



Community Services Reporter

... Information on Community DD Services Across the Country

Maine Initiative Facilitates Community Inclusion

A series of statewide conferences in Maine on the inclusion of people with disabilities has led to the development of a targeted outreach plan for ten local communities. The outreach plan is at the core of the state's new initiative that seeks to encourage Maine residents to join in the "journey of inclusion" through the "sharing of stories about people belonging and contributing within the community."

At a three-day event last month in which thirty-five diverse participants shared "Stories of Inspiration Within Maine," three teams including people with disabilities and their families, and community allies such as ministers, recreation groups, and housing supporters, created a vision for the inclusion efforts, and an action plan for moving ahead. Going forward, the teams will help to identify the ten Maine communities for outreach using Northwestern University's asset-based mapping model.

Through the "Stories of Inspiration" initiative, the group's objective is to conduct thirty-five to fifty public outreach events across the ten communities that "highlight the gifts and talents of all people." Initiative members plan to use "natural allies" in the community in places like churches, schools, clubs and associations

as starting points for telling their stories of inclusion.

Two one-day conferences in 2001 and 2002 marked the beginning of the initiative. The events, called, "Piecing Communities Together," convened people with disabilities and their families, state Department of Behavioral and Developmental Services (DBDS) employees and community provider staff to share best practices in community inclusion, and establish networks around the state. A September 2002 plan designed to bring inclusion resources to Maine resulted in successful planning collaborations with Jack Pearpoint of the Inclusion Network (Canada) and John O'Brien of Responsive Systems (Georgia). They assisted the group in identifying the critical allies to participate in the June event.

As the initiative grows, Maine's DBDS Web site will provide information on "Stories of Inspiration," including individual stories about inclusion, and resources to assist participants in the inclusion efforts.

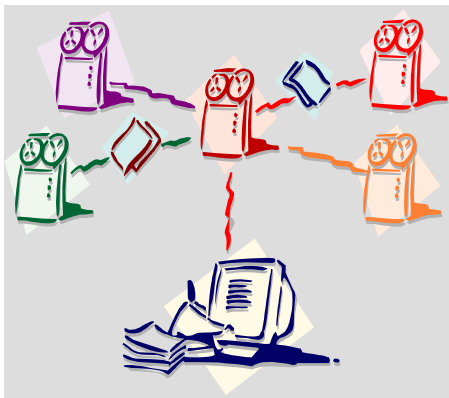
FMI: To learn more about the "Stories of Inspiration" initiative contact lisa.d.sturtevant@maine.gov. For updates and stories in the future, go to the DBDS Web site at <http://www.state.me.us/bds>. 🇺🇸

Inside This Issue...

Arizona Launches New Procurement System	2
Bill Proposing State-Operated Community Residences Advances Through California Legislature	3
INNOVATIONS IN EMPLOYMENT SUPPORTS	4
States Struggle with Budgets at the Start of the New Fiscal Year	6
Ohio Providers Bring Suit Against State to Challenge Medicaid Administration Practices	7
RESOURCES	8
STATESIDE	9
Funds Released to Open More Group Homes in New Jersey	10
Legislative Panel Tables California Workforce Measure	11

Arizona Launches New Procurement System

Starting July 1, the Arizona Department of Developmental Disabilities (DDD) began a new procurement system that is designed to foster consumer/family choice, to introduce fixed rates for similar services, and to generate open and continuous provider recruitment. The Qualified Vendor System puts processes in place that will accommodate Arizona's ten percent annual growth



rate and the entitlement nature of the state's managed care model. The new system, based on an exemption from the state's

procurement code, replaces the former process that was structured around contract awards resulting from sealed bids in response to Requests for Proposals. The old system ultimately closed off new providers for five years at a time.

Arizona has 680 private provider agencies and over 2,700 independent individual providers that reach the over 14,000 people that participate in the state Medicaid program, and the 7,000 people in the state-only funded program.

With a Web-based application process, the Qualified Vendor System is DDD's first step in building an "e-government environment." A Web-enabled ListServ and information directory that support consumer/family choice are planned for implementation later in the year.

