

**NORTH DAKOTA COUNCIL ON DEVELOPMENTAL DISABILITIES**  
**MEETING MINUTES**  
NOVEMBER 21, 2008  
BRYNHILD HAUGLAND ROOM – STATE CAPITAL  
BISMARCK, NORTH DAKOTA

Members Present

Darcy Andahl  
Bruce Askvig  
Shirley Brennan  
Tammy Desauel  
Richard Hickok  
Jeremy McIntyre

Bruce Murry  
Carol Olson  
Bob Rutten  
Alex Schweitzer  
Mary Simonson

Mark Sloan  
Bruce Stein  
Terry Woelber  
Diana Zietz

Staff Present

Andrea Peña  
Bonnie Roth

Guests

Tammy Wahl

Absent

Jane Haerter  
Cindy Taylor  
Mike Schwab

The meeting was called to order at 9:00 AM by Mary Simonson. Roll call was taken. Alex Schweitzer, Bob Rutten, Brent Askvig, Bruce Stein, Carol Olson, Darcy Andahl, Diana Zietz, Bruce Murry, Jeremy McIntyre, Mark Sloan, Mary Simonson, Richard Hickok, Shirley Brennan, Tammy Desautel, and Terry Woelber.

Proxies were given to Bruce Murry for Mike Schwab and Tammy Gallup-Milner and Darcy Andahl was given proxies for Jane Haerter, Mike Schwab, and Cindy Taylor. Diana Zietz made a motion to accept the proxies, and it was seconded by Darcy Andahl. This motion was approved unanimously.

Andrea Peña stated that the agenda had been sent to all members. There were no changes or additions to the agenda. Bruce Stein motioned to accept the agenda as stated; and Darcy Andahl seconded the motion to approve the agenda.

Brent Askvig introduced his guest, Dr. Jan Meyer from Harstead University College in Norway. Guest, Tami Wahl from the Governor's Office, was introduced by Mary Simonson as well as \_\_\_\_\_.

Andrea Peña, Executive Director, presented the financial report. The 2007 and 2008 expenditures reports were reviewed. According to the 2007 report, the administrative expenses have remained stable and spent down. Activity was shown in the three grants which were granted extensions from Tom Wallner -- NDACF – Community Transition, Arc of Bismarck, and NDDAC consortium -- and can spend down until 2009. Andrea has been in contact with each group. They are actively in the progress of working on their approved extensions.

In the Fiscal Year 2008, the administration budget has changed very little. As stated previously, the expenses of negative \$10,023.00 was a pay out for Tom Wallner's leave. Following that, we are unspent in travel monies, registration, and photocopying; and the council overspent in supplies and awards due to Tom Wallner's retirement and certificate that he received. There were small moving costs in transitioning from Prairie Hills Plaza to the Capital.

On the second page of the 2008 budget, you will note all the projects and their expenditures. As of September 30, 2008, there are \$41,878.71 projected monies available. The Fiscal Year ended September 30, 2008; however, statements are still being returned. There are still balances in some of the grants. All the project directors indicated to Andrea that all funds would be spent except NDACF who asked for a short-term extension just to expend some of their funds and bring in some speakers. The extension was granted by Andrea.

Carol Olson asked if the Council will roll over the \$41,878.71 into the 2009 budget that is just sitting there and is not available at this time. Andrea stated that the Council will rollover the money into the 2009 budget at this time; however, we could open those monies to another RFP next year if the Council wanted to do that. The money is not available until it actually rollover. Bruce Murry inquired when the rollover money would be available. Andrea stated that the money would be available at the end of December. A motion was made by Shirley Brennan to approve the financial report and seconded by Darcy Andahl. No discussion. It was unanimously approved by the members.

Andrea Pena, Executive Director, reported that new recording equipment and a laptop was purchased so the Council doesn't have to find equipment. On the Federal level, the ADA requirements have passed through Congress and the funding award letters were mailed November 20, 2008. There is anticipation for more information next week. An allotment of \$460,000 is anticipated. Andrea Pena will send a notification to council members via email of the amount granted. The intent to award letters has been sent for 2009 grantees in early October so they were aware if they were granted awards. Pathfinder and Rehab Services did receive denial letter, and Andrea has had contact with both of them. Legal Services will mail the contract to all grantees for their signatures as soon as Andrea has reviewed them.

