METRO REGIONAL QUALITY COUNCIL MEETING MINUTES
Friday May 11th, 2018
9 am – 11 am
The Arc Minnesota
2446 University Ave West, Suite 110
St. Paul, Minnesota
Hennepin/Ramsey Conference Room
In attendance: Ann Cirelli, Erin Paredes, Chelsea Lorenz, Georg Rumsey, John Estrem, Rebecca St. Martin, Joe Cuoco, Tim Sullivan, Kayla Nance, Isabel Taylor

Purpose Statement: The purpose of the Regional Quality Council is to promote and connect communities so that people have the services and supports to live a life based on their hopes and dreams. Implement a system to continually monitor and improve the quality of services and supports for people with disabilities by improving person centered outcomes, quality of life indicators and to drive overall systems change.

1. **Introductions/What's Happening?**
    - Rebecca and Lance Hegland are working together on workforce issues; this project will be launching soon
    - Rebecca: "If I can't get a PCA, who else can help me?"—working on establishing community connections and spreadsheets of who to contact and gathering 24 hour emergency assistance services (Joe shared that Supportive Living Solutions has a phone line like this)
    - Erin shared interest in connecting families with these Facebook groups; Rebecca passed out cards
    - Rebecca also organizing around people with sensory sensitivities: search "A Sensitive Life" on Facebook
2. **Tim Sullivan on Supported Decision Making Forum**
    - Minnesota relies on guardianship more than other states do; something like a 40% mark. There is more info on supported decision making on Arc website and elsewhere\

- Supported Decision Making is an encouraged alternative to guardianship. SDM is about providing information to individuals, allows them to make informed decisions for themselves based on the info they get from those who support them on more intense decisions that impact quality of life, particularly around health care. All about getting people to think about the options so they can make informed decisions
- Guardianship has 2 types of guardianship: public (determined in court), and private, which has more to do with power of attorney, etc., in families. Legal arrangement. Under 18 automatically have guardians.
- Kayla: school system, doctors etc. are defaulting to recommending guardianship as soon as an individual turns 18, without exploring other options. There is a real need to get into the school system and provide those other options before individuals turn 18 and are shuffled into it. The people who ran the panel are starting to work on this but it's a slow and complicated process.
- Ann: though we're trying to promote more independent living and housing, it's still really difficult to find those things, they are scarce, expensive etc. Tim: no regulations to enforce or support these resources, unfortunately.
- Housing For All is a resource working for accessible housing. Here at Arc MN, Ellen Baudler is in charge of housing work, we will see if she can talk with RQC
- Tim: mixed models (typical building with some accessible apartments) are hard to sustain… or rather it's more profitable for people to get rid of the building than to maintain this model, state isn't reimbursing enough to make worth it. A large facility is going to be converted to typical housing now.
    - Joe shared that Supportive Living Solutions does try to buy out places that are doing this in order to be able to maintain facilities for people with disabilities, can get in touch with him on this topic
    - Tim: unfortunately facilities only have to give 30 days' notice when they are doing something like this.
- Georg: judges and attorneys do not necessarily understand SDM – there is work to be done at law schools to educate them about that. Some individuals have been speaking to attorneys about that. Can't always speak on the behalf of people impacted by guardianship—we should involve them. One mistake can impact a person with a disability's life forever, how can we change that?

- Many of us needed/had assistance and guidance when we were 18 and were our own guardians. We made our own mistakes without it ruining everything—we should allow people with disabilities to have that too

