



# Clark County Developmental Disabilities Comprehensive Plan

2021-2025

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## *Introduction*

The Developmental Disabilities Comprehensive Five-Year Plan provides an overview of programs and initiatives that can significantly benefit Clark County residents with intellectual and developmental disabilities, or IDD. The sixth such plan developed by the county, it emphasizes efforts that enable people with developmental disabilities to be life-long vital, productive members of society.

Our community's response to the plan is contingent on an accurate understanding of the strengths, needs, issues and trends related to people with IDD and their families. The plan summarizes pertinent information and explains the demand for services and supports that can help people live as independently and fully as possible.

The plan focuses on the estimated 8,788 children and adults with intellectual and developmental disabilities who live in Clark County. It outlines a wide variety of support needs and program initiatives and pays particular attention to aspects of the service system that the public sector is responsible for developing, stimulating or growing.

The plan also places a strong emphasis on community education and information, infrastructure development, advocacy, training and technical assistance. The creativity and skills inherent in these efforts are increasingly important to providing effective services as resources remain limited.

This plan has been developed by:

- Oversight, advice and support of the Clark County Developmental Disabilities Advisory Board (DDAB);
- Soliciting and engaging public opinion and feedback from our clientele, families, stakeholders, advocates and the community; and
- Aligning our planning efforts with state and federal governments.

We hope you find this report enlightening and useful. If you have questions, please feel free to contact me at 564.397.7826.

Sincerely,

Patricia Buescher  
Development Disabilities Program manager



Michael Puche

### COVID-19 Pandemic

Since February of 2020, the Clark County Developmental Disabilities Program, like the rest of the world has experienced the challenge of a global pandemic – COVID-19. Hence, in our planning process, we think it prudent, appropriate and transparent to acknowledge that this virus has and may further change the way and methods we have historically used to deliver community-based services to individuals with intellectual and developmental disabilities (IDD) and their families. For example, as a county, we are now engaged in remote and electronic meetings and management. As we re-open, we anticipate more in-person opportunities. However, we also acknowledge that technology has allowed us to connect with people in new ways and anticipate the continuing use of technology to connect. Together with our funding and service provision partners we are consistently figuring out how to make services work while first prioritizing the safety of individuals with IDD and their families, staff, community-based providers and stakeholders. We will continue to embrace and honor:

- *Mission First* – Our mission continues to be the guiding light of our service delivery decision making process: “Clark County will assist people with Intellectual and Developmental Disabilities to achieve, full, active and productive lives.”
- *Relationships* - Developing, building and strengthening relationships with stakeholders, funders, the business community, providers and colleagues. We are in it together.
- *Communication* – Remaining engaged with all stakeholders. Providing and receiving information in a timely, clear and transparent process so as to strengthen

trust, respect and partnership. We will keep open and strengthen channels of communication.

- *Innovation* – At all times we will attempt to consistently look at each challenge as an opportunity to innovate our process, policies, procedures and operations to deliver efficient and timely services. This includes consistent upgrades in Information Technology (IT) and Assistive Technology (AT).
- *Priorities* – We will maintain and honor the priorities of this five-year plan while assuring our service commitments remain rooted in our values.
- *Efficiency* – We will attempt at all times to provide for nimble, thoughtful and efficient services and revisions to services as quickly and effectively as possible. As per our commitment, we will at all times strive to be responsive to our community.
- *The Long View* – As COVID-19 evolves, we will plan for the alignment and adaption of innovative services to meet the rigors of service delivery challenges and to frame opportunities to grow, change and succeed.

From time to time, we will give COVID-19 updates to all of our partners using media that is understandable and clear. This includes but is not limited to, information, updates, upgrades, changes in service delivery methods, funding, opportunities for training, etc.

### Equity/Diversity/Inclusion

In 2021, the Clark County Council resolved that systemic racism is a public health emergency. The work of the Developmental Disabilities program is directly related to economic stability, a social determinant of health. Therefore, we will prioritize this resolution and assure and honor equity in the planning, development, and implementation of services and supports for individuals with IDD and their families and encourage participation from the community. We will make every effort to include individuals and groups of individuals who have historically been underrepresented/underserved in our community. We have threaded the importance of equity throughout this plan and welcome continued community feedback.



CLARK COUNTY WASHINGTON

COMMUNITY SERVICES

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Clark County Community Services serves a key role in our community, providing federal, state, and local funding to the county’s most vulnerable populations. The department serves a wide range of needs, including, homelessness assistance, behavioral health crisis and prevention services, employment and early intervention for those with developmental disabilities, youth support programs, and community development activities.

**MISSION**

Clark County Community Services supports, through partnerships, all people in our community to increase their well-being and economic security.

**VISION**

We work to create a thriving community where people are valued and have the resources they need to flourish.

**VALUES**

- People
- Collaboration and Partnerships
- Diversity and Inclusion
- Accountability
- Education
- Positivity
- Innovation

**EQUITY STATEMENT**

Clark County Community Services recognizes past and present injustice and we work to heal it. We believe that everyone deserves to live a healthy and safe life. We have a moral obligation to support all members of our community who are underserved and underrepresented.

To achieve more equitable services, we must be inclusive and work in partnerships within our community. We use our commitment to equity to inform everything we do to address disparities. We actively listen to, and enter, the voices of those who have been historically underrepresented in order to challenge structural and institutional racism and discrimination. We honor and respect the experiences and perspectives of the people we serve. We look inward to challenge our own beliefs and barriers. We engage and support diverse communities to that they thrive.

We celebrate our community becoming more diverse and hold that our journey and success are intertwined with each other.

*Community Feedback*

As stated, this plan has been developed with reliance on community feedback in the prioritization of services and supports for individuals with IDD and their families, service providers, funders, businesses, stakeholders, etc. The feedback was solicited to:

- Identify, clarify and prioritize needs of participants and stakeholders in the development and implementation of services for people with IDD in Clark County
- Contribute to the development and implementation of the Five-Year Comprehensive Plan
- Align and integrate the community feedback with the goals and priorities of the comprehensive plan
- Reach out to historically underrepresented communities and individuals and establish and foster long-term relationships

The methods of solicitation included a survey sent directly to participants and stakeholders, a sampling of individual, in-person interviews and additions to the county website. Participants include but are not limited to individuals with IDD and their families, service providers, funders, case management, businesses, school districts, additional support staff, etc.

To summarize and study the feedback, we coded the solicitation comments in three parts:

- The respondent’s prioritized top three choices and subsequent comments regarding services in Clark County
- The respondent’s assessment of impacts to services due to COVID-19
- Other areas of concern including gaps in the service delivery process

Comments were collected and summarized by priority using a numbering system. Themes were identified and priorities compared to those in the Comprehensive Plan initial draft. Hence, revisions to this plan have been warranted and included to accurately reflect the community feedback.

Additional community feedback themes also recommended improved approaches to whole life access to services for individuals with IDD and their families including but not limited to:

- Housing
- Healthcare
- Mental healthcare
- Transportation
- Community and information – especially regarding what services are available and how to access them
- Impacts of COVID-19 such as mental health and community integration
- Recreation and leisure
- Aging and retirement

Clark County Developmental Disabilities Program contracts with the state of Washington to provide specific services to people with IDD, prioritizing Supported Employment and Community Inclusion. Many recommendations and other requested supports do not fall within the direct realm of county responsibility other than to help coordinate and support said services. Therefore, it is incumbent upon all system partners in Clark County to coordinate services with each other, freely share information, educate each system partner as to the areas of responsibilities each encompasses, and share and distribute this information to the public using relevant media and information channels such as the county website, etc. Several recommendations have been included in the plan to improve systems, partnerships, coordination and information.

It appears the motivation for requested increased whole-life services is due to: impacts of COVID-19 and the isolation accompanying the pandemic; an aging population of parents and loved ones; and a level of information frustration with what services are available, who provides them, and where to specifically go to access them. System partners must then, consistently ask, “What services are available for each individual and family, how are they coordinated and how do we connect to them?”

Inclusion is opening our minds to new possibilities, making room for different perspectives and enriching the experience for everyone along the way. – Lisa Friedman

## Clark County Developmental Disabilities Program

### OUR LEGAL MANDATE RCW 71A

To coordinate and provide services to people with developmental disabilities and their families and provide the following indirect services to our community:

- Serve as an information and referral agency within our community for persons with developmental disabilities and their families
- Coordinate all local services for persons with developmental disabilities and their families to ensure the maximum use of all available services
- Prepare comprehensive plans for present and future service development and reasonable progress toward coordination of all local services to persons with developmental disabilities.

### OUR MISSION

Clark County will assist all people with developmental disabilities to achieve full, active and productive lives.

### OUR VISION

People with Intellectual and Developmental Disabilities (IDD) are fully participating community members. This will occur in a community where each person is recognized for their gifts and contributions, where all are seen, and differences related to race, ethnicity, gender, orientation, age, ability, history, religion and/or nationality are honored and celebrated as a strength of the community.

### OUR VALUES

- **Access**  
People with disabilities and their families should have access to the supports needed to live, work and fully participate in local community life.
- **Choice**  
Services and supports will be tailored and customer driven. Individuals and families will have the power, authority and ability to personalize and direct supports to achieve a life typical of all community members.
- **Inclusion**  
People with disabilities and their families should have opportunities for natural interactions and

participation in all aspects of community life.

- **Partnerships**  
Clark County promotes partnerships including business, education, service providers and neighborhoods to ensure all individuals with developmental disabilities and their families have the opportunity for formal and informal supports. Formal supports and services should foster independence and personal growth, while informal supports should encourage friendships and community membership.

### OUR LONG-TERM PRIORITIES, RANKED

#### Employment

Expand development of job opportunities that encourage career progression and are responsive to personal interests, strengths and support needs. Jobs should promote inclusion, foster natural supports, and work toward full employment.

#### Equity

Embrace principles of equity to provide better services and achieve better outcomes with historically underrepresented and underserved communities.

#### Community information and advocacy

Expand information and education efforts throughout the community to better inform individuals with IDD and their families of opportunities, choices and issues, as well as increase public awareness. Continue strong advocacy in employment, early intervention, education, transportation, recreation and family support.

#### Transitioning high school students

Ensure all students with developmental disabilities who graduate from high school have access to a job, appropriate formal or informal job supports or additional educational opportunities, and other needed community supports or linkages.

#### Transportation

Increase access to quality public transportation throughout Clark County.

#### Housing

Expand access to safe, affordable and accessible housing throughout Clark County, including opportunities for home ownership.

#### Recreation/Leisure

Expand opportunities for recreation, leisure and neighborhood activities. Leisure opportunities should emphasize personal interests and connections with other community members.

#### Early intervention

Ensure that families are aware of and can access early intervention services for children up to age 3.

#### Aging issues

Encourage participation in community opportunities for people with disabilities who are seniors.

#### Health care

Improve access to appropriate, quality health care for people with developmental disabilities.

### OUR SERVICE COMMITMENTS

#### Diversity/Equity

We fully embrace and will champion equity in the planning, development and implementation of services and supports for individuals with IDD and their families.

#### Evaluation

We will consistently evaluate and measure the effectiveness of services and supports using adequate data, feedback and presentation of outcome data.

#### Growth and change

We are committed to new and progressive service revisions, required or

desired, and firmly believe change will foster an authentic path to real growth.

#### Informed choice

All participants and their families have the right to be fully informed and educated about their service choices.

#### Open communication

We pledge to prioritize healthy and open communication, reduce conflict, enhance individual contributions, and respect personal boundaries.

#### Self-determination

Each person with IDD has the right and responsibility to first choose and then determine their own life path.

### OUR KEY OUTCOMES

Our services and supports are designed to:

- Promote and attain equitable program outcomes for everyone served
- Improve self-directed, informed choice
- Build independence and self-sufficiency
- Honor diversity and promote equity and inclusion in all that we do
- Nurture people with IDD and their families as they make their way through the life process of planning, education, discovery, and development
- Contribute to full community participation by planning, developing, and providing robust employment supports resulting in satisfying and successful careers for people with IDD

## *Developmental Disabilities Past, Present and Future*

For more than 35 years, significant change has rolled through the systems and supports for people with Intellectual and Developmental Disabilities (IDD). When Clark County's first Developmental Disabilities Comprehensive Plan was published in 1990, local services reflected the initial stages of supported employment and large congregated group homes dominated residential options. Most people worked in large sheltered workshops with no access to individualized funding or services. A new program called Community Access was created for 12 people with development disabilities who had retired.

The Legislature had not appropriated funding for young adults transitioning from local school districts to adulthood. Young people who graduated from local schools went home to wait for adult services to become available. Adults waiting for services almost equaled the number being served.

By 1990, all children had some access to early intervention services thanks to local partnerships. Unfortunately, screenings for developmental delays were unfunded and irregular, and outreach to inform families about the screening service was limited. Although children with developmental disabilities went to public schools, they were segregated from other students, and early intervention services were primarily in developmental centers.

Earlier comprehensive plans reflect the dramatic change that has occurred in systems and supports for people with

developmental disabilities. Adults now are employed in community jobs through supported employment or working on their individualized path to achieve employment. Some are self-employed. Community Inclusion often serves people who have retired from their jobs. The number of children and adults receiving county-funded services and supports has more than doubled since 1990.

Funding for students with developmental disabilities who left local school districts was first allocated in 1991. Since 2003, projects with local school districts have increased students', families' and teachers' expectations that young adults will have jobs, a place in the community and friends. Trending towards employment is expected to continue as expectations regarding jobs, wages and opportunities expand and educational programs continue to improve their outcomes for all students. Families can now receive a variety services, such as early intervention, at home or other generic meeting places. Plans are now developed to support the family as well as the student.

Community partnerships have long been a core element of the local developmental disabilities system. Businesses, neighborhoods, schools and government all acknowledge the gifts and contributions people with disabilities make. As people go to school together, work alongside one another and become neighbors, services will continue to evolve and partnerships will expand.

In 1996, the top public requests of Clark County and its Developmental Disabilities Advisory Board was for information, education and advocacy. By 2003, employment had reemerged as the top request. Both employment and the broad category including information, education, training and technical assistance have been major thrusts for the Clark County Developmental Disabilities Advisory Board over the past 25 years. Both are increasingly linked to the provision of high-quality services and development of good jobs for people with developmental disabilities. Employment continues to be the number one request for 2021 and beyond. The interdependence of good information and education, training and quality employment is expected to rise as jobs in the community change and expectations continue to grow.

The continued focus of supports and services will include emphasis on individual interests and abilities, informed personal choice, support to families, and inclusion in all aspects of community life. Throughout Clark County

People with disabilities who work depend less on other public funds and use fewer support services.

and the nation, principles of self-determination have emerged and evolved. Freedom, control of resources, support and responsibility are now melded into the local service system. Most importantly, the inclusion of under-represented populations with a keen eye focused upon equity in supports and services will be our commitment.

Individuals and families direct the supports and services they receive. People are encouraged to be active partners in all services. Individuals can get help by creating a plan and considering all potential resources to put that plan in place. Over the next five years, we will continue to explore the use of multiple resources, generic resources and natural supports. Clark County and the Developmental Disabilities Advisory Board will emphasize activities that encourage the community to include people with disabilities and value the gifts they have and contributions they make.

## *Summary of Plan Development*

The Clark County Developmental Disabilities Advisory Board began work on this sixth comprehensive long-range plan in late 2019. Technical consultants worked with the advisory board to facilitate the plan design and development process. Community Services staff members gathered demographic and program information as the board reviewed the mission, goal, values and general plan content.

