get engaged. I know that ACL has put out the demonstration opportunity of \$100,000 for 10 UCEDDs to get engaged I think we need more of those types of opportunities and more of those funding streams that help people identify best practices and move forward and I'll offer up any of my staff to be involved in this if any of you are interested in the funding opportunity and want to consult we would be glad to talk with you about how we have done it and some of the lessons we have learned over the years, as well.

With that, I see we just have a few minutes so I'm going to go ahead and stop. But I talked earlier about providing the direct service provider qualifications and training and support that allows people to stay and live in the communities I think is critical, as well.

I'll turn it back over to you, Denise for questions and maybe some responses, as well.

>> DENISE ROZELL: Thank you. Thank you much, Derrick. And a couple of the things in the chat box, particularly Derrick, thank you, the conversation about what does a meaningful life in a community look like. It's not good enough to just have somebody in the community if they are not getting a chance to live a meaningful life, as well. So I really appreciate that comment, as well.

Okay, a couple of things in the chat box. Let me go back to those first Angela Martin saying thank you to Thelma and Tina for sharing your great ideas. All really does mean all. Not just those who ask for it whether it's a particular service or person directed support or full participation, it means all. And valued membership in the community.

Patricia Morrissey from Hawaii made a comment, what about pushing legislation for a parent academy this goes back to what Melonee was talking about and opening access to parents in a middle school as well as high school. I think that might be really interesting.

They are not always -- they are not getting the information they need in ways that are useful at this point. And maybe there are ways we can do that. And that's part of what Melonee was talking about.

Rhonda saying, I think we need to do more work developing our community attitudes with non-typical partners to shift attitudes and develop a place of belonging for

all.

I wonder given those comments if either Tina or Thelma or Melonee or Derrick, if you guys want to build on any of those thoughts or if you have anything particularly Tina and Thelma since you're the ones who started, if I circle back to you and say so now that you have heard all of this, are there things you wanted to say or hadn't thought about saying or whatever.

>> TINA CAMPANELLA: I just want to reinforce I think Melonee's comments -- Melonee's comments about families are spot on we have started working more intensely with families just to make sure they are equipped with the information that they need to make good decisions. And we find exactly what she said as being the case. People don't understand what HCBS is. They don't understand the pluses or the minuses of going down that funding stream there. Typically they are given a checklist and said go look at some day programs. So yeah, going back to what you said Derrick, about what is a meaningful life, what do you see for the future? And how are all of these resources potentially going to help you or hinder you in achieving those goals are critical things. So yeah, I love the idea of thinking about making it you know pushing legislation, great idea, Pat, about making it institutionalized that working with families during the educational years, not just kids with disabilities but equip families with good information. That will enable them to be active participants not only during the education process but also in planning the transition and really visioning for the future.

>> THELMA GREEN: Yeah.

>> TINA CAMPANELLA: I think families who -- can then be real partners. I think the families aren't really equipped to be at the table as full partners until they get that information. So it's really not a level playing field.

>> THELMA GREEN: That is so true. I agree with that.

>> DENISE ROZELL: I was going to say, Thelma, do you have any ideas on how do we get this information out into communities? Both communities of people with disabilities and communities of families. And how do we get the information out in ways that's useful. Do you have any ideas about that?

>> THELMA GREEN: Well mostly but then everything is a risk. But I know more people are on YouTube and things like that.

>> DENISE ROZELL: Ah.

>> THELMA GREEN: And maybe even go on a talk show or talk to a news reporter and stuff like that.

>> DENISE ROZELL: I think that's smart. Trying to do some things in ways that we don't always -- in ways -- different than ways we have always done it.

Okay. Wait a minute. There are a couple of others. Let's say. Dana said absolutely families don't think about the need for their family member to remain in poverty -- don't think about they are putting their family member in poverty to receive Federal and state services they just hear they have to apply. They don't know what

that means and we aren't helping this -- we're not helping them understand that. Melonee is shaking her head. Do you agree.

>> MELONEE CLARK: I totally agree about that and that early intervention of parent training, we did something maybe a couple of years ago and it focused on financial literacy for early intervention parents anywhere from toddlerhood up to eight and it was extremely informational for them because it was setting that tone and then we were starting to give information about supportive decision making and how you stay and are able. And you know changed it in a different way of them getting the information. And they were so ahead of the game so they felt more empowered. And I like the fact that us looking at different ways to give information to people. So we started something where we did a Happy Hour before we did our workshop. So people were like -- it's more celebratory way. So we had pizza and something to drink and you were able to talk to different vendors and then the workshop occurred. We had people there on time and ready to hear the message by the time the workshop started. So I think we should put more emphasis in being creative in how we get people the information.

>> THELMA GREEN: Block parties.

>> MELONEE CLARK: Yes.

>> DENISE ROZELL: Yes. And I think the other thing, different neighborhoods, different communities communicate differently. So if a block party works in your neighborhood and something else may work in somebody else's and something else may work in somebody else's. Oh, go ahead Liz.

>> I'm sorry. When you were talking about getting materials out, I wanted to know whether Project Action is doing anything in plain languages for people in Home and Community-Based Services.

>> TINA CAMPANELLA: Is Project Action doing anything in plain language for people in Home and Community-Based Services.

>> THELMA GREEN: I'm not sure.

>> TINA CAMPANELLA: I don't think so, Liz.

>> DENISE ROZELL: That's a good question and another way of looking at getting materials out in a variety of formats that's great. I've got one other -- this one, too, Angela Martin Melonee's description of parent school reminded me of the impact that partners in policymaking has always had that's absolutely right it's been so helpful for some many advocates adults who live with experience and young parents of people with disabilities and that's another example of doing things in a different way that's just blossomed in the last 30 or 40 years.

>> THELMA GREEN: Then those parents who are getting older they need to be educated so they are not living by themselves right now or whatever. Getting the help that they need before -- because if they depend on their sibling or relative to assist them, a lot of them are going to be in for a rude awakening. While the parents are alive

they are there but once the parents are alive they are ready to throw the person in a group home or institution. And just come and get them on weekends. Because I know because my biological sister wanted to do it to me and that didn't happen.

>> DENISE ROZELL: That's part of -- I'm sorry; go ahead Derrick then we'll have to close out but I wanted to definitely come back to you if you were going to say something.

>> DERRICK WILLIS: Yeah, I was just agreeing.

>> DENISE ROZELL: Yeah again, I think the conversation that has happened -- I want to thank all four of you this has been a phenomenal conversation -- starts -- keeps us thinking because this is not a new thing about what's going on, how do we do this, how do we change how we talk about it and get the information out and how do we make sure that it's not just a little subset who gets offered Home and Community-Based Services. Or community -- life in the community. Or housing if appropriate in the community or everybody is entitled to that and how do we get there. And I think it's an amazing role for the UCEDDs to be involved in.

>> THELMA GREEN: Also --

>> DENISE ROZELL: Yes Thelma last words to you.

>> THELMA GREEN: Since you mentioned about housing like around here in DC, and it might be in other parts of the world, they make apartments and houses so small that people in wheelchairs can't -- if they -- they are tearing up the walls trying to turn around. They need to go back. And they need all of the states need to have disability people at the table when they get ready to draw up them plans.

>> DERRICK WILLIS: Absolutely.

>> DENISE ROZELL: That -- I was going to say that -- that's a perfect last word. The whole idea of being included, at the table and part of the conversation. Not good enough to be just at the table but part of the entire conversation and the planning going forward and that's what it's about. Thank you, all, I really appreciate this.

My understanding and Anna or Sarah will correct me if I'm wrong -- Sarah is going to start screensharing Sarah you can explain how we'll move into the groups then there we go.

>> SARAH DeMAIO: Yes I'll explain how we will move into the groups. And so what's going to happen is in a few minutes, moments even, Anna is going to click the button to start the Breakout Sessions on the six topics that we identified in our collective impact poll group discussion.

When she clicks that button a popup box will appear on your screen that invites you to join the room that you selected. You need to proactively click the join breakout button. And then you'll be placed into the breakout room. Once you arrive in the breakout room, you will have control over your audio and video stream. So we encourage you to share your video so that these discussions can cultivate that same sense of personal connection amongst network members. That you might have had

during a live event.

If you did not have a chance to select a breakout room or just weren't able to figure out that whole system, you will remain in the lobby. And Anna will be there to help kind of get you to the place that you need so you'll just -- you'll be able to turn on your audio and talk to her or send her a chat in the box in the chat box in the room. To let her know where you want to go. If at any point during the breakout discussions you need to leave your breakout, you can click the leave breakout button, which will be in red at the bottom right hand of your screen. And that will take you out to the lobby, if you need assistance or if you want to move between rooms, that is an option.

Okay. And once we get into the discussion rooms, these are the six questions that we're going to be talking about. And AUCD staff who are going to be serving as a note taker for the session will -- will have notes with these questions on them. They are going to do a quick poll of the room to figure out whether people would prefer to have these questions and the notes up on the screen or would prefer to instead be sharing their video screens so they can see each other. That will be up to whoever is in your room to make that decision.

They can help with any minor technical issues that might come up, as all of us are fairly experienced with Zoom. Or they can help connect you to Anna, if there's a more -- if there are more technical glitches just as a reminder the discussions and the breakouts won't be video recorded but the notes from those sessions will be cleaned up and published on the event archive after we finish up. In the next couple of weeks.

Also, for those who were on yesterday, you may remember that at the one-minute -- when there's one minute remaining in the Breakout Session, a little warning will come up that tells you there's a countdown for the last 60 seconds to just help us tie up the conversations and make sure that all of the final thoughts and notes are all in together before everyone is automatically and seamlessly brought back to this large group plenary space where we'll close out the TA Institute for the day.

So Anna, whenever you are ready, you can go ahead and start the breakout discussions.

>> ANNA COSTALAS: Okay. Let's give it a second. It's working its way. Folks, if anyone needs a captioner, just let me know.
(Standing by).

