

ANCOR Links

July/August 2016

Columns

CEO Perspective: Seize the Moment!

by *Barbara Merrill, Esq.*

I have a job for you – a job that at minimum will take you a few hours this month, and again in September, but optimally will prompt you to also join us in Washington September 19-20. We have a moment right now – and I need every ANCOR member to help us to seize it.



I have a job for you – a job that at minimum will take you a few hours this month, and again in September, but optimally will prompt you to also join us in Washington September 19-20. We have a moment right now – and I need every ANCOR member to help us to seize it.

Something profound has happened this election season that provides us with an unprecedented opportunity to make significant headway for ANCOR's SOS legislation – disability has taken center stage in America.

It began during the primaries when, for the first time ever, candidates from both major parties, Secretary Clinton, Senator Sanders and Governor Kasich, began to specifically mention people with disabilities in their stump speeches and in their important election night victory speeches, singling out the rights of individuals with disabilities in the same breath as other groups that have gotten far more attention as important voter constituencies: Hispanics, the LGBT community, African Americans, Muslims, women.

Capitalizing on Donald Trump's mocking of New York Times reporter Steve Kovalski, and the 26th anniversary of the ADA coinciding with the Democratic National Convention, Democrats solidified the national spotlight. As former Senator Tom Harkin told Time Magazine "never has the issue of disability rights and inclusion been this prominent in a national convention."

With over 400 delegates with disabilities in Philadelphia and a speaker lineup that included disability rights advocate [Anastasia Somoza](#), Dynah Haubert, a lawyer who works for a disability rights organization and Ryan Moore, a Nebraska man with a form of dwarfism, the Time article noted that "disability was anything but invisible."

At non-partisan 26th ADA anniversary events hosted by AAPD, AUCD and the Down Syndrome Society at both conventions, attendees were reminded that both Democrats and Republicans have championed disability – the ADA was signed into law by President George Herbert Walker Bush, and Former Senator Bob Dole's dedication to persuading Senate Republicans to pass the Convention on the Rights of Persons with Disabilities (CRPD) was the stuff of legend. Honoring the importance of disability transcending partisanship in his speech before the Democratic Convention, Tom Harkin taught the audience the sign language for "America". Let that sink in - before a sea of Democratic delegates, the Senate author of the ADA chose unity over partisanship.

As I shared in May at our conference in Chicago, this heightened visibility didn't happen by accident. Although Donald Trump's action unmistakably accelerated the Democratic response, we were getting closer by the day. It happened because of all of us, because providers never stopped advocating, because the voices of self-advocates, family members and countless other advocates are being heard. I'm proud to say, ANCOR has never stopped speaking up - we've been helping to lay this foundation for decades, and because the current political environment is NOW especially ripe - the disability community is no longer the overlooked community among other marginalized populations.

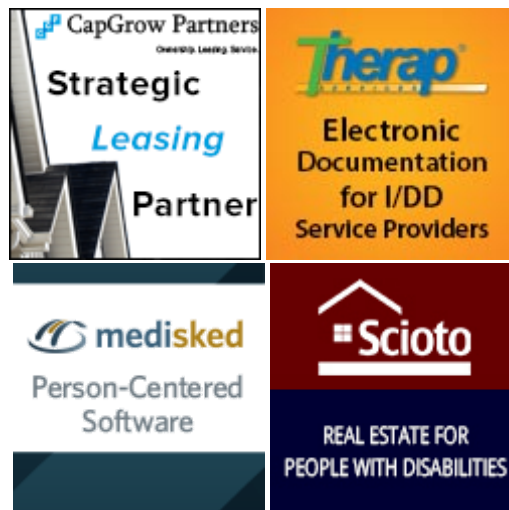
So this is what I need you to do now: help us build the bipartisan support crucial to pass ANCOR's Disability Community Act, HR 5902, sponsored by Rep. Paul Tonko (D-NY) and Rep. Steve Stivers (R-OH), and co-sponsored by the co-chairs of the House Bipartisan Disabilities Caucus, Rep. Jim Langevin (D-RI) and Rep. Gregg Harper (R-MS).

While we were obviously humbled that ANCOR's SOS Campaign resulted in IDD residential small setting providers being the only employer group in America to have received any sort of special accommodation by the Department of Labor with the non-enforcement policy, the policy does not offer full protection, and our counsel is for providers to plan to be in compliance by December 1. That's why we have now turned our attention full stop to Congress to pass our legislation to provide states with a three year Medicaid FMAP increase to help providers comply with the increased costs associated with the DOL Overtime (OT) Rule, the Home Care Rule, and the CMS HCBS Community Settings rule.

We can do this, but only if we are able to muster a huge grassroots effort. Let us seize the moment! Disability is in the limelight, ANCOR was the only group to achieve anything with the DOL OT Rule, and, despite the current Congress's abysmal record of gridlock, over the last two years two very significant pieces of legislation impacting disability, The ABLE Act and the Workforce Investment Opportunity Act, enjoyed strong bipartisan support and were enacted into law. Your members of Congress are back in your states and eager to demonstrate their attentiveness to constituent issues. Don't make it easy for them to ignore the enormity of our issue – pressure them during the August Recess (using our handy [August Recess SOS Campaign toolkit](#)), and double down by meeting with them in their DC offices during [ANCOR's Fall Leadership Summit September 19-20](#).

I repeat, we can do this, but only with your help. Moments when you have a chance to push the proverbial boulder over the mountain like these can be fleeting – but, as we all know, years of flat funding, rate cuts, and unfunded mandates endure. Let's get this done!

Author LINK: **Barbara Merrill** is CEO of ANCOR. She can be reached at bmerrill@ancor.org.



President's Corner: The Evolution of Disability Service

by Chris Sparks, Executive Director, Exceptional Persons, Inc.

"What keeps you awake at night?" ANCOR President Chris Sparks shares his responses to that challenging question and how he uses ANCOR to get closer to solutions.



"What keeps you awake at night," Marcus one of the CPA's completing our annual agency audit asked me recently. This was a part of the waste, fraud, theft, and misappropriation of funds discussion he is required to have with all leadership staff. He wondered if it was cash flow, or making payroll, or compliance – all good questions in Iowa as we are five months into a fully managed care system for all Medicaid funded services. I shared that it was not those things that worried me the most, but there are plenty of things to worry about.

I worry that we will not be able to keep the promises that we made to families about services for their loved one, in some cases thirty five years ago. I worry that the heart and soul of the organization will be lost in this transition as we become part of the medical system. I worry that we will become increasing incapable of staffing services with the number and type of people that we need and want. Those are but a few of the things that are cause for consternation.

As a field we are in the midst of massive and continuous change, each item challenging individually but truly overwhelming when taken as a whole. Some of the things we have and are facing include:

- Changing customer expectations,
- Pressure to reduce ICF's,
- HCBS waiver rates failing to keep pace with inflation,
- DSP vacancy rates and turnover that are truly abysmal and despite an investment of energy and resources we can't seem to move the needle on this critical issue,
- Compliance with the ACA and we don't have revenue to meet this expense,
- The HCBS settings rule,

- The companionship exemption,
- The DOL overtime threshold change,

The list continues to grow and something may be added tomorrow. It is important to note that not all of these are bad, in fact some of them are both welcome and exciting, but they still represent significant challenges that make our professional lives stressful. And if we aren't careful and disciplined we find ourselves caught up complaining and reacting.

And in many states in ways both large and small, managed care is becoming an operational reality, thrusting us into a different world. On April 1, 2016 Iowa launched a fully managed care system for all Medicaid funded services including all Long Term Services and Supports for people with disabilities. And we are now working with three managed care organizations and we find ourselves a part of the medical system.

Over the last several months, as we have transitioned to managed care, I have experienced moments of acute conflict. I sometimes struggle with the feeling that everything I have worked to build over the last thirty-three years is being torn down. I know some of you have felt that way too. In contrast there are other times I feel like this is a time of great opportunity and that organizations that are nimble and committed to high quality and great customer service will prosper.