In 2021, the advisory board held public meetings to gather community input about services and the future of services for people with developmental disabilities. The board gathered information about priorities, needs and actions it should consider through an electronic survey that went to a variety of Listserv members.

Several priorities clearly emerged from this community input process, and they were incorporated into the goals of this comprehensive plan. The priorities should be considered in light of the following:

- Strong support for the goals and goal areas developed by the Developmental Disabilities Advisory Board.
- Strong support for the underlying values of choice, inclusion, partnership, and access as these issues pertain to people with developmental disabilities and their families.
- Continued consistency in priorities developed in response to public meetings and the online survey. Employment rated far above any other goal listed; housing ranked second.

Once community comments were gathered, a draft plan was written for the advisory board's review and the plan will be reviewed annually. The plan uses person first language throughout. The advisory board recognizes that some people with disabilities prefer to be addressed using identity first. When in doubt, we ask the person.

## Plan Legend

**ADA**  
Americans with Disabilities Act

**BA**  
Benefits Analysis

**BP**  
Benefits Planning

**CRM**  
Case Resource Manager

**CS**  
Clark County Community Services

**CCDD**  
Clark County Developmental Disabilities

**CCPC**  
Clark County Parent Coalition

**CMS**  
Centers for Medicare and Medicaid Services

**Community Education**  
Community information, advocacy and legislation

**Customer**  
Also “participant,” “individual,” “child” – Person with an intellectual or developmental disability

**DDA**  
Developmental Disabilities Administration

**DDAB**  
Developmental Disabilities Advisory Board

**DDD**  
Division of Developmental Disabilities (later to become DDA)

**DVR**  
Division of Vocational Rehabilitation

**Employment agencies**  
Also “vendor” or “vendors,” service provider, employment organization – A provider of services to customers and families.

**Equity**  
The provision of varying levels of support—based on specific needs—to achieve greater fairness of treatment and outcomes.

**ESD 112**  
Educational Service District 112

**HCBS**  
Medicaid Home and Community-based Services

**IDD**  
Intellectual and Developmental Disabilities

**Job Foundations**  
A collaborative project with the schools to engage students in employment planning to increase the number of students graduating transition programs with a job.

**RHC**  
Residential Habilitation Centers

**RSA**  
Rehabilitation Services Administration

**TA**  
Technical Assistance

**T/TA**  
Training and Technical Assistance

**VR**  
Vocational rehabilitation

**Written Performance Plan (WPP)**  
Also “provider plan” – Essentially a written plan authored by the service provider, approved by Clark County, and intended to improve services.

## Community Assumptions Employment

**1. Adults with IDD have the right and responsibility to experience a full and satisfying career and earn a livable wage. Employment is a way out of poverty and enables people to contribute to and be an active member of the community.**

### GOALS

- Increase the number of people in paid employment by at least 5% annually
- Increase average working hours by 2% annually
- Establish baseline number of people in jobs with benefits
- Provide improved customer choice in the provision of an innovative job/career
- Annually recalculate the accepted livable wage standard in Clark County and share with the provider base

### STRATEGIES

- Plan for corporate job development efforts
- Expand public sector employment opportunities
- Expand marketing efforts to increase employment
- Ensure a focus on choice in career planning with the provider base
- Consider amending provider contract goals to accommodate livable wage goals
- Revise and refine the outcome data as needed
- Improve effective use of Social Security Benefits

### STRATEGY STEPS

- Expand, strengthen and improve local partnerships with businesses

- and business associations
  - » Connect with Columbia River Economic Development Council, WorkSource, chambers of commerce, employer associations
  - » Track progress
- Use DDAB as a referral and center of influence base as feasible
  - » Connect with Columbia River Economic Development Council, WorkSource, chambers of commerce, employer associations, Workforce Innovation and Opportunity Act
  - » Track progress
- Use DDAB as a referral and center of influence base as feasible
- Create employer-to-employer marketing efforts
  - » Work with consultants
  - » Work with associations
  - » Use technical assistance as necessary
- Include goal planning in the written performance plans
  - » Establish annual goal percentages with each provider – integrate with outcome data
- Provide ongoing job development and marketing training to providers
- Encourage discovery or career planning for those individuals on a pathway or for those who request it
- Gather, refine and disseminate relevant data to customers, families, providers, case managers, rehabilitation counselors, DDAB, stakeholders, others
  - » Share relevant information on the website
  - » Disaggregate outcome data by race and ethnicity
  - » Establish baseline outcome

- data for people on the Autism Spectrum
- Review outcomes and progress with individual providers and DDAB regularly
- Gather relevant information from customers, families and providers about what is working in job development and what is needed
  - » Adjust as required
- Integrate employment approach and activities with other Community Services programs as appropriate
- Disseminate information through existing networks such as school districts, CCPC, employment agencies
  - » Track progress
- Review database at annual work plan meetings
  - » Disseminate identified information to public
  - » Use website as necessary
- Publish living wage data on website

### MEASURES

- Revise wage, hour and benefit database as necessary
- Revise wage, hour and benefit outcome data as necessary
- Disaggregate data to include race and ethnicity
- Track number of individuals earning a living wage per Massachusetts Institute of Technology (MIT) Living Wage Calculator
- Review data quarterly; report to DDAB annually
- Review and monitor providers
- Consumer and family satisfaction surveys
- Adjust contracts, contract language, as necessary





Employment is a way out of poverty & enables people to contribute to and be active members of the community.

## Community Assumptions Employment

### OUTCOMES

- People with IDD experience improved hiring, retention, benefits and job satisfaction
- People with IDD work independently with nominal supports
- People with IDD make a living wage, as per MIT Living Wage Calculator

**2. Adults with significant IDD – referred to as “high acuity” – can have successful, satisfying careers and contribute fully to their communities.**

### GOAL

- Increase the number of people with high acuity in paid employment by 2% annually

### STRATEGIES

- Prioritize person-centered planning or Discovery for people with significant needs on a pathway
- Use individual training and technical assistance at point-of-service
- Include families and stakeholders in planning and implementation
- Provide increased T/TA to providers focusing on people with the most significant disabilities
- Integrate employment approach and activities with other CS programs when and where appropriate
- Continue to support business to business marketing approach regarding individuals with high acuity needs
- Work with consultants

### STRATEGY STEPS

- Assure individuals and families have availability and access to connect with benefit analyses resources
- Work with consultants and technical assistance providers to refine and adjust the system of service provision
- Provide continued marketing and job development technical assistance to employment agencies
- Work with consultants on fund development to focus supplemental resources on technical assistance and community education and training for job placement and successful careers for people with high acuity needs
- Continue to refine the outcome data, focusing on what is working to place people with high acuity needs
- Pilot new technologies with system partners
- Meet consistently with DDA and DVR to learn about new technology and progress toward improved placements for people with high acuity needs
- Create a T/TA plan considering the strategies and activities, including estimated dates and frequencies of T/TA
- Track T/TA engagement with individuals and providers on an annual basis and provide updates to DDAB as needed
- Review the entire outcome data and report to DDAB annually

### MEASURES

- Staff review dashboard outcome data monthly
- Share data with DDAB annually

### OUTCOMES

- People with IDD high acuity needs will be hired more often, work more hours, stay in their jobs longer and enjoy greater career satisfaction
- People with high acuity needs get and keep at least a minimum wage job tailored to their support and plan needs
- People with high acuity needs make a living wage and have satisfying careers

**3. People with IDD and those who support them have more satisfying careers when the system focuses on high-quality services.**

### GOALS

- Involve DDAB in quality review and improvements annually
- Identify/research best programs in supported employment, identify key quality factors to produce winning outcomes
- Increase hours and wages in employment by 2% annually
- Conduct risk analysis, process evaluation, on-site or virtual monitoring at least once per biennium

### STRATEGIES

- Continue to clearly identify training needs with families, case managers, vocational rehabilitation counselors, providers, advocates and stakeholders, focusing on quality improvements
- Continue to refine, define and revise the contracting and monitoring process
- Continue to involve the DDAB,

## Community Assumptions Employment

- stakeholders and participants in the quality and feedback process
- Continue to consider additional resource development to support quality improvements
- Work towards services that foster expectations of reducing supports and an increasingly self-directed life, when possible

### STRATEGY STEPS

- Staff: Monitor and refine communication with stakeholders
  - » When monitoring or adjusting contracts, focus on quality improvements

- » Monitor contracts a minimum of once per biennium and as needed to ensure compliance
- » Work with consultants to develop additional resources
- Continue to offer ongoing employment consultant training through consultants and technical assistance providers
- Consistently explore metrics that will contribute to the quality of our services
- Annually involve the DDAB in the quality discussion and feedback process
- Adjust county policies and procedures as necessary

- Apply an equity lens to define quality
- Include historically unrepresented, unserved or underserved communities of color
- Develop and strengthen relationships with, by and for organizations and individuals within these communities

### MEASURES

- If needed, engage community focus groups to discuss direction and priorities in services and supports
- Report to customers, families and the community through this plan

### OUTCOMES

- People with IDD will experience improved services
- Data will show a reduction in the number of service contacts with people with IDD
- All monitoring, evaluation and public feedback will be completed in a timely fashion
- Customers will report 95 percent satisfaction in service
- Data will show consistent increases in wages and hours of employment



Mike Ferry

## Community Assumptions Children

### 1. Children birth to age 3 and their families benefit significantly from robust early intervention services

#### GOALS

- A family's ability to navigate the system improves
- Children with IDD and their families are better connected to their communities and schools
- The benefits of advocacy, parental education and leadership become evident
- Education and family expectations are made clear
- Potential for successful long-term service and career planning improves
- Quality of life improves
- Costs of services are reduced over time
- Families are introduced to whole life services and resources to meet basic needs

#### STRATEGIES

- Support children with IDD and their families in Clark County to learn about, access and receive early intervention services

#### STRATEGY STEPS

- Participate in the local Inter-agency Coordinating Council
- Provide T/TA to the local ICC as needed
- Collaborate with school districts and others to fund services for children birth to 3
  - » Continue collaborative funding
  - » Monitor access to screening for developmental delays and choices for families

- Focus efforts on inclusion of and outreach to diverse families
- Include information regarding whole life services on the website and social media

#### MEASURES

- Review data; revise formats and relevance as necessary
- Family feedback
- ICC reports and feedback; track and record meetings and discussions

#### OUTCOMES

- All eligible children will receive early intervention services
- Children with IDD in Clark County school districts have access to and receive early intervention services
- The lives of children with IDD and their families will improve, and the costs of services and supports as adults will decline
- Families will receive robust services
- Children with IDD will be integrated into their schools, communities and other natural environments

### 2. High school students with IDD enjoy careers when School-to-Work Transition services are robust.

#### GOALS

- Expand and Improve the Family Training series annually through feedback and collaboration
- Collaborate with the schools to engage students in employment planning to increase the num-

- ber of students graduating from school with a job
- Support academic goals to transition to colleges, trade schools, universities or apprenticeships that lead to higher paying jobs
- Engage with interested individuals and groups to share information and collaborate
  - » Provide for issue-specific transition meetings with DDA and DVR
  - » Continue to provide transition T/TA to employment agencies
- Work with consultants to secure additional resources for transition services and support; focus on transitioning students with the most significant disabilities
- Direct transition requests from community feedback including:
  - o Improved transportation for graduating students
  - o Improved health intervention for graduating students
  - o Improved mental health intervention for students
  - o Improved availability to health-care for students
  - o Improved housing options for graduating students

#### STRATEGIES

- Top priority is students graduating with paid employment for adult services
- Provide information to families of transition-age students and others still in school
- Expand training and technical assistance to the greater transition community, explore business options for trial work experiences for students

## Community Assumptions Children

- Include families of younger students in training and technical assistance efforts
- Enhance and expand Continuing Education for those who request it, e.g. Clark College, WSU Vancouver, WorkSource and other institutions
- Continue to prioritize technical assistance for transition services
- Increase awareness of Social Security Work Incentives for students, such as PASS and IRWE. Coordinate with the statewide brokerage - benefitU and Plan for Work
- Apply an equity lens.
- Include historically unrepresented communities of color underserved or unserved
  - o Develop and strengthen relationships with these communities
  - o Provide information in a culturally and linguistically appropriate manner
  - o Review and rework as necessary
- Continue to prioritize Technical Assistance services to complete person-centered planning



Tatiana Dyubanova

### STRATEGY STEPS

- Work directly with Clark County school districts, ESD 112 and other sponsors to review Family Training Series curriculum and update annually or as needed
- Connect with academic institutions as needed to collaborate, develop opportunities, and provide resources for post high school opportunities for people with IDD
- Develop one new transition project during this plan
- Strengthen multi-cultural outreach
- Expand Job Foundations project
- Continue and explore ways to expand and improve on-going Family Training series
- Continue to work with case management and DVR - plan for waivers for graduating students
- Work closely with the CCPC to ensure outreach and appropriate messaging to families
- Work with DDA, DVR, families, and school districts to ensure students who want adult services receive them
- Continue working with the Community Advocacy Coalition and Washington State Association of Counties to advocate for resources on behalf of transitioning young adults
- Develop new and upgrade existing information for families of youth ages 11-24
- Increase focus on families of younger children
- Continue to analyze the data and other relevant dashboard data

- Monitor legislative and local funding for young people leaving special education
- Provide training and technical assistance about Social Security and provide links to benefits analysis resources
- Gather, define, and review race/ethnicity data related to transition students

### MEASURES

- Review data quarterly, report to DDAB annually; adjust strategies as necessary
- Review T/TA provided annually; adjust schedules as needed
- Review placement and outcome data annually
- Consumer and family satisfaction surveys
- Collaborate with providers
- Coordinate with school districts
- Coordinate with local colleges, trade schools and universities
- Number of students enrolled in Job Foundations project
- Number of Job Foundations Reports completed

### OUTCOMES

- Community participation and partnerships increase
- Costs of services and supports decline
- People receive the services that they need
- All students with IDD graduate with employment or continuing education
- Job Foundations students graduate with a job
- Equitable access to information, services and jobs for historically underrepresented communities of color

## Community Assumptions Housing

**1. Secure, long-term housing enhances the lives of adults with IDD. Stable housing can contribute to improved employment and social opportunities, and enhances the safety and security of the individual and their family.**



### GOAL

- Support and monitor housing opportunities for individuals with IDD and their families
- Monitor and support housing conferences and information with customers - include on county website and other notifications

### STRATEGIES

- Continue to identify the status of available, affordable and accessible housing for people with IDD
- As relevant, work with groups and entities to develop local opportunities for individual choices in housing and home ownership
- Dispense information and options for housing; collaborate with housing partners as opportunities arise
- Support and monitor agencies and individuals to provide families with low incomes who have children with IDD to have access to energy, weatherization and rehabilitation information
- As relevant, refer housing requests to the appropriate entity or funder - consistently update issue-specific information on the website

### STRATEGY STEPS

- As relevant, provide and update information on housing options and availability to DDAB annually
- Work with family housing groups regarding DDAB membership and involvement
  - » Disseminate relevant information
  - » Recommend new strategies to DDA and other funders as relevant and requested
  - » As relevant, review reports and local information regarding homelessness in Clark County; adjust policy and procedures as required; report to DDAB
  - » Continue to explore local housing ownership laws and standards; report to DDAB
- Respond to calls and requests for information. Connect questions and challenges to the appropriate organization, or entity
- Collaborate with local housing groups
- As relevant or requested, disseminate and/or present fliers, brochures and other information at public events to case managers, families, DDAB

- members active in the housing community, among others
- Continue to coordinate and share information with the county's Community Action, Housing and Development program
- Establish baseline for number of individuals with IDD from communities of color who obtain permanent secure housing

### MEASURES

- Data sharing and information; reports to DDAB, information from DDAB
- Numbers of people with IDD obtaining permanent, secure housing, disaggregated by race and ethnicity
- Customer and family satisfaction comments, public feedback
- Annual housing and homelessness reports
- Reports to DDAB as needed
- Increase/decrease in housing needs as reported

### OUTCOMES

- More individuals with IDD and their families will have safe, secure and affordable housing

**1. People with IDD experience improvements in service delivery and ultimately independence when they and their families are fully informed about available resources.**

**GOALS**

- Provide information and supports for consistent Benefits Analysis (BA) and Benefits Planning (BP). Link individuals and families to the statewide benefits brokerage - BenefitU, DVR and Plan for Work
- Support presentations in community regarding BA and BP

**STRATEGIES**

- Support adequate capacity for BA/BP
  - » Information regarding BA will be made available upon request or as part of a discovery process
- Facilitate the coordination of the different BA and BP entities
  - » CCDD will promote BA and BP with individuals, families, case managers, providers, DVR and others.