FMI: DDD's Web site (<http://www.de.state.az.us/ddd/reference/vendorinformationqvs.asp>)

includes the application for the Qualified Vendor System and a full inventory of its policies and procedures. 🌈

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Bill Proposing State-Operated Community Residences Advances Through California Legislature

Last month, human services committees in both houses of the California State Assembly passed a bill that authorizes the state's Department of Developmental Services (DDS) to establish state-owned, state-operated, and state-staffed community-based residential services for people moved from developmental centers into the community. The bill, Assembly Bill (AB) 271, also requires DDS to plan for and assist employees at developmental centers to find other, similar work if needed. The bill's sponsor canceled a hearing in the Senate Appropriations Committee earlier this month where the measure was set to face another round of scrutiny by California legislators. State Assembly members heard a similar bill last session that died in this committee.

The bill was introduced this year in the wake of Governor Gray Davis' 2003-04 budget recommendation to close Agnews Developmental Center, one of the state's five developmental centers, by July 2005. In addition to budget constraints, AB 271 anticipates the needs that will arise as the number of residents in the developmental centers decline, and the number of people in community-based settings with more complex needs increases. Currently, only two percent of the more than 170,000 people served

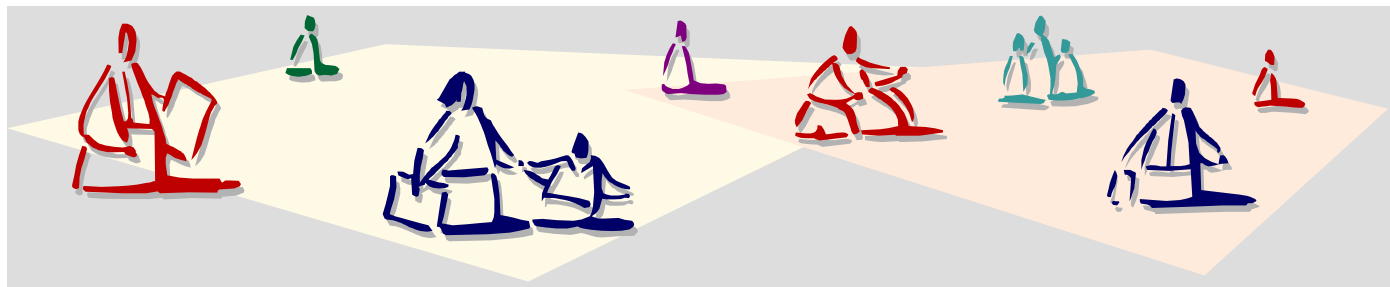
by DDS live in the state's five developmental centers. Twenty-five percent of the funds are allocated for their care.

Advocates of AB 271 contend that it will ensure quality care for developmental center residents as they enter the community by connecting them to state employees with specialized skills. Opponents argue that rather than protecting the interests of the 3,600 residents, the bill acts as a buffer for the 8,600 permanent and temporary employees that provide twenty-four hour care at the state's developmental centers.

A companion bill, AB 1693, has made it through the Assembly and to the Senate, as well. This measure allows DDS to exchange the property of developmental centers scheduled for closing for property with improved facilities that will serve as central service hubs and residential facilities.

Watch future editions of *Community Services Reporter* for an update on these California bills.

FMI: For a copy of the bill analysis, history, or text, go to <http://www.assembly.ca.gov/acs/acsframeset2text.htm>, and enter the bill number. 🗨️



- *Innovations In Employment Supports* -

The concept for this series was created collaboratively with the Institute for Community Inclusion, UMass Boston.

Contributing Author: John Butterworth, Ph.D., Institute for Community Inclusion, UCEDD, UMass Boston

New Hampshire

Between 1988 and 2001, New Hampshire's Division of Developmental Services transformed the state's day and employment services from a facility-based model, with 61% of individuals supported in sheltered workshops or facility-based day habilitation programs, to an inclusion model that supports 94% of its individuals in the community. Fifty-four percent of the individuals served work for at least part of their week in integrated employment. Two things are striking.