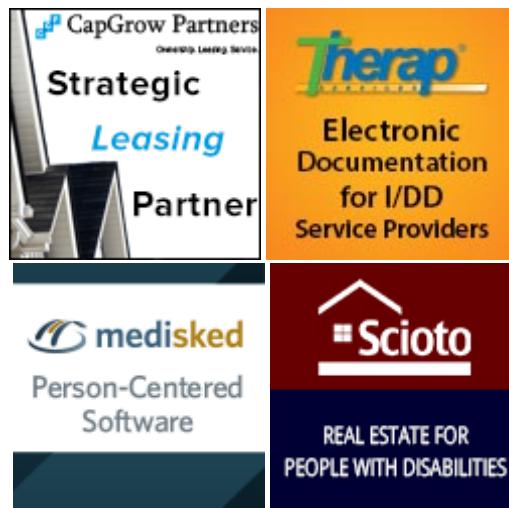
As I wrestled with those two seemingly incompatible extremes, I finally realized that both are true. What we have built is being swept away and services and supports are being re-imagined - as they have always been. And it is a time of great opportunity for organizations that are nimble and fantastically dedicated to high quality and great customer service.

As we face a changing service landscape we are fortunate to have ANCOR as a vibrant, relevant, and successful national association. The ANCOR staff, assembled by CEO Barbara Merrill, are talented and passionate. The SOS campaign continues to be effective, and our ongoing public policy efforts are broad and respond to our most critical needs. The ANCOR brand is better recognized and more respected than ever before. ANCOR membership continues to grow as people realize they need the information provided but that they also desire the connection offered by like-minded others.

ANCOR is many things but one of the most important to me is that we are a community of practice. My favorite part of the concept is the "community" part. Partly because it ties back to our mission of community inclusion for those we serve, partly because it responds to my personal needs. Our work has become challenging, and our landscape is changing quickly and dramatically. We need "trusted others" for conversation, ideas, and for support. In the ANCOR community there is always an answer to the question "who do I call about (EHR including goals tracking, staff time tracking, smart home technology, staff screening tools, etc.)?"

For me it's usually Larry Weishaar, or Dave Toeniskoetter, or Than Johnson, or Mark Davis, or scores of others. I have been fortunate enough to find that support among colleagues at ANCOR and it is a double bonus that they are some of the brightest most interesting people in the field. If you are sitting there and thinking, "Man, I need that," I invite you in.

Our Association has never been stronger, and this comes at a time when circumstances require us to be at our strongest. As unprecedented and complex variables in our culture make our work more challenging we must respond from a customer focused value set and with innovate options that make community membership a reality for people with disabilities.



State Association Corner: State Share - Findings of the 2016 Data

by Diane McComb, Liaison to State Association Executives

State Association Execs and members of the Board of Representatives recently provided detailed information regarding the status of their individual states in a survey conducted by ANCOR. Trends reported include rate setting struggles, rate cuts, concern over DSPs being left behind in states enacting new minimum wage standards, and implementing the HCBS rule.



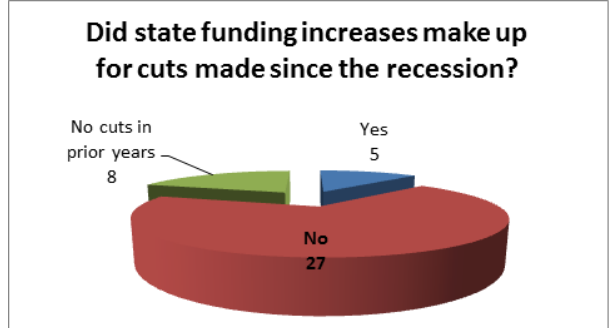
State Association Execs and members of the Board of Representatives recently provided detailed information regarding the status of their individual states in a survey conducted by ANCOR. Additionally, ANCOR's virtual State Share call provided personal accountings of what is happening in 40 of the states. Trends reported include rate setting struggles, rate cuts, concern over DSPs being left behind in states enacting new minimum wage standards, and implementing the HCBS rule.

State Budget Status

By July 1st most states had passed a budget which was signed by their governor. As of July 12th, 49 states have enacted full year budgets for fiscal 2017 while Illinois has enacted a six-month budget.

Thirty-two states enacted their fiscal 2017 budget during the 2016 legislative session, while 17 states enacted budgets last year covering both fiscal 2016 and fiscal 2017. Fiscal 2017 began on July 1 for 46 states (New York began its fiscal year on April 1, Texas begins on September 1, and Alabama and Michigan begin on October 1 - NASBO).

When ANCOR members were asked whether or not states have a surplus or deficit, 20 reported their state has a surplus (CA CO FL GA IA IN MA MD ME MN NC NH NJ NY OH SC TN UT VA) and 16 report a deficit (AK AL AZ CT DC IL KS KY LA NE NM OK PA WA WY). Nine responded their state had enough to make ends meet (AR DC DE MI MO MS ND OR SD). This is a slight improvement over last year when 20 states reported a deficit in the state budget. While the economy is improving, states are still struggling to make ends meet. Indeed, many states reporting rate increases are still receiving rates that are lower than prior to the recession.



Twenty-three said they would be receiving increases in rates (AZ CA DC FL IA IN LA MA MD MO MS ND NE NJ NV NY OH RI SC SD TN UT WA), yet six reported rates being cut (AK CO CT KS NM OK) and seven reported no increase (DE KS KY MI MN PA WI). Eleven states (AL AR GA IL ME NC NH OR TX VA WY) report increases and decreases in different programs.

Of the states reporting receiving new funding for disability programs, 10 will be able to increase wages paid to DSPs (CA DC MD MO OH SC TN UT WA); 5 received cost of living increases (CA MD MO NY SD); 7 states allocated new money for emergency placements (MO MD OH SC NJ NC TX); 7 for employment first initiatives; 4 for family supports (MA OH SC VA); 3 provided a bump to help with the federal DOL overtime rule (CA FL NJ); 3 for housing initiatives (NJ SC NY); 6 for institutional closures (CA MS NY OH SC VA); 4 for increases to minimum wage (CA MA MD NY); 7 for transitioning youth services (MD NJ FL RI MO TN SD); and 14 states added funding to serve people on waitlists.

