



## BPDD State Plan, 2012-2016

Every five years, the Wisconsin Board for People with Developmental Disabilities (BPDD) is required to submit a plan for systems change focused on improving the quality of life for people with developmental disabilities to the federal government.

The BPDD spent a year collecting public input. More than 300 people with disabilities, families, professionals and advocates provided input. Key issues raised were employment, long-term care (LTC) across the life span, transportation, school inclusion, youth transition to adulthood, technology, aging, poverty, and health.

BPDD members reviewed the input to determine the best investment of available resources. The BPDD has limited resources and needs to focus efforts in goal areas in which there can be demonstrated impact.

It is the policy of the United States, within the Developmental Disabilities Act, that all programs, projects, and activities receiving assistance under this title shall be carried out in a manner consistent with the principles that—

- (1) individuals with developmental disabilities, including those with the most severe developmental disabilities, are capable of self-determination, independence, productivity, and integration and inclusion in all facets of community life, but often require the provision of community services, individualized supports, and other forms of assistance;

The federal government expects Developmental Disability Boards (also known as DD Councils) to identify goals that can be achieved in five years utilizing the available resources. In addition, the federal government requires that BPDD activities focus on systems change, not direct service. The BPDD cannot be involved in legal action, such as lawsuits.

By law, the BPDD must choose goals that will:

- Result in systems change
- Be consumer- and family-centered and directed
- Be cost-effective
- Support a statewide advocacy organization led by people with developmental disabilities (DD)

To reach the goals, the BPDD uses a number of strategies, including training and consulting, building coalitions, educating policy makers and the general public, organizing grassroots advocacy and funding demonstration projects.

This document includes the goals and objectives the BPDD chose for the 2012-2016 State Plan.

**Public Comment:** A draft of this document was sent out for public comment; a Spanish version was also provided. Three public listening sessions were held; one in Milwaukee, Eau Claire and Madison locations. The BPDD reviewed all the public comments and made minor modifications

to the plan. The State Plan will be submitted to the federal government by August 1, 2011.

**Accessibility info:** If you would like the State Plan in another language or format, please email [bpdd@wisconsin.gov](mailto:bpdd@wisconsin.gov) or call (608) 266-7826.

**Vision: The BPDD believes that all people with disabilities should be fully included in the community.**

In addition, they have the same rights as anyone – the right to life, liberty and the pursuit of happiness, the right to be treated with respect and dignity, and the right to control one’s own life and destiny.

This State Plan will advance the opportunity for people with DD to lead fulfilling lives. With the support of families and their allies who believe in these values, they will pursue their own goals and be fully included in the community.

**Definition – Allies:** Allies are family members, guardians and friends who join together with the individual with the disability for a common purpose or goal.

**GOAL 1:** People of all ages make choices about their lives, and are actively engaged in planning their services and supports.

*Formal and Informal Supports*

*Budget: \$145,334*

**Rationale:** Individuals with DD and families with children with DD must be able to have control of their public funds to support their needs while providing the greatest amount of flexibility; including the use of paid and unpaid supports. Self-directed supports (SDS) offer the greatest flexibility to individuals and families in the long-term care system. SDS can also create cost efficiencies for their public dollars. Individuals and families engaged in developing a person/family centered, self-directed service plan are able choose services and supports outside the service system.

Youth transitioning from high school to the adult LTC system need to engage in well- informed decision making. Young adults who actively participate in transition planning in high school have improved post-school outcomes.

Person-centered principles help individuals develop plans that maximize resources, build community capacity and strengthen outcomes. Circles of Support have played an important role in helping to make individualized, person-centered plans with individuals with disabilities. This can be a powerful strategy to connect people to their community. However, our LTC system (Family Care and IRIS) does not currently invest in people connecting and activating a Circle of Support to assist them in community involvement. Likewise, despite the intent in Family Care and IRIS to do so, it is not commonplace for their members/ participants to engage in person-centered planning and involve people (other than the care manager, nurse, IC or closest family member) in meaningful and intentional ways. Technology and social networks play a vital role in allowing communities to work together to help individuals with disabilities and their families connect to community resources.

**Definitions:**

**Self-Directed Supports (SDS):** Refers to participants in LTC programs actively directing their supports and services.

**Natural/community supports:** Paid or unpaid supports used that are outside of the formal provider system (e.g., family member, neighbor, and co-worker).

**Transition:** In this context, refers to students with DD moving from high school into adulthood.

**Objective 1.1:** By September 30, 2016, there will be 1,000 more individuals with DD of all ages participating in SDS.

**Objective 1.2:** By September 30, 2016, there will be 450 more youth transitioning from high school to the LTC system participating in SDS.

**Objective 1.3:** By September 30, 2016, 500 people with DD will report a 50% increase in the use of natural/community supports.

**Year One activities:**

- [SPARKS Grants](#) for innovative formal and informal supports
- SDS Network Event
- Series of learning circles
- Request for proposals on developing circles of support and community connections for individuals and families using SDS

**GOAL 2:** People with DD will be employed in integrated jobs of their choosing in the community.

*Employment*

*Budget: \$133,334*

**Rationale:** Employment is an integral part of everyday life. It is a valued activity for individuals and society. All citizens should have the opportunity to earn income, to achieve greater stability and financial security. Employment helps people achieve independence, economic self-sufficiency and better health. Employment also gives people a sense of purpose, dignity and self-esteem. Currently in Wisconsin, only 6% of people with DD are employed in integrated jobs in the community. To address this critical issue, advocates in Wisconsin are advancing an Employment First Initiative.