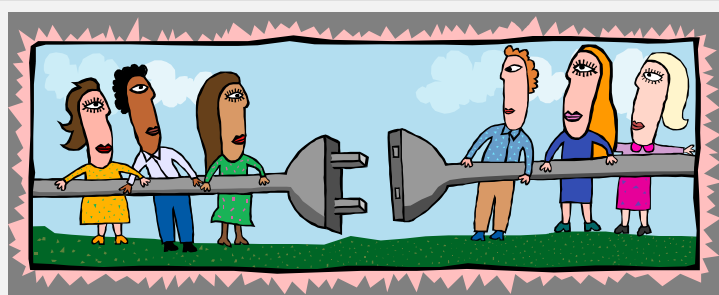
First, stakeholders in the state are firm about their commitment to the broad value of community inclusion, with employment as a principal vehicle for achieving that goal. Second, stakeholders are clear that much remains to be done, including expressing concerns about both individuals who are not currently working and the quality of the outcomes for individuals who are working.

Several factors were consistently highlighted as contributing to New Hampshire's employment outcomes to date:

- **A focus on values change more than structural change.** Driven by the Laconia State School class action lawsuit, the state invested heavily in values-based training as the transformation to a community-based service system began. This has remained the primary focus of state level training initiatives, reflecting a belief that the primary goal is a quality life and full participation in the community. Community inclusion was described as the driving value for the service system.

The richness upon which the system is based was values driven from the start... I would credit that probably as much as anything else to the success of the closure of Laconia State School and the development of the community system...

- **Elimination of facility-based services.** The state has significantly limited funding for facility-based services, including sheltered employment. This



As a body of empirical evidence on the positive outcomes associated with integrated employment develops, and a more definitive picture of what works to build strong employment supports takes shape, this occasional series presents some of the latest findings from research and practice.

change was gradual and came about as services became more consumer-directed. For a time funding guidelines required that individuals participate in the community in groups of no more than three individuals with disabilities. These guidelines are not currently formal regulations but are understood as expectations for service delivery.

- **Broad emphasis on self-determination.** New Hampshire's focus on flexibility is also reflected in a strong emphasis on self-determination and individual control over financial resources. Beginning with early demonstration activity developed at the area agency level and funded by the Robert Wood Johnson Foundation, NH has invested heavily in supporting self-determination including implementation of self-directed funding models.

People can go out and hire their own job supports ... anybody can go to any vendor they want.

(INNOVATIONS continued on page 5)

(**INNOVATIONS** continued from page 4)

- **Minimalist approach to policy.** Consistent with the state's political philosophy, New Hampshire has emphasized local control and opportunity for innovation in the design of its service system. DD services are managed by 12 area agencies that are independent nonprofit corporations. Area agencies and local providers are important sources of creativity and commitment to integrated employment. The state encourages these ideals, but assumes that services are best organized at the local level.

People (in state government) have yielded a lot of autonomy and control to the different area agencies. There is...little state government. There isn't that much that the state says be here now, learn it this way or be here now, do that.

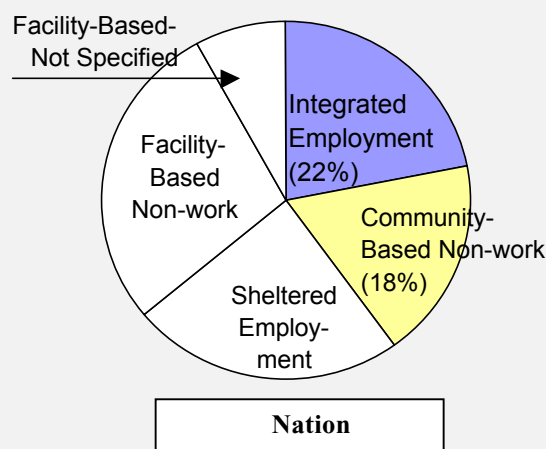
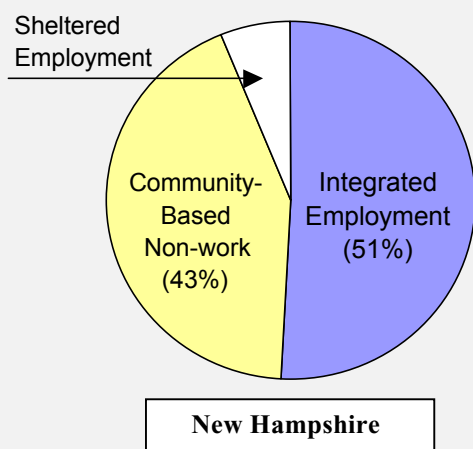
- **Flexible implementation of funding nurtures innovation at the individual level.** Despite implementation challenges, the Medicaid HCBS Waiver has been used to foster considerable flexibility in the design and implementation of services.
- **Person-to-person quality improvement.** In the mid-1990's NH shifted from a formal program