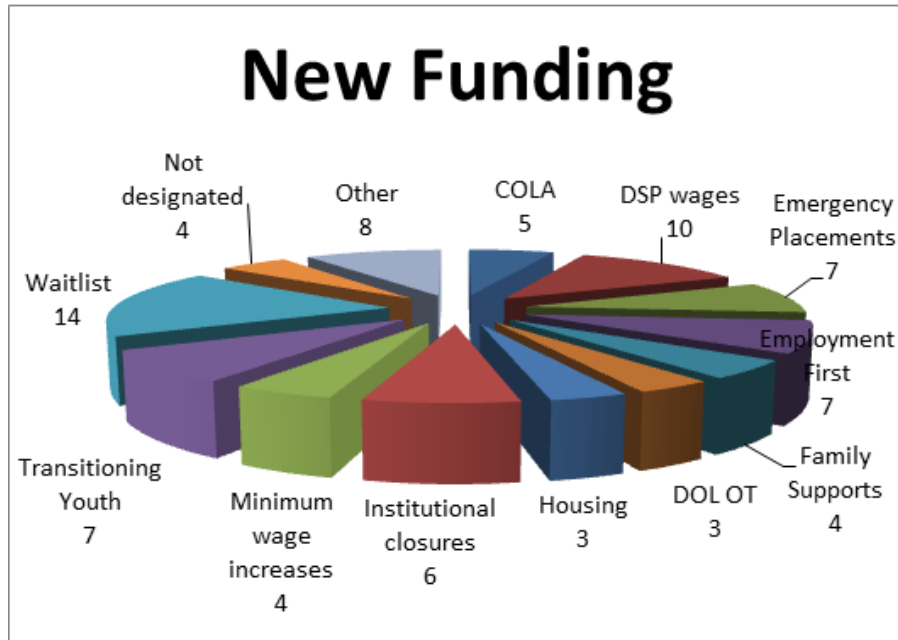


Figure 1 Number of States and New Funding

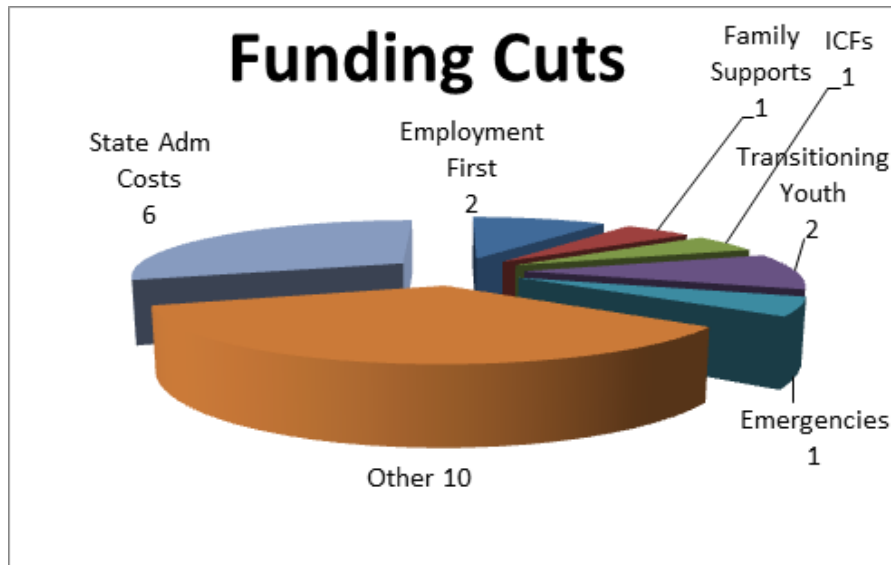


Figure 2 Number of States and Funding Cuts

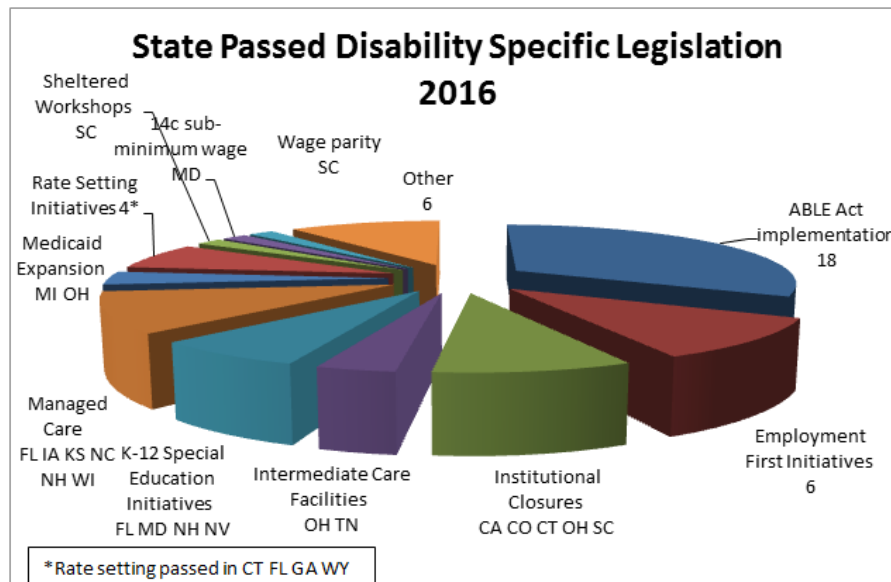
Some states also cut rates. Specifics include cuts to employment first services (MA LA); a cut to family supports (LA); cuts in transitioning youth (CT LA); 6 states saw their DD agency cut administrative costs (AK CT LA ND NY WI); and 10 states made non-specific cuts across the board (AZ CO DC IL KS LA NH NM OK OR).

The oil dependent states suffered lost revenue as oil prices plummeted. Seven states increased taxes (CA DC IL LA OK PA SD). Twelve states cut taxes (AZ FL IA KS MN MO NC NE NY RI SD TN). Most amazingly, 25 states report at least some community agencies closed due to lack of funding or workforce issues (AL CA CT DC FL GA IA KS KY LA MN MO NC NM OH OK OR PA RI TN TX VA WA WI WY). This has never been reported in prior years.

Twenty-two states pursued an increase in the state minimum wage ranging from \$8.50 to \$15.00 an hour (AZ CA CT DC DE FL IL LA MA MD ME MI MO NC NE NJ NV NY OR PA RI WA) and eight passed legislation (CA CT DC FL MA MI NY OR). Four states (DC DE MA NY) also pursued a tie with increase minimum wages to DSP wages going up as well. Ten states will have ballot measures in November to vote on increasing the minimum wage (AL CA CO ME MN MO OH OR SC WA).

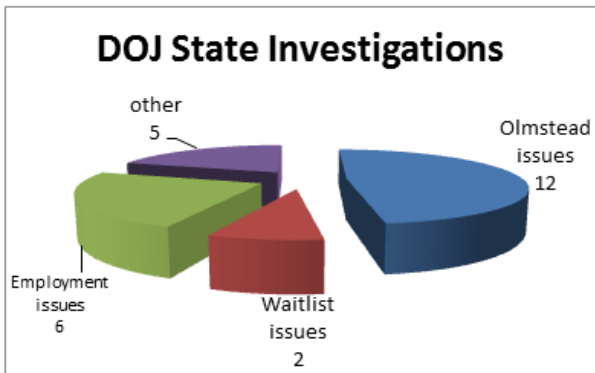
Legislative Proposals

ABLE Act legislation has been passed by all states and the District of Columbia except for ID ME MS WY. Maine passed a bill to study it. Employment First is an emphasis in 46 states with only 5 with no policy whatsoever (HI NE NH SC WV). Six states heard legislation to close institutions (AZ CA CO CT FL OH); ICFs (MN OH TN); and K-12 special education initiatives (FL IL LA MD NH NV). Ten states heard proposals about shifting to or changing managed care (FL IA KS LA MA MN NC NH NV WI). Rate setting initiatives were proposed in ten states (CT FL GA ME MN NC NM NV WY) and wage parity in 3 (LA NY SC). Ohio and California heard legislation about keeping sheltered workshops open and Illinois and Maryland both heard bills regarding 14c and paying sub-minimum wage. Maryland passed legislation prohibiting paying sub-minimum wage making it the second state in the country behind New Hampshire to do so. There was also budget language to delay the state's attempt to integrate all 1915 waivers into a block grant (KS); aging caregivers (TN); asset limit increases (MO); DSP credentialing (NY); Medicaid Buy-In (CO); seclusion and restraint, ombudsman, targeted wage increases (RI); OIG related issues, children's group home streamlining, medication pass in DT (IL); and in Connecticut a changed disability parking sign, increased waiting list communication to families, the transfer of residential funding (\$537m) from DDS to the state Medicaid agency (DSS), and two publicly-run regional centers will close.



Medicaid Expansion

Medicaid expansion has been implemented in 26 states including the District of Columbia (VT MA RI CT NJ MD DE DC NY PA WV OH KY LA IL MN ND CO NM AZ NV CA OR WA). An additional six are expanding, but in non-traditional ways (MT IA NH MI IN AR). Nineteen states have not expanded Medicaid, despite bills in a number of those states to do just that, but failed in the legislature (ID WY NE KS OK ME VA NC GA AL). All of the states who have not yet expanded have either republican governors or republican legislative majorities squashing expansion efforts).



DOJ Presence

Eleven states reported DOJ activity in the areas of Olmstead enforcement (DC DE FL GA MN MS ND OR RI SD VA), 2 for waitlist issues (MS VA), 6 for segregated employment issues (AK NC OR RI SC VA), and 6 for other issues such as police crisis intervention, shared living, long-standing deinstitutionalization issues and fair housing (DC MO NM OR TX VA). Eighteen states have legal action pending regarding a number of issues including (AK AZ CA CT DC DE FL GA IL MO NM OH OK OR PA TN TX VA). Missouri has litigation related to the waitlist; Florida has litigation related to changes in program eligibility. Georgia has litigation related to rate setting methodology. Oregon and Ohio have litigation related to keeping sheltered workshops open. Institutional closure is an issue (CT DE VA); Tennessee has an action against the state

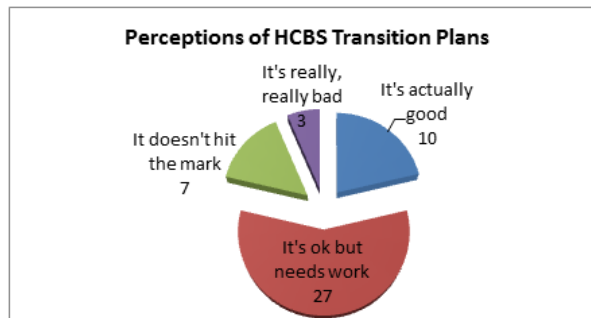
regarding potentially invalid rules/regulations relative to sanctions and recoupments.