>> ANNA COSTALAS: If you're in this room that tells me you did not select a room. You can just one at a time your name and what room you want to be in. And the full title would help.

>> DAWN RUDOLPH: Or folks have walked away from their computer for a moment that's possible too.

>> ANNA COSTALAS: That could also be the case. Me and Cindy just chilling. Cindy is the captioner.

>> DAWN RUDOLPH: All right. Amy -- oh you have some names in the chat box.

I hope there's another staff in the room that you sent me to take notes.

>> ANNA COSTALAS: Yes. Amy, I'm going to get you in there right now.

(Standing by).

>> ANNA COSTALAS: All right. And we're good.

(Standing by).

>> ANNA COSTALAS: Yes, it's still on for 3:30.

(Standing by)

>> ANNA COSTALAS: Sure thing. Anyone else? Okay.

(Standing by).

>> Anna this is Melanie, bummer you moved us back, we were in the middle of a very good conversation.

>> ANNA COSTALAS: I'm sorry; I gave you a five minute warning. I gave you a one minute warning.

>> SARAH DeMAIO: Yeah, well we will get to continue those discussions offer break.

>> ANNA COSTALAS: I stopped sharing.

>> SARAH DeMAIO: And I'm going to start sharing.

So let's see.

I know it takes a little time sometimes to make its way through the entire -- the virtual space to everyone. But this is actually the close of the TA Institute. Our first foray into a virtual TA Institute. Welcome back, everyone. I think everyone should be back now. And into the plenary space.

As Melanie shared, we were having a lively discussion in our breakout groups. And I hope you all were, too.

We are going to take about a 45-minute break. Before we start the UCEDD Directors Retreat.

As we are officially closing out the TA Institute portion of our meeting, I want to, again, thank all of you, our participants, for our engagement, your active engagement on all of the discussions today. Our large group discussion. The panel conversation and the breakouts. Thank our Planning Committee members, all of whom contributed incredible experiences and perspectives in shaping this meeting.

And our staff and our speakers who have demonstrated tremendous amount of flexibility in mobilizing to change this from an in-person meeting to a virtual meeting.

And make sure that this is an accessible event for our -- for all.

So as I mentioned, the Directors Retreat will be beginning this afternoon at 3:30 p.m. Eastern Daylight Time. Please note that we do have that revised agenda, which is online.

I hope that you will be able to join us in the continuation of the discussions from this morning related to the Collective Impact that can be made by the UCEDD network as a whole. And the AUCD Network as a whole. We will also have the reward updates in

the UCEDD Directors Retreat. But we have reserved a significant amount of time, instead of doing additional breakout discussions and conversations that we had planned, we're going to actually have a whole group discussion about Coronavirus and how each of the centers and your universities and your institutions are responding and addressing and the resources that need to be shared or developed and kind of all so well commensurate about how stressful and tense this time has been. So we will continue to use the same phone number and link that you have had for the last two days during the break.

This room is going to remain open. We will have a rotating slide deck of the URC staff so that you can get to know us better. We will also have a reminder that goes out at -- when there's five minutes left before the retreat will begin. So thank you, all, for joining us. If you will not be joining us for the retreat, please use the link that is on the screen and it will also be shared in the chat box if it hasn't been already to send us your feedback in the evaluation.

>> Sarah.

>> SARAH DeMAIO: Yes.

>> ILKA RIDDLE: If you stay on, is the evaluation at the end an evaluation for both or should we fill out this evaluation and then the other one for the director's meeting.

>> SARAH DeMAIO: We are just doing one evaluation for this full two-day experience and you can certainly give -- there are plenty of opportunities to tailor to say this works well for the TA institute and that for the retreat but we're just doing one evaluation. We know you guys get surveyed a ton so we're trying to cut it down as much as we can. Thanks, good question.

All right.

>> SARAH DeMAIO: Anna would you let me know when you're ready to go and start the recording. Looks like it just turned on. Great. So it is 3:30. Welcome or welcome back to everyone who joined us earlier today for the conclusion TA Institute.

Welcome to the 2020 UCEDD Directors Retreat.

We hope that you had a good break. And that you are ready for the next two 2 hours and 15 minutes that we have for discussion as a membership organization. With Federal funders on the line first kind of talk together, vision together and problem solve together on the topic -- emerging issues that are facing us right now.

Quick review of our agenda. I hope you saw there was a revised version that's been posted to the Website today and sent out to the listserv.

We are going to start off with a membership discussion where we can share out some of the topics that came up in the small groups in the TA Institute or identifying issues that you feel are pressing as AUCD closes in on its 50th year, that we can be doing together or should be doing together to maximize our collective impact as a network. We'll have some updates from our finance staff, an update from Sachin on the executive search and from Tawara on the conference planning.

And then we're going to save the last hour of our discussion together today to really dig into the response to COVID-19 or the Coronavirus and the higher education settings that you all are in. And Dawn will be facilitating that discussion.

John is going to get us started today and close us out so I'm going to turn my microphone over to him at this point. To give a formal welcome. And get us started.

>> JOHN TSCHIDA: Thanks, Sarah, and thank you, everybody, for your flexibility in transitioning this to an online event. Lots of kudos have already been expressed to the team. But I want to add mine, as well. And I think it's a great example of how we are adaptable, have the competencies in a difficult situation, to maintain continuity of business operations, still meet our goals in meeting the needs of the network. And I hope you've found today's sessions just as good as yesterday's. I know I have.

The praise in our adaptability are related to the next thing I want to talk about and that's our agency's response to the COVID-19 Coronavirus situation. Things have evolved rapidly over the last 24 hours. Here in the DC area. The Governor of Maryland is set to give an address while this conversation is happening I believe. And we expect that that may have something to do with the school closures but know that we are committed to the network in terms of our continuity of business operations. We have developed contingency plans should we need to go to an all remote operation. We will be communicating with staff later this afternoon exactly what that will look like but a key piece of that will be a mandatory telework day on Monday where we are looking at testing our I.T. systems to make sure that we are all prepared and have the tools needed to operate in a remote environment.

This is not a major shift for the organization. As with many other nonprofits and certainly with the Federal Government here in DC we have a culture, a long standing culture of telework, Roxanna our I.T. person is preparing some informational materials, informational tools, fact sheets, to help facilitate that exercise that we will have on Monday.

I have been consulting with many other organizations here in the DC area. Many nonprofits in our states are going toward a mandatory telework arrangement. Others certainly exercising a voluntary option. When we communicated with staff last Friday, we let them know that we have very flexible voluntary telework policy. And that they should be working with their supervisors if they don't have a telework arrangement in place. Certainly our guidance is the same as the CDC guidance when it comes to staff members who are at risk and find themselves in what the CDC has defined as a high risk population.

So our goal is to be flexible. We have a long history of supporting employees and their families in difficult situations. We have very flexible leave policies in addition to our telework policies, have revisited those. And as I said, we'll be sharing more detailed information with our staff later this afternoon.

In terms of our events, many of you, I'm sure, have heard that the Disability Policy

Seminar has been cancelled. Rylan and her public policy team here in the office are preparing for a virtual event or I should say series of virtual events that will take place on Monday, March 23rd. Including the training session as well as a virtual Hill Day. You may or may not have seen that the capitol here in DC is also restricting visitors to non-essential staff and personnel. Tours are being delayed.

We're doing everything that we can to switch those in-person meetings to phone conversations. So that our trainees and attendees can still have a Hill visit experience, albeit a different experience.

We are meeting with our gala Planning Committee on Monday. And we'll be looking to make a decision regarding our gala that is scheduled for next month on Monday. So look for more news about that very early next week. I know I've gotten questions from a few of you. And I know that as your travel bans continue to increase throughout the network, that that's created difficulty for some folks looking to attend. For our Board Members, we do have a June Board Meeting scheduled tentatively. In Utah. For January 15th and 16th (sic).

We will be deciding in the next ten days and working with our contracted hotel contract negotiator to get you an answer in terms of whether that meeting will take place.

The LEND directors meeting scheduled for later this summer we have not made a decision on and are going to give ourselves some more time just to see how this situation plays out over the next month or so for revisiting that conversation.

So the high-level message, business will continue. We're hoping that you as members don't care where we're located. That you're still receiving the services and support that you need. And if you're not, hope that you will let us know and that we'll continue to remedy any glitches. But I would say over the next week or so, if you could be patient with us as we look to ramp up our remote capabilities, test those capabilities. And ensure that we can support you in the way that you all are accustomed to.

I know Troy will shortly be giving a finance update. It's traditional to give a finance update at the beginning of this meeting. My message to all of you that we are operating as best as we can with six fewer FTEs than we had 18 months ago. That we are experiencing some capacity constraints but in terms of our budget we are ahead of where we were a year ago. We received very good news today and got a refund on the hotel contract in cancellation of this meeting so we are experiencing some budget savings because of some of the meeting cancellations that we have had to do. Our high-level goal is to end the year with a surplus. We have instituted a number of organizational efficiencies, contracting through an RFP process to replace some of the communication services that we had when we had a full-time staff member.

Some business operations that Troy has led us through that have also contributed to cost savings and increased productivity and smarter purchasing throughout the organization.

So I apologize, Sarah, I've gone over my time. I don't know if we have time for questions. But certainly if we don't, please feel free to email me directly and I'm happy to be responsive to any questions that you might have regarding the organization or anything that I've just said.

>> SARAH DeMAIO: John, are you going to be staying on for the Board updates.

>> JOHN TSCHIDA: I am.

>> SARAH DeMAIO: It might make sense.

>> JOHN TSCHIDA: I'll be on for the duration of the directors meeting. Thanks.

>> SARAH DeMAIO: Let's do Q&A after we get all of the Board updates and we can do a little Q&A I think we do have some time built in at that point.