3. **Georg Rumsey on Sexual Violence Center/Arc Collaboration and materials**
    - The Arc has been working on this since 2000s. Different ways of working with parents and professionals on training: online course for parents on how to talk to kids about healthy relationships, courses here at the Arc, partnered with other service providers to train those professionals on these topics, also can refer people to this program
        i. Parents have found it really helpful and that it changed the conversation within the homes
        ii. Conversations without parents or direct support professionals so individuals can be comfortable (parents aware of what the conversation will be like, so they can be aware of what questions might arise)
    - Sexual Health Team – multidisciplinary, meets monthly. Talking about protocol on medical advocacy, victim services and law enforcement. In October, that team is going to provide a training to members of the team and other interested members about the protocol. Ensuring victim centered, trauma informed services.
    - SVC supports people 12 and older in Hennepin, Carver and Scott counties but can refer to other resources in area where you live (Ramsey is SOS, Dakota is 360 degrees)
        i. SVC advocates trained with 40 hour training on how to be sexual assault advocate. Different privileges than Arc advocates: can explain legal and medical advocacy and help a person make a decision on where to go. SVC provides 24 hour crisis line for survivors and secondary survivors. Does not have to have occurred recently.
    - Office on Violence Against Women grant – goal of working together and looking at issue of supporting people with disabilities who have been victims of sexual violence
        i. **Strategic plan**: focus groups and interviews with people with disabilities, victims/survivors, and parents/guardians in spring 2015. Listening sessions with staff and volunteers at Arc, SVC, SAAC in summer 2015. Plan written fall 2015.
            1. Goal to increase staff comfort and capacity on supporting victims/survivors with I/DD; they do a training that might be useful for

other providers. Scheduled to do one with Hennepin County Adult Protection in July.

2. Education around romantic relationships – for people who do fundraising, etc., as well as families and individuals
3. Training around trauma informed services and best practices for working with victims/survivors

ii. **Access and Safety:** SVC focused on access; recently moved into more accessible space because of this work. Arc looking at safety.

1. Both looking at how we communicate with victims/survivors who have disabilities. Are we using understandable language? Do we have visual tools? Designed picture tool currently being used in most hospitals in Hennepin County to explain exam, what will happen, what choices are available to individuals. Returning power and control to people with disabilities.

iii. **Policies and procedures**: creating policies that increase safety, confidence, comfort and empowerment. Providing people with the language they need to find support. Mandated Reporter work here at the Arc. Arc working on guidelines for both those who have been harmed and those who have harmed others, and what the responsibilities are for working with both populations. SVC working on accommodations conversations.

1. Working on picture tool to explain mandated reporting, who is one, who is not, what is the result of a report being made. Frequently don't hear back,

iv. Working with self-advocates to make accessible support groups, support group specifically for victims/survivors with I/DD. People with disabilities are currently welcomed to any support groups, but might want to be with people with similar identities. Development, implement and outreach

v. New area, law enforcement: relationship with St. Louis Park police, developing environmental scan to use, focus groups, recommendations report, finding what needed to enhance ability to work with v/s with i/dd; looking at school element too

vi. **Outreach**

1. Flyers, age appropriate sexual relationships tool, developing poster to put in community (Ann pointed out that the flyer does not reflect that the SVC number listed is the 24-hour line, not the office number)
2. Working on how to share resources with people who aren't receiving services
3. Grant specific to Hennepin County, but Arc has advocates that work in other counties that can share with
4. Looking at how to get grant for statewide effort
5. Hennepin County could leave behind flyers. Also would be good to reach out to contracted case managers, who are in touch with people's lives more than many in the system
6. Awareness that flyers, etc. might endanger someone: there are other resources available. RQC has more discrete cards we can hand out

4. **Small Group Discussions**
    1. **Membership/Council Process**
        - Recruitment—who do we need at the table? List of groups to draw from: Ramsey County and Scott county, bringing in another person from each
        - Would like to see racial minorities join us, still a pretty white group
        - Others from disability community—maybe a parent, person from the medical community who works with disability and can share the medical side of it; adolescent or person who works with kids
        - Bigger name—who can we look to in order to give us a "face" and get us out there a bit more? Someone with some clout
        - Politician. Would be great to have someone sit on the council, go "all the way to the top". Even if they just sit in once that would be great. Asking potential candidates questions about what they will do for the disability community
    2. **Review Process/Procedures**
        - Urgent vs. crisis matters: distinguishing between. Council isn't service provider or county; our job is to use the county's system to make reports. Maybe call county to alert to something happening to somebody in the county, and let the county take care of it from there

- Probably don't need a work group to review these things—would probably be getting too involved. Rather, use systems that are still in place. Develop relationship with crisis response teams in 3 counties served. Constantly review resource doc. Current resource doc not helpful for person in crisis; assume that they are not going to self-actuate and we need to step in and make that connection.
- Training for interviewers on crisis situations and connections with those
- Agreement done by July, hopefully, then look at renewal and recruitment
- Press on DHS and Ombudsman about guardianship issue

5. **Next Meeting- June 8th, 2018, 9am-11am**