Systems Reform

A number of states are engaged in discussions regarding reforms affecting LTSS including such topics as managed long term services and supports (AR CA FL IA KS LA NE NH NV NY OK PA RI TN TX VA WI); the use of Accountable Care Organizations – ACOs (AK AL AR IA MA NC NY WI); Health Homes (AL AR CA IA IL); implementing a 1915 (i) or (k) state plan amendments (AK AR CA CT FL IA KS ME MS NM NY OR VA); waiting lists (AR CO CT FL LA MS NJ NM NY PA SC TN VA); consolidation of two or more departments of State Government (e.g. Disabilities/Aging, Behavioral Health/Disabilities, etc. AK AR IL NC NY OK TX); and conflict free case management (CO SD). Additionally, states are looking at person centered planning, Money Follows the Person, consolidating waivers, and more.

HCBS Transition Plans

Interestingly, 27 states think their HCBS Transition plan is ok, but needs work and ten think theirs are really good. The responses are a bit of an improvement over the same questions last year. Some states will allow residential settings not readily conforming to the HCBS rule (AR CT GA KY MA MI MN MO ND OK PA SC SD TN WA WI); and, 14 eliminate sheltered work or other segregated day habilitation settings (AL AR CT DC IA MA NC NH NM OH OR TN WA WY). To review all states' plans go to www.hcbsadvocacy.org.



Summary

The climate in which community programs supporting people with disabilities is tumultuous. Never before have we seen such extensive activity at the federal level with regard to new rules impacting every aspect of funding and service provision. While we see many states operating in disarray and struggling, we also see bold reform and efforts to improve the way in which we do the work at hand. ANCOR provides members with up to date information, analyses, and networking opportunities to assist in navigating all the changes.

*** Data was extrapolated from member surveys and may not reflect everything occurring within a particular state.*

Author LINK: Diane McComb is ANCOR's Liaison to State Associations and can be reached at dmccomb@ancor.org.



Notes from the Foundation

by Chris Stevenson, President, ANCOR Foundation

Who are the Foundation's 2016 Legacy Leaders? Learn more about the 2016 class of inductees into the Legacy Leader Circle.

The ANCOR Foundation was pleased to announce the 2016 class of inductees into its Legacy Leaders Circle at a ceremony during the 2016 Annual Conference in Chicago, IL this May. The ANCOR Foundation Legacy Leaders Circle recognizes the accomplishments of long-standing ANCOR members who made significant contributions to shape ANCOR as the leading national trade association for provider agencies.

The 2016 class of Legacy Leaders have a combined 150+ years of experience in the field. These inductees have advocated for the community around intellectual and developmental disabilities through positions ranging from Presidential appointee to the Department of Labor Task Force; to university professor; to volunteer. They've also had sustained and profound impacts in states such as (but not limited to) New York, Arkansas, Connecticut, Oregon, Pennsylvania, Ohio, Maryland, Minnesota, and Illinois.

The ANCOR Foundation Legacy Leaders Circle celebrates the accomplishments of the men and women who have paved the way to life in the community for people with disabilities. These visionary leaders have made meaningful community participation a reality for thousands of individuals with intellectual and developmental disabilities over the years:

Regis Champ, President and CEO, NHS Allegheny Valley School (retired)

Maureen Corcoran, President, Vory's Health Care Advisors

Tim Kral, Executive Director, Oregon Rehabilitation Association (retired)

Marty Lampner, President and CEO, Chimes International LTD

Dan Rosen, Founder, D. Rosen Associates

Karin Stockwell, Senior Director, Dungarvin Minnesota, LLC

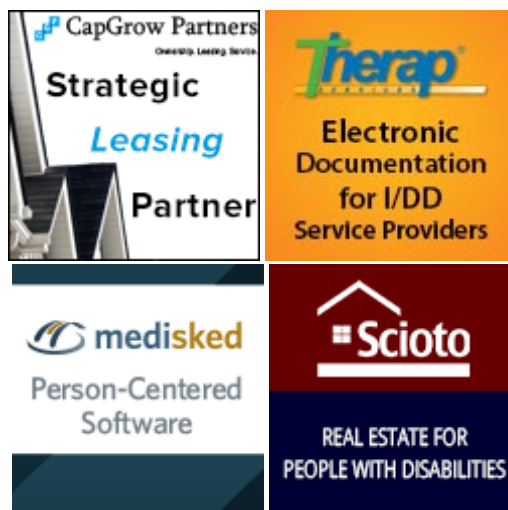
Janet Stover, President and CEO, IARF

Short bios of the 2016 class of Legacy Leaders can be found [here](#).

"The Legacy Leaders Circle honors those dedicated, visionary leaders who have shaped the landscape of disability services and made independence and community living a reality for countless Americans with disabilities," said Chris Stevenson, President of the ANCOR Foundation. "We're pleased to recognize these exceptional leaders. The ANCOR Foundation will continue to recognize excellence in leadership, while we also train the future leaders in our industry."

About the ANCOR Foundation

The ANCOR Foundation is a 501(c)(3) organization whose mission is to develop leaders through dynamic education and innovative practice to strengthen inclusive communities for people with disabilities. www.ancorfoundation.org.



Across the Board

by Barbara Merrill, CEO, ANCOR

Welcome to Across the Board, the inaugural quarterly column written to keep ANCOR members abreast of the work of the ANCOR Board of Directors.



Welcome to Across the Board, the inaugural quarterly column written to keep ANCOR members abreast of the work of the ANCOR Board of Directors. Its debut feels especially timely, coming on the eve of the Board of Director's Candidates call Wednesday 8/17 @ 2:00 pm EDT ([register here](#)), and the actual board elections which are open Aug. 26 – Sept. 9, 2016.

As longer term ANCOR members know, in 2013 the ANCOR membership voted to make important changes to our bylaws. These changes were recommended by the Board of Directors, with thoughtful input from the ANCOR Board of Representatives, and were part of a multi-year process by the directors to become a higher performing board. The most significant bylaw changes included a reduction in the size of the board, change in how the majority of the board members are elected, and adoption of term limits.

Those were the obvious external changes but the most significant change was functional – how the board chooses to operate. Inspired by the work of Richard Chait and other nonprofit association thought leaders, the board has consciously added [generative governance](#) to their traditional fiduciary and strategic duties.

Delegating the monthly fiduciary supervision of the association to the Executive Committee, the board now meets face to face four times a year, reserving significant blocks of time at these meetings to receive and discuss information about industry and membership trends necessary to make the critical decisions to position ANCOR most effectively in both the short and long term. While this article is not intended to be a full blown explanation of the governance changes and board practices, I commend anyone wishing to learn more to contact any of [ANCOR's current board members](#) – they'd be delighted to share their personal perspective.

They've certainly had their hands full – in just two years the board has conducted a national search to replace 16 year CEO Renee Pietrangelo, supported my transition from VP of Government Relations to CEO, updated ANCOR's mission and 3-year strategic goals, evaluated the mission and work of the ANCOR Foundation, and approved the launch of the SOS Campaign. But amidst the flurry of change, the board realized the need to ensure greater transparency in their actions, and committed to greater solicitation of member feedback.

As one of the recommendations adopted by the board to address this important concern, this article will become a regular feature to inform membership of recent major board developments.

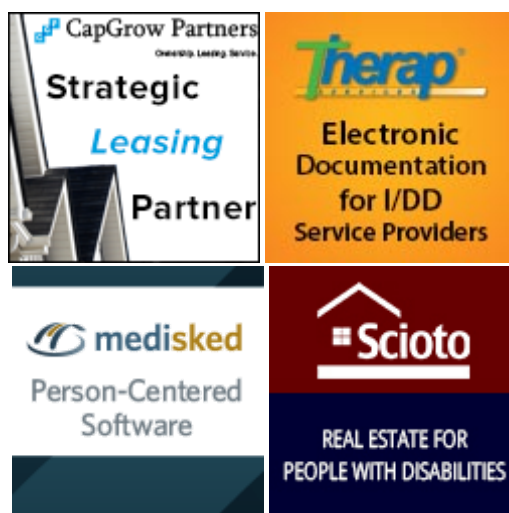
Other recommendations adopted included posting [board meeting minutes to the ANCOR Forum Library](#) and for ANCOR to continue to offer, as appropriate, membership feedback/engagement opportunities such the 1/16 Strategic Goals Virtual Town Hall.