So let's move on for the moment to the membership discussion. That we had originally planned to tee up some additional breakout discussions. But this is going to kind of be a wrapping up of the discussions that we had earlier today. And then as topics emerging that need follow-up and as John mentioned, we'll always be responsive in the URC to the needs of the network. So these -- this doesn't have to be the end of the conversation, even though we're not having small group breakouts, we can continue the discussion with the network and take action on any action items that come up.

So to facilitate this discussion, Maureen Van Stone, director of the Maryland Center for Developmental Disabilities is joining us. The focus of this discussion is on areas for collective impact and coordinated activities, specifically in light of AUCD's upcoming 50th Anniversary.

So with that, I'm going to hand the microphone metaphor, microphone over to Maureen Van Stone.

>> MAUREEN VAN STONE: Thank you, Sarah. Can everyone hear me?

>> SARAH DeMAIO: Yes we can hear you.

>> MAUREEN VAN STONE: Great. So it's been my pleasure to serve on the Planning Committee for the 2020 TA Institute and Directors Retreat this is my first time serving in this capacity so it's been wonderful. I want to give a special shoutout to Sarah and to Darcy for an excellent job as well as all of AUCD staff in pulling off this virtual TA Institute and Directors Retreat.

I want to give a special thanks to the facilitators and the panelists who participated in the TA Institute over the last two days. I think we all felt like it was a very rich experience and great discussions.

And it's my privilege to continue the discussions we had earlier today in terms of how we can build on the Collective Impact discussion that occurred in the TA Institute where we broke out into our six subgroups focusing on different topic areas. And determine how we can share information across the network. How we can learn from each other. And how we can learn together in a coordinated fashion specifically around having a collective impact as we think about AUCD's upcoming 50th Anniversary in 2021.

So I think if everyone can open their group chat and people can post or raise their hands and Sarah and I can call on folks to contribute to this discussion. If there's anyone I think we should -- we should mention, if there's anyone who is now joining us for the first time and didn't participate in the earlier discussion during the TA Institute, the six sort of breakout groups were working with various partners, including DD partners, state agencies and advocacy groups.

The second group was person-centered thinking and support for HCBS.

The third was social determinants of health, ACEs, working across different systems and working with partners who don't typically work in the disability community.

The fourth was promoting inclusive opportunities.

The fifth was workforce specifically looking at DSPs capacity and wages.

And then the sixth was rural areas and territories, including infrastructure, transportation and cultural consideration.

So we can open it up to anyone who wants to kick off the conversation this afternoon.

>> SARAH DeMAIO: Thanks, Maureen and just as a reminder for anyone who wasn't part of the earlier discussion you can raise your hand to contribute if you need help unmuting your microphone by clicking on manage -- participants -- there's a button on your Control Panel that says participants. And that will open up a panel for you or a window. And then the bottom of that window is the option to raise your hand.

You can also type a message into the chat box, which is another option on the control point if you would like to be added to the queue and are having trouble finding the raise your hand button.

>> MAUREEN VAN STONE: Dawn did respond that she would like to hear some summaries of the prior Breakout Sessions I'm happy to do that to the extent I can I think I have five of the six summaries and I'm not sure in which orders these are. I know I participated in the third breakout group, which was the social determinants of health and ACEs we had a very rich discussion around California, who has incentivized pediatric clinics and hospitals who are participating in an online training and administering ACEs screenings in their clinics and hospitals. This is new implementation in the state of California. Larry shared what's going on there.

And it seemed like it was a good discussion and a lot of interest around potentially evaluating the implementation of this early screening. In California. He believes it's the first state to implement this and the state itself has created the online training and incentivized it for participants across the state.

So that was one particular group.

I think Group No. 6 who was talking about rural areas infrastructure and resources focused most of their discussion on the Project ECHO model. And in some of the strengths and limitations of implementing the Project ECHO model, including I think that Dr. Mills from the Virgin Islands was talking about being licensed not only in the States

but also in the territories. So that was I think the focus of their discussion.

In terms of the discussion around person-centered thinking and support, --

>> SARAH DeMAIO: Maybe we can just ask for volunteers for that group to report I can give a verbal report from my group.

>> MAUREEN VAN STONE: That would be excellent sorry I'm just receiving all of the notes from those groups I apologize.

>> SARAH DeMAIO: I staffed the small group discussion on inclusive partnerships and true inclusion between self-advocates and researchers was a lot of the discussion that we had. There was a review of the variety of existing resources that helped and a discussion of the barriers that persist as far as attitudinal barriers, there are some workforce development needs as far as preparing researchers for what true inclusion looks like. And a need for additional tools that are -- there was some discussion about how a lot of tools are designed to help families and self-advocates participate in research. But there's less available for researchers about kind of summarizes both the carrots and the sticks to move them in the direction of desiring participatory research models and not just one that invite people to participate as research subjects but to collaborate as researchers or to involve themselves in the identification of research topics at the very foundational level of research.

So -- and that was our discussion.

>> MAUREEN VAN STONE: Is there anyone from the first group working with the different partners and agency and advocacy groups that can report out?

>> SARAH DeMAIO: So raise your hand or unmute yourself or type your name in the chat box.

>> So this is Cindy Thomas I can speak if you want.

>> MAUREEN VAN STONE: That would be great thank you.

>> We talked a lot about both about some of the challenges of working as partners across the DD Network that there's a wide range of different types of relationships, some effective, perhaps some more challenging but I think we did speak to the value of the DD Network working together and thought -- we kind of came up with an assignment for AUCD which was to really be -- if we could develop some kind of a resource that could highlight some of the benefits of network engagement and also pull together some examples of good practice and where the network engagement has really been effective. We did talk about some things that we're thinking about in Massachusetts about possibly doing a joint Needs Assessment. A little tricky because it's not the same for everybody but we feel like we have ways to deal with that. But I think there was some -- feel free other group members to jump in. But I think there was a sense that these relationships vary greatly across the country in terms of how strong the networks at the state level are or are not and I.

>> FEMALE SPEAKER: Other folks to jump in. We did talk about our need to be Switzerland sometimes particularly with -- where PNAs are in the mix which may

sometimes have a little more litigation focus at times.

>> MAUREEN VAN STONE: Thank you, Cindy.

(Chuckles)

Anyone else from Group 1 want to jump in? Everyone is just acknowledging Cindy for her good summary.

So if anybody from Group 2 person centered thinking and support wants to add to the discussion.

>> I think that -- I didn't take notes but I do recall a few things I think were powerful one program I don't remember what university has created -- or attempted to create a Master's level program for people to become leaders in giving support to people with disabilities. Making decisions which I think is very interesting. I suggested a piece of legislation to create parent academies so that parents beginning in middle school can have access to information that will help them make decisions for their children so that they are not blind sided when their kid leaves high school with no organized information about how to proceed and what to do next. Others may have other things. Like I said, I didn't take notes. I listened.

>> MAUREEN VAN STONE: Thank you for sharing. I appreciate it. Does anyone else from the person-centered thinking group would like to chime in, that would be great.

>> DENISE ROZELL: Maureen this is Denise I'm actually the one who took the notes so there was a lot of discussion about making sure we're all talking from the same score sheet, if you will, the song book, if you will, we're all defining person-centered planning as person-centered plans in similar ways and perhaps a definition developed across the network might be useful so that we're all talking together. There was some talk about looking -- how do we change expectations? How do we break down silos and buckets that put a variety of these topics into different buckets when they all bleed together someone said even based on the six topic areas that they had to choose from, at least three of them could have fit into what we call person centered planning or person centered approaches and how do we break down some of those.

There was an emphasis on making sure that when we're talking about person-centered planning that we are recognizing that that is not always in and of itself a culturally and linguistically correct and maybe in fact offensive to some communities. And so we need to look at what that means.

It was a conversation about training, both the folks I think it's Mina who is do the Master's level degree in human sciences but the flip of that is the folks in Minnesota were also training. But they are training folks with lived experience to do peer-to-peer person-centered planning but again how do we all make sure we're talking about the same thing. There was some talk about legislation, as Pat mentioned one specific piece and some other pieces going on about how do we in states convince agencies and others to do something different. And one of the ways of doing that is to give

somebody some money to do something different. And that's a legislative fight so we talked a little about that. And then are there ways that we can come together, ten UCEDDs doing the same project with different emphasis under an RFP process for some way. The point is how can we partner and help spread this beyond just our own university centered lives so person centered planning and approaches and Home and Community-Based Services all of that stuff is out there in a much broader frame and a much broader (inaudible).

And anybody else can jump in some more. But that was kind of the glancing at the notes, some of the highlights.

>> MAUREEN VAN STONE: Great, thank you so much.

>> SARAH DeMAIO: I think the last group that hasn't reported is the one on workforce.

>> MAUREEN VAN STONE: Yes and I can see that Tawara and (inaudible) were involved in that group. I'm not sure who else.

>> SARAH DeMAIO: Deb -- it looks like Deb is raising her hand.

>> MAUREEN VAN STONE: Great.

>> SARAH DeMAIO: I'm going to unmute her. Deb, I have just unmuted you. I think you should be able to speak now.

>> No, I'm sorry that was an accident but I did have something I wanted to say at the end of the session about kind of the history of our work. So can you please mute me until the end, thank you.

>> SARAH DeMAIO: Okay. Great.

>> MAUREEN VAN STONE: Anyone want to contribute for the workforce discussion?

>> Sorry this is Karen, I'm just trying to unmute myself. I'll check my video. I'm using my phone right at the moment.

I've got to find -- so Luis also took notes so I would love if he would join in. We talked about collective data around workforce issues across the network. And we talked about training and that there are a variety of training programs across the network that maybe we should be sharing. I'm sorry; I'm going to try to find my notes. We talked about occupational categories that were not consistent. And that if that was a better -- at the Federal and at the state level.

We talked about Medicaid limits to paying direct service professionals.

And I think that we also talked about wanting -- oh in the training -- let's see, there was a -- I think that Amy said something about reinstating projects of national significance that training initiative projects. And Luis, did you have any other or anybody else on that from that team have any other things? And then we also talked one last thing we talked about wanting to continue this conversation because we thought it was way too big for this however long we had.