**STRATEGY STEPS**

- BA and BP will support the use of Social Security Work Incentives for individuals and families through the BenefitU Brokerage and/or Plan for Work
- Connect and share information with local culturally specific organizations

**MEASURES**

- Include BP in outcome data
- Track customer satisfaction as relevant

**OUTCOMES**

- People with IDD and their families will access BA and BP as needed; track progress
- Employment outcomes will improve; costs of long-term services per person will decrease

**2. System services improve significantly when customers, supporters, stakeholders, partners, providers and the community have access to robust community information, advocacy and legislation.**

**GOALS**

- Strengthen community information, advocacy and legislation
- Improve services for people with IDD
- Provide periodic statewide leadership training for Parent Coalition staff and leaders
- Work with CCPC on legislative forums
- Work with CCPC on candidate forums as needed
- Receive regular updates from the CCPC coordinator
- Continue to strengthen and clarify website presence
- Produce new videos, video clips, media shorts as funds and opportunity allow
- Provide community members consistent information, training and technical assistance

**STRATEGIES**

- Maintain and strengthen presence with the Washington Legislature
- Maintain and strengthen relationships with Clark County government

- Improve supports to families who have children with disabilities. Focus efforts on support and identification of historically underrepresented communities of color, under- and un-served
- Support CCPC
- Increase community awareness by expanding availability of information to the community; consistently update the website
- Work toward organizing a robust cadre of professionals and consultants to share information, educate and inform

**STRATEGY STEPS**

- Continue to develop, refine and implement a strong legislative agenda
  - » Build strong relationships with local, state and federal public officials
  - » Conduct an annual meeting with local legislators
- The DDAB will take the lead in educating the Legislature, county council, and other entities to improve services for people with IDD
- Coordinate with parent coalitions statewide, community participants and stakeholders, parents and self-advocates
- Provide information to the Parent Coalition regarding DDAB activities and solicit regular feedback
- Continue to support parent leadership training related to IDD

**MEASURES**

- Report community education events and meetings to DDAB
- Track numbers of legislative



- forums and meetings; report to DDAB annually
- Regular reports from CCPC; report to DDAB annually
- Report quality improvements as needed and in Status Updates

**OUTCOMES**

- Community members will have consistent and complete access to information and knowledge related to services to and support for people with IDD
- Increase in multicultural outreach
- Informed Legislature and DDAB knowledgeable about advocacy opportunities

**3. Supports for individuals with IDD improve markedly when strong advocacy and infrastructure are in place and thriving.**

**GOALS**

- **Transportation** – Participate in planning and public meetings to ensure quality options and continued service because transit is critical to community access, everyday life and employment
- **Recreation and leisure** – Support and expand opportunities for people with IDD to be

- included in recreation, leisure and neighborhood activities
- **Health care** – Identify barriers to health care for people with IDD; improve and expand access to health care for people with IDD
- **Aging supports and services** – Explore and develop more retirement options for people with IDD; track annually
- **Customer service** – Conduct quality reviews and monitor services and programs to honor customer service; share information with the public

STRATEGIES AND STEPS

- **Transportation**
  - » Advocate for progressive, comprehensive transit service
  - » Partner with senior and rural groups, disability organizations, residential contractors and employers to maintain and enhance service
  - » Share comprehensive plan with C-Tran
  - » Provide regular updates to DDAB
  - » Coordinate with the Regional and Statewide Human Services Transportation Planning efforts
- **Participate on C-Tran Advisory Committee** as needed, requested
  - » Participate in advocacy organizations and board as requested, needed and is relevant
- **Recreation**
  - » Provide training and technical assistance to Vancouver Parks and Recreation as needed
  - » Disseminate information on leisure opportunities
  - » DDAB members act as advisors and connections to the community as needed and relevant (e.g. Clark County Parks and Open Spaces Plan)
  - » Provide needed training and information to case managers, families, CCPC
  - » Expand relationship with cities' parks programs and offer training as needed
  - » Share links to opportunities for recreation and leisure on the website and through social media
- **Health care**
  - » Work with Public Health to increase understanding of



- health needs and approaches for people with IDD
  - » Share information and connections to Healthcare providers and other system partners to increase access to adequate healthcare for customers - include new page on website
  - » Work with Health Care Authority and others to highlight health needs and care of children and adults with IDD
  - » Collect narratives of issues where individuals with disabilities have limited access to health care
  - » Identify and track community needs
  - » Reinforce to public that community services are not health care and should not be managed by the health care system; monitor and manage care and IDD issues
  - » Monitor integration related to mental health and substance

- abuse; work with other Community Services' programs related to behavioral health
  - » Provide training to physicians and Public Health
  - » Provide TA when appropriate
  - » Participate in Regional Health Authority work groups, as appropriate
  - » Participate as relevant, in annual healthcare conferences and events
- **Aging Supports and Services**
  - » Continue to identify senior options for people with IDD; track progress
  - » Increase awareness of generic senior community associations and activities. Evaluate consistently
  - » Strengthen collaboration with system partners regarding aging information and options - include on website
  - » Inform DDAB as needed; discuss viable senior options,

- make recommendations, disseminate information
  - » Discuss additional needs with CCPC as relevant; invite additional elements of service as they evolve
- **Customer Service**
  - » Update status of this comprehensive plan on annual basis
  - » Work with DDAB to consistently improve customer service
  - » Monitor employment organizations on an on-going basis; conduct risk analysis as needed, on-site or virtual monitoring every two years
  - » Refer to DDAB for feedback, definition or quality and system capacity
  - » Compare outcome data to state and national data; report

- to DDAB annually with recommendations
  - » Maintain Open Continuous Request for Information (RFI) and update as needed
  - » Continue to work with TA providers and national foundations for best practices, demonstrations
  - » Refine public data outcomes annually with DDAB, partners, providers and stakeholders
  - » Use interns as appropriate

OUTCOMES

- Community infrastructure and supports for individuals with IDD are consistently strengthened and improved by provision of robust information and advocacy

- Service outcomes in employment, independent living and customer and family satisfaction are improved annually
- Stories of full community participation from individuals with IDD are disseminated to all CCDD stakeholders

MEASURES

- Data, comprehensive plan, customer and family satisfaction surveys, DDAB feedback, stories
- Revised and completed data; revised and completed dashboard; records of customer feedback; success stories in employment and independent living; community navigation; full community participation



## Community Assumptions Community Resources

**4. Services, supports, efficiencies and outcome attainment are improved when the whole community is seen, included, educated and enlightened regarding equity. Successful services and outcomes result when each individual is welcomed to express their individual choices and opinions.**

### GOALS

- The DDAB will participate in organized and consistent training regarding equity. DDAB work sessions and other planned gatherings will reflect opportunities for updates and trainings

regarding equity.

- Planning for inclusion and equity will be a key element of our work – DDAB, staff, the provider community and stakeholders

### STRATEGIES AND STEPS

- Propose an initial training plan for DDAB approval
- Share information with our many publics and include summaries on the website
- Research culturally specific organizations, by and for organizations and community groups in Clark County
- Develop curiosity – consistently inquire regarding needs and supports

- Develop consistent relationships with culturally specific organizations and community groups to improve communication, mutual respect, trust and partnerships; encourage opportunities to connect; include the DDAB, staff, providers and stakeholders
- Establish feedback loops with consistent check-ins
- Assure plentiful access to language accessibility
- Honor cultural diversity
- Assure cultural and language accessibility at DDAB meetings and other community meetings
- Establish baseline to include race and ethnicity in data outcomes
- Include consistent updates on the website to include culturally specific resources and information

### OUTCOMES

- The staff and DDAB will be consistently informed and educated regarding equity including updates and evolution
- Equity will be a key element in the planning process for services and supports
- Community outreach regarding equity will be improved
- Program outcomes will be equitable across race and ethnicity

### MEASURES

- Community, provider, family, participant(s) and stakeholder feedback and stories
- Annual review with the DDAB
- Consistent updates in the plan prepared for DDAB approval



Mike Ferry



# Appendix

## LEGAL DEFINITION

Washington definition of developmental disability under Washington law, RCW 71A.0.020 (5), the state defines developmental disability this way: “Developmental disability means a disability attributable to intellectual disability, cerebral palsy, epilepsy, autism or another neurological or other condition of an individual found by the secretary to be closely related to an intellectual disability or to require treatment similar to that required for individuals with intellectual disabilities, which disability originates before the individual attains age eighteen, which has continued or can be expected to continue indefinitely, and which constitutes a substantial limitation to the individual.”

Washington Administrative Code 388-823-0015 further states:

“(1) To qualify for Developmental Disabilities Administration (DDA), you must have a diagnosed condition of intellectual disability, cerebral palsy, epilepsy, autism, or another neurological or other condition found by DDA to be closely related to intellectual disability or requiring treatment similar to that required for individuals with intellectual disability which:

- (a) Originates prior to age 18
- (b) Is expected to continue indefinitely
- (c) Results in substantial limitations.

“(2) In addition to the requirements listed in subsection (1) of this section, you must meet the other requirements contained in this chapter.

“If you have an eligible condition of intellectual disability, in order to meet the definition of substantial limitations you must have:

- “(1) Documentation of a full-scale intelligence quotient (FSIQ) score of more than two standard deviations below the mean per WAC 388-823-0720, and subject to all of WAC 388-823-0720 and 388-823-0730, and
- “(2) Documentation of an adaptive skills test score of more than two standard deviations below the mean as described in WAC ((388-823-0710)) 388-823-0740 and subject to all of WAC 388-823-0740 and 388-823-0750.”

## SERVICES

### CURRENT CLARK COUNTY SYSTEM

The developmental disabilities system is shared by the state and county. The Developmental Disabilities Administration of the Washington State Department of Social and Health Services is mandated to provide or pay for services for eligible children and adults with developmental disabilities. Services are provided to the extent funding is available through legislative appropriations and local designated dollars.

Case management services and state institution services are provided directly by state employees. The state contracts with local providers for family support services such as respite care and community-based residential programs. Other services jointly funded by the state and county include early intervention, employment and community inclusion. Recreation and leisure programs are supported by volunteers, local efforts and nominal fees paid to the specific programs. Access to all programs which have state funding is through the state case management system.

Besides funding direct services, counties are mandated to provide information and referrals, plan for the development of future services, and coordinate all local services for persons with developmental disabilities and their families. At the request of the community, Clark County also has a heavy emphasis on training, technical assistance and infrastructure development.

For many decades, services to people with developmental disabilities have been underfunded. Waiting lists have evolved into lists of people receiving “no paid services.” The Legislature has recently tried to make strides through the reinvestment of money, changes to the Medicaid State Plan and the implementation of new Medicaid waivers. While these sources have not solved the chronic underfunding, they have gone a long way to increase the availability of services and supports to children and adults living in the communities across Washington. During the course of this plan, the system will have to retool as the state and county adjust to altered revenues, new waivers and different ways of doing business.

More than specialized services, people with developmental disabilities need ordinary, everyday things all people need – employment, friends and a place in the community. A

variety of specialized services are available in Clark County for both children and adults with developmental disabilities. While they and their families may need supports from formal and informal systems, the listings here primarily represent formal specialized supports.

### SPECIALIZED SERVICES

Children and adults with developmental disabilities consistently demonstrate capabilities beyond the expectations of professionals, families, and service providers. More young adults with developmental disabilities benefit from special education and early intervention, and their expectations and those of their families are high. Growing skills among people with IDD coupled with rapidly advancing education, training and technology

mean the service system and community face constantly changing support needs of people with disabilities.

As use of generic, natural supports is encouraged and growing, some people with intellectual and developmental disabilities and their families will continue to need specifically designed services. Eligibility for supports and services for people with intellectual and developmental disabilities is contingent on the level of disability or delay, not an individual’s or family’s income. Children with developmental disabilities are born into families at all income levels, but more than 90% of adults with developmental disabilities in Clark County have incomes below the poverty level. This percentage is dropping slightly as more adults with disabilities find better job opportunities and advance in their careers.



## SERVICES FOR CHILDREN

### Overview

A number of programs and services are available in Clark County for children birth to 3-years-old who have developmental delays and their families. Some programs are designed specifically for children who have significant developmental delays, and these early intervention programs provide support and training for families as well as therapeutic services for children. Currently, the emphasis is on providing services and supports for children in typical places and supports for families, so members can do much of the teaching and therapy within a child's daily routine. Services such as training and education for parents, support groups for families, adaptive equipment and individualized therapies are currently available. Since fall 1989, local school districts and Educational Service District 112 have collaborated with Clark County to pay for services for children birth to three, and the state mandated school district involvement in 2009. Clark County Early Support for Infants and Toddlers and the local Interagency Coordinating Council have enhanced community outreach efforts since then.

### Education/Information

The availability of information and training opportunities – even generic parent education programs – are crucial to most families of children and adults with developmental disabilities. Clark College, for example, offers parent education classes for families of children with and without disabilities. Parents enroll as students and with their children, participate in a variety of developmental experiences.

Specialized information opportunities can be developed to better support the needs of families whose children experience a substantial delay or an intellectual/developmental disability.

### Family resource coordination

Clark County Early Support for Infants and Toddlers offers information and referrals to help families reach services for young children with possible developmental delays. This service is designed to assist families and non-specialized service providers. Information, assistance and support are used primarily when families are making decisions about services or connecting to community resources shortly after experts identify a delay.



### Family support

Currently, the state Developmental Disabilities Administration provides direct and indirect financial support to families to help them with family members with IDD who live at home. The money can be used for a variety of goods and services including respite care, planning, community engagement and specialized therapies.

### Parent Coalition

The Clark County Parent Coalition is sponsored by the Clark County Developmental Disabilities Program. Its purpose is to provide people with disabilities and their families with a support system that:

- Links them with their community and helps them better understand and access various systems.
- Involves them in decision making at the state and local levels.
- Provides current, accurate information and networking opportunities.
- Forms a power base to advocate in the community for meeting the needs of people with disabilities.
- Helps new parent groups get established.
- Serves as a resource for leadership and leadership development in new and existing groups.

Parent Coalition plays a major role in keeping families of children and adults with developmental disabilities well informed. Members provide regular leadership training and have a staff that supports the state's second largest Spanish-speaking parent group.

### Parent-to-Parent

The Parent-to-Parent Program connects families to local support groups, provides emotional support and information, and shares resource ideas and peer connections. It organically connects parents of children with disabilities and delays with other parents.