review structure for quality assurance to a more community-based approach. A consultant provided extensive training on continuous quality improvement and the Quality Assurance office was disbanded to shift the investment of state program specialist time to more informal program and individual contact. Six program specialists spend most of their time in the field working with local providers to facilitate change. On a more formal level the program specialists are responsible for reviewing 10% of the individuals supported by DDS each year. These reviews are at an individual level, and focus on whether the individual's preferences and needs are being addressed fully.

In the late 1990s the state also hired John Vance, Director of a small innovative employment supports provider, on a half time basis to provide targeted technical assistance to providers to expand access to integrated employment. John is able to provide hands-on support over an extended period of time to support provider capacity development.

- **Data, Data, Data.** While New Hampshire has not emphasized specific goals on a statewide or provider contract level, providers described the
- (**INNOVATIONS** continued on page 6)

In FY 2001 New Hampshire's Division of Developmental Disabilities reported that 51% of individuals receiving day and employment supports were working in integrated employment for at least part of the work week. This places New Hampshire among the top five states based on the percent of individuals in integrated employment.



These data were collected as part of the National Survey of State MRDD Agencies administered by the Institute for Community Inclusion, University of Massachusetts Boston. ICI staff collected descriptive information during a series of on-site and telephone interviews conducted in 2002.

States Struggle with Budgets at the Start of the New Fiscal Year

Findings published in the latest Fiscal Survey of the States released last month by the National Governors Association (NGA) and the National Association of State Budget Officers (NASBO) show that for the first time since 1983, state government spending is expected to decrease from one fiscal year to the next, as nineteen states predict negative growth in state government for the fiscal year that began July 1. Budget data collected by NASBO during spring 2003, based on Governors' FY 2004 budget proposals, shows states depleting reserve funds, and making record tax increases and spending cuts to balance budgets—"unable to protect their highest priority programs from budget reductions."

Proposing the most new revenue since 1979, Governors in twenty-nine states included \$17.5 billion expected from new taxes and fees in their budget packages. Spending growth is projected to decline 0.1 percent in FY 2004 after a year of \$14.5 billion in cuts, the largest in the Fiscal Survey's 27-year history.

During FY 2003, a number of strategies were used by states in efforts to thwart the fiscal crises. Across-the-board cuts was the strategy used most widely by states (twenty-eight states), followed closely by drawing down rainy day funds (twenty-two states). Employee layoffs and agency and program reorganizations were implemented by seventeen and ten states, respectively.

The report confirms that Medicaid growth continues to strain budgets; twenty-eight states anticipate Medicaid shortfalls in the current fiscal year.

Just weeks into the new fiscal year, California remains deadlocked, unable to reconcile a \$38 billion deficit. The first to

feel the pinch will be state legislators and elected officials who will not receive paychecks until a budget is passed. Community colleges, the state university systems, and local street repairs will also suffer in the short run as the state tries to operate on a \$5 billion balance from the sale of revenue anticipation notes that is expected to run out next month.

New Hampshire and Oregon passed short-term, or mini-budgets, to keep the states going in the first weeks of the fiscal year. And, in Connecticut, Governor John Rowland signed an executive order at the last hour to keep the state government operating for a week, and continues to manage state funds on a weekly basis until the legislature agrees on a final budget

Watch future editions of ***Community Services Reporter*** for updates as states' budgets evolve.