>> Hi this is Mary Beth who was on this group, too. I think that the other thing that

we all recognized is that if we could come up with some national professional development activities, opportunities and even module, it would really help the network, all of us, and not just for certain age levels or segment of the personnel space but looking almost birth through geriatrics, what people need to know to do the job that we create or is created to help people with disabilities reach their optimum quality of life.

And there's more that we can share across the network rather than each center doing something separately.

>> MAUREEN VAN STONE: Great, thank you. Anyone else from that group by chance?

Okay. If we want to move on to the sixth group, it looks like Marty is contributing in the discussion box. Sarah, do you want me to go ahead and read that.

>> SARAH DeMAIO: Sure if you would like, I can read it, you can read it.

>> Alexa, turn on --

>> SARAH DeMAIO: I think we were just getting some background noise I'll go ahead and read Marty said for the rural group ECHO was only an example for the larger issues of telehealth we discussed the possibilities of bringing the varied telehealth interests together into a network Community of Practice so that we can learn from each other. Some UCEDDs are statewide telehealth or telemedicine coordinators like Wyoming and others are just dabbling, there's wide experience and lots to learn from each other. There's -- there was also a discussion about the need to address housing issues. Accessible and affordable.

The stock is limited in rural areas. And it's often quote-unquote snarfed when new businesses come into town for example oil booms or a new factory opening, et cetera.

>> MAUREEN VAN STONE: Does anyone else from that group want to contribute.

>> SARAH DeMAIO: Sounds like we got good comprehensive views for discussion.

>> The one I did for social determinants, the one issue that Larry raised was so while it's important to do this screening in pediatric clinics across the state of California and they are incorporating the training into the LEND curriculum, the one issue that was raised was, well, so if these children screen positive, are there enough resources. And what do we do in response to screening positive so it's great for exposure and we ran out and didn't have time to discuss it but I wanted to raise that with the group.

>> MAUREEN VAN STONE: Now that we've had some discussion in terms of what the breakout groups were talking about are there areas we can learn from one another and share and have some kind of impact as related to us celebrating AUCD's 50th Anniversary and I think we're curious to hear from the membership in terms of what that might look like. We have about 25 minutes for discussion.

>> SARAH DeMAIO: I think it might be helpful to share some of the Planning Committee's thoughts on having this discussion related to we have talked a lot about the impact that the network has had for people with developmental disabilities in the last

50 years. Is there something that we could do together to kind of launch us into the next 50 years and make a statement about the power of working together. Not as something that is another unfunded mandate that people get. And certainly AUCD has no interest in providing something saying that everyone has to do something. But is there something that came up in our past discussions that is representative of something that is -- everybody is thinking about or that could benefit everybody that or would help to lift everyone up across the network and amplify the work you're doing. So what might that look like?

>> MAUREEN VAN STONE: So thoughts from the group?

>> Hello, can you hear me.

>> MAUREEN VAN STONE: Yes.

>> ILKA RIDDLE: This is Ilka I'm not really sure but I was thinking something that can celebrate maybe you know over the last two days we have -- or we talked about the last 100 years of achievements. Obviously AUCD came into that in the middle of the 100 years. So we can't all take credit for that as a network. The last 100 years. But maybe just a summary of what has happened and moved us forward over last 50 years and how the network has been involved and maybe provide some examples of that and celebrate that somehow. Would be something that I think we could all do without it being super extra work with us sharing some stories for you or you guys develop a timeline and we can intersect where UCEDDs played a great role in moving us forward.

>> This is Deborah, could --

>> Just so you know we have two people with their hands raised, Deb and Lori.

>> Thanks, Sarah, this comes from what Ilka was just saying which is that I think whatever we do, we really need to capture the paradigmatic aspects of these changes. Because I think where we are presently, it's very hard to understand what -- how much the world has changed. And what our role is in it. So I think that would be an important sort of cross-cutting element in whatever we decide to do.

>> SARAH DeMAIO: Thanks, Deb and Lori I'm going -- you unmuted yourself, you're up next.

>> I did. Hi. Just I think reiterating some of the things that have already been said. But I see in Rhonda's chat she talks about the Community of Learners groups that Marty had suggested. Talking about the idea of providing definitions or examples of what goods/services look like.

I think I'm thinking of something that we can put out officially that does all of those things where we demonstrate and model good collaboration. That we share the definitions and the good examples of works so that people may not envision what's possible for people can take a look at that and be inspired. That's at least my hope.

>> SARAH DeMAIO: Thanks Lori we have a chat from Marty he says as part of Ilka's comment, it will be interesting to highlight our contributions and the various partnerships we have forged and grown or lost in order to make positive change.

Any other thoughts from the group? Olivia has raised her hand.

>> Hi, I was thinking that as we present this, while we want to show our accomplishments, perhaps we want to do it through the eyes that have been the beneficiaries in terms of a voice from community partners, certainly the voice of families, the voice of self-advocates. So I think that's going to be a very important consideration as we present this information. Otherwise I think it's quite self-serving so we really want to think about that as we design or identify what it is we want to present.

>> SARAH DeMAIO: That struck a cord Dana Yarbrough says, yes, the voice of people with disabilities definitely is a must.

And Karen contributed, check out progress in community partnerships. It's a nice outlet for research collaborations. Or maybe we can be ambitious and start our own journal.

I see hands raised, Patricia Morrissey has raised her hand and Olivia your hand is still up. I'm going to put it down you can put it back up if you have more to add.

>> PATRICIA MORRISSEY: Hi there I think a journey would be a great thing but it's very ambitious. I was thinking as a starter we could have just a booklet. With an emphasis on pictures versus words. But covering some of the categories that have been identified. For example, profiling what a couple of UCEDDs have done for individuals, how their lives have changed. Profiles from partnerships that have really worked to bring about systems change.

Some training programs that have had an impact on how things have been made better for people with disabilities. And then not to separate it out but to give an emphasis filling in the cultural competence area. So you would have like maybe three things profiled in each section. And put it as a booklet.

I think when I went to the UN when the disability rights treaty was being developed, I had a chance to speak to 90 countries about the DD Act. And the developing country participants were very, very interested. Because they have no infrastructure. And they found the network that we have through the DD Act is being something they would want to do.

In this country, and in this state, people don't understand the DD Act and how -- what potential it has so I find 20% of my time in every new conversation explaining the DD Act. So I think if we at least started out with a little booklet of some kind that translated to the average person what UCEDDs do, that would be a good start.

>> SARAH DeMAIO: Okay. We've got a couple more chats coming in. Derrick says Olivia took the words right out of my mouth. Matt and Angela both referenced a journal that Utah launched just this week called: The Developmental Disabilities Network Journal. And he shared some language to the Editorial Board and Dana said yes this Open Source journal idea is wonderful. Thanks to Utah for getting this up and going and Rhonda is raising her hand.

>> Hi, can I go?

>> SARAH DeMAIO: Yes, go ahead.

>> Okay. I was thinking about a couple of years ago we had this map that had kind of -- I think it had some hover possibilities. And maybe we could pick some topics like partner engagement or self-advocates or whatever it is. And create something really visual that has a really one page plain language kind of format that highlights all the work we do across the network. I don't know. And I think we could involve our partnerships in some of that like what's important and the work we're doing. I don't know. I just remember that map and thought it was pretty cool and I think it was really focused on policy. But perhaps we could adapt that. Just an idea.

>> SARAH DeMAIO: I'm not sure if there's a policy map -- AUCD has an emerging leaders map that has hoverover abilities and features, emerging leaders and trainees and what they have been doing. I'm not sure if there's another one from the policy side.

>> This was a couple of years back. I'll see if I can go dig it up. But I think it could be a very plain language way that we could also include the voice of the people that we're working with and do some really simple story vignettes to communicate some of this information.

>> SARAH DeMAIO: Dawn and Angela just said there was one that was done around public policy in advance of the gala. So maybe that's what you're thinking. All right we have a comment from Susan. The inclusion small group talked about the possibility of a fact sheet or toolkit that describes for researchers how to engage community members including people with disabilities in the entire research process from the initial questions through analysis. This would make a positive impact rather than or in addition to a retrospective or congratulatory celebration. Karen suggested a podcast that rotates across the network I know some UCEDDs have podcasts but not all have enough content for bandwidth if we all volunteered for a few podcasts that would fill a lot of content.

Maureen says she thinks the map is a great idea.

And Ilka said she agrees it would be helpful for people to understand what the DD Act is and does and what the DD Network is and does.

Relating to the DD Act comment I don't know if others have seen there's a relatively new I think last year AUCD worked with AMCHP to publish a learning module around the cares act.

About where it came from. How it came to be. What it does. What it funds it's more oriented towards education than like community engagement but it might be a resource to look at.

I'm not seeing any hands raised.

But there is quite a lot of chat going on so I'm going to keep reading that out.

There are other -- Karen, there are other maps we could key into. Ilka, maybe a fact sheet on this. And that can be shared with partners out -- I think maybe a fact

sheet on this that can be shared with partners outside the disability community about how like for example how we can help or support them. Susan agrees and an explanation of the DD Act would be useful. And Karen gave a link to an existing map, opportunity insights Deb, before contemplating activities or products around the DD Act network we need to include the other partners in the planning and decision making.

Ilka agrees. Any other thoughts, comments, feedback, suggestions? Derrick likes the idea of a professional video about the DD Act and what we do.

All right. Anyone else?

>> MAUREEN VAN STONE: There's some additional comments in the chat box Sarah.

>> SARAH DeMAIO: Can you read them out.

>> MAUREEN VAN STONE: Sure. As far as the 50th Anniversary is concerned we need to not only look back but also look forward we should reauthorize the DD Act -- what should the reauthorization of the DD Act look like what would the next 50 years bring to our field most importantly the lives of person with disabilities and their families I was responding earlier to Derrick's idea I said including in the video we should include the impact on children adults with disabilities and families. Someone agreed with Tawara. Two people agree with Tawara. Three people agree with Tawara so looking forward is a theme. Based on the agenda we have about five minutes left for this discussion. If anyone has any clothing thoughts about the 50th Anniversary and what we can do.