## SERVICES FOR ADULTS

### Benefits analysis/Benefits planning

As personal income for people with developmental disabilities has increased, the complexity of managing finances and benefits also has increased. Benefits analysis is the review of and planning for the use and coordination of an individual's benefits. Planning should be provided by a professional experienced in Social Security, SSI regulations and other resources that could be available to the person with disabilities. DDA eligible customers can seek

assistance through Benefit U. Benefit U offers content and resources and is available to anyone interested in learning more about their benefits. Benefit planning services are open to 14 years and older who are also receiving services through DDA. For those who might not qualify for services through Benefit U, Benefits Planning may also be available through DVR or Plan for Work.

### Employment

The major focuses of services for adults with developmental disabilities are employment and community inclusion that will lead to employment. Employment offers everyone access to other community members, a way out of poverty, a path to a living wage and independence from a service system. When employment is not possible right away, services can help people on a path to employment by supporting them in their communities and strengthening relationships with other community members.

Two broad categories of employment services are available to Clark County adults with developmental disabilities. They are Competitive Employment and Supported Employment, which includes Customized Employment.

### Competitive Employment

The Division of Vocational Rehabilitation has primary responsibility for competitive employment programs. It can provide short-term vocational assessment, placement, and training. People must rely on their own skills to maintain themselves in the job, since people in the program are seldom tracked once they are placed on a job. This alternative offers a wide range of work choices and possibilities but no long-term support.

### Supported Employment

Supported employment is paid, competitive employment for people who have severe disabilities and a demonstrated inability to gain and maintain traditional employment. Supported employees work in a variety of typical, integrated business environments (WIOA 2014) and alongside employees without disabilities or the self-employed. They earn at least minimum wage and get help finding and maintaining a job. They can benefit from promotion and contribute to workplace diversity. The employee, employers and/or coworkers get support through, for example, on-the-job training and long-term assistance.

Supported employment is different from traditional rehabilitation services.



Traditional services focus on short-term assistance and training that results in long-term employment. For many people with disabilities, initial training and brief assistance will lead to meaningful and lasting competitive employment. For others with more severe disabilities, short-term support is insufficient for obtaining and maintaining employment, and supported employment is the perfect fit.

Another supported program – individual employment – offers work to people with severe disabilities in local business or industry on a one-person-one-job basis. A support organization develops a job based on an individual’s interests, helps train the person, and provides ongoing support for the employee, employer and co-workers. Self-employment has emerged as an option for some. These jobs, whether self-employment or individual employment provide wages at or above minimum wage with the goal of a living wage. The support organization assists the individual with the mutually agreed upon details of the business.

And customized employment now is included in the definition of supported employment. Customized employment is competitive, integrated employment for an individual with a significant disability. It is based on a determination of the person’s strengths, needs and interests and is designed to meet the needs of the person with a disability and the employer. (Rehabilitation Act)

Individual employment continues to be the preferred employment option for Clark County and the state. It is the most requested service and the priority for county funding. Wages tend to be higher and opportunities for inclusion greatest in this type of employment service.

When employees stay on their employment paths, career advancement and asset building become the focus of services and supports.

#### **Employment and day program services**

The number of people receiving services is expected to grow as young adults leave special education. It will also grow as a result of people who move to Clark County and others



Beth McKenney

become aware of services and connect with DDA. From 2015-2020, funding has been available for those leaving school systems, but continued funding is uncertain.

#### **Planning**

Independent, third-party planning services called “person-centered planning” are available on request. The approach creates a team to help people plan for their future and focus on the vision of what they would like. Person-centered planning focuses on the unique values, strengths, preferences, capacities, needs and desired outcomes of the individual with developmental disabilities.

#### **RECREATION AND LEISURE**

Recreation and leisure opportunities for children and adults with disabilities are important to their quality of life. The community offers a wide variety of opportunities with varying degrees of support.

#### **Community Inclusion**

Community Inclusion offers retired persons with devel-

opmental disabilities individualized services in typical integrated community settings. Services promote connection and participation so people can independently engage in their community. Activities provide opportunities for learning and relationships and chances to practice and apply skills that result in greater independence and community inclusion. These services may be available for working-age people who have received nine months of employment support or have not found a job and have decided to stop looking for work.

#### **Education**

People with developmental disabilities can enroll in generic higher education classes at Clark College and Washington State University Vancouver. Some people have worked out modifications or accommodations that have enabled them to attend classes. Interest in higher education options for young adults with developmental disabilities is growing, and discussions are beginning with Clark College and WSU Vancouver to encourage the inclusion of students with developmental disabilities.

#### **Parks and recreation programs**

Parks and recreation activities provide the opportunity for people of all abilities and backgrounds to meet and share time in ways that encourage friendships to take root and flourish. Vancouver Parks and Recreation offers specialized opportunities for children and adults with disabilities, and the city staff welcomes and offers supports to everyone who attends recreational classes and programs. Classes can include individual sports programs such as swimming, jogging, weightlifting, and skiing; craft classes such as pottery or woodcrafts; or outdoor activities such as hikes or day trips to various events and places. A fee is typically charged. Vancouver sponsors most park and recreation programs in Clark County, including summer day camps, which are popular with families of children with disabilities.

#### **People First**

People First is a self-advocacy group where people with disabilities meet to learn their rights and responsibilities as members of our community. The group is open to anyone over the age of 18.

#### **RESIDENTIAL SERVICES**

Residential programs provide supports for eligible adults in a variety of different living alternatives. The programs are operated under contract with the state, and the

Developmental Disabilities Administration provides oversight. On request, case management makes a referral to a community residential provider. The current options in Clark County are non-facility based. They are:

#### **Adult Family Homes**

Over the past 25 years, Adult Family Homes have become one of the most available residential choices for people with developmental disabilities, although they are not paid for by the Developmental Disabilities Administration. The homes are licensed and regulated by Residential Care Services under the state Department of Social and Health Services. Providers are paid a service fee, often from a resident’s SSI check and Medicaid Personal Care, for room, board and supervision or care. These homes are not required to provide training or habilitation services but may receive additional monies for doing so. The quality of care and training residents receives varies greatly.

#### **Companion Homes**

The Companion Home is a model of 24-hour support and care. Providers make a commitment to the resident to share their home, including the resident as a full member of the household. Other services include supervision, personal care, transportation, activities, and necessary support. This housing option can work particularly well for people with greater support needs and those with autism. This option should be further explored and developed.

#### **Independent living**

More than ever before, people with developmental disabilities live in their own homes or apartments without formal or paid supports. Occasionally, this option – which is not a service or program – incorporates low-income Section 8 housing as well as informal supports, such as assistance from family, friends and companions or roommates.

#### **Living with family**

Living at home may be an option for some families with adult children who have disabilities. Families who select this option may not always be able to care for their children, so long-range family planning about housing, guardianship, day programs, employment and recreation is critical.

Most transitioning students must live at home unless a crisis or other unusual situation arises. Some families might lack alternatives or access to suitable alternatives. A Developmental Disabilities Administration case man-

ager can assist families with some service options if the person chooses to remain at home.

**Supported living**

Supported living is a non-facility-based residential service for people who live in their own homes or apartments. People receive support from organizations certified by the state to provide assistance and training, ranging from a few hours per month to 24 hours a day. Residents pay their own rent, utilities, food and personal expenses, and the state pays for a staff member to provide support and training.

**Residential services conclusion**

This array of housing alternatives does not ensure adults with severe disabilities will have access to the most appropriate option. People frequently face long waits, and some options may exclude some people. Clark County has made substantial progress developing housing for people with developmental disabilities. Specialized non-profits have received local, state and federal dollars to support infrastructure development, and that has increased the availability of affordable, accessible housing. Home ownership is an option that will allow an individual to build equity and stabilize housing costs, but housing in Clark County is difficult for most people, and particularly so for those who have low incomes.

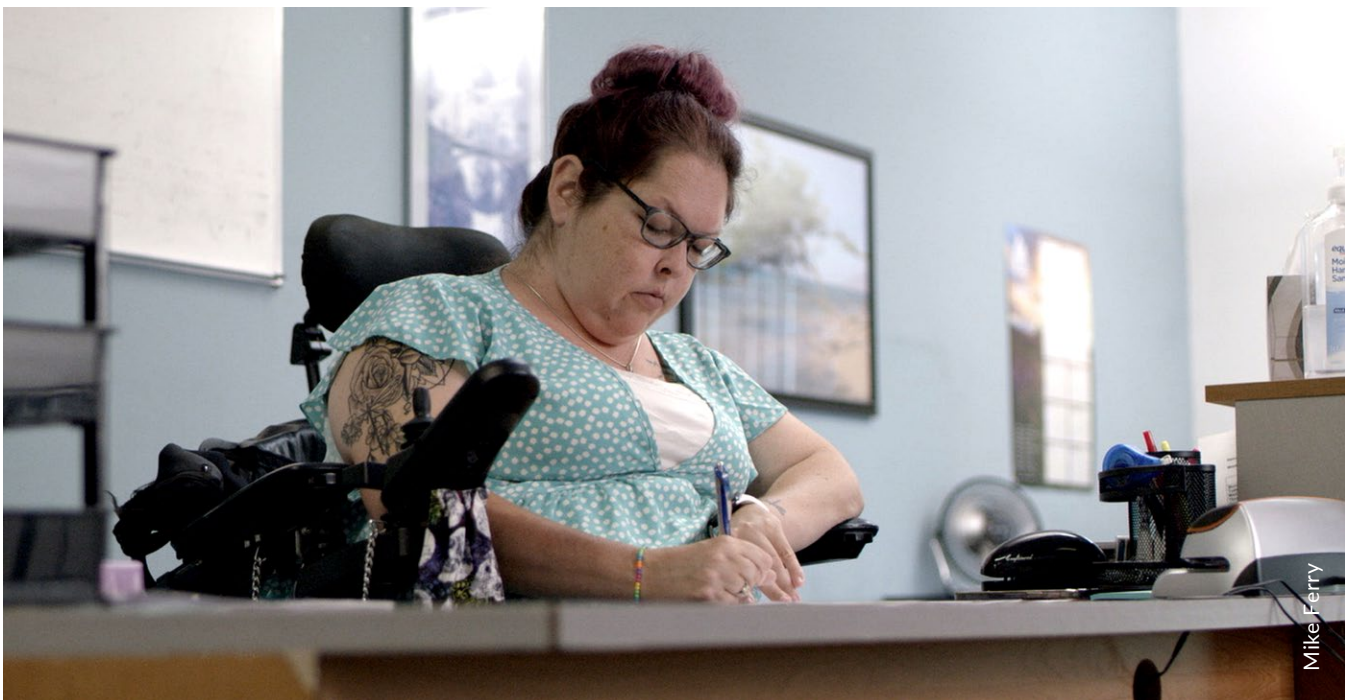
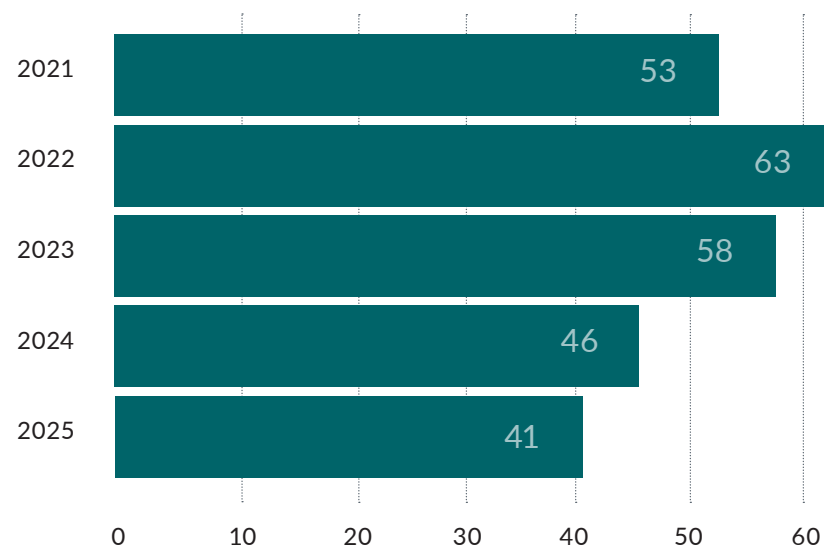
The lack of residential support and training services is on-going, especially for young adults graduating from special education programs. Some families have created their own informal supports, but not all families can, especially if an individual has high support needs. More, new and varied housing options are a growing need in the county, and various community groups are exploring options.

**LOCAL SERVICE NEEDS**

For many years, the formal service system’s capacity has lagged behind the needs and requests for services throughout Washington, including Clark County. In recent budget years, the Washington Legislature and governor have taken steps to provide services for people on the no paid services case load. Creativity remains necessary to be as efficient and effective with resources as possible.

Clark County’s system for people with developmental disabilities has been working on strategies to cope with limited resources. One is to continue working collaboratively with other systems, which reduces duplication and maximizes resources. Collaboration with the public school system around early intervention and transition is another strategy, and interest in young people leaving special education with jobs is high. Developing more ways to work with businesses that employ people with developmental disabilities is important to expand the formal services system capacity.

minimum number of transition students expected 2021-2025



Mike Ferry

The number of children and adults on the autism spectrum continues to grow. Sometimes these people and others who present challenging behavior require increased/heightened collaboration between systems and services. Providing training and information to health care providers, mental health providers and others will continue to be a priority.

Partnerships with vocational rehabilitation and public transportation are critical for people with developmental disabilities and their families. These partnerships have been strong in Clark County, and they are expected to continue.

**Transition**

During the previous five-year plan, services to students transitioning out of special education were a priority. In spring 2013, the Washington Legislature appropriated funding for 734 young adults leaving the statewide special education system in that year and next. Funding again was identified for employment services in 2015-2020. The county, state and public education must work closely with families to receive services provided by state dollars. Services to young adults are again a high priority for both the community and the Clark County Developmental Disabilities Advisory Board. During the course of this plan, over 300 students are expected to graduate from local school district programs, and requests for employment and other services are expected to reach levels similar to previous years.

**Capacity**

Neither the state’s nor Clark County’s service system for people with developmental disabilities has kept pace with need and demand. The number of people in need of services across the state is growing. During the Great Recession, some people lost some or all services, and counties, including Clark County, faced inadequate resources. For many years, the national dialogue has included the concern about lacking resources to support service capacity. The ability of service providers to staff programs has reached crisis levels in recent years, particularly with our residential partners. As long as federal, state and local resources for social services remain inadequate, the service system capacity problem is expected to grow. Families, providers, jurisdictions and the community must be creative to be as efficient as possible with scarce resources.

In Clark County, the service system community has been working on strategies to increase capacity. One is to continue developing collaborative relationships with other systems to reduce duplication. Examples include collaboration with public school districts to meet the needs of children birth to 3 years and young people transitioning out of special education. Developing creative ways to work with businesses that employ people with developmental disabilities also continues to be an important way to expand capacity.

As the number of people with autism and other disabilities associated with challenging behavior increases, collaborative



Halfpoint

efforts are needed to train health care and mental health service workers. Never before has it been so important to work in partnership and eliminate duplication. Well-trained, competent providers in Clark County are important for the most effective, efficient services possible.

#### *Informal supports*

People help each other at work every day. Neighbors support each other informally in various ways, and places of worship help their members and others by providing transportation, emotional support and sometimes meals. Regardless of one's abilities, not all assistance in life comes from a formal service system or organization.

Many informal community supports have been eliminated from the lives of people with developmental disabilities. With the advent of formal services, willing informal supporters can be overlooked or excluded. Neighbors, friends and extended family cannot be expected to replace formal services, but similarly, formal support services cannot replace informal sharing or assistance outside a service plan.

