



of Wisconsin Disability Organizations

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To: Kitty Rhoades
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From: Survival Coalition of Statewide Disability Organizations

Topic: **Recommendations for Supporting Families* through CLTS Redesign – Doable strategies in the next 18 months -**

Survival Coalition was very pleased to hear your announcement about a renewed focus on quality improvement within the children’s long-term support system. We are ready to offer greater detail to recommendations you would like to advance.

We believe that CLTS, supporting children and families, is critical to achieving desirable outcomes for young adults with disabilities. Values about work and contribution come from families. Families who have access to information and skill-building opportunities, emotional supports and needed goods and services are able to play key roles in identifying and securing opportunities for their family members to participate in meaningful ways within their community and ensuring access to self-determined lives. The goal of supporting families is to maximize their capacity, strengths, and unique abilities so they can best support, nurture, and love their family members while facilitating achievement of self-determination, independence, productivity, integration and inclusion in all facets of community life.

The following recommendations are intended to advance DHS systems change efforts to support families as they endeavor to support their children to have meaningful self-determined lives:

ACCESS

1. Build on efficiencies experienced in counties using a single point of entry and expand COMPASS-Threshold statewide to improve access to information, supports and eligibility determination.
2. Support opportunities for families to acquire skill and knowledge to be effective partners and advocates by supporting parent leadership training such as PALS (Parents As Leaders).

3. Assure families have access to information that is understandable, reliable and culturally appropriate.
4. Increase access to one-to-one service coordination supports for families who are seeking assistance and those on the waiting list for CLTS.
5. Provide learning opportunities to families and service coordinators to assure families are supported to focus on strengths, interests, possibilities and opportunities.
6. Assure that all children have equal access to eligibility determination using the functional screen with particular attention to children with severe emotional disturbance.

* Family is defined as a group of people with common ancestry, purpose or conviction that considers themselves to be related and is committed to adapting and accommodating to the experiences and changes of individual members throughout their lives.

CHOICE

1. Family-centered CLTS service coordinator training that is ongoing and reinforced by DHS. Increase skills and knowledge of current CLTS service coordinators to partner with families to identify family outcomes and increase family access to generic community supports, Medicaid covered services and futures planning.
2. Support and encourage family-to-family networks and connections to provide emotional supports, information and a more expansive vision for the future.
3. Address barriers that prevent service coordinators from creative problem-solving which in turn facilitates inclusion for the child and family and maximized use of neighborhood and community supports.
4. Start early and continue often to help families shape a positive vision for the future and actualize that vision as partners and advocates with schools, CLTS, and their communities.

COORDINATION

1. Assure that annual planning for current and future needs of a child and family is based on the family identified outcomes, not a menu of services.
2. Improve access to and coordination with Medicaid prior authorization and EPSDT and reduce cost shifting to CLTS.

QUALITY

1. Using system outcomes identified by the CLTS Council, design and implement a family evaluation to get information from families about effectiveness of supports and services. Use this information to guide quality improvement efforts.
2. Ensure that CLTS interactions between providers and families, as well as ongoing training for families focusing on vision setting, future possibilities, partnering with professionals, and maximizing school and community resources.
3. Improve data reporting that can be used to describe CLTS: for example, numbers served and on waiting lists; costs; spending trends; service utilization and demographics.

FINANCING

1. Increase funding to reduce or eliminate waiting lists for access to the CLTS for all children waiting, regardless of diagnosis. Any new funding should reduce the inequity between children with different disabilities. This is best accomplished by eliminating waiting list which will assure

that families have the best match to needed supports rather than having to choose the only open door, even when this does not meet their needs.

2. Make self-directed personal care available to families

We appreciate your consideration of these recommendations. We would like to provide more detail on recommendations of interest to you. Please contact us for a meeting at your earliest convenience to set up a time to meet and discuss your priorities.

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