The board also reaffirmed the long established practice of open meetings held in conjunction with Annual Conference and Fall Leadership Summit, and voted to leverage the other two meetings held in different parts of the country to solicit local member feedback. In addition to the practice of publishing the date, time and place of meetings on conference and summit website and printed conference programs, the ANCOR Friday Weekly Update now lists the date and time for the February and July Board meetings.

We are very excited about our "field" member engagement – the July meeting in Minneapolis was our first experience. Notifying every Minnesota member by emailed invitation, eight ANCOR members took us up on the opportunity to share their most pressing concerns with the board. The results? Hardly surprising – to a person, the most significant issue they are facing is the workforce crisis.

We learned from our MN members what ANCOR resources were most helpful to them as they struggle to recruit and retain the men and women so critical to our work and to our mission. We received praise for tools like [The Cost of Compassion video](#)

and our still-in-progress DSP Toolkit, but we also heard loud and clear that there is much much more work to be done. We're on it. And I'm looking forward to sharing next steps and our progress in future columns.



Public Policy: Reports from the Policy Front

by Katherine Berland, Esq.

Highlights from ANCOR's Washington Insiders Club (WICS), a weekly round-up of top stories and headlines of the week distributed to ANCOR Members only.

ANCOR distributes WICS, a round-up of top stories and headlines of the week, to ANCOR Members to keep them up to date on significant policy and political developments of note to the disability community. The following entries highlight the most significant reports of the last several months.

[HHS Diverts Funding to Fight Zika](#)

(August 15) On August 11, the Obama administration announced that it would shift \$81 million away from research, antipoverty, and health care programs to pay for the development of a Zika vaccine. Health and Human Services (HHS) Secretary Sylvia Matthews Burwell said in a [letter](#) to Congress that absent the diverted funds, the departments working on measures to combat the virus would run out of funding by the end of the month.

The Zika virus poses significant threats to infants and unborn babies of infected mothers. As of the date of the announcement, 7,350 cases of Zika had been reported in the United States, including 15 infants born with Zika-related birth defects.

ANCOR has joined with other national organizations calling on Congress to ensure that adequate funding is secured quickly to respond to the Zika virus. (See WICs article, "[ANCOR Joins Effort to Fight Zika Virus](#)," August 8, 2016.)

In February, President Obama called on Congress to approve \$1.9 billion in emergency funding to combat the virus. That request has remained in limbo as lawmakers have asked for detailed accounting of how the funds will be spent and have placed restrictions on proposed compromises. In April, the Administration shifted \$589 million from Ebola funding to the Zika effort. Secretary Burwell said that that money has nearly all been spent, necessitating the new action to shift additional funds.

[PACE Proposed Rule Released](#)

(August 15) On August 16, the Centers for Medicare and Medicaid Services (CMS) will publish proposed rule [RIN 0938-AR60](#), which will revise and update the requirements for the Programs of All-Inclusive Care for the Elderly (PACE) under the Medicare and Medicaid programs. According to the summary in the proposed rule, it will address application and waiver procedures, sanctions, enforcement actions and termination, administrative requirements, PACE services, participant rights, quality assessment and performance improvement, participant enrollment and disenrollment, payment, federal and state monitoring, data collection, record maintenance, and reporting. The proposed changes will provide greater operational flexibility, remove redundancies and outdated information, and codify existing practice.

In recent years, there have been efforts to expand PACE services to non-elderly people with disabilities. A bill permitting demonstrations expanding PACE was signed into law last fall. (See WICs article, "[PACE Demonstration Legislation Signed Into Law](#)," November 23, 2015.) ANCOR has contributed significantly to developing recommendations and considerations to be taken into account when attempting to use a PACE-like model to serve this population.

The proposed rule just released appears to impact the current PACE program and does not further expand the program beyond the demonstration authorized. ANCOR is in the process of reviewing the proposed rule and will comment as appropriate. Comments are due on the proposed rule by October 17, 2016.

[CMS Issues Guidance on Strengthening and Stabilizing Medicaid Home Care Workforce](#)

(August 8) On August 3, the Centers for Medicare and Medicaid Services (CMS) issued an [informational bulletin](#) that highlights steps available to states, providers, and others to strengthen the home care workforce, defined in the document as encompassing individuals furnishing home and community based services (HCBS). The document is split into subsections, with recommendations under each. The subsections are:

- Workforce Identity
- Provider Qualifications and Basic Training
- Wage Analyses
- Related Prior Guidance
- OSHA's maximum penalties, which have not been raised since 1990, will increase by 78 percent. The top penalty for serious violations will rise from \$7,000 to \$12,471. The maximum penalty for willful or repeated violations will increase from \$70,000 to \$124,709.
- WHD's penalty for willful violations of the minimum wage and overtime provisions of the Fair Labor Standards Act will increase from \$1,100 to \$1,894.

Notably, in the "Wage Analyses" section, the guidance says, "When developing payment rates for home care services, states should also consider business costs incurred by a provider – whether a home care agency or an individually employed worker – associated with the recruitment, skills training, and retention of qualified workers." This is an important acknowledgement that states should ensure that rates will be sufficient to provide adequate compensation for workers. There is also a direct reference to the Department of Labor's Home Care rule, with the guidance noting that states should take into account geographic differences in wages within a state and keep in mind any joint-employer obligations the state may have.

[WIOA Advisory Committee Holds Final Meeting. Releases Draft Final Report](#)

(July 29) On July 20 and 21, the Advisory Committee on Increasing Competitive Integrated Employment for Individuals with Disabilities (the Committee) held its ninth and final [meeting](#). The Committee was formed by the Workforce Innovation and Opportunity Act (WIOA), tasked with developing a report of recommendations to the Administration on ways to increase competitive, integrated employment for people with disabilities. The Committee held its first meeting in early 2015, and has met regularly since then. An interim report was issued last year. (See WICs article, "[Updates from WIOA Advisory Committee Meeting October 14-15. Interim Report](#)," October 20, 2015.) The Committee released its draft final report, which will be formally submitted in September. The final report is available [here](#).

The Committee's recommendations largely focus on expanding HCBS services, building a stronger transition system for youth, outreach and collaboration with the business community, and reforming the use of 14(c) certificates. The Committee recommends that Congress should amend Section 14(c) of the FLSA to "allow for a well-designed, multi-year phase-out of the Section 14(c) Program." Any phase-out of the program, the Committee urges, should be accompanied by strong oversight and transition services to avoid unintended negative consequences for individuals impacted.

[House Introduces Transition to Independence Bill](#)

(July 22) On July 14, the House of Representatives introduced the Transition to Independence Act ([H.R. 5903](#)), a bill that would provide states an enhanced match for meeting certain outcomes regarding competitive, integrated employment for people with disabilities. (See WICs article "[ANCOR Applauds Introduction of Transition to Independence Bill](#)," June 19, 2015).

The House version of the bill differs from the Senate version which was introduced last year ([S. 1604](#)). The House version reflects ongoing conversations between Congressional offices and national disability organizations, and the revisions are generally seen as positive. ANCOR has been a strong supporter of the Transition to Independence Act and worked extensively with Sen. Chuck Grassley's (R-IA) office prior to its introduction in the Senate. We will continue to monitor the bill's progress and work with the sponsors as appropriate.

[ANCOR-Led Disability Community Act Introduced in the House in Response to DOL Overtime Rule](#)

(July 15) On July 14, Representatives Paul Tonko (D-NY) and Steve Stivers (R-OH) introduced the Disability Community Act of 2016 ([H.R. 5902](#)), with original co-sponsors James Langevin (D-RI) and Gregg Harper (R-MS). The legislation will permit a 90/10 enhanced FMAP for three years for increased expenses stemming from the Department of Labor (DOL) Overtime and Home Care final rules, and the CMS HCBS rule. This additional funding is critical to permit states the time required to adjust rates to meet the requirements of the rules going forward. The bill also seeks to replace outdated language that is still enmeshed in statute.