During the course of this five-year plan, Clark County will endeavor to partner with people with developmental disabilities, families, formal service providers and the community to explore and expand reciprocity, time banking and the role of informal supports. Formal services should augment rather than replace informal supports for people with developmental disabilities and their families.

#### *Future directions*

The percent of people with developmental disabilities in Washington remains fairly constant. Some children with delays will need services and supports as adults. But the availability of high-quality early intervention services can reduce or eliminate the need for future services.

Young people ages 18-21 account for the age group with the greatest growing need for services. This trend is expected to continue, and considerable effort will remain focused on young adults transitioning out of local school districts. Research shows that gains the special education system gives young adults can begin to fade after a short time at home if no employment or additional education opportunities are provided. Reaching these young people early to preserve and capitalize on efforts and results of the special education system will be a challenge. The number of people with IDD who are reaching re-

tirement age continues to rise steadily. During the next five years, we need to find new ways of providing services to these people and connecting them to activities and other seniors.

The astounding increase in the number of people with autism has garnered national attention. For many years, researchers and providers believed autism occurred in 4.5 of every 10,000 live births. The Centers for Disease Control and Prevention now estimates that autism spectrum disorders affect 1 in every 54 children. Communities, schools, employers and service and health care providers all need increased training and information to appropriately serve and include people on the autism spectrum.

The number of children and young adults on the autism spectrum is growing significantly in Clark County. The community continues to need information, education, training, and technical assistance to understand the unique needs of these people and their families. Some local expertise has been developed, but it is not sufficient to adequately meet the growing demand. Efforts to collaborate with education agencies, technical assistance organizations and the community will be important to understand the complexities of supporting children and adults with autism. In many cases, strategies that support children and adults on the autism spectrum are best practices for all people, especially because we no longer have the resources or luxury of ineffective practices. Most children and many adults with developmental disabilities live with their families, and the community has no expectation this will change dramatically. The majority of people considered medically fragile and adults whose parents are becoming elderly also are living with their families, making support to families more important than ever.

The number of individuals and couples who live independently has increased over the past 10 years and remains high. Many require a little support from a service system or family, but that support looks quite different from the long-term care of the past. Housing groups are exploring different ways to support young people who want housing options, and more couples are marrying and some becoming parents. Support for couples and families should be explored.

#### *Service changes*

Over the past 30 years, the service system's focus has moved away from the deficiencies and inability of people with intellectual and developmental disabilities and beyond forced segregation. The focus now and into the

future is on individual abilities, personal choice, independence and inclusion in all aspects of the community. Washington identifies four trends driving the growing demand for services. They are: continued increases in life expectancy; an increasing number of parents becoming too elderly to care for their adult children; medical advances that save the lives of premature infants; and the state's general population growth.

The lack of available services for individuals and families poses some risk of returning to congregated and segregated services. While these are not less expensive, they seem less complicated to manage. The wider community will need vision, vigilance, and creativity to keep the service system moving forward, serve increasing numbers of people, and avoid a return to the past. After all, recent federal actions and lawsuits view segregated services as discriminatory and frequently exploitive.

The movement to self-determination and person-centered services as well as changes in federal policy may be the momentum needed for system change. This might be the opportunity to create more equitable, effective, and efficient systems to support people with developmental disabilities and their families.

With the Affordable Care Act of March 2010, Washington was poised to implement health care reform. The health care delivery system has undergone significant changes in response to the ACA, and Washington and Clark County are participating in their implementation. Clark County was the state's first Early Adopter of complete integration of primary care and behavioral health. Integration was completed April 1, 2016.

Since November 2010, Washington has sought public comment related to changes in the state health care delivery system. The disability community has consistently said health care for people with developmental disabilities should be managed in ways typical of the general population. Also, employment and residential supports are not health care and should not be managed by health care providers. The community has little confidence in a medically run model of supports for people with developmental disabilities, given the long history of institutionalization, forced sterilization and practice of over medicating.

State and county services continue to emphasize that people with disabilities can work and can pursue a path to

employment. The importance of employment in people's lives, including adults with developmental disabilities, is again being emphasized, and state policy has prioritized employment and reinforced the value of employment for people with developmental disabilities. This policy does not, however, eliminate community connections services for people who have not been successful in employment. Services and supports developed in the next five years will continue to be individualized and self-directed.

Support for the Residential Guidelines and County Guide to Achieve the DDA Guiding Values continues. In 2015, a new workgroup reviewed and reaffirmed both documents. The Developmental Disabilities Administration's Guiding Values combines the documents and outlines the over-arching values about how services should be designed and delivered.

These documents reaffirm the following values for people with developmental disabilities and their families:

- Power and choice
- Inclusion
- Relationships
- Status and contribution
- Competence
- Health and safety

In Clark County, the governing principle for the provision of services is that people with developmental disabilities and their families should have as much control as possible over resources. Supports will be individualized and opportunities should promote a person's ability to live as independently as possible. Supports are to enhance people's abilities by helping them grow in personal relationships, have choices, have a valued social role, and be participating members of the community with ordinary living experiences. County services will continue to emphasize individualized, flexible services that promote inclusion and community connection.

For the duration of this plan, we will increase emphasis on individualized supports, the evolving use of technology, and the use of best practices in service delivery. The amount of support will continue to relate to need and be coordinated by the state with increased use of Medicaid waivers. We need to maximize Social Security work incentives and other federal incentive programs. These benefits can expand or enhance supports available to working people with developmental disabilities. Since 1989, requests for segregated

services have steadily declined, and at this time, there are no publicly funded segregated services in Clark County. As the Department of Labor, the Department of Justice and Medicaid continue to issue new policies and civil rights complaints are litigated, segregated services in Washington ended in 2019. Inclusion is firmly embedded in Clark County and is expected to continue as an increasing number of students graduating from local high schools have community-based work experience. More young people are leaving public education with jobs. A priority for service in the future will be young people who graduate from local schools with paying jobs.

As technology becomes an even greater part of our lives, families and system partners must find ways to include children and adults with developmental disabilities in the benefits. Many advances in technology can help people with disabilities live increasingly typical lives. The county has been experimenting with a few of them, but the challenge over the next five years will be to provide

more opportunities for more people to participate in and benefit from technology advancements.

Building a community's capacity to include all members ultimately reduces costs to formal service systems and enhances the quality of life for everyone. Efforts will be directed toward improving Clark County's capacity to understand, include and welcome residents with disabilities into all aspects of community life. Associations, institutions, and businesses should be viewed as potential partners in community building because they already have demonstrated a willingness to include and support people with intellectual and developmental disabilities.

While funding remains constrained, new and more effective business practices and partnerships must be forged. The county, specialized service providers, other services systems, generic services, school districts, C-Tran and others can no longer operate in isolation. It is essential that resources are coordinated.



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## Clark County Profile

### Community partnerships

The ability of groups to work together to find local solutions for local problems is one of Clark County's greatest strengths. Examples of broad partnerships can be found in all segments of the community.

Community partnerships have become critical to children and adults with developmental disabilities. Clark County's tremendous population growth, increased demand for services and reduced public funding make expanding these partnerships essential.

Collaboration between the county and schools has ensured access to early intervention services for all children birth to 3 years. It also has expanded service options for children and eased families' transitions to school district programs while maximizing resources available to both systems.

For the past decade, the county and most school districts have partnered to improve outcomes for students with developmental disabilities who are leaving special education. As school districts have become increasingly aware of the adult system and strategies for employment, educators have developed better plans and outcomes for young adults. Future partnerships need to include expanded access to higher education for some people with developmental disabilities.

Partnerships with local businesses have expanded the availability of community-based jobs for adults with

developmental disabilities. Employers are increasingly aware of the positive contributions people with disabilities can make to their businesses. The employers often promote hiring by other businesses. Major companies, small businesses and government agencies employ people with developmental disabilities, and their involvement is expected to continue.

### Community strengths

One of Clark County's major assets is its location. The county offers a quieter lifestyle while being close to Portland, Oregon. A geographically small county, most areas – urban, suburban or rural – are within a short distance of one another, and people are fairly familiar with all areas of the county.

Community awareness continues to grow. Fifteen neighborhood associations in the unincorporated area provide access to government officials, venues to air concerns and opportunities to solve problems. In this time of limited resources, neighborhood associations are a valuable resource.

Numerous other associations mobilize various sectors. Leadership Clark County, for example, was created to identify people of great potential and mentor them to become community leaders. A variety of other service organizations, churches, sports groups clubs, and political associations are active. These associations, together with efforts of local individuals, are basic community-building resources.

Clark County has a vast array of public, private and non-profit institutions. Clark College, Washington State University Vancouver, PeaceHealth Southwest Medical Center, Legacy Salmon Creek Medical Center, Fort Vancouver Regional Library District, police and fire departments, school districts, chambers of commerce and local governments represent a significant concentration of resources. Their leaders ensure the organizations contribute to the social, physical and economic health of the community.

During the next five years, a focus of this plan will be to find ways for people with developmental disabilities to increase participation in local associations and institutions. Whether through jobs, education, clubs, churches or youth activities, people with developmental disabilities have the desire and capabilities to make unique contributions to their community.

### Demographics

Clark County is in Southwest Washington, north across the Columbia River from Portland, Oregon. The county is considered part of the Portland metropolitan area and shares the economic and population growth of the region. It also competes with other regional counties for economic development opportunities.

During the growth boom of the 1990s, the county changed from a largely suburban-rural community to one with a sizable urban population. By the 2000 U.S. census, major high-tech manufacturing and other industries had moved into Clark County, further altering the nature of the community. Most of the population growth since 2000 has been migration from outside the county. Growth slowed slightly during the recession but has resumed and Clark County is now the second fastest growing county in Washington.

Growing communities and aggressive development have taken over much rural land. Business development is now dispersed throughout the county, with particularly dynamic development in the east and north. By the 2020 census, Clark County had grown to 503,311 people, an 18.3 percent increase since the 2010 census. Clark County continues to be the fifth most populous county but ranks 35th out of the state's 39 counties in terms of land, making this county a densely populated area.

### Employment

In 2000, the unemployment rate for Clark County was 4.2%, considerably less than the state unemployment rate of 5.2%. Since then, there has been a volatile shift in unemployment in both the county and state. In March 2010, the state unadjusted unemployment rate grew to 10.5%, while Clark County's unemployment rate was 15.6%, among the highest in the state. By October 2019, the county unemployment rate had dropped to 4.8%. In May of 2020 impacts from COVID-19 drove the county's rate up to 14.6%. By July 2021, the county unemployment rate dropped to 4.6%.

Clark County's reliance on employment in the technology and manufacturing sectors resulted in the community being particularly hard hit by the Great Recession and that largely helped the county jobs to weather the COVID-19 pandemic.

People in Clark County identified by age group



Birth to 3 years • 867	22-45 years • 1,001
4-17 years • 874	46-64 years • 316
18-21 years • 222	65+ years • 89

*data has no date parameters and is a snapshot in time—August 2021*

Over the past 30 years, people with developmental disabilities have steadily moved into the workforce. By 2004, almost all working age adults were employed or looking for work in businesses throughout Clark County. Both private and public sector employers have responded positively to hiring people not previously part of their workforce. This trend continues despite economic pressures, as more employers become aware of the contributions people with developmental disabilities can make to their companies. During the COVID-19 pandemic, people with disabilities were part of the essential workforce, working to assure that services in the community were maintained and the population's basic needs were met. As inclusion powers America's recovery, people with disabilities who want to work are poised to meet the demand as Clark County faces labor shortages.



Mike Ferry

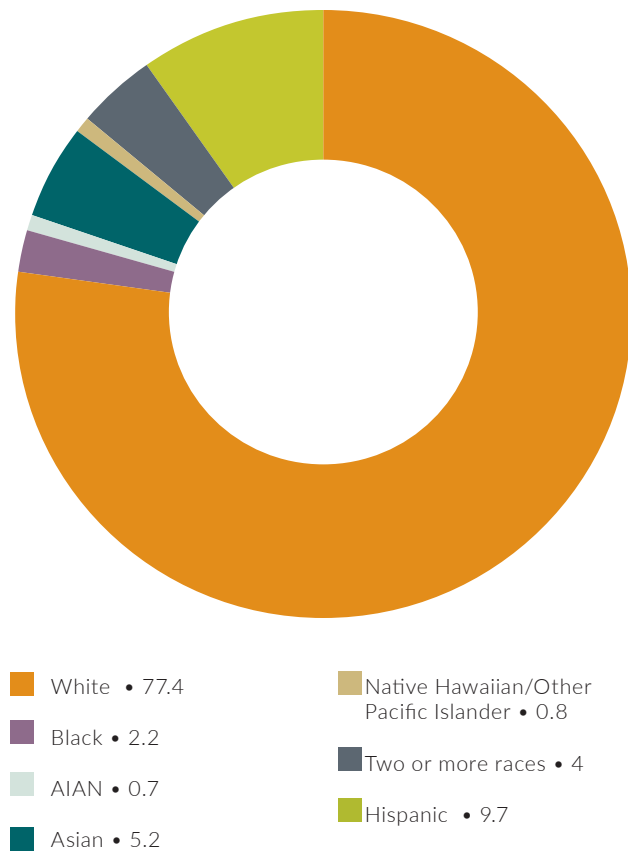
**Diversity**

Clark County continues to become increasingly more racially and ethnically diverse. In 2020, the Clark County Council passed a resolution condemning systemic racism and another one identifying it as a public health crisis. This relates to this plan as economic stability is a social determinant of health. This plan identifies equity as a priority, and it is threaded throughout the plan. The chart below reflects the general population demographics by race and ethnicity in Clark according to the 2020 Census.

**Housing**

Population growth and low interest rates make the housing market in Clark County strong. The median price of a home is now \$425,400. The median income for a family of 4 in 2021, based on federal data for the Portland metropolitan area, was \$96,900. U.S. Census quick facts estimates Clark County’s median household income for 2019 at \$75,253. Rents have continued to rise and now the median rent for a two-bedroom unit is \$1,795. A national publication expressed concern that people with disabilities are being priced out of the housing market.

Race as percent of County population 2020



Apartment vacancy rates in fall 2018 were reported at 5%, among the lowest in the state. Vacancy rates below 5% tend to drive prices up. As of the Spring of 2021, vacancy rates in Clark County for all apartment types was 0.8%. According to the University of Washington, some of the extraordinarily low vacancy rates are possibly due to both the COVID-19 economic reopening occurring simultaneously with the statewide eviction moratorium remaining in place. This would act to accelerate the downward vacancy trends that were occurring prior to the outbreak of the pandemic. Vacancy rates this low tend to drive up prices.

Affordability has been an issue for many county residents for many years, but particularly for those who have low – 50% of median income – or very low – 30% of median income – incomes. Most adults with developmental disabilities have stable, low or very low incomes, making safe, affordable and accessible housing a significant issue.

During previous comprehensive plans, the community made a consistent effort to increase the affordable and accessible housing stock available to people with developmental disabilities, and in fall 1997 Teammates Condominiums opened. The eight units are both affordable and accessible. They represented a unique public-private partnership among families, young adults with disabilities and housing financiers. Since then, several additional projects, including Teammates II, Condo E, and others, have been built. Cascadia Village opened in January 2004. Despite the progress, affordable, safe housing continues to be an increasing concern for people with disabilities.

**IDD community**

Three of every 100 people, or 3% of the U.S. population, or 15,099 Clark County residents in 2020, have a disability, according to national prevalence formulas.

Based on population and prevalence formulas, approximately 9,060 children and adults with developmental disabilities – 1.8% of the total 2020 population – live in Clark County and would be eligible for developmental disabilities service. Currently only 3,122 individuals are known to the state Developmental Disabilities Administration and eligible for state-funded services.