Andrea has completed all three levels of the \_\_\_\_\_ Procurement Training. This training qualifies Andrea to be the contract manager for these projects and allows Andrea to administer the RFPs for 2010. Contract closure reports for 2008 have been closed out. These reports are required by DHS Fiscal Administration and have been completed. Andrea received the 2008 narrative reports and is compiling them at this time for PPRs. A PPR is an annual report for the federal government, and these reports should be ready by January 1, 2009. There are no major changes in the report format. It will be online once again. Andrea is hoping to go through and close the narrative information very soon.

Andrea Pena had the opportunity to visit the 2009 projects in Minot and visited Brent Askvig and staff as well as Chet Fenner who is the SCDD web site administrator. Chet Fenner is in the process of updating and reformatting the SCDD web site. At the next meeting, Andrea would like to preview the new web site. Nichole Wiler of the Governor's Office updated the web page through the Governor's Office also.

Andrea Pena also had an opportunity to attend the October Executive Directors' Retreat in Montana and met many directors in other states and territories. Mike Bureoli, who is the new CEO of NATT, met with him and talked about national level issues. Mike is hosting individual calls to each director across the US. Andrea will be talking to Mike directly very soon. If any Council members have questions to be asked to Mike, send them to Andrea as soon as possible.

At the last meeting, the bi-laws were amended for 2008. The bi-laws were passed around to view. Betsy Dalrymple was thanked for her time served on the Council. Since Betsy could not attend in person, Andrea will send a card to her to thank her for her years of service. Terry Woelber questioned the location of amendment. Former council chairperson was added to Section 5 under committees which was on page 2 of the bi-laws.

Bruce Stein inquired if the new web site would let a blog or hot topics area be placed there. Andrea Pena stated that after speaking to Chad regarding this feature it will be a part of the new formatting. Andrea stated that once all the reformatting is finished, she will have the ability to go in and change the text at any time. Andrea needs to get an updated software package and work with ITS staff. Andrea will email the web link and updates before the next meeting and get feedback from members.

Diana Zietz, NCDD, stated that she attended an October conference in Milwaukee, WI which was very informative. New officers in this organization. Diana noted that there is more Midwest representation. Deb Swingley is a new representative from Montana. North Dakota was awarded a 3-year technical assistance grant (\$1,000,000 for technical assistance). In the years past, the grant was \$140,000 per year. One of the things that the grant monies are going to be used for is leadership training. Finances are still good, but the dues have risen from \$100 -140. Diana Zietz will remain on the finance committee and fall conference committee. There is a June conference meeting in Washington, DC which Diana thought Andrea Pena should attend, if possible. Diana Zietz had visited with Commissioner Morrissey at the National Conference and will hopefully attend again. Diana stated that the conference sessions were interesting and a good learning experience. A photographer put on a visual show regarding the growth of disabilities.

Marlene guest

Jack Reuter (Medical Services Division) spoke to the Council regarding Money Follows the Person grant. In the overview of this grant, Jack stated that this grant was intended for two things:

- Visual transitioning from institution to community; and
- System transformation. ND must see how we provide services in community, both early and now more in depth. Prevent institutionalization, if possible.

The program's purpose is:

- Rebalancing – increasing the use of Home and Community Based Services (HCBS) instead of nursing homes and institutions. We must continue to try and keep our elderly and disabled at home longer.
- Money follows the person. North Dakota must break through the barriers of spending Medicaid dollars which restrict the flexible use of Medicaid funds to enable Medicaid-eligible individuals to receive support for appropriate long-term services in a setting of their choice.
- Continuity of service would increase the ability of the State Medicaid program to assure provision of HCBS services to eligible individuals who would like to move from an institution to a community setting; and
- Quality assurance and quality improvement to ensure that procedures are in place within the HCBS program and maintain and improve the quality of services.