FMI: The latest NGA/NASBO Fiscal Survey of the States, and the accompanying press release and perspective piece by NGA Executive Director, Raymond Scheppach, can be accessed through the NGA Web site at http://www.nga.org/nga/newsRoom/1,1169,C_PRESS_RELEASE^D_5631,00.html. 🚩

(**INNOVATIONS** continued from page 5)

employment outcomes data collection system as an important factor in the state's focus. The state collects outcome data every six months from providers. Perhaps more important, it is clear that there are regular conversations about employment outcomes using these data at both a statewide and local level. In addition to individual employment outcomes the data system tracks the number of businesses, currently 765, that employ DDS consumers in order to emphasize untapped opportunity and the importance of outreach.

FMI: John Butterworth, Ph.D., Institute for Community Inclusion, UCEDD, UMass Boston; Tel: 617-287-4357; Email: john.butterworth@umb.edu, or Jeanne Cusson, Program Planning and Review Specialist, New Hampshire Division of Developmental Disabilities; Tel: 603-271-5014; Email: jcusson@dhhs.state.nh.us. 🚩

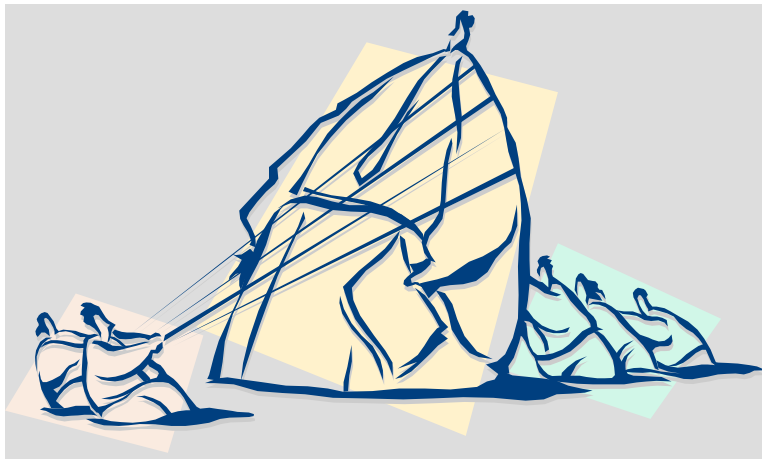
Ohio Providers Bring Suit Against State to Challenge Medicaid Administration Practices

Late last month, Ohio's private provider association and four other plaintiffs including three private provider organizations, filed a lawsuit in the state's Franklin County Court of Common Pleas alleging that the Ohio Department of Mental Retardation and Developmental Disabilities (ODMRDD) and the Ohio Department of Job and Family Services (ODJFS), the state's Medicaid agency, have failed to ensure the uniform statewide administration of Medicaid as Federal law requires. The plaintiffs' petition claims that the state's county boards of MR/DD and board associations are unlawfully operating Medicaid-funded community services by requiring providers to enter into and renew general operating agreements/service contracts that vary from county to county, and ultimately, result in disparate treatment of the individuals receiving services.

Predicated on 2001 state law requiring ODMRDD to define the rules that govern service contracts by July 1, 2002, the lawsuit relies on the fact that these rules have not been issued yet. As such, the plaintiffs contend that the county boards are forcing providers into renewing existing agreements that generally expired on or before June 30, 2003, or creating new unlawful agreements using county-specific guidelines that are not based on any statewide policy. The plaintiffs asked the court to grant injunctive relief

to prevent the county boards from forcing them to sign contracts that they do not regard as legal or withhold payments.

In a June 30 court order, presiding Judge Patrick McGrath specified that county boards and providers should reach mutual agreements on either extending or revising the terms of existing



service contracts, or otherwise resolve differences under the state's dispute resolution statute. In the event that the board and providers do not agree or choose not to enter into a new contract or to amend an existing contract, Judge McGrath

instructed both sides to continue to operate under their existing contracts, day-to-day until ODMRDD, as the ODJFS designee, develops the rules governing service contracts. He also used the order to dismiss the county board associations from the lawsuit. The order remains in effect for 90-days, or until ODMRDD adopts rules governing service contracts.