**Definitions:**

**Integrated Jobs:** Integrated employment refers to working for a competitive wage in a community-based job (i.e., a job that is not based in a community rehabilitation facility) at 20 hour a week or more. The employment must be in a work setting where, to the greatest extent possible, the employment typically involves interaction with co-workers and business associates who do not have disabilities and/or the general public. Integrated employment includes employment located in community businesses, self-employment and ownership of micro-enterprises.

**Competitive Wage:** Means payment for work that is generally equivalent to the payment made to others performing similar work. Competitive work does not mean commensurate wage or special minimum wage (sub-minimum wage).

*\*\*Definition taken from the 2008 Wisconsin Managed Care and Employment Task Force Report.*

**Employment First:** Refers to the affirmation in state and federal public policies, legislative statutes, regulation and operational procedures that “employment in integrated settings at minimum wage or higher with commensurate benefits” is a priority objective and preferred outcome of publicly funded services provided to citizens with disabilities, regardless of level of disability. It is based upon a core set of principles and practices that promote integrated employment.

**Objective 2.1:** By September 30th, 2016, the number of people with developmental disabilities participating in Long-Term Care in integrated jobs in the community will double from 560 to 1120.

## Year One activities:

- Develop a Wisconsin Employment First Team as part of the National Alliance for Full Participation
- Develop a request for proposals and provide grants for pilots that demonstrate innovative employment practices that incorporate SDS, person-centered planning, and customized employment practices.
- Provide [SPARKS Grants](#) to support innovative methods of building community capacity for Integrated Employment.
- Host two statewide Integrated Employment Events
- Utilize online technology to develop a network that can provide a vehicle for ongoing sharing of information and technical assistance around innovative employment practices.
- Host 4-5 regional sessions with consumers, families and providers to provide training on Employment First principles and practices and support local groups to develop strategies for increasing the number of people with disabilities in integrated employment.
- Review and provide input into the technical assistance guide (TAG) as part of the Division of Vocational Rehabilitation, the Department of Health Services, and the Department of Public Instruction interagency agreement; provide input and assistance into the training/implementation plan – in particular for consumers and families.
- Collaborate with other organizations (Pathways, Employment Resources Incorporated) to develop a plan to increase educational opportunities around work incentives and financial literacy.
- Work collaboratively with key organizations to set up efficient systems to share key employment data.
- Conduct a [“Take Your Legislator to Work”](#) Campaign

**GOAL 3:** People with DD and their families will be effective advocates and leaders resulting in systems change on issues they feel are most important to them.

Quality Assurance (Self-Determination and Self-Advocacy) Budget: \$201,332

**Rationale:** Nothing about me without me. Individuals with disabilities and their family members must be at the table when programs, services or changes in the community are occurring that will have a direct effect on their lives. This includes, but is not limited to, changes in local government (school boards, county transportation committees, human services boards, ADRC boards, etc.), but also statewide and national government. In order for individuals to be involved with change they need to have the tools to make the change. They need to understand how the legislative process works at the county, state and federal levels. They also need a basic understanding of the principles of community organizing.

Individuals with intellectual disabilities need to learn the skills and have an organization that can help them speak up to create systems change. They need to feel like they belong to something that represents them.

Individuals with disabilities and their families need to have a system set up where they can receive timely information about what is happening with government in their local communities and at the state capitol. This system should also be set up to allow them to connect and tell their elected

officials what they think about specific issues and ensure that people have access to the information in formats they can readily access.

**Definitions:**

**Effective advocates:** These are individuals who engage in at least two different types of advocacy activity during a year. These may include, but are not limited to: voting, writing a letter to an elected official, attending an advocacy activity, planning an advocacy activity, speaking at a public event about their issue, and involving others in advocating for their issue.

**Effective Advocacy Group:** Advocacy groups are comprised of at least five individuals, the majority of whom have disabilities or are family members, who are working on a project that fits within the scope of the BPDD Budget Platform.

**Objective 3.1:** By September 30, 2016 there will be 30 effective advocacy groups engaging in advocacy and organizing activities of their choice, based upon the BPDD Budget Platform, that result in measurable systems change.

**Objective 3.2:** By September 30, 2016, a statewide self-advocacy organization that is led by an individual with an intellectual disability will identify at least one statewide systems advocacy change project of their choice based upon the BPDD Budget Platform.

**Objective 3.3:** By September 30, 2016, at least 3,000 individuals and organizations will be signed up for electronic alerts through the [DAWN system](#) and act on those alerts. (Baseline is 1,200)

**Year One activities:**

- [SPARKS](#) community organizing grants: These grants aim to facilitate positive change in local communities.
- SPARKS Retreat: Individuals who are awarded SPARKS Grants will attend the SPARKS Retreat to share their project ideas with others, get feedback, and plan their projects.
- [Partners in Policymaking](#): Participants in this project will receive training so they can work effectively with policymakers to create systems change and improve the lives of individuals with disabilities in Wisconsin.
- The voting project will work to increase the numbers of individuals who will become consistent voters. The project will also work to ensure that individuals with disabilities (A) can obtain the appropriate type of photo identification and (B) have access to accessible polling places.



For more information about the Wisconsin Board for People with Developmental Disabilities, call 608-266-7826 or visit [www.wi-bpdd.org](http://www.wi-bpdd.org).