ANCOR drafted the legislation and has been lobbying on it as a key part of its Save our Services (S.O.S.) campaign work. The language as introduced reflects significant collaborative and cooperation between congressional offices, ANCOR staff, and legislative counsel. We will bring members more information on the bill in coming weeks, and will highlight it as the central piece of our advocacy for the Hill day held in conjunction with the ANCOR Leadership Summit; Keeping Up the Good Work in September. While we expect the major legislative push from the bill's co-sponsors will occur after the August recess, we need your help to rally support before then! Stay tuned for our grassroots advocacy toolkit which will include tips and resources for actions you can take to support our efforts, including by inviting your representatives to visit your agency over the summer.

If you haven't already done so, bookmark www.disabilitySOS.org now so you always have the latest resources and information at your fingertips!

[Lawmakers Urge HHS to Include HCBS in Medicaid Access Rule](#)

(July 11) In a letter dated July 5, Senate Finance Ranking Member Ron Wyden (D-OR) and House Energy and Commerce Committee Ranking Member Frank Pallone, Jr. (D-NJ) urged the Department of Health and Human Services (HHS) to include hospital and Home and Community Based Services (HCBS) in the review process set forth by the recently-finalized Medicaid Access rule. (See WICs article, "[ANCOR Analysis of Medicaid Access Rule Available](#)," November 16, 2015.) The lawmakers thanked HHS for finalizing the rule, but believes that the scope should be expanded to include these services. ANCOR submitted comments to the RFI that was issued along with the final rule, recommending that HCBS waiver services be included.

The letter is available at the link below.

[Wyden-Pallone Letter to Burwell Access Rule 070616](#)

[WIOA Final Rules Released](#)

(July 1) On June 30, the U.S. Departments of Labor (DOL) and Education (DOE) [announced](#) the advanced posting of the following final rules relating to the Workforce Innovation and Opportunity Act (WIOA):

- [Workforce Innovation and Opportunity Act; Joint Rule for Unified and Combined State Plans, Performance Accountability, and the One-Stop System Joint Provisions; Final Rule](#)

- This Joint WIOA Final Rule provides guidance for State and local workforce development systems that increase the skill and credential attainment, employment, retention, and earnings of participants, especially those with significant barriers to employment, thereby improving the quality of the workforce, reducing dependency on public benefits, increasing economic opportunity, and enhancing the productivity and competitiveness of the nation. This Joint WIOA Final Rule reflects changes made as a result of public comments received to the joint Notice of Proposed Rulemaking that was published on April 16, 2015 at 80 FR 20574.

- [State Vocational Rehabilitation Services Program; State Supported Employment Services Program; Limitations on Use of Subminimum Wage; Final Rule](#)

- This final rule seeks to align and streamline regulations governing entities responsible for administering separate workforce and employment, educational, and other human resource programs to collaborate in the creation of a seamless customer-focused service delivery network that integrates service delivery across programs, enhances access to the programs' services, and improves long-term employment outcomes for individuals receiving assistance.

- [Workforce Innovation and Opportunity Act, Miscellaneous Program Changes, Final Rule](#)

- This final rule makes technical corrections and revisions required by the Workforce Innovation and Opportunity Act across various programs. It removes regulations that are superseded or obsolete and consolidates regulations where appropriate.

- [Programs and Activities Authorized by the Adult Education and Family Literacy Act \(Title II of the Workforce Innovation and Opportunity Act\); Final Rule](#)

- These final regulations implement changes to the Adult Education and Family Literacy Act (AEFLA) resulting from the enactment of the Workforce Innovation and Opportunity Act of 2014 (WIOA or the Act). These final regulations clarify new provisions in AEFLA. The Secretary also updates the regulations that establish procedures for determining the suitability of tests used for measuring State performance on accountability measures that assess the effectiveness of AEFLA programs and activities. The Secretary also removes specific parts of title 34 of the Code of Federal Regulations (CFR) that are no longer in effect.

- [Workforce Innovation and Opportunity Act; Department of Labor - Only Final Rule](#)

- This rule makes substantial changes to existing regulations in keeping with the WIOA. It provides the framework for changes for statewide and local workforce development systems to increase the employment, retention, earnings, and occupational skill attainment of U.S. workers, particularly those individuals with barriers to employment, so they can move into good jobs and careers and provide businesses with the skilled workforce needed to make the United States more competitive in the 21st Century global economy.

These five final rules contain over 4,000 pages of text, which ANCOR staff is currently reading through to flag any significant changes that members should be aware of. We note that the rules when proposed did not make major changes to regulations except as required by law. We will look for significant changes from the proposed rules or areas that require additional guidance to inform implementation of the rules.

[DOL Releases New Rules on Increased Civil Penalty Amounts](#)

(July 1) On June 30, the Department of Labor (DOL) [announced](#) two interim final rules that adjust civil penalties for various violations as required by the [Federal Civil Penalties Inflation Adjustment Act Improvements Act](#) of 2015. The Act requires agencies to 1) adjust the level of civil monetary penalties with an initial "catch-up" adjustment through an interim final rulemaking (IPR); and (2) make subsequent annual adjustments for inflation. Agencies were required to publish interim final rules by July 1, 2016, and have the new penalty levels take effect no later than August 1, 2016.

The DOL penalties that are relevant to providers are within the Occupational Safety and Health Administration (OSHA) and the Wage and Hour Division (WHD). Specifically, the interim final rule means that:

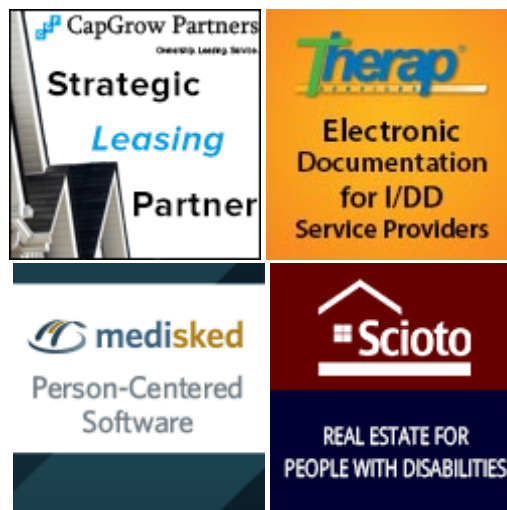
The DOL's fact sheet on the rules is available [here](#).

[Supreme Court Declines to Hear Challenge to Home Care Rule](#)

(June 27) On June 27, the United States Supreme Court declined to hear an appeal in the case of [Home Care Association of America v. Weil](#) (No. 15-683). (For background on the history of the case and appeal, see WICs article, "[DOL Home Care Rule Enforcement to Start on November 13](#)," September 4, 2015.) The decision not to hear the appeal means that the lower court ruling that reinstated the Home Care rule will stand.

The Department of Labor released a [statement](#) on the Court's decision, saying "Today's decision by the court not to review a challenge to the Final Rule ensures that the rule can fulfill President Obama's vision of an economy where hard work pays off and responsibility is rewarded. ... We have worked closely with a wide range of stakeholders, including state officials, providers of home care services, advocates representing people with disabilities and worker advocates, to encourage thoughtful implementation of the rule. We have two goals: extending basic labor protections to home care workers; and ensuring that Medicaid participants and their families enjoy continued access to the home and community-based services they need, particularly services delivered through innovative models of care."

With this decision, the case has no other opportunity to be appealed, leaving the final rule in place. Under the Home Care rule, third-party and joint employers of companions and live-in domestic service workers must be paid at least minimum wage and overtime in compliance with the Fair Labor Standards Act.



Articles

Leadership Committee: We Have A Horse Race!

by Dave Toenisketter, Chair, Leadership Development Committee

In just a few weeks, you will have the opportunity to vote for the leaders who will shape the future of ANCOR for years to come.

Are you ready for the 2016 national election season to be over? How much more negative campaigning and media circus can we stand? Is it November yet?

Within ANCOR, we are preparing for our own elections, and we can promise you better candidates, and a mercifully short campaign season. But, short doesn't mean unimportant. In just a few weeks, you will have the opportunity to vote for



the leaders who will shape the future of ANCOR for years to come.

In 2013, the Board of Directors and the Board of Representatives approved a new set of bylaws that changed how members of the Board of Directors and the Leadership Development Committee are elected. Most of the Board of Directors and a significant portion of the Leadership Development Committee is now elected directly by ANCOR's members. We've placed the power in the hands of the members, counting on you to participate in the democratic process.

During the past two years, we've had few open seats and relatively few candidates standing for election. 2016 is very different—five seats on the fourteen member Board of Directors are open, and eleven candidates with diverse backgrounds and ideas are standing for election to those seats. The Leadership Development Committee election is not so crazy, as we have one open seat and one candidate seeking election.

