

Maine Developmental Services Oversight and Advisory Board (MDSOAB)

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MINUTES - January 28, 2025

1. **Present:** Cullen Ryan; J. Richardson Collins; Rory Robb; Ann-Marie Mayberry; Richard Estabrook; David Cowing; Kim Christensen; Bernie Oster; Mark Kemmerle; Jennifer Putnam; Kim Humphrey (Members); Barrett Littlefield (DRM); Betsy Hopkins, Noelle Nealt (OADS); Maggie Hoffman; Deb Dionne; (Guests); Victoria LaBelle (Administrative Assistant); Bonnie-Jean Brooks (I.E.D.)

We were disappointed to learn that our chairperson lost his mother early this morning. Condolences were offered by the Board.

2. **Conflict of Interest** – There were no disclosures.
3. **Minutes:** The November minutes were not available. The December meeting minutes were presented in rough draft form. It was decided that the I.E.D. would amend them and present them to the Board for approval at the February meeting. The November and December minutes were both deferred until February.
4. **Financial Report** – The November and December minutes were deferred.
5. **Updates from Office of Aging and Disability Services (OADS)**
 - A Board Member, reacting to recent federal administration changes, asked Betsy if any federal grants applying to Maine would be frozen – including ARPA grants. Betsy said that it is too early in the process to know what the impact of decisions in Washington may have on services in Maine.
 - A Board Member said they would send out a summary of what experts are expecting for changes from the federal government.

Budget – A Board member said that lack of the Supplemental and Biennial budgets including a COLA in the Waiver program will be detrimental to services.

 - **Review of DDS Quarterly Data - July 1, 2024 – September 30, 2024** –
Noelle reviewed the report and pointed out areas that have been changed because of recommendations made by the MDSOAB at past meetings. This included adding clarifying data from Case Management agencies. A survey was conducted of Case Management agencies with forty (40) responses.

The Dangerous Situations category was also expanded. There were some questions about why medication errors and visits to emergency rooms and why they were not listed in this category. There also appeared to be some duplication in the data re, emergency rooms.

A Board Member asked how involvement of Law Enforcement and trips to Emergency Rooms intersect with Crisis Services. Betsy described a variety of different services that the Crisis Team provides including going to the Emergency Room in certain circumstances. An agency can contact Crisis Services at any time. Do we have record of what the response is when Crisis Services is contacted by telephone? Betsy emphasized that the goal of the Crisis Service program is to support the person in the home and if the person is in the Emergency Room, the goal is to support the person to go home when stable.

There was mention of 'subcategories' that did not roll back up.

A Board Member asked if OADS has enough resources to provide the necessary Crisis Services. How often do we have to locate a new place for a person to live?

A Board Member asked if we are tracking how many people are staying in state Crisis homes and the length of stay of these individuals.

A Board Member asked if the MDSOAB could get specific information on the number of people living on their own receiving Section 29 supports.

Responses to Questions Above: Betsy said she would take these questions back and see what data might be available to answer some of these questions.

There was an example of Reportable Event but had 2 Substantiations which is unusual. From a discussion on Page 9, there was a question about how we count/track a perpetrator of multiple victims. Not sure.

A Board Member asked under the category of "Caregiver Neglect," is data available to say how many incidents in Shared Living and other types of living arrangements. **Response: Betsy said that she thinks that this can be tracked.**

A Board Member asked if "unmet needs" for Dental Services can be seen in Evergreen, including need for IV Sedation as well as Dental Services, in general. **Response: Noelle will discuss with Betsy.**

Another Board Member said that the MDSOAB wants to see all "unmet needs" categories and how many people are waiting for their needs to be met.

It was noted that there was a slight decrease in the number of Reportable Events.

- **Lifespan Waiver** – Betsy mentioned the handout that she had provided. She also said that ARPA funds expire 6/20/2025.

The biggest roll-out to date has been the **Readiness Grant** program. There will be notifications coming out in the next couple of weeks spelling out levels of funding and technical assistance.

CRC PILO CRCs are concentrating on people on the Wait List and eligible children. Their current caseload is not at full capacity.

Budget – There are some three (3) CRC positions in the Governor's budget for the Lifespan Waiver.

- **One-Person Homes** – Betsy described the new Policy on one-person homes. There appear to be 228 of these homes. This policy decision will help to decrease the deficit in the HCBS Medicaid program. People who do not have ADA accommodation will need to move or find a housemate. Betsy reviewed the process for reviewing an accommodation request which is an independent assessment. There was Board concern that this policy is in conflict with the Person-Centered Plan process and represents PCP PLANNING vs DOLLAR-BASED PLANNING. It violates the principles of the PCP process. It is difficult for a person when they lose their home and coercive.