**Living arrangements for people with IDD**

People with developmental disabilities live in a variety of settings throughout the county. The following data are based on people known to receive state case services. Most children and adults live with their families. Thirty-three children with developmental disabilities live in foster care, and 241 adults live in their own homes with no formal support services. The remaining adults either live in homes with supports or in homes with generic formal support programs sponsored by the Washington State Department of Social and Health Services, which provides long-term care.

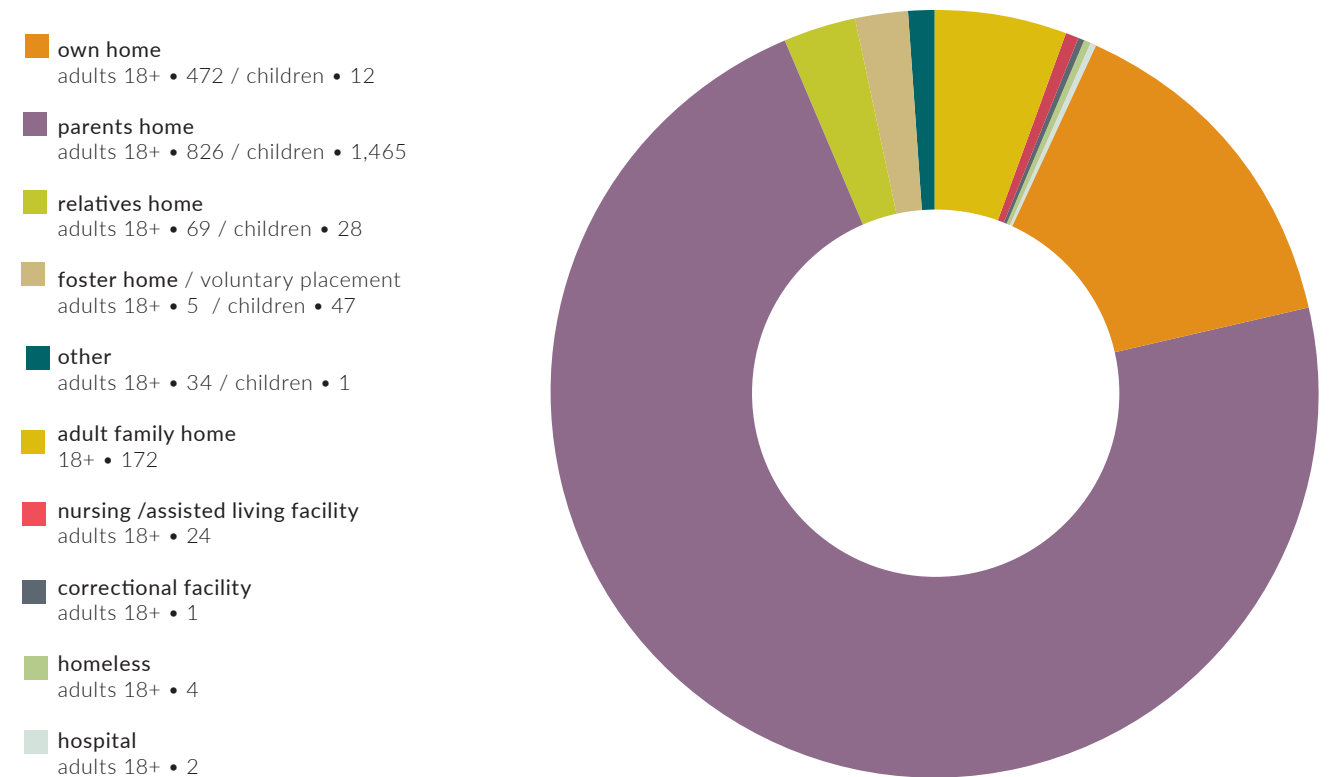
**Transportation**

A variety of public transportation is critical to people with developmental disabilities and their families. Most adults with developmental disabilities do not drive and are dependent on public transportation to get to work, school, recreation, shopping and community activities. While many people successfully use fixed route buses, others need a more specialized support service. In addition to the public bus system, there are many options to assist people with disabilities to access transportation



Beth Conyers

People in Clark County identified by type of residential service



through the Human Services Council. These options each have unique purposes and eligibility criteria and sometimes combine C-Tran bus rides with other options. The Clark County Public Transportation Benefit Area, or C-Tran, began countywide service in 1981. Boundaries of the service area were changed in 2005 to exclude some unincorporated areas. Fixed route service is provided in urban areas, some rural areas and along commuter routes to Portland. The commuter service connects directly to Portland's fixed route and light rail systems. All C-Tran buses are bicycle rack-equipped and lift-equipped on all Clark County routes. Use of lifts for wheelchairs and scooters, as well as use of the bicycle racks, increased rapidly shortly after the equipment was installed. People with IDD should be encouraged to take fixed-route services as much as possible for timely service at a reasonable price.

Demand Response is a combination of the ADA compliant services Dial-A-Ride, Connector and Amtrak. Specialized service has been available since 1983 and is, in part, a door-to-door or curb-to-curb service that parallels C-Tran. The ADA portion is designed for people who are elderly or have a disability and are unable to ride the fixed-route buses. In 2019, Demand Response provided 264,391 passenger rides and traveled more than 1.82 million miles. Requests for this service are expected to continue to grow as the economy improves, the county's population ages, and people with

disabilities increasingly are employed and active in community events.

C-Tran has redesigned its mobility training service. To increase efficiency, this service has evolved to a "train the trainer" model. Caregivers, families and others are encouraged to learn how to train individuals to use the public transit system.

C-Tran continues to grow. In 2019, C-Tran provided 6,295,062 rides. Lack of current service to some areas has been a problem for people with disabilities who live in rural areas and for businesses wanting to hire people with disabilities. In fall 1999, voters passed Initiative I-695, reducing C-Tran's revenue by 40 percent. Continued budget shortfalls and cuts have further stretched the transit agency's budget. With significant community input, the agency has tried to minimize the impact of the cuts. Service reductions have taken place in several waves of service redesign and restructuring. C-Tran is trying new service models in areas where fixed route service has been reduced. C-Tran passed local taxes in 2006 and 2011, which helped service funding significantly.

C-Tran's overall growth has flattened mainly due to falling gas prices. In 2014, C-Tran provided 6,061,350 rides. Lack of current service to some areas has been a problem for people with disabilities who live in rural

areas and for businesses wanting to hire people with disabilities. In fall 1999, voters passed Initiative I-695, reducing C-Tran's revenue by 40 percent. Continued budget shortfalls and cuts have further stretched the transit agency's budget. With significant community input, the agency has tried to minimize the impact of the cuts. Service reductions have taken place in several waves of service redesign and restructuring. C-Tran is trying new service models in areas where fixed route service has been reduced. C-Tran passed local taxes in 2006 and 2011, which helped service funding significantly.



# History



## History of developmental disabilities public policy

Major policy shifts have occurred in the past 75 years, resulting in significant changes in the way services and supports are provided to people with developmental disabilities and their families. Few other human service fields have experienced as great a rate of social, educational and technological change. The following represent external policy changes that have had the most impact on local services and the local service system:

- 1945**      **National Disability Employment Awareness month**  
Congress enacts a law declaring the first week of October “National Employ the Physically Handicapped Week” later removed the word physical, changed the name and expanded to a month-long celebration to acknowledge the employment needs and contributions of all people with disabilities.
- 1959**      **Epton Act**  
The act, sponsored by Kay Epton, established Epton Centers for community educational training and group living options in Washington. It was the beginning of community services in the state. Funding for educational centers and group homes began in 1961.
- 1965**      **Medicaid Title XIX**  
Medicaid Title XIX of the Social Security Amendment (Public Law 89-97) first authorized. A broad program to provide states the opportunity to receive federal funding for services.
- 1967**      **Washington System for Developmental Disabilities**  
Washington adopted a system of state and county services. State services were associated with institutions, and county services were associated with community-based supports.
- 1974**      **Division of Developmental Disabilities established**  
Washington established a separate division of the Department of Social and Health Services to carry out legislation focused on people with developmental disabilities. It included the development of community services, a major change from the service delivery system that was offered in institutions.
- 1975**      **Education for All Act - Public Law 94-142**  
The federal law mandating public education for everyone has had perhaps more impact than any other single policy change. Individuals with developmental disabilities no longer had to be institutionalized to receive formal training or education. The trend quickly became maintaining children with their families in their communities and developing services for adults so they might be able to live independently in communities. Washington’s mandatory education law preceded this federal law.

- 1982**      **Employment instead of activities**  
In 1982, Washington took the position that most people with developmental disabilities could work and earn wages. Services funded through the state were work-oriented. Activity centers and living skills training, which were to prepare people for sheltered workshops, were no longer eligible for funding. Statewide, sheltered workshops that provided people contract work were developed or expanded.
- 1983**      **Habilitation Rights Act**  
The Washington Legislature passed a law requiring every eligible person with developmental disabilities be given adequate habilitative services to the extent money was available. Such services included employment, education, vocational supports, therapy and other related services. The law made vocational and day-program services available to all.
- Title XIX Waiver**  
Federal policy shifted to allow states to use Title XIX dollars for community services. Previously, the money could only be used in institutions. Waivers were limited to a number agreed upon and approved by the federal funding agency.
- 1985**      **U.S. Department of Education, Office of Special Education and Rehabilitative Services and the Department of Health and Human Services**  
Funding was appropriated to assist 27 states to convert large portions of their service systems to supported employment. Washington received one of the first grants to stimulate employment in typical work settings.
- Developmental Disabilities Act**  
This legislation augmented the funding for the 27 states to convert to supported employment. Grants to the states were for demonstration projects and business development.
- 1986**      **Rehabilitation Act Amendments**  
Amendments to this act provided Title 6-C funds for all states to participate in supported employment. A major, nationwide outcome has been to elevate expectations for people with developmental disabilities.
- Amendments to Social Security Act**  
By this time, a program called Supported Employment consistently demonstrated that people with developmental disabilities could work in typical jobs when appropriate supports were provided. People could be successful and more economically independent. National policy made a dramatic shift with amendments to the Social Security Act that provided work incentives for people receiving Supplemental Security Income. Also, people who became employed were no longer at risk of losing Medicaid coverage.
- Washington system change**  
Following the federal policy change, the state notified counties in the fall that it was making a systems change by converting 34% of its existing system to Supported Employment. The change was to take place during the 1987-1989 biennium, and counties were expected to make the change, too. The policy change gave people with developmental disabilities more opportunity for

1986 CONTINUED

greater individualized support and consumer choice. Both the state and Clark County exceeded the 34% goal.

#### Amendments to the Education for All Act 99-457

This legislation provided substantial incentives for states to provide comprehensive, coordinated services to children birth to 6 years old and their families. Although Washington has mandated services for children 3-5 years old since 1984, children birth to 3 years have traditionally been served by developmental disabilities services alone. This legislation's focus shifts the emphasis of services to supporting and empowering families while encouraging collaboration at the community level.

1989

#### Institutional downsizing

The Washington Legislature made a major policy shift when it decided to downsize state institutions for people with developmental disabilities. The plan was in response to the federal decertification of one institution and probable future certification problems with others. Under the new policy, persons leaving state institutions received funding for the supports they needed to integrate into the community. Not increasing resources for institutions represented a change in Washington's service delivery system.

#### State-run Community Residential Services

The Department of Social and Health Services' Division of Developmental Disabilities embarked on a plan to develop community-based residential services run by state employees. This policy change could potentially undermine the long-time system of private providers who contracted with the state, but despite tremendous community opposition, the department proceeded with the change. Legislation set limits on the number of state-operated services that could be developed in 1990.

1990

#### Americans with Disabilities Act

This legislation addressed civil rights issues for all persons with disabilities. It focused primarily on employment, public accommodations, transportation and communication. Under this act, an employer cannot refuse to hire a person with disabilities who is qualified for a job because of the disability. Rather, employers are required to make certain job modifications and possibly communication services for employees. Also, under the law, all public accommodations must be accessible and publicly funded transportation agencies are required to purchase buses accessible to people with disabilities.

#### Individuals with Disabilities Education Act

Congress amended the Education of the Handicapped Act by reauthorizing its discretionary programs for five years. Renamed the Individuals with Disabilities Education Act, or IDEA, the special education law put new emphasis on meeting the needs of minorities with disabilities, improving personnel recruitment and retention, and advancing early intervention services. IDEA now mandates that schools help students with disabilities plan for when they leave school and authorizes a one-time grant program aimed at improving transition services. Individuals with Disabilities Education Act. (P.L. 101-476)

#### Rehabilitation Act Amendments

In 1920, Congress established the federal-state vocational rehabilitation program. This act has been revised many times to improve the range of vocationally related services for people with disabilities. The Rehabilitation Act of 1973 was reauthorized and amended most recently in 1986.

In 1992, Congress again reauthorized and revised the programs established by the Rehabilitation Act of 1973. Some of the intended outcomes were:

- To improve how the vocational rehabilitation system functions by streamlining access, expanding services to people with severe disabilities, improving interagency relationships, and increasing the business community's involvement.
- To promote the philosophy of independent living.
- To increase the choices and involvement of people with disabilities.
- To increase the accountability and quality of services at all levels.

#### County guidelines

The combined efforts of the state, counties, vendors and citizen groups resulted in county guidelines that envision promoting the inclusion of people with disabilities in community life. The guidelines were the foundation for planning each county is required to do and provided strategies for using state and local money and personal influence to produce the desired benefits. All activities being evaluated were based on the benefits of power and choice, relationships, status/contribution, integration, competence, health and safety.

#### Legislative Budget Committee

The Legislative Budget Committee was authorized to conduct a three-part study of the Division of Developmental Disabilities. Its final recommendations were presented in January 1993. The study focused primarily on residential needs of people in institutions and RHCs, and it concluded that many people could move out of RHCs and have better lives if they did. The study also found that people living in the community was more cost effective than living in institutions.



Mike Ferry

1993

### School-To-Work Opportunities Act

This legislation was a vision for what would be available to all students. It laid out components programs must have to be eligible to receive funding: work-based learning; school-based learning; and connecting activities. Programs with these basic components are funded through state implementation grants, federal implementation grants to partnerships, and federal grants to programs in high poverty areas. These components must be coordinated, integrating work- and school-based learning.

### Washington Education Reform

The Washington Legislature passed a bill encouraging schools to apply for dollars that changed how education is delivered in local buildings. The bill encouraged innovation and reform for better educational outcomes for all students.

### Closure of Interlake School

The 1993-1995 state budget required closure of this state institution. Families had to choose between moving their member into the community or to another state institution. Interlake was the first state RHC to close, and sections of others were converted to nursing homes to reduce costs. Closing the RHC moved Washington in a direction many other states had already taken – services in the community for all persons with developmental disabilities.

1994

### Initiative 601

General election voters passed this initiative, putting a spending limit on state General Fund dollars. The limit is calculated using factors such as population, personal income and previous spending. Annual budgeting is required so the Office of Financial Management can adjust the limit for each fiscal year as directed by law. Funds not spent during the fiscal year revert to the General Fund and reduce the state spending limit for the next fiscal year.

1995

### SB 5800

Passed during the legislative session, the law went into effect in July. It shifted money, when available, from state institutions to services in the community.

### Managed Care Feasibility Study

The 1995-1997 state budget required the Division of Developmental Disabilities to study how a managed care environment could affect services for people with developmental disabilities. The study did not move forward.