Develop benchmarks:

1. How many people will be moved from institutions to community settings.
2. Spending increases for home and community based services.
3. Crisis intervention services is needed. How to support people in the community through behavioral analysts and other staff.
4. Increase awareness and utilization of HCBS in North Dakota. The grant is focusing on Medicaid and making sure clients are aware of the program and who to call to access services. This is a statewide process and is focusing on ten counties and collaborate their services. Staying close to family and friends.
  - Jack met with Kidder County who was the first county to try these services. District Health staff joined in to support community clients along with pharmacist and clients to keep individuals out of institution.
5. North Dakota will create a crisis intervention/response process to support:
  - Seek assistance for client and get a team together with HCBS to support this person who needs help and keep out of institution. Transportation, businesses, and other entities will be part of this benchmark.

Individuals should be contacted in a nursing home or ICR/MR facility to tell the individual about this program for a possible transition to the community. A transition team (nursing staff if necessary, DD planning, and DC planning coordination) must be in place for this process to work. The DD Case Manager will work with a local agency and planning process is put in place in coordinating people to community.

Transition coordination must be developed after a comprehension assessment is made. The assessment must tie to their actual plan of care. A plan is made for the 24-hour

backup plan and support after transition. What issues are accounted for and what the community can do to help is all part of this process.

Nursing backup services is another part of the process. There are three levels of backup:

- Local people to be contacted on a 24-hour basis.
- Providers will have their own backup plan to work their the individual health/welfare needs.
- Team must develop a backup plan also to response immediately. The 911 system is also to be used.

Supplemental Services could be used such as a grant of \$3000.00 or less to purchase furniture, supplies, adaptive equipment, home modification, first month rent, groceries, scooter, alarm systems, doors for staff and clients, etc. for clients to use during their move. This is a one-time transition cost.

An individual must be Medicaid eligible to have nursing home eligibility with a 6-month minimum stay before their move. Institutional level of care must be met by moving into the community. Does the apartment meet the needs of the individual? This is accessed by the team. The individual must have a desire to return to the community.

ICF/MR Eligible individual must be Medicaid eligible with a minimum of a 6-month stay and continues to meet the Level of Care screening requirement. The individual must wish community placement.

Eligible community residence must have a home owned or leased by the individual or their family; an apartment or live in an adult family foster care with less than 4 individuals.

The community-based service programs are:

- Developmental Disabilities Waivered Service
- Service Payments for the Elderly and Disabled (SPED)
- Expanded Service Payments for the Elderly and Disabled (Expanded-SPED)
- Medicaid waiver for HCBS.
- Older American Act Programs
- Informal Supports

For one year the grant will pay the waiver services at a little higher rate. 20% saving is placed in the rebalancing funding. You must spend the grant dollars on residents to stay in the community.

The services are to find in some areas because of their size. Promoting educational services and how to spend the rebalancing monies is a goal for all grant users.

HCBS or any waived services will be paid for one year by the grant. The use of 365 days for the grants does not have to be continuous.

DD providers have developed a substantial list of potential risk patients.

Emergency backup plan must be in place by having a list of services needed for health and safety of the consumer. There is a web site for information, resources, and contact information. <http://www.nd.gov/dhs/info/pubs/mfp.html>

Jake Reuter asked for questions from the Council. Brent Askvig asked if any lessons have been learned up to this point. Jake stated that under the DD transition, the funding and transitioning is working very well. Case Managers and Medicaid staff are looking at the individuals who are in a nursing facility and moving to the community. This transition will take a bit longer. Care must be taken in approaching institutional staff and residents in their transition (can the resident afford to move). Institutional staff is cautious in telling the consumer that they may be eligible.

Bob Rutten asked about benchmark one and children in this program. Ann Carlson has been contacted. A new Medical Services program has a waiver for children with medically fragile needs and would support a child from an institutional setting to community and home living. Fifteen slots are available for this program, and only three slots have been filled at this time. The grant can assist with equipment or adaptive equipment at home. Children in this program may have challenging behavior problems also as well as medical challenges. There are children and adults who meet these needs also from the State Hospital. Moving children out of an institution may be a problem in trying to sustain the needs after going into adult services. This grant pays for transition for one year only.