So Sarah, I guess we can probably just move on with the agenda.

>> SARAH DeMAIO: Yeah.

>> MAUREEN VAN STONE: Thank you all for participating.

>> SARAH DeMAIO: Yeah, this has been a really robust discussion. And I think it will be really valuable and informative. Obviously this is a discussion that needs to happen across AUCD and will include our Board and all of our partners as we think about things to do for next year I think the thoughts and contributions for this discussion has been a really great starting point.

All right. I'm going to get us back to -- I'm going to share my screen.

And get us back to the PowerPoint.

So our next session of the agenda is Board updates or updates on status of the organization.

So we've got finance updates. I think John and Troy are going to offer some financials.

Then we'll have some updates on the executive search from Sachin. And conference updates from Tawara.

I'm just taking a look to see if Troy is on the line.

>> JOHN TSCHIDA: Troy is here with me in my office so we're good.

>> TROY WASHINGTON: If you can move to the next slide we just wanted to give

a quick update, a finance update just overall. Just a few bullets here we had a clean audit as of last year June 2019. Everyone worked hard to get to that clean audit stage but more importantly into this year, this Fiscal Year '20. We do have overall AUCD is stable financially and we projected a surplus, a small surplus in our original forecast of about \$13,000. Just overall. So so far everything is stable. Financially we're better. We're in better fiscal shape this year than we were at the same time last year. We were actually in a major deficit at the same time last year. The reason we're in a better position obviously for a lot of cost cutting, a lot of focus on financials analysis, as well as everyone just keeping their nose to the grind and trying to be as productive as possible and as sufficient as possible just overall. The last one the last bullet point significant effort is being made to streamline all internal processes, internal systems and again just trying to increase operational efficiency.

So the direction is good. I know realistically I know we're all wondering about and are thinking about the impact of the virus and what's the impact financially.

You know, for everybody, you can be as proactive as possible but you've got to take a day at a time. So at this point those numbers don't have any negative impact with the virus but we're going to take it day by day and we'll keep the Board updated as we move forward throughout the year. So that's our update -- finance update in a nutshell.

>> SARAH DeMAIO: Thanks, Troy.

>> TROY WASHINGTON: Uh-huh.

>> SARAH DeMAIO: Next up we have Sachin offering an update on the executive search.

>> SACHIN PAVITHRAN: Is my audio coming through.

>> SARAH DeMAIO: Yes your audio is clear.

>> SACHIN PAVITHRAN: Perfect thank you first I do want to acknowledge the work Troy has been doing in regards to the finances are concerned. Since I've been on the Board Troy I believe is the third Finance Director and is definitely a huge -- there's definitely a huge contrast with how our finances have been handled over the last couple of years or year and a half that Troy has been in this position. And like Troy said, we're in a good position right now as far as financials are concerned.

Also I want to acknowledge all of the staff at AUCD who have stepped up in many different ways. The last couple of months with the transition going on and I know staff has taken up extra responsibilities. So I do want to acknowledge all of the staff for all that they are doing to keep things going and especially John stepping in for the actor director while we're in transition looking for the next Executive Director. So with regards to the Executive Director search, since Andy's last day on January 3rd a few of the things that the Board has been focusing on is updating policies that we have in place. So some of the policies we had in place for transition since last time it was more referring to when somebody was retiring so we had to go back and change a lot of the transition documents that we had so that took some time so lots of January was focused

on updating our policies and also coming up with job description and job announcements. That was a -- that was a good part of our January process. In February we started looking at the search firms where we put proposals out for folks to reach out to us.

We did find a search firm that we came into contract with towards the end of February unfortunately during our first meeting last week although the search firm looked really good in paper and every conversation like myself and Troy and others who had conversations with the search firm looked very -- they looked good for what they were bringing to the table unfortunately last week when our Board met and in our meeting with the search firm, we came to the realization that that particular search firm that we identified was not a good fit for what we were trying to do. We are in the process of rescinding that contract and also identifying a new search firm. We have a couple of interviews set up with search firms next week. So that set us back a little bit in timing.

We're trying to proceed -- we're trying not to rush it so that we don't have a bad process we definitely want to identify the best search firm we can work with.

I feel very comfortable with a couple of search firms that we're looking at that this could -- I think it will help us in our process.

So that's kind of where we are. Our hope is to have a search firm identified in the next couple of weeks with an announcement soon to follow some time early April. Then with the timelines. Our goal at least for now is to have an ED appointed hopefully by some time this summer.

Any questions that anyone might have in regards to the process and what's been going on in the search process?

>> SARAH DeMAIO: Sachin I just wanted to read out a comment that came in through the chat that Lori from North Dakota says that she -- for you, she says, Sachin it's better to go a little slower and get the search right than to get something done fast.

>> SACHIN PAVITHRAN: Yeah and that's what the Board felt and the Search Committee, as well. We felt even though they seemed really good on paper and in some of the initial conversations we had, it was best for us to move on and look for the appropriate search firm so we don't find ourselves in other issues popping up down the road.

>> SARAH DeMAIO: Are there other questions for Sachin? You can either add them to the chat or unmute yourself or raise your hand.

>> SACHIN PAVITHRAN: I do want to touch on the Search Committee real quick. There's 11 members on the Search Committee. We made sure the representation on the Search Committee has a diverse voice on there. Members from the UCEDD -- members from the UCEDD network. There's members from the LEND network. IDDR network. And also a good mix of people with disabilities, someone with IDD. We also have Troy as a staff representative on the committee, as well. So a total of 11

members on the committee.

>> SARAH DeMAIO: I'm not seeing any questions or comments coming in or hands raised.

>> SACHIN PAVITHRAN: I should be on until the end so if people do come up with questions, I would be happy to answer.

>> SARAH DeMAIO: Thanks, Sachin.

All right. Our final Board update is Tawara Goode going to provide an update on the 2020 conference. As it stands right now.

>> TAWARA GOODE: Good afternoon, everyone and thank you for this opportunity to participate in the virtual conference. I think the staff has done an amazing job in such a short period of time. This will be very, very, very quick.

For those of you who are checking out the screen, we have a really wonderful logo. And the theme of our conference is: Achieving Equity: Leading the Way in the Next Decade.

We have an excellent Planning Committee and we went through many iterations before reaching the title.

I will cite that I had a strong bias really wanting us to focus on the notion of equity. Again, we talk about it. Yet we have not really reached consensus on what that means within our network. And because we are starting a new decade and we know this work of achieving equity, at least for me, won't happen in my professional career but what does that look like in the next decade? And that was the idea -- that was the idea for our theme. And -- but our leading change sessions in everything will focus on what this theme means going forward. So it will be at the regular place at the Renaissance Hotel December 6th through the 9th. The call for proposals will open in April. The proposal will close in late May. We need reviewers. From previous conferences we've had a lot a lot of applicants and proposals to submit. So we do need assistance. There will be call for awards in May, as well.

And then early September that we will have notifications go out in terms of how many folks that were accepted. We are making some slight changes. Particularly in the number of people who will be accepted and assigned to individual Breakout Sessions, there's been a lot of complaints in the past about those up to seven, eight or more people on a panel. And some things aren't related. So we're taking some steps to do that.

And I want to acknowledge in particular Martin and other members of the AUCD staff for leading the way in doing this work. It's -- they have it down to just -- I don't know, a fine toothed comb so I don't want to take up more time about this. If there are questions, please include them. But we're very excited about the theme.

>> SARAH DeMAIO: All right. We have about ten minutes. If anyone has questions on any of the topics, the conference. The AUCD finances or the executive search.

I don't see any hands raised but I'm going to give a little time for people to think, if they have questions.

And if we don't have any, then we'll move on to our discussion about responding to COVID-19 in higher education settings.

Dawn says thank you Tawara for your leadership.

>> TAWARA GOODE: Thank you, Dawn.

>> SARAH DeMAIO: And Deana also says thank you.

All right. Not seeing any other questions or comments coming in over the chat or hands raised in the participant list, we'll go ahead and move on to our next -- the next portion of our agenda, which is -- just got put in today. This morning.

Dawn is going to facilitate a group discussion about the Coronavirus and responses in higher education settings. So I'm going to hand the mic over to her.

>> DAWN RUDOLPH: Fabulous, thank you so much.

It is near the end of our day here and I'm going to ask if folks could help me out and if you could turn your video on and if we could put it on gallery view, I would love to see everyone talking together about this. And then I'll feel like I'm in the same room with everybody. That would make me really happy. Can we do that? All right. Oh, look at all of those faces. I have missed you all.

You know, it would have been a hard TA Institute and Directors Retreat if we had to do social distancing because I like to hug each and every one of you those of you who don't like hugs must really be enjoying this right now. I'm glad to see so many smiles. I do want to thank Olivia for sending the message early this morning about hey can we talking about COVID-19 today. Because obviously it is top of mind. Many of us have had to step out of this meeting yesterday and today in order to coordinate responses where you are.

And this is a perfect opportunity for us to just share our experiences, share our approaches, do some problem solving with what is right immediately in front of us. I do not have an agenda. I think the best place to start is just to ask you if there are things that you really want to make sure to talk about in this next hour or so. So we can make an agenda on the fly and then go through those topics that way. I'm happy to write down agenda items and I'll keep track of all of that. And Wayne, I see a hand raised. Is there anyway to keep track of that.

>> Dawn I think it would be interesting if you could put up a poll our university closed today so we're moving all of the students to doing distance learning for the rest of the semester and I wonder how many other UCEDDs are seeing the same trend that are here on the call.

>> This is Olivia --

>> Maybe we can raise our hands on the participate list.

>> Oh lots of hands.

