The Importance of Diversity in our Field

by Brent A. Askvig, Ph.D., NDCPD Executive Director

Diversity is often defined as “identifiable difference.” When some characteristic is used to differentiate one person from another, we have diversity. There are many possible factors which might be used to separate one person from another. It may be language, mobility, hair color, height, or any of innumerable characteristics. While the labeling process to identify differences may not always be viewed positively, I believe it is good that we acknowledge difference.

This viewpoint is a suitable perspective because diverse people often convey a multifarious outlook to situations and issues. Obviously, we’ve seen this in the recent national political discussions, but we also see it in our daily work. University Centers of Excellence on Developmental Disabilities (UCEDDs) value diversity and varied perspectives. Different opinions can be a healthy way to more fully discuss all aspects of an issue. When done in respectful and collegial ways, these different opinions and outlooks allow us to examine unique viewpoints of problems and solutions. Thus with diversity comes a greater understanding.

Over the past several months, NDCPD has become a more diverse UCEDD. This has been an exciting time for us and allowed us to grow. We have staff from different countries, which helps us better understand systems and services for those persons we serve. Also, our staff includes individuals with differing ethnic and cultural backgrounds, which makes us understand various value systems. Additionally, we have staff who possess varying languages, which makes us able to clearly articulate our views and ideas. Lastly, we have staff with a myriad of skill sets, which makes us proficient at defining what is really important.

The growth in acknowledging and understanding varied perspectives has been tremendous. I see this leading us closer to the goal of Excellence. I believe this will allow us to advantageously tackle the complex issues we face in the disability field. But challenges still remain. Diversity demands that we take time. Diversity demands that we listen. Diversity demands that we collaborate. Diversity demands that we respect. These things have always and will continue to challenge us, but we know that the end result will be greater.

So as we go forward toward a new year and new challenges in our state and our country, and as we continue our work with and for persons with disabilities, embrace diversity. I challenge you to look for diversity, acknowledge diversity, and draw on diversity. Ultimately, we should continue to do the good work our field demands.
ND High Schools Addressing Suicide Prevention

by Emily Rodacker

In North Dakota, 10% of high school students report attempting suicide one or more times, 14% have seriously considered attempting suicide, and nearly 24% have felt sad or hopeless for two or more weeks in a row. (Centers for Disease Control and Prevention, High School Youth Risk Behavior Surveillance Survey, 2011 results).

The ND Department of Health Suicide Prevention Program has contracted with the ND Center for Persons with Disabilities (NDCPD) to administer a new online training for high school staff to learn how to recognize students in psychological distress and how to refer them for help. At-Risk is available to all high school staff in North Dakota and is a one-hour, online training available 24/7. Enrollees in At-Risk will practice speaking with student avatars selecting from a menu of and pre-set dialogue options. The student avatar will react positively or negatively to build the trainee’s skills for helping a student in psychological distress. A champion from a school enrolls their school to give staff access to the training. NDCPD is able to track which schools are enrolled and their completion rates. Since its introduction in early September, 25 high schools and special education units in North Dakota have enrolled in At-Risk. Hazelton-Moffit-Braddock Public School and Richland Public School both have exceeded 50% completion. Underwood Public School has recently surpassed 25% completion. To find out if the high school in your community is participating, visit the interactive map at www.ndcpd.org/prevention.

To enroll your school or for questions, please contact Emily Rodacker at emily.rodacker@minotstateu.edu or call 701.858.3546.

Disability Health II Offering Technical Assistance

by Emily Rodacker

The Disability Health II project is offering technical assistance on disability-related issues to emergency responders, health care providers, and other disability health-related groups across North Dakota. The training is free of charge and part of an effort to promote the health and wellness of North Dakota citizens with disabilities. Training topics include health promotion and wellness, access to health care, disability awareness, and emergency preparedness. The technical assistance provided will increase health promotion opportunities for people with disabilities to maximize health, improve access to health care for people with disabilities, and improve emergency preparedness among people with disabilities. Project staff will work with organizations to identify their needs and provide a customized training session in-person or via distance technology. The session will include a presentation, discussion, and implementation strategies.