Contact Jake Reuter, Program Administrator, Medical Services, at 701-328-4090 or email him at [jwreuter@nd.gov](mailto:jwreuter@nd.gov) if you have any questions regarding this program.

Brent Askvig introduced our guest speaker, Professor Jan Meyer of the Norwegian Systems of Care and Support for Persons with Disabilities at Harstad University College at Olso, Norway. Mr. Meyer talked about the various services provided in Norway and has spent time at the Center for Disabilities in Minot. Brent was a visiting professor in Norway for two years.

Harstad University College is located north of the Arctic Circle. Jan Meyer stated that Norway has a democratic system of government (executive power, legislative power, and judicial power. Media is the fourth power), and people are elected at three levels who deliver welfare for the people of the country. The township level is the caretaker of the elderly and disabled. This level is responsible for schools, health and social care, and daily care for people who need care and special services. The township gets money from the government according to the size of the township. The social welfare system is found in the township and has now merged into one organized called NAV. There are approximately 2 million users. The NAV is the Norwegian labor and welfare

organization. The national insurance and employment services are state funded and run by the state to get a job. You MUST take the job no matter the location.

The NAV's main goals are to put people to work and other activities and fewer on benefits given.

Norwegian Welfare System.

- The Township/Municipalities have the responsibility for health and social care for people who live in the township based on the social care act and Township Health Care Service Act.
- Regulate the responsibility of the local municipality and financed by general state grants and local taxes.

### Standard of Quality Assessment

The national budget has 30% of their funds going to social support services through local taxes and general state grants. Finances support social services and nursing services in the home and institutions. Periodically monies are earmarked grants for new measures or for stimulating improvements.

### National Insurance Scheme

All Norwegian citizens and individual working in Norway are automatically qualified for membership. Government insurance scheme entitles members to a pension, old age survivors disability, pregnancy, birth, single parent families and funerals and other benefits such as industrial accidents and illnesses. Everyone who has wages pay 7.8% in to the national insurance scheme and everyone will get benefits. Everyone in a nursing home or living in an apartment has to pay certain percent for their care.

In 1991, Norway began non-institutional reform. The circumstance of life and standard of living of persons with developmental disabilities in institutions was unacceptable by basic human social services. So the government set up the townships to be responsible for people with DD and older people to give them better lives by staying at home. The townships MUST give these services to all who need it.

Individual housing provided by the act:

- The individual would rent or own his or her own house/apartment.
- The contract or mortgage for that housing would be in the name of the person.
- The apartment must be near family in the community.

Continued Individual housing

- The quality and character of housing should be similar to that of other citizens in the township.
- If purchased, the apartment should have relative market-ability for resale.

- The apartment must be barrier-free and accessible for people using wheelchairs or having other physical impairments.

School system:

When a child is born, the mother gets one year off as well as the father and gets 80% of their wages. Every woman should be able to work out of the home; therefore, when child is born children go to a day care, preschool, or kindergarten. People with disabilities have first rights to go to the day care facility. Monthly kindergarten is about \$400 monthly but coming down in cost.

When a child is six years old, they go to regular school including disabled mentally challenged children. The goal is for the family to care for all their children including disabled. The state helps with their expenses in the township. Township administers the monies for the school. If families need a rest, the family sends the child into a restful activity. Disabled children have the right to go to school first. There is home schooling in Norway also. The Township visits the home to see if the child is getting the correct academic training.

Bruce Murry inquired as to how the HCBS ends and when the nursing home services are available. The township has a nursing committee are in contact with an elderly person and see how the person can do the daily activities. An assessment is made and help is placed in the home. Nursing homes are for old people first and occasionally a younger person can be placed in a nursing home with a disability.

Bruce Stein asked if the country trains workers to help in the home. There is a 3-year degree of home trainers to go into the townships and help the disabled and elderly. Home workers are trained and untrained in the townships.

Carol Olson asked about social security. Everyone, even the person who lives on the street, gets social security monies. It is approximately \$20,000 yearly and helps to pay for their living expenses. If you work, the social security monies are increased.