>> DAWN RUDOLPH: We could just do that. Raise your hands on the participant

list if your university is closing. There's a good number of hands. I see -- okay I see Nebraska. I see North Dakota. Massachusetts. Ohio, Cincinnati, USC, North Dakota, my institute in Sacramento, Virginia. Let me scroll down, Wyoming. Iowa. New York Westchester. New York Rochester. Montana, Delaware, Kansas, Utah, Wisconsin, Evan Dean I feel like I know where you are, are you also Wisconsin North Dakota.

>> I'm in Kansas, too.

>> DAWN RUDOLPH: Kansas I knew I knew the name to that one it's like a matching list it's like I knew the names and what state everyone is in. Thank you, Evan. West Virginia, Arizona, Connecticut. Rochester. Georgia. IHDD.

Yeah. There's a lot. New Jersey. I'm going to keep scrolling. I think it's a good number, Wayne.

>> SARAH DeMAIO: There are some in the chat, as well.

>> DAWN RUDOLPH: Oh, I didn't even look there.

>> Dawn.

>> Dawn.

>> Go ahead.

>> Go ahead, Olivia.

>> Well, I was just going to say that our university is clothing but we're like north and South Campus so the north campus which is the academic division which is the research -- versus the research institutes and medical centers are all open so we are open but the university is closed so I just wanted to say that there's also that situation.

>> This is Wayne, I should clarify. UNMC is not going to close. But all of the students are no longer taking class. And this is true to the NU system by coming to the university all of the courses are going to be taught via distance learning.

>> That's true for LA too.

>> This is Marty in Montana. And I think that's the case for many of us. The university is still open. Classes are going online so the challenge we're having is particularly with our programs that are very public focused, how do we continue to keep our public service programs open in a way that keeps our staff and our faculty comfortable and safe when there's a public perception that there's some sort of a problem because students aren't here? That's something that we're working through on a day-to-day basis. I'm interested to know how others are dealing with it.

>> TAWARA GOODE: This is Tawara for some reason I don't have the raise my hand feature on my computer. We don't really have the luxury of making that decision. The university policy, which was disseminated yesterday, basically says we're doing telework. And that unless the activity in which we're engaged is so critical that we will not have meetings, doing community activities for anything that will involve Facebook with the public so that we don't really have an option.

>> ILKA RIDDLE: This is Ilka in Cincinnati so our universities are all closed. But

we just received notification that also all of our schools will be closed as of Monday for the next three weeks. And so we have been -- or I have been following our agencies, provider agencies discussion around what to do when we now have the workforce also being impacted in terms of providing care. If they are home with their kids, if they can't find child care because you can't go anywhere, how do you provide care and services to people who actually need it. We also have ongoing discussions around restrictions to visitation in hospitals and nursing homes, in ICS, which we understand. On the other hand there is a whole group of people that will be impacted and we are not really sure yet what to do in terms of not being able to go anywhere or getting the services they need in order to be included in their communities.

And so being in some ways stranded without supports. So we're looking at that as well.

So there's going to be a lot of issues I think in the next couple of weeks in terms of how do we support our families, people with disabilities, while we are supposed to do everything online.

>> This is Sue from New York. I feel like we got hit probably about two weeks ago. So I think we're probably about a week ahead of everybody. And it's all I'm doing. New York is the epicenter. New Rochelle is in our County. New Rochelle is now under containment we have staff who live in that area we have staff who were exposed to the man in new Rochelle who have come into our building and are now in quarantine we have had to up all of our cleaning procedures every night we do a deep disinfectant. We are not closed. We are not going to close unless we get forced to close but we are having major cancellations of appointments.

We're very worried about the financial impact of all of this.

Today I've been working on a -- we're banning all travel. We've got people who are out traveling right now. We're going to ask them to work from home when they get back. We're instituting a telecommuting policy. But obviously the people who do direct service and see people, we have to be here.

But it's -- and it changes literally by the hour. About an hour ago, the Governor instituted a ban on any gatherings of 500 or more. Broadway is shut down. I mean, that's how serious New York is getting about it.

So it's been -- it's been a really -- I've never experienced anything quite like it. And yet, in it all, trying to not get people panicked. You know, as we're implementing all of these policies, trying to say, but stay calm, it's really low risk, it's okay.

It's been very difficult. And I think the financial impact to us, to the economy, to people in the community is just going to be huge.

And so trying to be sensitive to people, if they can't work. A lot of schools have closed. Single parents. We had two parents bring their child -- children into work when their school got closed and we said, no, you can't do that. And I feel terrible because I'm so sensitive to the plight of working parents. But in this case, the school is

closed because of potential virus and we can't have people here, even if -- no matter how remote the chance of they are being positive is. While we keep saying the risk is still low we're going to take all of these drastic measures so it's been -- it's really been something.

>> SACHIN PAVITHRAN: Sorry.

>> Go ahead.

>> SACHIN PAVITHRAN: I'm sorry; I couldn't find how to raise my hand. So I'm going to jump in. I know a lot of universities are going online, even Utah State University. One thing I fear what's going to happen is the accessible VPs when it comes to online learning most universities barely function when it comes to accessibility and this is going to create new obstacles for disabled students. So I see this as space for -- a role for UCEDDs to play in interacting with all of these online classes coming up. Because I'm certain a lot of the universities haven't even thought about how they are going to deal with accessibility.

>> DAWN RUDOLPH: I see a hand up from Danny Armstrong.

>> Hey, we're dealing with the issue here at medium me and we're in a medical school. In a large urban area. And we've got several issues. And our group is working on how to modify distance learning to deal with our LEND training around advocacy issues. We're trying to figure out how to do clinical service supervision for folks who need hours for their internships and things of that nature.

At a hospital level, and a community level, I've been -- I was on a flight getting in today. We're involved with developing policies around allocation of resources. There are only so many ventilators for instance in the system. And trying to make -- ventilators in the system and trying to make determinations about things like do not resuscitate orders if we are hit with a large number of individuals needing that. And built into that are issues related to vulnerable populations about how decisions will be made related to people with disabilities and children.

The other challenge is that we have about 125 affiliations with external community organizations and agencies. And more than half of our outreach is in the community. And we're trying to look at how do we deal with support. Not just for individuals in the community. But with community agencies.

And these are all interesting challenges. But we're also looking at them as real opportunities. And as Sachin said there are real challenges about accessibility that we're trying to overcome. Trying -- I've had real struggles with some of my staff who have said, well, I really can only do what I do face to face. And I've kind of said you can't do that because you may not be allowed to come to work. We're not quite at that point yet. But there could be limitations in the future.

So I think there's an opportunity for all of us to learn from one another about what we encounter and what we are able to come up with as solutions. And my suggestion -- my suspicion is that what will work for me in Miami is not going to work exactly that

way for Sachin in Utah or folks in Montana or New York. But we will likely find some real opportunities to learn from one another.

>> DAWN RUDOLPH: Thank you, Danny, I see a couple more hands up I'm going to go Cindy in a minute but I also want to recognize that there's been a couple of comments in the chat box with several people wanting to make sure that AUCD can represent the network to the funders. And I want to let you know, we have had already two conversations with ACL specifically about Coronavirus. They are you know scrambling to figure it out, just like everybody else is.

But with possibly less direction and guidance and resources available than we have.

And I think the closest -- the closest comparison that I can make actually is with the territories and what the territories experience when they have a -- when they have had -- when they have experienced disasters and their entire work plan gets thrown out the window because they didn't anticipate Hurricane Maria they didn't anticipate that typhoon and everything they had planned and would be reporting to the funder had to just change to meet the current needs. And the communication. And the support from ACL was solid.

I feel very comfortable saying that ACL understands that this is going to impact everything. It's impacting them, also.

Of course -- of course we'll take this message to them again from this meeting.

But if it helps to have any reassurance right now, what we have experienced in other cases of emergencies has been nothing but support and flexibility.

>> This is Pat. I just sent a link to Sarah. Marcy Roth and a group called Partnership for Inclusive Disaster Strategies have written a letter to Vice President Pence and they are looking for people to sign on. We did. And the main message is make sure you include references to people with disabilities in all of the statements you make with regard to what needs to be done.

And so Sarah can share that with everybody, if they want to join the letter.

>> DAWN RUDOLPH: Thanks so much. There was a comment in the chat box that AUCD signed on to the same letter, also.

Cindy, you've had your hand up, do you want to share?

>> Yeah, I mean I think a couple of things. One is being in a university but not doing a lot of traditional academic stuff it's been interesting to try and really manage the communication for our institute. Because everything comes down about students, about faculty, about online courses. And certainly that's important opportunity business but when I have staff who live in Japan, California, Maryland, all over the country and who are engaged in other kinds of work, it's a lot of the formal responses we get from our University System don't quite hit the mark. So we have been doing a lot of sort of mini grant of that.

We also provide direct services. We provide employment supports for folks. So our staff are not yet forbidden for going into the community but we're talking with them

about how they make those assessments. They are doing some technology assessments with their jobseekers. And people who are working to figure out can we quickly turn around some folks to learn how to use FaceTime and are there tools that maybe they haven't been using. We're contacting employers to get a sense of what their level of tolerance is going to be for folks to come or not come to work.

But most importantly we're doing risk assessments with each of our individuals and health conditions, who else might live in their households, who is at risk, so that we can then support individuals with their teams about being intentional about what they are going to do. And to me that's what's important.

I mean there's a lot of people working in our community. We've got you know -- we're not like new Rochelle but we're also not like Minnesota we got a lot more going on here Biogen made us a big problem.

And so you know we are -- our staff are still going to be -- going to be going out into the community but we're trying to really mitigate the level of risk and help ensure that they personally are okay. And that -- but that we can't abandon our jobseekers, you know, our folks who are working so we're just trying to walk that tightrope to keep things -- keep people supported as they are working.