1996

### Family Support 96

Beginning in July, the Family Support Program underwent significant changes. It moved from being a long-term to a short-term service. It moved from being driven by out-of-home placement requests to great use of community and natural supports. The intent was to increase access and flexibility while building on the support systems many families had. Over time, all Family Support services were to convert to this new system.

1997

### IDEA Reauthorization

(See Appendix) IDEA, also known as the 1991 Individuals with Disabilities Education Act, is the amended version of the 1975 Education of the Handicapped Act. It was reauthorized in May.

The law required local school systems to provide a free and appropriate education for children with disabilities. Federal money was available for elementary and high school education only after a state had a federally approved plan for educating children with disabilities. In addition, IDEA required participating states to establish specific administrative procedures by which parents or legal guardians could challenge the identification, evaluation or educational placement of children. Requirements of the law are conditions of federal assistance or duties arising from participation in this voluntary federal program.

IDEA provided millions of students with disabilities access to a free and appropriate education, but the law imposed significant costs and administrative burdens. Although IDEA included a provision authorizing the federal government to pay up to 40% of services provided under the law, only about 8% was appropriated. The law also limited the flexibility of states and local governments to combine IDEA dollars with other funding streams to meet the unique needs of children.

Resolving disputes under the act became overly litigious and added to implementation costs.

Local agency decisions may be challenged in state or federal court. Changes to IDEA primarily reinforced the commitment to educate all children. Federal funding for schools and special education increased to more approach the original commitment made by the law. After a certain level, school districts were allowed to shift up to 20% of their state funding, as long as all children with disabilities were served.

Students in special education who have challenging behavior or who could be a safety risk to themselves or others now can receive alternative services for up to 45 days. This section of the law could be a problem if it is misused or staff fails to consider the nature of a student's disability.

The Arc and the Consortium for Citizens with Disabilities Education Task Force examined the reauthorization and found it to be "fair and balanced." It will, they concluded, "maintain the right to a free, appropriate public education for all children with disabilities." The bill strengthened parental participation in all aspects and provided essential supports to parents and school personnel through training, technical assistance, and research activities. The bill also reduced paperwork for schools and could reduce litigation because of a new focus on alternative dispute resolution.

1998

### SSB 6751: Highlights from the bill include:

#### Section 1

The intent of the law was to provide people with developmental disabilities, in partnership with their families and guardians, a complete range of choices about where to live, allowing to the maximum extent possible, that they do not have to leave their home or community.

This intent affirmed the policy of a complete array of options, including community services and residential habilitation centers. It also continued the policy of supporting individuals with developmental disabilities to live in their own communities whenever possible. This law was the first time state policy recognized choice by the individual and guardian and set an expectation that publicly funded services be of responsive and reasonable quality.



Mike Ferry

## 1998 CONTINUED

### SSB 6751: Highlights from the bill continued

#### Section 3

Eligible people with developmental disabilities should have the opportunity to choose where they live, whether in RHCs or the community. RHCs were maintained at the current level until June 30, 2003. To fill vacancies under that limit, an adult must have an assessed need that requires the level of resources provided by RHCs. This allows the restricted choice of admittance to RHCs for only those who have severe needs.

RHC admittance may not be offered unless an appropriate community support service was also offered.

Community support services must be paid by funds specifically designated in the budget. When these dollars are exhausted, the department may not offer admittance to an RHC.

#### Section 4

By June 30, 2003, Division of Developmental Disabilities (DDD) was to develop an outreach program to make all eligible clients and applicants aware of all service options.

#### Section 7

DDD was to identify everyone with developmental disabilities who was eligible for services and whether they were served, unserved or underserved. DDD gathered data on the required services and supports required and the cost of providing those services.

The information was used by DDD, with the participation of a DDD stakeholders workgroup, to develop a long-term strategic plan in three phases that begin Dec. 1, 1998, Dec. 1, 2000 and Dec. 1, 2002. The plan included budget and statutory recommendations to secure for all persons with developmental disabilities the opportunity to choose where to live and the supports they need.

## 1999

### Section 8

The DDD stakeholders group was established to develop recommendations on future directions and strategies for service delivery improvement, including agreement on the roles of RHCs and community support services, focusing on resources for people in need of services.

### Work Incentives Improvement Act of 1999

The Work Incentives Improvement Act allowed people with disabilities to keep their health care buy-in to Medicaid. People with disabilities no longer had to choose care when they returned to work. WIIA modernized the employment services system by creating a “ticket” that will enable Supplemental Security Income and Social Security Disability Insurance beneficiaries to see any of a number of public or private providers for vocational rehabilitation.

### Reaffirmation of county guidelines

Washington counties reissued the County Guidelines, reinforcing the commitment of state and county values and quality indicators depicted in this document.

### The Olmstead decision

This landmark case upheld the right of people with disabilities to live in the least restrictive setting appropriate to their needs. Two women whose disabilities included intellectual disability and mental illness brought the Olmstead case against the state of Georgia. When the suit was filed, both plaintiffs lived in state-run institutions, despite the fact that their treatment professionals had determined they could be appropriately served in a community setting. The plaintiffs asserted that continued institutionalization was a violation of their right under the ADA to live in the most appropriate integrated setting. Georgia appealed the decision at every level. In 1999, the U.S. Supreme Court upheld a lower court ruling that states must administer their services, programs and activities “in the most integrated setting appropriate to the needs of qualified individuals with disabilities.”

The court stated directly that “Unjustified isolation...is properly regarded as discrimination based on disability.” It observed that “institutional placement of persons who can handle and benefit from community settings perpetuates unwarranted assumptions that persons so isolated are incapable or unworthy of participating in community life.”

### Washington: The Arc of Washington State et al. v. Lyle Quasim et al.

Filed in November 1999, this class action complaint alleged that Washington was in violation of federal Medicaid law and the ADA by failing to provide long-term Medicaid services with reasonable promptness to eligible individuals with developmental disabilities. The complaint alleged that several thousand people with developmental disabilities needed Medicaid-funded services or current Medicaid recipients who would benefit from additional services.

In rulings, the District Court determined that: (a) eligibility for ICF/MR services does not establish an entitlement to HCB waiver services, and (b) Medicaid law, in fact, requires services to be furnished with reasonable promptness. In December 2000, the court granted the state’s motion for summary judgment to deny the plaintiff’s ADA claims. The plaintiffs had claimed the ADA requires that if a state makes MCB waiver services available to some individuals with disabilities, it must furnish such services to all similarly situated individuals. The court ruled that the ADA is not a basis for ordering a state to increase its limit on the number of individuals who may receive HCB waiver services because such an order would require the state to make a “fundamental alteration” in its services.

1999 CONTINUED

The plaintiffs indicated they intended to raise two other issues: (a) that current HCBS waiver participants were not receiving all services to which they were entitled, and (b) persons who are eligible for ICF/MR services have not received them with reasonable promptness.

At present, the court has ruled that the agreed upon settlement should not stand.

2002

### Engrossed Substitute Senate Bill 6387

The Social Security Administration, or SSA, administers the state's Mandatory State Supplementary program. The payment amount is determined by the Minimum Income Level, or MIL, established at the conversion in December 1973.

Beginning July 2002, pursuant to Engrossed Substitute Senate Bill 6387, the state administered its Optional State Supplement Payments for Blind, Aged or Disabled to people eligible for DDD services. SSA continued to administer the payments to people with an ineligible spouse. This plan applied only to blind, aged or disabled people eligible for services from DDD. The plan for people with an ineligible spouse is separate and managed by the Economic Services Administration of the Department of Social and Health Services.

As of June 25, the eligibility criteria for the Developmental Disabilities State Supplementary Payment program are:

- Be a client of DDD, and
- Be eligible to receive a Supplemental Security Income (SSI) payment, and
- Have received a state-only funded DDD service (residential, voluntary placement, family support or high school transition, employment or other day program) in the prior year and still be in need of the service.

The amount of money available in each client's SSP will vary according to the service or support needed. The exact amount will be determined by DDD, but it will be based on the prior year's expenditures for the state service needed.

For persons receiving residential, voluntary placement or high school transition programs, SSP payments will be based on the total state dollars paid for the service(s) in the prior year, as adjusted for rate increases or decreases. A client was required to prove continued purchase of the needed service/s to continue to receive SSP. Funds for employment or day program services must be spent on county-contracted services.

The federal government did not support part of this method of payment. Money for employment and day program services was removed from SSP and now falls under state regulations.

2004

### Fircrest downsizing, closure and RHC consolidation alternative

#### Background

In the past 30 years, the focus of services for people with developmental disabilities has shifted from institutional settings to community-based settings. The change is reflected in the growth of programs serving individuals with developmental disabilities from 1994 to 2003. Fircrest and Region 4 have pursued a community discharge process both before and after the 1999 U.S. Supreme Court's Olmstead decision. The trend since 1994 has resulted in a declining census at Fircrest. This biennium, the Washington Legislature directed DSHS to further downsize Fircrest and consolidate vacancies across all residential habilitation centers.

#### Closure plan

A closure option was developed for Fircrest. Implementing it, if selected by the Legislature, will be in four phases:

- 1) Planning activities from July-December 2005
- 2) Close three cottages every four months beginning January 2006 and ending March 2007
- 3) Facility closure activities April-June 2007
- 4) Property caretaking from July 2007 until property is put to an alternative use.

Clients would be transferred to one of the other RHCs or a community placement option.

Clients, parents/guardians and employees would receive support during the transition.

#### Placement of Fircrest residents

Under this option, the estimated 204 Fircrest residents would be moved to:

- Cottages at Lakeland Village, Rainier or Yakima Valley
- DDD supported living programs
- Programs that meet the nursing needs of residents, e.g., adult family homes and/or nursing homes

### Division of Developmental Disabilities Waiver Plan

#### Background and status of previous waiver

The Centers for Medicare and Medicaid Services' 2002 review of the division's Community Alternatives Program waiver raised a variety of issues about management and operation of the waiver. CMS was concerned that:

- Waiver recipients were being denied access to needed services based on funding limitations
- People were placed on the waiver to obtain state plan services. Waiver enrollees are at 300% of the federal poverty level and require state plan Medicaid Personal Care services but use no waiver service.

The CAP waiver ended March 31, 2004. Effective April 1, 2004, the department began offering services under the four new waivers described below.

#### Four new home and community-based waivers

To address issues cited by CMS, the department will offer services under four targeted waivers – Basic, Basic Plus, Core and Community Protection—each with limits on benefits, services and enrollees.

- Personal care was offered as a waiver service in lieu of state plan Medicaid Personal Care.
- Current enrollees were initially placed on one of the four waivers based on their level of service use in the prior CAP waiver.
- All of the waivers are at capacity enrollment.

#### County services for working age adults

Washington has had good success providing supported employment services to help people with developmental disabilities become gainfully employed. Gainful employment means people with developmental disabilities earn typical wages and become less dependent on service systems. Employment gives the rest of the community the opportunity to experience the capabilities and contributions of people with developmental disabilities.

In December 2000, the Division of Developmental Disabilities submitted the Strategies for the Future Long-Range Plan Phase II Report to the Washington Legislature. This report included recommendations by the stakeholder workgroup regarding adult employment and day program services. The workgroup recommended persons of working age should be gainfully employed

## 2004 CONTINUED

and contributing to community life, using a variety of strategies. Specifically, the report states: “Pathways to Employment: Each individual will be supported to pursue his or her own unique path to work, a career, or his or her contribution to/participation in community life. All individuals, regardless of the challenge of their disability, will be afforded an opportunity to pursue competitive employment.”

This policy established employment supports as the primary use of employment/day program money for working-age adults. The policy established guidelines for Case Resource Managers and counties when authorizing and offering services to adults age 21 to 62.

### Policy

- A. Supports to pursue and maintain gainful employment in integrated community settings shall be the primary service option for working-age adults. CRMs, in conjunction with county staff, will provide each DDD-enrolled person with information about the policy and be available to answer questions to help people understand the policy.
- B. Counties will develop and make available services that offer support for people pursuing or maintaining gainful employment, including support and technical assistance to achieve integrated employment.

DDD field services staff shall authorize services to working-age adults that support the individual to pursue and maintain integrated, gainful employment. Services for persons younger than 62 that do not emphasize the pursuit or maintenance of employment in integrated settings can be authorized only by exception to policy. People older than 62 will continue to have the option of supports to pursue and maintain gainful employment.

## 2005

### Caring for Washington Individuals with Autism Task Force

The Caring for Washington Individuals with Autism Task Force was created by Senate Bill 5311 to study and make recommendations to the Legislature about the growing incidence of autism and ways to improve the delivery and coordination of autism services. The Department of Health provided staff for the task force. The final report and recommendations on how best to prevent, identify, treat and accommodate the needs of individuals with autism and their families was submitted to the governor and 2007 Legislature.

### Money Follows the Person

Money Follows the Person passed as part of the Deficit Reduction Act of 2005. The Money Follows the Person Rebalancing Demonstration Grant helps states reduce their reliance on institutional care while developing community-based, long-term care opportunities that enable people with disabilities and seniors to fully participate in their communities. The Congressional Budget Office estimates the \$1.75 billion in funding for MFP may help as many as 100,000 people return to the community.

Under MFP, implemented Jan. 1, 2007, the federal government will pay for 75% to 88% of the associated long-term cost of transitioning people from nursing homes into community settings. Washington was awarded one of the first grants, which was used primarily for people in the Aging and Adult Services system.



Muro Photography

## 2006

### IDEA regulations announced

New IDEA regulations were announced in Part B of the Individuals with Disabilities Education Act. The regulations further the president’s goal that no child is left behind, including America’s many students with disabilities. Aligning the regulations with No Child Left Behind helps ensuring students with disabilities are held to high expectations.

## 2007

### Autism Task Force 2007 report to governor and Legislature

The Autism Task Force completed its report detailing development of implementation plans, including cost estimates for its top priority recommendations. The task force had three and a half months to choose and detail several issues. Included in the legislative proviso was the creation of a Washington guidebook on autism, which could be completed by June 30, 2008.

## 2009

### Children’s Intensive In-Home Behavior Supports Program

This legislation created a program for 100 children with intense behavior needs. It provided supports and services with the goal of avoiding disruption to families and the need for out-of-home placement.

## 2011

### Consolidation of residential habilitation centers

As the request for services in residential habilitation centers has continued to decline, pressure to consolidate the state’s remaining five institutions continued. In the past 10 years, 37 studies of RHCs – the most recent in 2009 – have recommended consolidation and closure and suggested a schedule. The 2011 Legislature changed the number of RHCs in the state that were to close by

Dec. 31, 2011. Residents of the home were given the choice of moving to a community residential placement, a state operated residential placement or one of three remaining institutions. A second facility will no longer take admissions except for respite care. When that facility reaches a census of 16, it will be converted to two state-operated Living Alternatives on the property. The 2011 Legislature also stopped admission of children under 16 to state residential habilitation centers. People ages 16-21 may be placed there for short-term crisis stays, but not permanent admission.

### Employment and Day Program changes

Three major changes were made to the Employment and Day Program, which is administered jointly by the state and counties. The changes were:

- 1) Adult Day Health became a COPES waiver option. This means many families had to choose whether to be on a Developmental Disabilities Waiver or an Aging and Disability Services Waiver. About 60 percent of people who have developmental disabilities and are receiving Adult Day Health are unserved by county programs. It is not clear whether they would like to have county employment and day program services, since waiting lists for employment services are long and young people leaving the public school system have been the priority for more than 10 years.
- 2) People with developmental disabilities who have participated in employment supports for at least nine months were offered continued employment or community access services. This change was a dramatic departure from the Working Age Adult Policy in effect since 2004. A statewide workgroup developed enhancements to the current Community Access Program. People always will have the option of returning to employment services, if they'd like.
- 3) The state mandated another workgroup explore the development of an adult day care option. This policy decision explored setting up programs that have not been supported in Washington since 1982. The programs would allow congregating and segregating people much like is done in RHCs. These potential changes came at a time when funding for Employment and Day Program was again being reduced.