FMI: For the latest update on the case, contact Greg Swart in ODMRDD's Legal Services Division at 614/466-6441. For a PDF version of the original complaint (*Nickolaus Thompson and Ohio Provider Resource Association et al. v. Hayes et al.*) go to <http://www.opra.org/pdf/Lawsuit-MemorandumSupport.PDF>, and for Judge McGrath's court order, visit <http://www.opra.org/pdf/Judge McGrath Order.PDF>. 📄

- RESOURCES -

First Complete and Validated Positive Behavior Support Curriculum for Direct Support Professionals Set for September Release.

In September, the American Association on Mental Retardation (AAMR) will release a curriculum for direct support professionals (DSPs) and supervisors that was developed, validated and implemented on a state-wide basis by the South Carolina Department of Disabilities and Special Needs in partnership with the University of South Carolina Center for Disability Resources. The training, packaged in two editions, one for DSPs, and the other for supervisors, is designed to build skills known to work in improving behavior of people with developmental disabilities. AAMR is selling the curriculum and supporting materials at reduced rates prior to the September 1 release.

FMI: You can access Frequently Asked Questions on both editions of the curriculum, sample curriculum modules, and a *Journal of Positive Behavior Interventions* article on the curriculum and training at http://www.aamr.org/Reading_Room/pdf/pbst_training_curriculum.pdf. To order the curriculum call 301-604-1340, e-mail aamr@pmds.com, or visit <http://www.aamr.org/Bookstore>.

National Collaborative Provides Resources for States' Accessible Voting Efforts. Eight national organizations are collaborating to develop a Web-based tool that states can use to make voting accessible to all voters and potential voters. The Web site, <http://www.GoVoter.org>, is intended to be a national Internet resource for states in their efforts to comply with the federal Help America Vote Act (HAVA) which requires that states' information and voting materials be accessible to people with all disabilities, including intellectual, mobility, sensory, dexterity-related and emotional, and that information to the public at large be available in alternative formats. In addition to being a resource for states, GoVoter.org is envisioned as a user-friendly portal for all voters to find the information they need to register and vote.

Members of the GoVoter collaborative include the National Association of Developmental Disabilities Councils, the National Association of Protection and Advocacy Systems, Self Advocates Becoming Empowered, and The Arc of the United States.

The Web site is currently under construction, and a proposal for the finished product is being sent to the chief election official in every state and territory.

FMI: Additional background on the GoVoter initiative is available on its Web site (<http://www.GoVoter.org>). The collaborative encourages people interested in learning about state-specific accessible voting plans to contact their respective state election officials.

N.O.D. Guide Highlights Disability Issues for Emergency Planners. Through its Emergency Preparedness Initiative, the National Organization on Disability (N.O.D.) has created a guide for emergency managers, planners and responders. It highlights key disability concerns to those officials and experts responsible for emergency planning in their communities, and assists them in developing plans that will take into account the needs and insights of people with disabilities before, during and after emergencies. It also is designed to help emergency managers, planners, and responders make the best use of resources to include all members of the community in emergency preparedness plans. The guide outlines steps for emergency preparedness managers to consider in ensuring that the needs and situations of people with disabilities are taken into account in all four phases of emergency management: mitigation, preparedness, response, and recovery. The authors encourage communities to develop and customize their own plans that account for area-specific hazards, population demographics, and resources available for emergencies.

FMI: The guide is available in PDF and text formats through the N.O.D. Web site at <http://www.nod.org/content.cfm?id=1267>.