I think for employment, I think what -- think about what the jobs are that most people with intellectual and developmental disabilities do in this country. Most of them are publicly facing jobs and they are not the people who are going to be able to go home and telework. And we've already had from an economic impact just since yesterday three people who are either furloughed or laid off because they work in academic settings, education is one of our biggest industries in Massachusetts. So people get -- our now potentially unemployed. At least for -- problem for the rest of the semester. Because we're probably -- many schools here are going online for the rest of the Academic Year. So it's a lot. I think supporting our staff. Dealing with the university administration. You know and supporting the people that we provide services and supports to to make sure we still meet their needs but at the same time we help keep individuals in the community safe.

>> DAWN RUDOLPH: Thanks so much, Cindy, I see a few more hands up we can go to Karen and Melanie and then Lori.

>> Yeah I just want to reiterate what was said I think sometimes we have to be proactive. Yesterday I mean I've said to the staff that I supervise that if you're non-essential we practice and we have been doing the telecommuting but in terms of research administration on the co-PI of a program that does home visits and my partner had come up with a plan and I said let's check with our research administration and yesterday they said -- I think I was one of the first people to approach them they said well you should still go but all of the usual sort of issues. And then today we get an email, no home visits. So I'm just saying sometimes we need to be the people who are kind of on the frontline when it's appropriate.

>> DAWN RUDOLPH: Karen, I'm really glad you made that point. I feel especially because we work in the disability community the health status of folks can be so much more fragile. Those with autoimmune disorders. It's just more fragile. And we have an awareness of that that maybe others don't so we can be on the forefront of making recommendations yeah. Melanie.

>> I'm going to follow exactly with that but from a -- but from a slightly less positive note so we also only do home visits for research. We're in the middle of a single case research design so we've gone to three peoples' home 16 times and we need to go 9 more times in a row for our single case research design. So the university said that we can go out for outpatient visits. So does that mean research outpatient visits? And then our department said, no, you can't go out at all. A.

>> DAWN RUDOLPH: Oh you just muted yourself somehow. What happened. Melanie just muted.

>> Better?

>> DAWN RUDOLPH: Better, thank you.

>> So our researcher called the dean for the School of Medicine and said, I'm getting mixed messages and the dean said, yeah, mixed messages because everything is changing every day. But he gave the researcher a perspective that I hadn't thought about before.

So we only have two researchers going out. They are not affected. The people with disabilities are in their homes. The people in the homes are not affected. And the dean said, well, if the person in their home becomes affected and dies, then the university is liable. So they took on that -- I hadn't that about -- thought about that perspective. The liability perspective at all. But that was another piece to me that really opened my eyes. To another level not only health and services but another level that is being considered.

>> DAWN RUDOLPH: Thanks for sharing that. There's a couple of chats in the chat box to raise on the topic of telehealth. Sandy in Colorado says we're going to do some in-home telehealth for some previously planned home visits as well as for some follow-up clinic visits and Larry at UFC we're trying to do the same using telehealth as much as we can for in-home support services.

And then Sarah shared a link passed on by Maureen Van Stone around Department of Education guidance about the impact on kids with disabilities under IDEA. That might be a helpful resource up in the chat box to click on.

Lori, you next and then Marcia has a hand up after you.

>> LORI GARNES: Okay. So just a little piece of advice perhaps to remind everybody that this isn't business as usual. When you live way up north, you get a good blizzard generally once every two years and it shuts everything down for days. And one of the things that I really had to learn from coming from a Cleveland and moving to a North Dakota was that your priorities need to change. It isn't about getting

everything done that you always do. It's about triaging and figuring out what is important to do.

And taking it in terms of who is going to get hurt by this. That's what we need to take care of first.

And sometimes you have to ask for help. And so you know in the middle of the blizzard, we may not be able to get ourselves to somebody's house or to somebody that needs us. But we can get snowmobiles in there. And so you know rallying your community to pick up those pieces that you might not be able to do on your own to kind of make do until it is business as usual.

Because it's just a matter of time until it's back to normal.

But I think people feel like you have to get everything done that you normally would do and this isn't going to be that time.

>> DAWN RUDOLPH: Wise words. Marcia, did you want to share?

>> Yeah, I just wanted to piggyback on the UCEDDs teleconferencing thing and one of the things that's actually been positive here in New Mexico is a quick and aligned response with our state agencies, including our developmental disabilities support group that almost immediately went to CMS to get permission to use Zoom and teleconferencing for billable services which are not approved right now in our plan. So that was actually really reassuring for everybody we still don't have an answer but the fact that they did that on behalf of the system.

And the other is we kind of piggybacking my earlier comments about working cross agency at our state level through our home visiting system or our early intervention system, there's absolutely been a coordinated effort to give guidance about how to use and even suggestions on how to frame your documentation. So that you will be paid. Because there is a huge concern here as everywhere about the economic impact especially direct services there still be because we have a number of families cancels because they don't want to be exposed but I wanted to share that at the state level that coordinated effort has been helpful and we received news from our Governor Mexico is not New York. Large gatherings of 100 or more so it's all relative.

I also want to share I wrote in the chat UNM is explicitly not closing because of the negative impact it would have on minority students and students who don't have other places to be.

And on their academic progression. So that could change. But I thought that was a really -- a really lovely email was written about the need to support our student body in multiple ways.

>> DAWN RUDOLPH: Thanks, Marcia. Danny, you had a hand up, also.

>> Yeah I just wanted to follow up on Lori's comment. We have hurricanes in South Florida that are disruptive but we were looking at some things this morning in terms of the experience with the virus in China and Italy and South Korea. I think what we need to do that's different from a bad weather storm or something else is to think

about the start to finish of this and it's not finished in China but the downturn is about four to five months. So this is not something that's going to be over in two or three weeks. And we need to be thinking about planning for a long impact period that will be disruptive. And then triaging about what we can do but also utilizing that as an opportunity to think about, well, this is more than two weeks. And we may not be able to convene groups for a period of time. So how do we handle that. Because I think -- I always try to go to the evidence. And that's what the curves are showing in that area and it may be different for us because China cracked down on it in Wuhan very quickly and limited the spread and we have not done that here with our testing. So it could even be a little bit longer period of time. So I think planning for that will be a critical part.

>> DAWN RUDOLPH: Yeah, thanks for sharing that, Danny and there's a couple more chats in the chat box and I do apologize I've missed a lot of chats also so if you wanted your chat said outloud I'm sorry I missed it chat it again but Larry says one silver lining in all of this is the instantaneous use of telehealth services and adoption of modality for wider use and a couple of folks have agreed with that. I feel like there might need to be a caveat on that because I feel like there's a lot of underresourced communities and families who don't have WiFi in their home, who don't have the ability to have the technology, the resources, the equipment in their home. So that's really an opportunity for us to think about problem solving with that, too.

What are some other areas? Other things that you're struggling even with your programs or your universities. Anything like that? Your staff, yourself? We want all of you to be healthy.

Anything that we can help out with from central office standpoint? We have No. 1 talk with ACL and I'm sure MCHB.

There's a couple of chats in the chat box.

Lori mentioned that almost everyone, even the most disadvantaged have a SmartPhone. Marcia shares that they have been providing hotspots for families not perfect but can help with access. That's a great solution. And Karen, Karen has her hand up in Alaska.

>> Yeah I was just curious, we are at NCI state for the first time this year. And they communicated with us a couple -- maybe about a week ago that if we were impacted by the Coronavirus, it would extend our data collection time. I'm just curious if other states are being impacted. We have actually -- Alaska is one of the few places that has not yet been hit by the Coronavirus. I suspect it will come after Spring Break when everybody brings it back from the lower 48. But I was just curious of other states and what are their plans? What do you plan on doing?

>> DAWN RUDOLPH: Rhonda?

>> Well, we have been -- that's pretty much what I've been doing on the side of this meeting. And since probably last Thursday. We were navigating kind of the university

policies that literally come -- changes -- Melanie said daily. I'm going to disagree and say hourly we're getting some other update. And everybody is trying to do the best they can about advising whether or not we can be out in the field. What that potentially means for people who are in group homes and adult foster care homes and where we're doing individual in-person individuals.

We put -- I made the decision to put the project for data collection on hold on Monday. Until we could get some clear guidance from our DD state partners, HSRI and our university. This morning made the decision to pause the project until this passes. That it's just not -- for us not -- considering the situation in Oregon not responsible to have people out in peoples' family homes at this time. And partially, you know, because our -- everyone's goal is health and safety and so it will pass. That's kind of what we're saying. I am now dealing with a very real issues around we have part-time interviewer staff hired and they are not going to be working on this project, which impacts their livelihood. So I am working on a plan to figure out how I can provide them some assignments and move them into some work on our core grants at some limited hours to do what I can I'm really deeply concerned about layoffs and pressing our university to support me in helping provide kind of some financial support. I don't know how far I'll get on that.

But it's just been a challenging time. And stressful for the folks -- our employees who are out there that rely on this money in their family budget. It's a very real impact that is taking place.

So hopefully if anyone has good ideas on how to manage that, I would love to hear from you.

>> DAWN RUDOLPH: Thanks for sharing that, Rhonda. There are a few chats in the chat box specifically related to NCI and I see some hands up, also, I'll run through the chats first and then the hands. Angela then Amy then (inaudible) but in the chat box Eric in South Dakota shares that -- shares that South Dakota has NCI and has an extension for in-person interviews assisted living centers and nursing homes are closed to visitors.

Brian in Delaware, we are also in the process of figuring that out. We paused surveys for today and tomorrow at least in accordance with classes being cancelled today and tomorrow in order to work with the state to figure that out. But as of yet, no plans. But I wouldn't be surprised if the pause lasts much longer we may consider creative means for conducting surveys but that's tricky for a variety of reasons.

Then there's a couple of suggestions that AUCD convene a meeting of the UCEDDs who are conducting NCI interviews so that there's a group plan. Folks -- and then Dana has a question for Eric, did you ask for that extension or did you hear directly from the funder?

>> We actually just had a planning call just yesterday. And during that call kind of came to the mutual decision it would be in everyone's best interests to just hold off on

doing those interviews.