Here is what you need to know:

Each candidate has submitted a Letter of Interest, and we've posted them on ANCOR's website. Here is a link to the candidate letters: [Meet the Candidates!](#)

On Wednesday, August 17 from 2:00 to 3:30 p.m. EDT we will have a Meet the Candidates conference call, in which each of the Board of Directors candidates will speak about his or her candidacy, and members will have an opportunity to ask questions of the candidates. You can register for it [here](#).

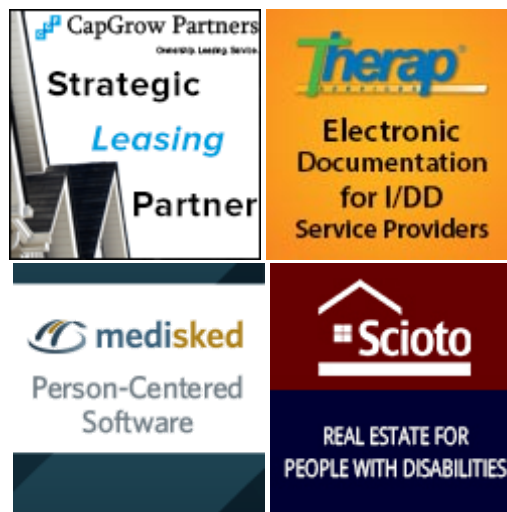
The elections for Board of Directors and Leadership Development Committee will be held by electronic ballot during the period of August 26 through September 9. Important to note: The one designated primary representative of each Full ANCOR member agency will be authorized to vote in the elections.

Election results will be announced during the week of September 12, and new Board and Committee members will begin their service on October 1.

In both ANCOR elections, your vote is important. Please take the time to learn about the candidates—and please vote!

Dave Toeniskoetter,

Chair, Leadership Development Committee



Members in the News

Comings and Goings

News and updates about ANCOR Member Executives.

Ark Regional Services, Laramie, WY. Shirley Pratt, President & CEO of Ark Regional Services in Laramie, WY, stepped down as CEO on June 1st. Shirley left to take a position with the state of Wyoming. Shirley has been CEO for 6 years and prior to that was CFO at the Ark. She was active with ANCOR as a member of the Finance Committee and also on the ANCOR Board of Representatives for Wyoming.

Bob Sell has been appointed as interim CEO. Bob has been at the Ark for over 10 years in other administrative management positions. Bob also provides technical support and stage management at the Cooper Center for Creative Arts, a program of the Ark.

Chimes International, Ltd., Baltimore MD. Current President & CEO **Marty Lampner** will retire January 2, 2017 following 28 years of service at Chimes (**note: ANCOR will post an extended announcement about Marty in our November/December issue of LINKs**) Chimes International, Ltd. and subsidiaries, known as the Chimes Family of Services, offer a wide range of opportunities for people with disabilities and other special needs. Chimes International as the parent organization, leads and supports various subsidiaries, which provide services to over 19,000 people in 6 states, the District of Columbia and Israel.



Terence Blackwell was named the new President and CEO. He will begin transitioning into his new role in early August and will assume full duties before the end of the year. Terence brings more than two decades of diverse leadership experience. Most recently, he served as COO of Manhattan-based Serving the Underserved, providing services to people with intellectual disabilities, behavioral health, mental health and substance abuse issues, as well as veterans' services in a variety of coordinated and integrated care

models.

Blackwell's career history has ranged from serving as a Direct Care Counselor for a large community-based residence to leading the development and operation of preschool programs for children with disabilities under the authority of the New York State Educational Department. He also launched his own consulting practice for not for profits and government-funded agencies and led program expansion and business development efforts for a large not for profit that provides job opportunities for people with barriers to independent employment.



IAC, Interagency Council of Developmental Disabilities Agencies, Inc., New York City, NY. **Peter Pierri**, Executive Director is retiring as of August 26. Pete has been the executive director at IAC for quite some time.

He's been an active member of the ANCOR State Association Executives Forum. **Richard Bosch**, IAC's Deputy Executive Director has been named as Interim Executive Director effective August 29.



INARF, Indianapolis, IN. **Steve Cook**, has been appointed as President/CEO effective July 25. Steve brings a wealth of experience in the field of Developmental Disabilities to this position. For the past 10 years he has been Vice President of Business Development at Benchmark Human Services and previously held leadership roles at two other INARF member agencies - Indiana MENTOR and New Hope of Indiana (formerly known as St. Vincent New Hope).

In addition to Steve's experience within member agencies, he was also the Director for the Division of Disabilities and Rehabilitative Services (formerly known as Division of Disabilities Aging and Rehabilitative Services) from 2001 to 2004. He has previously served in various INARF volunteer roles including Chair and Member-at-Large on its Board of Directors.



InterHab, Topeka, KS. **Tom Laing**, long-time (22 years) Executive Director of InterHab, ANCOR member state association in Kansas, is retiring as of September 1st. Prior to joining InterHab, Tom served as the staff director of the Kansas House Democratic caucus and then as chief of staff for the house speaker. With his retirement Tom will conclude a period of state government and statehouse activity spanning more than 30 years. Tom has been a tireless advocate.



Tim Wood was hired in mid-March to succeed Tom as Executive Director. Tim joined InterHab from Johnson County Developmental Supports where he worked as the CDDO Director. He has a breadth of experience supporting and advocating for persons with disabilities. He has more than 18 years of experience working in government relations and disability policy. Tim also previously worked at Disability Rights Tennessee and Disability Rights Center of Kansas.

Mission Mountain Enterprises, Ronan, MT. **Graydon "Brodie" Moll**, long-time CEO of Mission Mountain Enterprises retired as of June 30. Brodie had been working there for 28 years, as the company evolved from 15 employees to 150. "It has been fun to see and help people



find their niche and build a career for themselves,” Moll said. “We have given a lot of people that chance.” Building connections with people in the community on a daily basis and being able to improve a person’s life are what Moll will miss most after he retires. “We customize services for individuals with intellectual disabilities,” Moll said. “We find jobs, activities, set up a retirement plan, offer transportation...it has been a rewarding job.

During his retirement he hopes to travel, kayak and volunteer. He also will continue to be an advocate for human rights and would like to do some environmental advocacy.

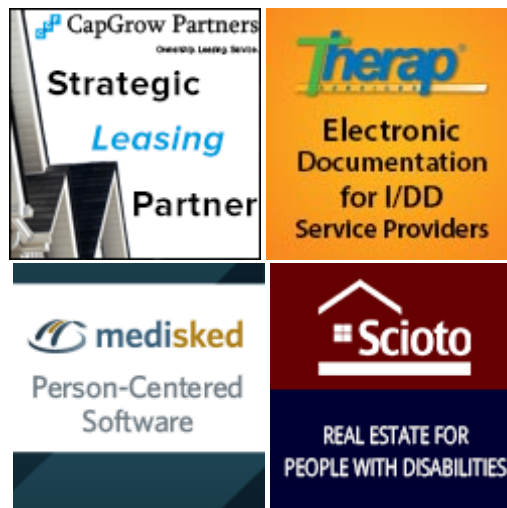
Brodie served for many years on the ANCOR Board of Representatives for Montana.

He will also be helping new CEO **Whitney Cantlon** transition into her new title. He will be a lifeline for me for about eight months,” Cantlon said. “Most CEO’s wouldn’t help their replacement get comfortable. I am very lucky that he is doing that.” She is looking forward to continuing building on the success of MME. “I am not going to try and create change for the sake of change,” Cantlon said. “We will help continue to provide critical services in the valley and evolve these services to adapt to changes happening in the industry. I think we will also tap into the advances in technology and social media, but that is down the line.”

Oregon Rehabilitation Association has changed its name to **Oregon Resource Association**.

St. John’s Community Services, Washington DC. William (Bill) Loyd, State Director – DC at St. John’s Community Services and a member of the ANCOR Board of Representatives, is leaving St. John’s in early August. Bill has taken a position effective August 15 as CEO of **The Arc of Montgomery County (MD)**. He will assume his role upon the retirement of Joyce Taylor, the current Executive Director who has led the organization since 2008. “I’m looking forward to joining The Arc Montgomery County family, which is in an exciting time and place as an organization,” says Loyd. “With the collective efforts of everyone, we will forge an even brighter future for the people they support, their families, staff and other constituents.” Bill has been engaged in supporting people with disabilities since the mid-1980’s and has worked in almost every capacity in the field.