For more information or questions, please contact Emily Rodacker at emily.rodacker@minotstateu.edu or call 701.858.3546.
Support Autism in North Dakota

by Hilory Liccini, Project Director

Support Autism in North Dakota (SAND) is currently in its second of three funded years. The SAND project has been across the state conducting trainings for preschool and daycare providers as well as a separate training for the North Dakota medical community on the red flags and warning signs of Autism Spectrum Disorders. Additional information includes how to utilize and score ASD screening tools such as the M-CHAT. Trainings are typically 1 to 2 hours in length and are held at the sites of the daycare or medical offices. Preschool/daycare trainers are “Growing Futures” certified. Attendees are able to earn continuing education credits. Medical training on the screening tools and billing codes also provides information on how attendees can earn CME’s and CNE’s.

The following red flags may indicate a child is at risk for atypical development, and in need of an immediate evaluation. Please consult with your child’s primary care provider if you see one or more of the following red flags:

- Not respond to their name by 12 months
- Not point at objects to show interest (point at an airplane flying over) by 14 months
- Not play “pretend” games (pretend to “feed” a doll)
- Avoid eye contact and want to be alone
- Have trouble understanding other people’s feelings or talking about their own feelings
- Repeat words or phrases over and over (echolalia)
- Give unrelated answers to questions
- Get upset by minor changes
- Have obsessive interests
- Flap their hands, rock their body, or spin in circles
- Have unusual reactions to the way things sound, smell, taste, look, or feel.

If you are interested in trainings, please contact Hilory Liccini at Hilory.Liccini@minotstateu.edu or call 1-800-233-1737 ext. 3008. You may also view our website at www.ndcdp.org/sand.

National Association Awards Provisional Accreditation to MSU Program

The North Dakota Community Staff Training Program, recently received official verification that had been awarded Provisional Accreditation by the National Alliance of Direct Support Professionals (NADSP). MSU was given approval to move forward in the voluntary accreditation application process.

Joseph Macbeth, Executive Director of NADSP stated that, “Achieving NADSP accreditation demonstrates that your program effectively teaches the ethics, knowledge and skills that constitute best practice in community direct support to individuals with developmental disabilities.” The accreditation process provides a structure to align program content with contemporary practice guidelines and demonstrates leadership in community human services professional development.

The Community Staff Training Project provides the professional development for direct support and other professionals who provide support in all of the community-based developmental disability provider organizations in North Dakota. Approximately 4500 staff members employed in 79 ND communities are enrolled in the program. Partners assisting NDCPD and the MSU Special Education Department with the national accreditation self-evaluation and the planning processes include the ND State Council on Developmental Disabilities, the ND Association of Community Providers, the ND Department of Human Services, parents of individuals with disabilities, and advocates.

For additional copies of the Collaborator contact Linda Madsen at 1-800-233-1737. Please feel free to copy and distribute articles or excerpts from The Collaborator, provided the following acknowledgement is used: Used with permission from the North Dakota Center for Persons with Disabilities, a center of excellence at Minot State University, Minot, North Dakota, USA.
The North Dakota Center for Persons with Disabilities is a member of the Association of University Centers on Disabilities (AUCD). AUCD is a national network of interdisciplinary centers advancing policy and practice through research, education and services for and with individuals with developmental and other disabilities, their families, and communities.