We don't have a timeline. We're kind of waiting to see how things unfold. But my guess is that we'll probably be into the next year. So it was kind of a mutual decision.

>> This is Wayne from Nebraska. We received notification from HSRI that it was extended to June 30th.

>> DAWN RUDOLPH: Okay. And there's a couple more chats in the chat box related to this. Rhonda shares there's no hard -- we have a hard no on shifting to any technology supported data collection. Deana in Virginia shares that they are concerned about bringing the virus to the person to conduct the interview. And Dana in Virginia, we're holding off on interviews, it's a concern for the interviewers who rely on getting paid of course.

All right. Let's switch to the hands up in the participant portal I guess I'll call that, Angela?

>> ANGELA MARTIN: Yeah this is Angela I just wanted to reiterate maybe I know in AUCD there's so many NCI UCEDD states that we kind of get together and came up with a plan both for data reasons but also just for reduction of confusion. I think to Danny's point our goal is we're meeting with our interviewers on Monday and we're meeting with the state next Thursday but the challenge is that we were going to ask for June 30th but the way things are unfolding I don't even know if June 30th is a realistic finish so I want to come up with Plan B, C and maybe D, I don't know, I don't know how far to think ahead. But we're getting interviewers telling us that they are not going to do the work and we don't have to backfill. They are contractors. But I would really -- it would be great if we could convene -- if those that are interested to come up with a similar plan and then all UCEDD states take the same approach or at least a somewhat similar approach if we can't do it exactly the same so I would be interested in that meeting if it can be hosted.

>> DAWN RUDOLPH: Amy Sharp, I see your hand up.

>> AMY SHARP: Yes, thank you, Dawn, what about AUCD and the emergency preps conducting a webinar for the AUCD Network and maybe the DD partners on planning for people with disabilities in relation to the COVID, to the virus. And maybe pulling in some of the expertise from the UCEDDs at hospitals and get that medical perspective, as well, as well as the disaster planning.

>> DAWN RUDOLPH: Good idea we'll share that with the CIG (phonetic) and I think probably our public health team.

And related to that, is there anybody on the call from New Hampshire? New Hampshire's center for services has been developing -- they also saw a posit resources that are a little more understandable in different languages and in plain language and there's a lot of information that's being shared certainly our office is being asked to only share information from CDC and AUCL so we're not really sharing any other resources other than that quite broadly but I've been forwarding resources to New Hampshire

since they started requesting resources for this page so I'm going to share this page in the chat box and if you all find anything that's helpful among that resources for you to use in your communities, I wanted to make sure you have that. Thanks.

Karen Heath, you have your hand up again and then Tawara.

>> Yeah, so I was just going to mention as far as the NCI, sorry back to the NCI technology piece, we in Alaska actually are the ones that are piloting using technology because of the ruralness of our state so we will just power on and maybe get it done quicker so that you guys can all keep that technology system as well.

>> DAWN RUDOLPH: Thanks, Karen, Tawara?

>> TAWARA GOODE: Yeah I want to go back to what Danny was saying about longer term planning. We know that our university is operating quote virtually through the end of the semester. So they made an announcement that we're working, teleworking, et cetera, through May 15th. And we have several conferences that we're thinking of doing in June and July.

Sooner or later, and I think it will be sooner, we have to make decisions as to whether or not we can go forward with those. And there are cost implications. So I don't know who has done the forward thinking about that this may be long term. It's really the Ebola virus was long term and we also don't know a whole lot about this virus I read something recently and I'm not contributing back to (inaudible) but the few children that have contracted the virus, and this is from China, shared the virus for 30 days not this 14 days that we're talking about so I just think we're at a distinct disadvantage in terms of really knowing the full impact of the virus. And how do we plan for events coming forward.

>> DAWN RUDOLPH: Thanks Tawara.

Anything else that would be beneficial to bring forward? To problem solve with your peers and with us. I feel like we all know we have more questions than answers at this point. I'm really glad that we were able to take this opportunity to sort of share strategies and concerns and approaches and ideas together. Plus I'm happy to see your faces. Plus I like your haircut by the way.

>> Thank you.

>> ILKA RIDDLE: Dawn, this is Ilka, I think what would be helpful, I agree with you that right now we all have a lot more questions than real answers but maybe AUCD could facilitate over the next couple of weeks for us to kind of be able to share things with each other as we move along in our states' approaches to this. I think it would be really helpful if we could all stay in touch in terms of like how do we address the issues that we are facing how do our states address them how do we do as you said in terms of our work I think it would just be really helpful to see across the network what are people doing. I think that we can learn from one another, support one another. So I don't know if AUCD could facilitate that, especially if this is longer term. How we have to conduct our business and our work.

>> DAWN RUDOLPH: Ilka, thank you for raising that, I was thinking that exact point earlier today before this meeting started. Over the course of the meeting and I think even in this discussion I've heard a couple of requests of things that AUCD can do and in my head I'm thinking okay we're super short staffed we've had a few layoffs recently and maybe some of you have seen we just got a resignation from another one of our key staff very recently so we truly are working on a getting close to understaffed place. So when I think about the things that you have been asking for us to do, sort of coordinating around the NCI, I almost think it would be a value added but it's maybe not as big a priority as maybe if we could have a twice a month call like this where we could just problem solve. I feel like there might be other -- you know any of you who are involved in NCI could probably take the lead and reach out to other UCEDDs who do it and figure that out. I feel like that can be done without us. But I feel like a call like this periodically with the network, not just with the UCEDDs but with the LENDs and with the IDDBRCs together is something that falls more squarely in what we really ought to be using our limited bandwidth to do.

I don't know if that rings okay with everybody else. I'm just trying to balance our staff needs, also.

I'm finding myself saying -- I feel like I'm checking in. Is it okay for me to say yes to Ilka and no to the NCI I think I'm just asking that sort of bluntly.

>> ANGELA MARTIN: Dawn, I'm just speaking -- I think what the list of group of us that met in November, we could send out an email and see if we can coordinate ourselves either by a date and time or we can do something online so absolutely. I'll put that out to the group that way.

>> DAWN RUDOLPH: Okay. I appreciate that.

And then I do want to say yes to a periodic call about sort of as things progress with COVID-19. How often do you think -- we don't know. Because like you say, things are changing by the hour. But what's reasonable as a place to start maybe like when should we do our next call? In a week? In two weeks.

>> ILKA RIDDLE: Hey Dawn this is Ilka. I think we did this very successfully for another issue and for some reason I cannot remember the issue, believe it or not but we had regular calls. And I think we started out with weekly calls. And then it moved to like monthly calls until it was no longer needed. So -- so right now --

>> SARAH DeMAIO: If I'm -- I think we did it when -- with the Administration transition.

>> Yeah.

>> ILKA RIDDLE: Yes, I think that is correct.

I mean that worked -- it worked really well I think. I think you could give it a try. I think if things progress as they progress currently I think a week gives us plenty to reflect upon or talk about. Since we have hourly kind of changes.

>> DAWN RUDOLPH: Yeah. Yeah and we know for ourselves our own work

plans are going to be like we have to figure out what we can do, what we can't do, these things can't happen, can they be virtual you know all of the same stuff that you're doing but we can certainly bring to you the knowledge that we're getting from our Federal partners and then have opportunities for you to share with each other what's working and not working and questions that come up.

All right. That's a good idea. And thank you for helping me prioritize what we can and can't do and for being generous and saying no. I don't like to say no to you all I feel like I'm here for you all. But sometimes . . .

Anything else that's on your mind regarding COVID-19? Going once, going twice. All right.

Then we might just get a few minutes back earlier in our day I think we may have come to the end of that discussion and I think John we're just going to hand it back to you for some closing remarks and of course a reminder to complete the event evaluation because we so love the feedback. We always do want your feedback around how to make sure we are meeting your needs.

John, are you there?

>> JOHN TSCHIDA: John is here, thanks, Dawn and thanks Sarah for your leadership and for the rest of the UCEDD team for making this I think a successful few days.

I want to thank all of our members for your flexibility and for your commitment. Just in looking at the numbers, at the bottom of the screen, people stuck in there for the full two days. I think the Breakout Sessions worked great. That's always an opportunity for people to steal away and check their email and their cell phones and we had solid participation. I think great presentations on where we have been, where we are. And I think some great ideas about the future not just for example in the planning of our 50th celebration and how to capitalize on that but I think helping us think about where we need to go as an organization. I think this very recently call about -- or conversation rather about Coronavirus, we're going to look to you. With our limited capacity to help define our priorities.

So I think that's an easy thing to do. That's an easy lift for us to have those calls. I think the numbers and the participation will tell us when they start to dwindle, if there are other supplementary or alternatives methods besides those phone calls where we could be providing useful information, I think we'll rely on you to do that and feel free to reach out to me or to other members of the UCEDD team.

I think in closing, and I was going to do this in my comments and forgot about it, Dawn mentioned a staff member of ours who will be leaving us, I'm going to name him because he deserves the credit, many of you are UCEDD directors but also LEND directors. Ben Kaufman, his -- he got an offer he couldn't refuse. A nice promotion. Going to a community partner at am chip. I think that creates additional partnership opportunities for the network, for us here at AUCD. Certainly we've got a great

relationship with them today. But I think Ben will see opportunities and already has seen opportunities, especially in his role with the Title V program.

So again, thank you for your flexibility in joining us for the great thinking. And we'll continue to be in touch, especially around potential future cancellations. I'm guessing that will be a part of our Coronavirus conversations. But especially for those of you who have committed to the gala in April, the next big AUCD event, look for some information there on Monday when our Planning Committee makes a decision. So thanks, all. And please be in touch with any concerns you might have that we can help you with.

>> Thanks so much John wonderful time spending a couple of days with everyone thank you for putting your video at the very end so I could see your smiling faces stay well be well take care of yourselves while you take care of everybody else around you. We'll see you.

>> SARAH DeMAIO: Bye.

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