- STATESIDE -

CMS Review Team Praises Vermont's HCBS

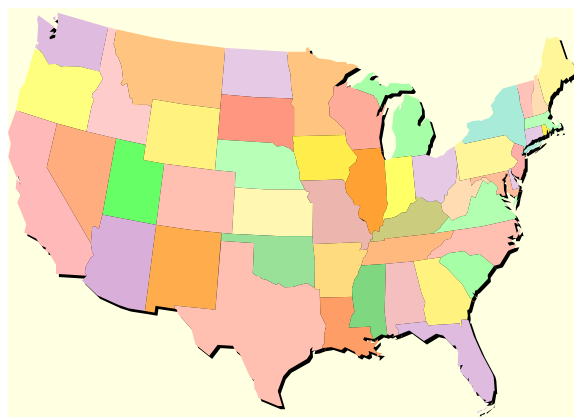
Waiver Program. In a written report recently forwarded to state officials, a review team from the Boston Regional Office of the Centers for Medicare and Medicaid Services (CMS) concluded that Vermont's Medicaid home and community-based waiver program for individuals with mental retardation and other developmental disabilities "can serve as a model" for waiver programs in other states. The report was transmitted to the Secretary of the Vermont Agency of Human Services, Charles P. Smith, by Margaret Leoni, Medicaid Program Branch Chief in CMS' Boston Regional Office, on May 21. The team noted that the results of its review were "consistently positive," adding "The State ... not only [has] developed a detailed system for ensuring quality and improving the delivery of services, but ... continually works to improve [the] design and implementation [of its system] to meet its goals." In the area of quality oversight, the federal team singled out for special praise the state's multidisciplinary approach to quality monitoring and its automated process of tracking eligibility, resource allocations, utilization, and service planning among community provider agencies.

FMI: For copies of the CMS team's report and answers to questions concerning the design and operation of Vermont's DD waiver program, contact Theresa Wood at the Division of Developmental Services, Vermont DDMHS, 103 S Main Street, Weeks Building, Waterbury, VT 05671-1601.

Indiana Is Home to One of Two 4-H Clubs in the Country for Adults with DD. Six residents of an Indiana Family and Social Services Administration (FSSA) developmental center comprise what is "believed to be one of only two"

4-H Clubs in the country for adults with developmental disabilities. At a recent visit to the state's Fort Wayne Developmental Center, FSSA Secretary John Hamilton remarked that while the Administration is committed to expanding home and community-based services, "it's exciting to see an initiative like this in a state developmental center."

The garden cultivated by the 4-Hers includes decorative plants, and a variety of produce that members plan to sell at a farmer's market. Animal care is also incorporated as the 4-H livestock component. Hamilton praised the Fort Wayne 4-H club as "proof that people with disabilities can be active members of and serve their communities."



FMI: More information on the Fort Wayne 4-H Club can be found in the FSSA press release at <http://www.state.in.us/serv/presscal?PF=fssa&Clist=3&elist=71924>.

Rhode Island Cabinet-Level Official Moves On.

Kathryn Power, ten-year director of the Rhode Island Department of Mental Health, Retardation, and Hospitals (MHRH), is leaving her state post to accept a federal appointment in the Substance Abuse and Mental Health Services Administration (SAMHSA). Power will become the director of SAMHSA's Center for Mental Health Services on August 11. During her tenure, Power was noted for leading efforts to transition people with developmental disabilities and behavioral challenges from institutional to community settings, and for building strong partnerships with developmental disabilities agencies and community mental health centers across the state.

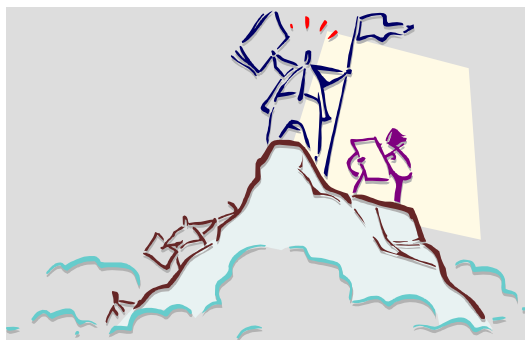
The Division of Developmental Disabilities is one of four MHRH service clusters along with integrated mental health, long-term hospital care, and substance abuse.

Funds Released to Open More Group Homes in New Jersey

New Jersey's Human Services Commissioner Gwendolyn L. Harris recently announced that an additional \$11.7 million was being added to the budget of the state Division of Developmental Disabilities (DDD) for FY 2004 to cover the cost of opening 84 more group homes. These homes will serve a total of 402 individuals.

In making the announcement, Commissioner Harris said meeting the needs of persons with developmental disabilities is a high priority for the department, New Jersey Governor James E. McGreevey and state legislators.