**Upcoming Trainings**

**Train the Trainer to Train the Staff in Therapeutic Intervention**
Presenter: Ron Odden  
Registration Fee: $85.00

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<tr>
<td>Comfort Inn, Bismarck</td>
<td>July 18 (follow-up)</td>
<td>9:00 AM – Noon</td>
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**To register contact:** Vickie Brabandt vickie.brabandt@minotstateu.edu or call (701) 858-3047 or toll free (800) 233-1737

**North Dakota Association of Community Facilities Annual Conference**
**Creating Inclusive Communities**  
**May 8-10, 2013**
Ramada Plaza and Suites, Fargo, ND
Conference Registration Deadline: April 25, 2013
Reserve Hotel Rooms before: April 7, 2013 (701) 277-9000

**Registration:**
$250 all 3 days;  
$150 for May 10;  
$75 for May 9 or 11  
$25 per day: Registration fee for individuals with disabilities and families

**Keynote and Featured Speakers include:**
* William Stillman, Hummelstown, PA  
* Art Dykstra, Joliet, IL  
* Allen Anderson, Toronto, Ontario

* John Pelizza, North Chatham, NY  
* Peter Leidy, Madison, WI  
* Dennis McGuire, Oak Park, IL

**To register contact:** Vickie Brabandt vickie.brabandt@minotstateu.edu (701) 858-3047 or toll free (800) 233-1737

**Upcoming Great Plains Interdisciplinary Autism Diagnostic Clinic (GPIC)**
**April 16, 2013, NDCPD @ Minot State University, Minot, ND**
The Great Plains Interdisciplinary Autism Diagnostic Clinic is funded through ND Department of Health Children’s Special Health Services Division. We will be holding our next GPIC clinic in Minot on April 16, 2013. We welcome professional, educational or parent referrals to be a part of this clinic. GPIC clinics use an interdisciplinary, arena style approach for the assessment. We are able to assess two children per clinic. For more information please contact Connie Irey, Project Director/Family Support Specialist, at 701-858-3286 or 1-800-233-1737 ext. 3286.

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Health Care Reform Anti-Fraud Provisions

by Linda Madsen, Project Director

The Patient Protection and Affordable Care Act, more commonly known as the Affordable Care Act, enacted in 2010, provides tools to prevent, detect and take strong enforcement action against fraud in Medicare, Medicaid and private insurance.

The Affordable Care Act (ACA) seeks to improve anti-fraud and abuse measures by focusing on prevention rather than the traditional “pay-and-chase” model of catching crooks after they have committed fraud. There are four principal ways the ACA seeks to make changes: (1) More money to prevent and fight fraud, (2) Better screening and compliance, (3) New penalties, and (4) Better data sharing.

More Money. The ACA provides $350 million over 10 years (FY 2011 through FY 2020) through the Health Care Fraud and Abuse Control Account (HCFAC). The ACA also allows these funds to support the hiring of new officials and agents that can help prevent and identify fraud.

Better Screening and Compliance. The ACA allows the Centers for Medicare & Medicaid Services (CMS) to conduct background checks, site visits, and other enhanced oversight to weed out fraudulent providers before they start billing the program. The ACA makes changes in the following areas:

1. Screening and Disclosure. Creates a national pre-enrollment screening program for all providers, and requires disclosure of affiliation with providers and suppliers that have been the subject of certain adverse actions. States will be subject to similar requirements. Those types of providers and suppliers that have been identified in the past as posing a higher risk of fraud (such as durable medical equipment suppliers) will be subject to a more thorough screening process.

2. Licensing, Background Checks. Increases oversight of providers and suppliers participating or enrolling in Medicare and Medicaid through mandatory licensure checks, fingerprinting and criminal background checks of certain high-risk providers, and site visits before a provider can begin billing the Medicare or Medicaid programs or Children's Health Insurance Program (CHIP).

3. Temporary Moratorium. Allows the Secretary of the Department of Health and Human Services (HHS) to prohibit new providers from enrolling in the federal programs where necessary to prevent or combat fraud, waste or abuse in certain geographic areas or for certain categories of services.

4. Withholding Payments. Allows the HHS Secretary to temporarily withhold payment to any Medicare or Medicaid provider based on a credible allegation of fraud and pending resolution of an investigation.

5. Required Medicare Enrollment. Ensures that those who order and refer certain items and services on behalf of Medicare beneficiaries are enrolled in the Medicare program. Providers and suppliers must also maintain documentation on certain orders and referrals.

