State of New Hampshire
Department of Health and Human Services

MINUTES
Advisory Committee Meeting
Thursday, 3/17/22 from 10:30AM - 12:30PM Held via: Zoom Webinar

Attendance: Sandy Hunt, BDS Facilitator; Melissa Hardy (Previously Nancy Rollins) BDS Facilitator; Mark Vincent Director, Common Ground; Mark Mills ED, Pathways; Ann Potoczak ED, Community Bridges; Carrie Beth Duran State Family Support Council; Kimberly Habib Chairwoman, Family Support Council; Karen Hatch Employment Leadership Committee; Krista Gilbert Family Advocate; Darlene Hayden Regional Director, Work Opportunities Unlimited; Deb Ritcey CEO Granite State Independent Living; Ellen McCahon ED, CSNI; Stephanie Patrick Disabilities Rights Center; Denise Nash Board Member, Farmsteads; Isadora Rodriguez-Legendre DD Council; Cathy Spinney Family Advocate; Jennifer Pineo Delegate, NH Family Voices; Keith Steckis (And DSP Denise) Self Advocate; Tyler Jaques Self Advocate; Kelly Ehrhart Self Advocate; Drew Smith A&M; Alecia Ortiz A&M, Maureen DiTomaso BDS

Guest from Institute on Disability (IOD): Mary St. Jacques; Kelly Nye-Lengerman; Brittany Little

Note: Members of the public who joined as attendees in listen-only mode are not included in this list.

Please reference the corresponding slide presentation for the detailed agenda, including topics and themes covered in the meeting and corresponding takeaways and applicable action items. This document provides context into areas of substantive discussion which took place during the meeting.

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<thead>
<tr>
<th>Major Topics and Themes</th>
<th>Key Discussion Areas</th>
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<td>BDS communicated that the goal of this session is to create a unified vision for the future of DD services to be used to guide system change work</td>
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<td><strong>Focus Areas</strong></td>
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<td>Listening to hear</td>
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<td>Moving the work forward</td>
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<td>Creating a shared vision</td>
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<td>The advisory committee discussed the following questions.</td>
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<td>What brings us here? Why do we want to be a part of systems change?</td>
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What do you hope the service system will be like in the future?

What’s working in the current system you want to ensure we keep?

What’s not working in the current system you want to ensure we are looking at and considering a change?

Individual brainstorming comments and discussions included...

- Looking for more 24-hour type of supports
- More congregate settings, when appropriate for the individual
- More supportive mental health services
- More support with concurring diagnosis, and more communication navigating silos when you have concurring diagnoses
- Additional training and classes for individuals
- Want the system to be easy to navigate, very responsive to family and individuals needs and very much integrated with other resources again, communication between the silos, bringing those together instead of separate
- Consolidation of the area agencies and resources. Instead of having ten separate area agencies throughout the state, perhaps just have one organization have the money go directly to the care of our individuals rather than having ten separate area agencies
- Want the process to be person-centered planning, definitely keeping in mind it is not one-size-fits-all in the system
- We want to be flexible and ensure we have a quality direct care workforce that enables the DSPs to have wonderful training -- have a fabulous and supportive and also well-trained supervisory staff
- Have DSPs be paid well and have benefits
- Have a system that doesn’t rely on families for support because it is not an equitable system for those who don’t have family members that can provide supports
- Keeping in mind that there are aging parents and those parents are providing a lot of the caregiving. We really need to think about the stress that we are putting on parents as our caregivers and looking ahead to what the needs are as those caregivers who are aging
- We need a system that continues to bolster community integration and provides support and wraparound services
- A system that is responsive
- A system that can continues to break down the silos
- Bring together all services from all the different providers throughout the lifespan
Direct quote “the one who does it gets to decide”. That it’s very important to understand and remember that our parents and individuals are the experts, they should be the ones making the decisions and they should have the authority to make those decisions.

People who live the life should have the final determination and we need to make sure that we remember this as a system that we need to ensure we have the buy-in of families and caregivers and individuals. They need to know that they get to make the decisions for themselves.

Each person has personal autonomy and how their life is led. Remember that this shouldn’t be solely based on a medical model. We need to remain flexible and have a nimble system, understanding that we need to go with the ebbs and flow of what happens.

The pandemic really showed us some of the areas that we need to improve in our flexibilities. Making sure that we have -- we are fully staffed and our individuals have the workforce they need. Do what we can to create a well-trained and sustainable workforce.

Families and individuals would not be choosing residential care if adequate resources were available in the community. Giving family and individually-driven, the flexibility so the focus is on what the individual needs or it wants for their good life.

That the focus is not all around using HRS or SIS and the focus isn’t there, it is really being responsive to what people see as a good life and what they want to have as that good life. Making sure people's needs are met.

Talked about rates and how important that was for the staff and making sure they are able to live their good life as well, being able to afford their own housing and having they ability to have a career path instead of being a job that is just a job and people come and go and there’s no consistency.

Talked about the concerns about residential options and looking from a creative options, what those may look like. How can we be more flexible with the options that are there. Being able to think outside of the box and looking toward perhaps other states see what they are doing and what other creative opportunities are out there. Talked about the capacity building for staff, capacity building for housing, capacity building for the system overall, including the families and what the expectations are there for families, whether it is the family supporting the family.
member or the families expecting to be fully staffed and have the support needs they need in order to ensure their family member as a -- has a good quality of life

- Brought up the idea of community partnerships
- Looking toward people who want to be employed, how can we make those connections with employers so they can provide support to a family member or an individual and make it easy. That you don’t have to jump through hoops for that to occur, and it can carry over if someone new takes over the business
- Businesses are bought out all of the time, do we have to start from scratch, can it carry over and make it more simplistic and making connections in the community so it is a natural partnership instead of that forced by the system partnership
- Talked about making sure the system is adaptable and responsive as we move forward with the service delivery system
- Focused on the creativity and thinking outside of the box and that is whether it was related to housing, rates, service provision all about creativity and flexibility

**Next Steps**

- Please refer to the corresponding work group PPT for details on assignments (if any) and next steps.