What are taxes based on? The average yearly taxes paid is 30%. High wages may send your taxes to 40%. Gas and oil exports are about 5<sup>th</sup> in the world. Tax money for gas is used on roads and public transportation.

A disabled child is analyzed right away upon birth. They go to a doctor; ask for a specialist if more help is needed. Health people come to the home to help with advice, and they do have advocates to help.

There are township elections. The Political parties make their programs and voting as to what program is best for you.

Laplanders live in Norway and various townships. Some township have their own language. Schools use the language there, and need more help. It is similar to the

Native American reservations in the United States. The Laplanders live in Russia, Norway, Sweden, and Finland. The government gives them money.

HCBS training is paid by the county. The county has a market for home health people. People can be retrained after an evaluation is made if they cannot continue with their job.

A Council member asked if there is a stigma being disabled and getting a job. The hiring process into business is more difficult, and the government does pay for businesses to help with disabled wages.

Theresa Larson spoke to the Council regarding the MTARS federal audit which is coming in 2009. Theresa Larson, Andrea Pena, and Brent Askvig have taken the opportunity to have monthly conference call. They have been comparing dates to have the team audit in April. The federal auditors are giving us tentative dates to visit North Dakota – end of April or May. The MTARS audit visit will be 3-4 days, and the date isn't known as yet. Calendars were matched by Theresa, Brent, and Andrea asked the federal auditors for June. This visit will be one week.

Sara \_\_\_\_\_ sent a 2007 MTARS material notebook – fiscal and monitoring guidelines and filling in the boxes of information that they are requesting to be completed. A notebook was left by Tom Wallner regarding the information, and Andrea will do comparing of the old and new information.

Theresa Larson discussed the collaboration project between the three entities from the past years and present. Theresa passed out a report current and past projects of collaborative projects amongst the three entities (sister agencies) -- Protection & Advocacy Project, \_\_\_\_\_ and \_\_\_\_\_.

The Disability Justice Initiative was a five-yr project. Minot State University (MSU) has helped fund this project. Prior to these projects, there are other projects such as a web site working with MSU. There are links to the various web sites. P & A and the Council work together as a good model. The Council helped P & A with a youth council on reservation.

Therea will give a copy to Brent and Andrea which showed Alabama sharing collaborative information through minutes and working together. Reports, interviews, and other information will work well together with federal audit and reports. Documentation and sharing good information will be of benefit.

If a compliance issue occurs, there would a need for corrective action. They give more recommendations and creative ideas. The council members will be involved only through a series of phone calls and possible interviews.

In the Alabama grouping, there were approximately 15 federal auditors but will probably be smaller here. P&A, USAID, and other members will do the audit. Brent stated that

possible members will fly into Minot and come down to Bismarck to join the other group of auditors. Because collaboration is so important, Brent Askvig stated that core funding is a big project. Using extra money to address issues and topics that are emphasized in the DD Act, emphasis on quality assurance, health care, early intervention, and education is most important. A possible one-day topical summit conference on these emphasized area should be set up with a keynote speaker to come in and have small group discuss the topics is a possible project. SCDD and P & A would be getting this project together for the future.

Bryce Fifield, Theresa Larson, and Tom Wallner had strategy sessions each year. There is a need for more collaborative sessions. New applications, specific goals, and evidence have to be gathered to get the information for future goals. In the meantime, Andrea Pena stated the monthly conference calls will continue. Diana suggested that Andrea Pena contact other minimum allotment states to get feedback from those states and update Council via email so everyone will know the happenings.

#### Other business:

Tentative Council meetings, which are required quarterly and the dates be given to the Secretary of State, are as follows: March 11; June 12; September 23; and December 11.

Brent Askvig offered "Living at Grafton" DVDs to the Council members.

#### Legislative sessions:

Diana stated she would like to be kept abreast of legislative information. The Executive Committee will be involved in testimony. There is also a legislative web site that will be updated all the time. Andrea will send weekly updates.

#### March Agenda:

- Legislative updates
- MTAR updates

The SCDD Meeting was adjourned by Mary Simonson at 12:10.