6. Recovery Audit Contractors. Expands the Recovery Audit Contractors (RACs) program to Medicaid, Medicare Advantage (Part C) and Medicare drug benefit (Part D) programs. Medicare RACs are CMS contractors that are used to detect and correct improper payments after Medicare has paid a bill. RACs will continue to help identify overpayments and underpayments in Medicare and recoup overpayments from providers participating in Medicare.

7. National Provider Identifier. Requires providers to include their National Provider Identifier on all a applications and claims.

8. Surety Bonds. Strengthens the government’s authority to require surety bonds as a condition of doing business with Medicare.

9. Compliance Programs. Requires providers and suppliers to establish compliance programs.

10. Claims Filing Limit. Requires Medicare providers and suppliers to file fee-for-service claims within 12 months of providing the item or service.
The Ticket Program is not meant to supplant the pre-existing state VR… to receive services.

Cassie Tofteland
Karen Pearson

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The ND Senior Medicare Patrol provides Medicare beneficiaries with the information they need to **PROTECT** themselves from Medicare errors, fraud and abuse; **DETECT** potential errors, fraud and abuse; and **REPORT** their concerns. SMPs use trained senior volunteers to help educate and empower older adults in the fight against health care fraud. ND SMP helps beneficiaries with questions, concerns or complaints about potential fraud and abuse issues. It also provides information and speakers for your facility. ND SMP can be contacted at 1-800-233-1737 or 858-3580.

*Resource: The National Consumer Protection Technical Resource Center*

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**Delivering the last of the Giving Tree gifts just in time for Christmas**

NDCPD’s Giving Tree has been in existence since 2001. Each year names of children from our community are placed on the tree and NDCPD staff purchase a gift for the children. The purchased gifts are returned to NDCPD and in early to mid-December a “wrapping party” is held at the Center to package and wrap the gifts for distribution.

Staff from NDCPD’s Infant Development Program deliver the gifts to the children in our community.
New NDCPD Staff

We want to welcome our new employees to NDCPD Staff. These employees have already proven to be a valued asset to our Center.

**Allyson Berner**  
Ms. Berner serves as a Research Associate for the Adult Student Transition Education Program (A-STEP).

**Roxann Hayhurst**  
Ms. Hayhurst serves as a Follow-up Coordinator for the Early Hearing Detection and Intervention (EHDI) Project.

**Stephanie Burt**  
Ms. Burt serves as a Consumer Services-Cultural Liaison for NDCPD.

**Rhonda Weathers**  
Ms. Weathers serves as a Research Associate for Perceptions Project.

**Jolene Orluck**  
Ms. Orluck serves as an Administrative Assistant to the Associate Director of Program Development of NDCPD. She also serves as the Project Secretary for the Supporting Autism in North Dakota (SAND) Project, and the Technical Assistance to Childcare Providers (TACP) Project.

NDCPD’s “Ram Good Job” Award

NDCPD’s “Ram Good Job” Award is given to a staff members to recognize them for going above and beyond. This award is given by the preceding month’s award recipient and honors the staff member’s work to enhance the lives of people with disabilities and further NDCPD’s mission. Recipients over the past months include:

**October 2012**  
*Dr. Brent Askvig, Ph. D.*  
Executive Director

**November 2012**  
*Amy Armstrong, M.E.d.*  
Project Director, ASTEP

**December 2012/January 2013**  
To be Announced
The Collaborator

The Collaborator is the quarterly newsletter for the North Dakota Center for Persons with Disabilities (NDCPD). NDCPD is a University of Excellence on Developmental Disabilities in Education, Research, and Services at Minot State University. It is part of a network of similar programs at universities throughout the United States.

Our mission...
To provide leadership and innovation that advances the state-of-the-art and empower people with disabilities to challenge expectations, achieve personal goals and be included in all aspects of community life.

Vision Statement...
We believe that people with disabilities have the same rights as all citizens. We believe that people with disabilities who receive publicly funded services have the right to expect that those services appropriately promote their independence, productivity, integration and inclusion. Furthermore, we believe that the public expects that these services will be provided in an effective manner.

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