The Governor's original 2004 budget for DDD did not include sufficient funds to open the 84 new homes which are at various stages of completion. But, according to Harris, the additional dollars were located after legislators encouraged the department to find a solution to this funding dilemma. Creating a new group home typically takes between two and three years, since most of the homes require renovations or special adaptations to ensure they meet accessibility



standards. The Division plans to open the homes in phases, with 25 scheduled to come on line this summer, 25 in the fall, and the remaining 34 by the end of the fiscal year.

DDD, with a total operating budget of approximately \$1.1 billion (in combined state and federal dollars) contracts with private (mainly nonprofit) community agencies to provide residential services, day programs, and family supports. At present, the division supports 767 group homes serving over 3,600 individuals, plus 178 supervised apartment programs that house almost 1,100 persons. Overall, more than 32,700 persons with mental retardation, cerebral palsy, autism, spina bifida, and other neurological impairments receive services through DDD.

FMI: A copy of the press release announcing the allocation of the \$11.7 million in additional funds is posted on the Web site of the New Jersey Department of Human Services at <http://www.state.nj.us/humanservices/Press-2003/group-homes-ddd.htm>. 🌐

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Conference Details are Available at <http://www.nasddds.org>

Legislative Panel Tables California Workforce Measure

The Human Services Committee of the California State Assembly agreed earlier this session to postpone action until next year on a controversial bill that would fundamentally restructure the relationship between community service providers and direct support workers who assist persons with developmental disabilities.

The measure (Assembly Bill 649) calls for the establishment of a statewide network of 13 of “workforce service centers” to perform various employment-related functions in connection to direct support workers who are furnishing services and supports authorized and paid for by the state’s 21 regional centers and the Department of Rehabilitation. Regional centers serve as the single point of entry to state-funded developmental services in the State of California.

Sponsored by the Services Employees International Union (SEIU), the legislation, once it is fully implemented, would radically alter the way in which DD community service workers in the state are recruited, trained and compensated. Responsibility for hiring, training and paying direct support workers would be shifted from thousands of community provider organizations and other vendor agencies across the state to the workforce service centers. The geographic catchment areas of the 13 centers would be contiguous with the service lines of the Area Boards of Developmental Disabilities.

Community service organizations would be required to hire direct support staff from a registry of pre-screened workers. Individuals with disabilities and families, however, would be authorized to choose support workers who are not listed on the registry. The state Department of Developmental Services would be responsible for establishing job classifications for workforce service centers and specifying the educational, training, and experiential requirements associated with each job class. Individuals and families would have the option of electing a self-determination service mode.

At an April 29 legislative hearing, proponents of AB 649 argued that the proposed centers would provide a focal point for statewide efforts to improve the competency and stability of the workforce – an absolutely essential prerequisite to upgrading the quality of community DD services, they pointed out. A 1999 study conducted by the California Bureau of State Audits concluded that the inadequate wages and benefits paid to community workers has resulted in high turnover rates and a lack of continuity in services. The proposed workforce centers, proponents contended, would lead to more stable, better trained, and more adequately compensated front line staff.

Many community provider agencies, however, oppose the legislation. They argue that AB 649 would jeopardize service quality by severing long term relationships between agency staff and individuals receiving community supports. Opponents of the legislation also contend that: (a) the bill would undermine worker accountability thus placing service recipients at risk of abuse and neglect; (b) the liability exemption that would be granted the centers would mean that provider agencies would likely be held liable for actions by workers who they had no control over hiring or firing; and (c) the cost of maintaining an additional expensive layer of administration would drain scarce state dollars away from direct services to individuals with disabilities.

Following the April 29 hearing on AB 649, the Assembly Human Services Committee agreed, without a recorded vote, to hold the measure in committee. While the legislation could be reconsidered later in the session, knowledgeable observers say that the committee is unlikely to take further action on the bill until next year.

FMI: For a PDF copy of the Workforce Centers bill as amended in April, go to http://www.leginfo.ca.gov/pub/bill/asm/ab_0601-0650/ab_649_bill_20030408_amended_asm.pdf. 📄