A Board Member wondered how much pressure that may be put on decision-makers to say 'no' because of the need to save money. Can the PCP process be given deference even if the accommodation request is refused.

Another Board Member asked if a decision can be grieved. A representative of DRM said that they have not seen a denial for behavioral reasons. **This person will speak to the Board Member asking the question.**

- A Board Member said that lack of person-centered thinking may ultimately cost more money than it will save. It may put people in a vulnerable position and some people will end up in crisis. Consistency is important.

A Board member asked if 2-person homes were allowed. Response: YES.

- **Residential Licensing** – Betsy said that OADS is close to releasing a DRAFT of proposed regulations. There has been a lot of work that has gone into the development of these regulations with a great concentration on safety. All licensing will be done at the agency level.

There was a question about 'dual licensing.' Betsy said this is a mistaken understanding.

A Board member asked what the timetable is for all agencies to be licensed. Response: Betsy will find out.

- **Special Presentation from Chris Baglia and Erin – Alvarez and Marsal**– state consultant. Erin accompanied her remarks with a PowerPoint.

They are specifically looking at Sections 21 and 29. They are looking at the Licensing Rule, Incident Management, and the Access Rule. The desired outcome is to make people safer. They described Town Halls and Listening Sessions that they have held/will hold. A recent Town Hall had over 100 people in attendance. They will meet with family focus groups.

A Board Member asked how these consultants will reach out to people who live on their own. Chris said that they are trying to figure out how to make it easier to report abuse, neglect, and exploitation.

Alvarez and Marsal have 50 employees working in its Public Sector Practice. Most have frontline experience.

Their planned timetable is December/January – Introductions with DHHS staff; January/February – Interviewing other states who may have exemplary practices; March/April – Development of Final Report. Betsy said that the report will be shared with the MDSOAB.

They have met with several stakeholder groups and continue to look for more feedback.

Cullen thanked Chris and Erin for their presentation.

6. **Interim Executive Director's Report** – The I..E.D. briefly described her medical situation and described initial conversations with Cullen about an Executive Director Transition Plan. She also gave a quick federal update, remarking about the many unknowns, potential de-regulation, possible Medicaid block grants or other types of cuts, and other impact on services.

7. **Other Comments**

- A Board Member mentioned that there are many openings in group homes yet there are not people coming off waiting lists.
- Another Board Member spoke of the housing crisis for people who are homeless while providers are making difficult decisions to close licensed group homes and thus lose more housing stock otherwise available to people with disabilities.

- Another Board Member spoke of the lack of qualified Case Managers and the amount of time that it takes to train a Case Manager to a point where they can carry a full caseload.

There is a new state Case Management Manual,

- Another Board Member mentioned that there is still sometimes confusion between what a Case Manager thinks they have been told by someone in OADS; then acts on it; and then finds out it is not accurate.
 - A Board Member remarked that if what appear to be the 'most informed' people in the system are having so many problems, we are in trouble. The gaps in communication are often extreme.
 - State Mortality Review Panel – One Board Member is also a member of this Panel. She briefly described an upcoming Hearing on February 4, 2025, on L.D.51 – which expands the scope of the membership of the Panel and the constituents it will cover to cover all people under Public Guardianship. It is important to ascertain whether the Panel has the current capacity to take on more cases. **Richard volunteered to go to the Hearing. Jennifer will send out an email on this bill.**
8. Dental Subcommittee – Has not met. Richard will forward a Letter to the Editor of the Portland Telegram talking about the lack of dental services. Craig Patterson is on vacation. The subcommittee will urge him to try to obtain monthly wait list reports from Dr. Pavurulu.
 9. Regional Review Committees
 - The I.E.D. suggested that Review Committee Members think of tracking 'unmet needs,' approval of ADA accommodation and possible other data as they encounter it.
 - One Review Committee Member said that some providers are having trouble getting necessary data into Evergreen within the 15-day timeframe because it is not available and then it must be sent directly to the Review Committee Members.
 - A Board Member that the data comes in in a way that often requires conversion of data which is very time-consuming.
 10. Public Comments – None
 11. Governance – There has been no further feedback regarding outstanding applications. The I.E.D. will follow up.

Respectfully submitted: Bonnie-Jean Brooks, Interim Executive Director