### Employment First

Senate Bill 6384 reinforced Washington's employment first policy for people with developmental disabilities. It:

- Directed the state to work with counties and stakeholders to strengthen and expand existing community-access programs that integrate people with disabilities into their communities, as well as support independent living and skills.
- Required people 21 and older to be enrolled in supported employment for nine months, at which point they will be offered the choice of transitioning to community-access programs.

Employment programs in Washington help people with developmental disabilities earn more than \$40 million each year. Every dollar invested shows a \$1.46 return to taxpayers. To maintain federal matching dollars for these programs, Washington must continue in the same direction as the federal government, which is employment-focused.

### Employment – Federal Agencies Sign Agreement to Promote Employment First

The U.S. Department of Labor's Office of Disability Employment Policy and the U.S. Department of Health and Human Services Administration on Intellectual and Developmental Disabilities announced a new memorandum of agreement. Under the agreement, the agencies will collaborate to expand and promote integrated employment as the first employment option for people with significant disabilities, including intellectual and developmental disabilities.

### National Association of Governor's 2012/2013 Initiative

#### *A Better Bottom Line: Employing People with Disabilities*

This initiative aimed to increase employment among people with disabilities, specifically those with intellectual and other significant disabilities. It focused on the role that both state government and businesses can play in advancing opportunities for individuals to be gainfully employed in the competitive labor market.

Government, business, the public, people with disabilities and families all stand to benefit from increased employment of people with IDD and have shared responsibility to reach the goal. Governors and other policy makers will be presented with better policy options to assess the impact on their state's environment. Business leaders, governors, disability leaders and others will come together to share ideas and strategies to move this initiative forward.

### Executive Order 13548 – Increasing Federal Employment of Individuals with Disabilities

“As the nation's largest employer, the federal government must become a model for the employment of individuals with disabilities. Executive departments and agencies must improve their efforts to employ workers with disabilities through increased recruitment, hiring and retention. My administration is committed to increasing the number of individuals with disabilities in the federal workforce through compliance with Executive Order 13163 and achievement of the goals set forth therein over five years, including specific goals for hiring individuals with targeted disabilities.” – President Barack Obama

### National Disability Rights Network report

Beyond Segregated and Exploited, an update on employment of people with disabilities. This report examined the ability of sheltered workshops and other segregated employment settings to meet the needs of workers with disabilities. It stated the systems fail to prepare workers for anything and in fact, often leave people impoverished. This finding resulted in a call to action by the National Disability Rights Network and the protection and advocacy systems they represent in Washington, D.C. They took action to “end segregated work and subminimum wage, as well as further exploitation of workers with disabilities.”

### Department of Justice and State of Oregon

In March, the United States moved to intervene in the class action lawsuit, Lane et al. v. Kitzhaber et al., (No. 12-cv-138). The complaint alleges the state violated Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act by unnecessarily segregating thousands of people with intellectual and developmental disabilities in sheltered workshops and placing them at risk of such segregation when they could be served in integrated employment settings. Individuals at risk of unnecessary segregation include youth with IDD who are referred for admission to sheltered workshops after graduating from or leaving Oregon secondary schools.

In October 2011, the department opened an investigation into whether Oregon was violating Title II of the ADA by placing persons with IDD in segregated sheltered workshops when such persons are capable of working in integrated workplaces with appropriate supports and services. The Center for Public Representation and Disability Rights Oregon, along with two private law firms, filed Lane v. Kitzhaber to challenge segregated workshop placements under Olmstead. In June 2012, the Department of Justice filed a Statement of Interest in support of class certification and issued a Letter of Findings concluding that Oregon's sheltered workshop system violated Title II of the ADA and Olmstead.

On Aug. 6, 2012, the court certified a class defined as “all individuals in Oregon with intellectual or developmental disabilities who are in, or who have been referred to, sheltered workshops” and “who are qualified for supported employment services.”

#### TASH Position

Longtime advocacy organization TASH pushes for administrative actions to reduce reliance on sheltered work. These recommendations were sent to the Health Education Labor and Pensions Committee, Department of Education, Assistant Secretary of Special Education and Rehabilitation and Centers for Medicare and Medicaid Services.

#### Rhode Island settlement with Department of Justice

In June, the Department of Justice announced it had entered an interim settlement agreement with the state of Rhode Island and city of Providence that would resolve violations of the Americans with Disabilities Act for approximately 200 Rhode Islanders with IDD. This first-of-its-kind agreement addressed the rights of people with disabilities to receive state- and city-funded employment and daytime services in the broad community rather than segregated sheltered



workshops and facility-based day programs. The agreement was accompanied by an exposé on Goodwill that aired on PBS and other news outlets.

#### State of Washington Executive Order 13-02

Gov. Jay Inslee signed an executive order entitled Improving Employment Opportunities and Outcomes for People with Disabilities in State Employment. This order established a task force to look at helping state agencies recruit and retain people with disabilities in state government jobs. It also set a goal of 5% of the state workforce being persons with disabilities by June 30, 2017.

#### Workforce Innovation and Opportunities Act

The Workforce Innovation and Opportunities Act reauthorized the Workforce Investment Act of 1998, including the Rehabilitation Act through 2020. Highlights of the bill included:

- A much larger role for public Vocational Rehabilitation in transition from school to adult life.
- Efforts intended to limit the use of subminimum wage and significantly limit young people with disabilities from entering sheltered work.
- Required agreements between state VR systems and state Medicaid systems and state intellectual and developmental disability agencies.
- A definition of Customized Employment in federal statute and an updated definition of Supported Employment that includes Customized Employment.

#### Workforce Innovation and Opportunities Act continued

- A definition for “competitive integrated employment” as an optimal outcome.
- A number of disability agencies moving from the Department of Education to Health and Human Services, including the Independent Living Program. Rehabilitation Services Administration, however, is staying in DOE.
- Enhanced roles and requirements for the general workforce system and One-Stop Career Centers in meeting the needs of people with disabilities.

The implications and impact of the act are still being examined, but in general, it has the potential for significant advancement in employment for people with disabilities.

#### Congressional Record: Washington Allies for Advocacy

A Proclamation for the Rights of All Human Beings was entered in the Congressional record. Self-advocates in Washington developed a statement of rights that included housing, community participation, schools and employment. It also stated, “We always start by presuming competence and the right to grow.”

#### U.S. v. Rhode Island

On April 8, the United States entered the nation’s first statewide settlement vindicating the civil rights of people with disabilities who are unnecessarily segregated in sheltered workshops and facility-based day programs. The agreement with the state of Rhode Island resolved the Civil Rights Division’s January 6 findings, as part of an ADA Olmstead investigation, that the state’s day activity service system over-relied on segregated settings, including sheltered workshops and facility-based day programs, to the exclusion of alternatives such as supported employment and integrated day services.



**Presidential executive order raising the minimum wage for federal contract workers**

An executive order raised the minimum wage for workers on new and replacement federal service, construction or concession contracts to \$10.10 an hour. The executive order covers individuals with disabilities.

**Home- and community-based services settings final rules****The Centers for Medicare and Medicaid Services**

This final rule establishes requirements for the qualities of settings eligible for reimbursement under Medicaid Home and Community-Based Services sections 1915(c), 1915(i) and 1915(k). In the final rule, CMS moves away from defining home and community-based settings by “what they are not” and toward defining them by the nature and quality of individuals’ experiences. The home- and community-based setting provisions in this rule establish a more outcome-oriented definition of home- and community-based settings, rather than one based solely on a setting’s location, geography or physical characteristics.

The changes related to clarification of settings will maximize opportunities for HCBS program participants to access the benefits of community living and receive services in the most integrated setting. The changes also will effectuate the law’s intention for Medicaid HCBS to provide alternatives to services provided in institutions.

**SSB 6387 Community First Choice Option**

This bill created a new Medicaid Individual and Family Services program and added people to the Basic Plus waiver. It changed respite provider training requirements to intermittent providers working 300 hours per year instead of 20 hours per month, minimizing the training requirements for certain respite providers. It offered a new Medicaid state plan option established by the Affordable Care Act that allows states to receive an additional 6% on their current federal match for approved services. It became effective July 1, 2015 and included personal care and other enhanced services such as assistive technology, additional skills acquisition and community transition services.

**Achieving a Better Life Experience Act**

Federal legislation passed in December permitted states to create programs similar to college savings plans to benefit people with disabilities. These programs allow individuals to hold up to \$100,000 of their money in a tax-advantaged savings account with contributions up to \$14,000 per year. This will not affect their eligibility for federal SSI, Medicaid or other means-tested public benefits.

**Individual and Family Services Waiver**

The Individual and Family Services Waiver began May 1, converting the old IFS program to a Medicaid Waiver program and expanding the number of people receiving services, which include respite, behavior support person-centered planning, therapies, specialized medical equipment, transportation and nurse delegation. The intent was to support children and adults living in their family home.

**New Hampshire becomes first state to eliminate subminimum wage**

In April, New Hampshire became the first state to repeal laws allowing employers to pay workers with disabilities at a rate lower than the minimum wage. This step became a national effort to eliminate subminimum wage.

**Olmstead vs L.C Oregon Lawsuit**

On Dec. 29, the United States approved a settlement with Oregon vindicating the civil rights of individuals with intellectual and developmental disabilities who are unnecessarily segregated in sheltered

workshops or at risk of such unnecessary segregation. The agreement with Oregon resolves a class action lawsuit brought by private plaintiffs in which the Department of Justice moved to intervene in May 2013. The lawsuit alleged the state’s employment service system over-relied on segregated sheltered workshops to the exclusion of integrated alternatives, such as supported employment services, and placed individuals, including youth, at risk of entering sheltered workshops.

As a result, over the next seven years, 1,115 working-age people with IDD who were served in segregated sheltered workshops had opportunities to work in real jobs at competitive wages. Also, at least 4,900 young people ages 14-24 will receive supported employment services designed to assist them to choose, prepare for, get and keep employment in a typical work setting. Correspondingly, the state reduced its reliance on sheltered workshops and implemented policies and capacity-building strategies to improve the employment system.

**Every Student Succeeds Act**

The Every Student Succeeds Act reauthorizes the Elementary and Secondary Education Act, known as the No Child Left Behind. The bill was approved with strong bipartisan support. It addressed issues such as accountability and testing requirements, distribution and requirements for grants, fiscal accountability requirements and teacher evaluation.

It provided states with increased flexibility and responsibility for: developing accountability systems; deciding how federally required tests should be weighed; selecting additional measures of student and school performance; and implementing teacher evaluation systems. The bill required school districts to consult stakeholders in planning and implementing programs to improve student safety, health, well-being and academic achievement. Act dollars may be used to improve early childhood education programs, and the act specifies requirements that ensure homeless youth have access to all services provided by states and school districts.



Marko Rupena

### Disability Integration Act of 2015 introduced

The Disability Integration Act was introduced to the Senate Health, Education, Labor and Pensions Committee. This civil rights bill was intended to address long-term services and supports and reduce the institutional bias that still exists in Medicaid. The legislation would require states and insurance providers that pay for long-term services and supports to change policies to provide community-based services as a primary option and offer home and community-based services to people in institutions.

### National Disability Rights Network and US Department of Labor sign MOU

The memorandum of understanding concerns Section 14(c) of the Fair Labor Standards Act, which permits employers to pay wages less than the federal minimum wage, after receipt of Department of Labor certificate, to people whose earning or productive capability is affected by a physical or mental disability. The nationwide network of protection and advocacy agencies has for years investigated reports of abuse and exploitation of workers with disabilities by employers, including employers who hold 14(c) certificates.

Ensuring proper implementation, oversight and enforcement of the Section 14(c) subminimum wage program is a key component to protecting the rights and preventing the exploitation of workers with disabilities. The agreement:

- Improves sharing information between the network, protection and advocacy agencies and the Wage and Hour Division of DOL about potential violations of subminimum wage certificates by employers.
- Uses the resources, knowledge and expertise of the protection and advocacy agencies on disability issues in each jurisdiction where wage and hour violations are suspected.

2016

### Disability Rights Ohio, National Federation of the Blind and Autistic Self Advocacy Network celebrate landmark decision ordering fair pay from sheltered workshop

In a precedent-setting opinion issued by a U.S. Department of Labor administrative law judge, three people were awarded minimum wage going forward and back pay from Seneca Re-Ad, a sheltered workshop run by the Seneca County Board of Developmental Disabilities. The original petition was filed by Disability Rights Ohio, the National Federation of the Blind and the Autistic Self Advocacy Network.

### Washington Developmental Disabilities Administration Guiding Values

In 2015, a workgroup was formed to review and reaffirm both the Residential Guidelines and County Guidelines. The Developmental Disabilities Administration's Guiding Values combines those documents and is the over-arching statement about how services should be thought of and delivered. These documents reaffirm the following values for people with developmental disabilities and their families: Power and Choice, Inclusion, Relationships, Status and Contribution, Competence, Health and Safety. These values are how people will be assisted in creating their meaningful life and how services will be measured.

### Minimum Wage Increases

Initiative 1433, approved by Washington voters in 2016, requires a statewide minimum wage of \$11.00 in 2017, \$11.50 in 2018, \$12.00 in 2019, and \$13.50 in 2020. Beginning 2021, and each year thereafter, Labor and Industries is required to make a cost-of-living adjustment to the minimum wage based on the Consumer Price Index.

Included in Initiative 1433 is a Sick Leave Provision. Washington has some of the best sick leave provisions for employees in the country. Qualifying employees can take 12 weeks (or 16 in some situations) of paid sick leave without fear of losing their jobs. Both Initiative 1433 and the Paid Family and Medical Leave Program are important in terms of worker leave rights and responsibilities.

2018

### ABLE Act

A Washington State ABLE Savings Plan allows people with eligible disabilities to save for their everyday needs, invest in a tax-free account and prepare for the future without losing their state or federal benefits.

In 2014, the U.S. Congress approved and then-President Obama signed the Achieving a Better Life Experience (ABLE) Act. It set out a way for states to help individuals with disabilities maintain their financial eligibility for Medicaid, Supplemental Security Income (SSI), and other key federal benefits – while also setting aside in tax-sheltered accounts up to \$14,000 per year of their personal funds for education, job training, assistive technology, transportation, and more.

Previously, the disability benefits eligibility threshold was a maximum of \$2,000 in personal assets; under ABLE that rises to \$100,000, so people can maintain important aid and better save and plan for the future. Total ABLE-eligible beneficiaries in Washington are estimated at 130,000 to 180,000 adults and children, and roughly one-quarter of them have sufficient resources for participation to be feasible.

During the 2016 legislative session, Washington State's ABLE program was authorized and it was launched in July of 2018.

2019

### Sheltered Work ends in Washington

To come into full compliance with the Center for Medicare and Medicaid Services (CMS) settings rule, the state of Washington and its counties ceased funding sheltered workshops. This service had been very small in Washington State for many years and the intent of the regulation was to give participants access to the benefits of living and working in the greater community.

2021

### Subminimum Wage ends in Washington

Senate bill 5284 signed into law to prevent issue of new 14(c) certificates and phases out existing certificates. The result is that all individuals with IDD will now earn minimum wage or better.



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