*ANCOR members at the executive level are encouraged to contact
Jerri McCandless (jmccandless@ancor.org)
about their comings and goings.*



Hammer Opens Lisbeth Place: A Home for Four Children in Crisis

Hammer Residences, Inc. shares a release about their newest home.

Hennepin County approached Hammer to open a group home to meet the needs of four children in crisis with developmental disabilities and behavioral health conditions. Although the moratorium on opening new group homes still remains, this new home is an exception deemed necessary by County and State officials because of the shortage of available services for children. The children served in this home have been living out of state, away from their families, to receive the support they



need. With the opening of Lisbeth Place, the children are closer to their families, and can be part of their daily lives. Hammer has deep roots in supporting children; the founder Alvina Hammer started the Hammer School in 1923, and history has come full-circle.

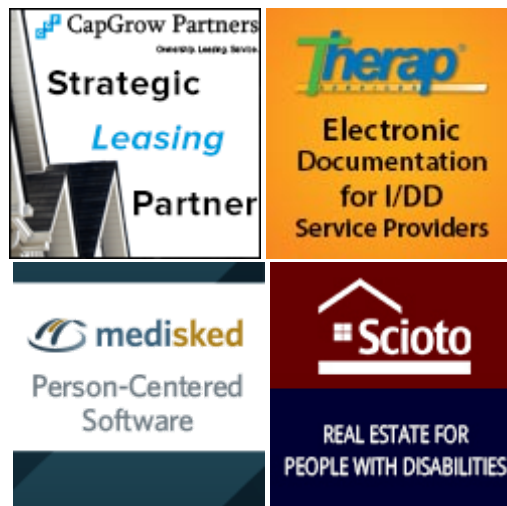
"It is a privilege to have the opportunity to serve these four children at our Lisbeth Place home," said John Estrem, Hammer's CEO. Alvina Hammer started supporting children in 1923, and we are honored to be a part of helping them receive the support they need to flourish and live a full life.

The house was redecorated and renovated to accommodate the needs of each child, and each child chose the theme and color of their room to make it their own space. Qualified staff and a nurse were hired to provide daily support for the children as needed. The staff is highly trained and

accessibility options are also in place to accommodate the some of the children's mobility challenges.

The new children's home was named in honor of Lisbeth Vest Armstrong, former Chief Program Officer, who retired in 2015 after more than 30 years of dedicated service. Hammer currently has 37 group homes and 10 apartment programs for people with developmental disabilities throughout Hennepin County.

About Hammer Residences, Inc. Since opening its doors in 1923, Hammer has helped thousands of adults and children with intellectual disabilities experience life to its fullest. Founder Alvina Hammer believed that individuals with disabilities had the right to lead full lives in a loving atmosphere where they would feel secure and develop self-confidence. Hammer was one of only two Minnesota organizations at that time to offer people with disabilities the opportunity to thrive in a school and home setting. Today, Hammer Residences, Inc. provides residential and customized support services, including In-Home Support; Support Planning; Case Management; and Healthcare Coordination (SNBC) to more than 1,300 people throughout the state. To learn more about Hammer visit hammer.org.



ODEP Highlights ANCOR Member in Its Newsletter!

In its "[Small Business Spotlight](#)" newsletter published on June 16, the Office of Disability Employment Policy (ODEP) highlighted the work of Oak Hill in Connecticut, an ANCOR member, as being integral in helping to match people with disabilities to employment opportunities.

In its "[Small Business Spotlight](#)" newsletter published on June 16, the Office of Disability Employment Policy (ODEP) highlighted the work of Oak Hill in Connecticut, an ANCOR member, as being integral in helping to match people with disabilities to employment opportunities. The full text is below:

Small Business Spotlight: Thomas Hooker Brewing Company

At the [Thomas Hooker Brewing Company](#) — a craft beer brewery in Bloomfield, Connecticut — employees with disabilities are an integral and productive part of the workforce. The company credits much of its success on the diversity and inclusion front to community partnerships, which are a proven strategy for building a pipeline of talented job candidates with disabilities.

Over the past five years, the brewery has benefited from a winning recruitment partnership with Oak Hill, a service provider to people with disabilities throughout Connecticut. Oak Hill helps Thomas Hooker fill positions with qualified individuals with disabilities, and the relationship has yielded excellent results that are a true "win-win." The company benefits from the work of great employees with disabilities, while the workers themselves experience life-changing employment opportunities.

The employees sourced through Oak Hill are engaged in meaningful work, performing integral business tasks for the company. In addition to training them on their specific job tasks, Thomas Hooker also educates its employees on effective ways of working together, while reinforcing the values of independent living.

"Words can't explain how proud I am of our partnership with our Oak Hill team members, and how they have become an integral part of not only our operation, but the culture of our company," says Curt A. Cameron, Thomas Hooker Brewing Company president and member of the [Connecticut Business Leadership Network](#).

For more information on effective recruitment partnerships, and other promising practices, access [Small Business and Disability Employment: Steps to Success](#), which provides practical guidance for small businesses on how to recruit and retain qualified people with disabilities.

Editor's Note: In our efforts to update small businesses on valuable disability employment resources and exemplary practices, "Business Sense" is launching a Small Business Spotlight feature. This is the first in a periodic series of issues showcasing the experiences of actual small businesses that are working to foster a disability-inclusive workplace culture. If you know of additional small businesses we should feature here, please tell us about them by contacting the [Employer Assistance and Resource Network on Disability Inclusion \(EARN\)](#).



Obituary

Stephen P. Lesko

Alaska lost a visionary leader and friend with the passing of Stephen P. Lesko on May 29, 2016.

Alaska has lost a visionary leader and friend with the passing of Stephen P. Lesko on May 29, 2016.

Mr. Lesko served as the Executive Director for Hope Community Resources, Inc. for 37 years before retiring in December of 2014. Mr. Lesko's passion for advocating on behalf of individuals experiencing disabilities and their families is legendary not only in Alaska but nationwide. The organizational culture developed under Mr. Lesko's leadership strives to fulfill the dreams of individuals experiencing disabilities, removing barriers to full and meaningful lives in their community of choice.

Mr. Lesko was far more than just Executive Director at Hope. He was a sincere friend, mentor, guide, and role model to all Hope stakeholders. He was revered as a great storyteller and inspirational orator. He truly was a person of the 60's who believed in value driven change in social thinking. He was an exceptional advocate, establishing the Key Campaign, transforming grass roots advocacy for the rights of Alaskan's who experience a disability and served in national leadership roles impacting positive change. Mr. Lesko also took leadership opportunities to impact Foster Grandparent and senior programs in Alaska. He lit candles that will forever continue to cast a light of hope, and burn as a shining example of what a life well lived should look like.

From Our Partners

How Social Services Organizations Can Build Stronger Community Partnerships

by Stefanie Gause, Business Development at Altus Dynamics

Nonprofits have a long history of collaborating with one another, and such partnerships are much more common than partnerships among businesses in the private sector. In part that's because for-profit businesses often view one another as competition; by contrast, nonprofits frequently view working together as mutually advantageous.

Nonprofits have a long history of collaborating with one another, and such partnerships are much more common than partnerships among businesses in the private sector. In part that's because for-profit businesses often view one another as competition; by contrast, nonprofits frequently view working together as mutually advantageous.

When you work on a joint nonprofit program, you can create combined initiative applications that bring in extra money from federal, state, provincial and private funders. Oftentimes, financial backers are eager to subsidize [CRM software](#) and other pieces of infrastructure that bolster these partnerships.

If that sounds exciting, the following tips should help make your nonprofit alliance as fruitful as possible.

1. Research Is Your Friend

Before you meet for the first time with people from another community living group, become as familiar as you can about that organization. Read the information on its website, and tour its headquarters. You'll definitely make a better impression during your initial get-together if you are informed and interested.

2. Be Clear From the Start

When you find a social services group with whom to collaborate, you should start by figuring out [the nature of your relationship](#). Among the questions to discuss are:

- Who will lead this partnership?
- When and where will meetings take place?
- How will conflicts get resolved? Will certain people vote on various issues?
- Do you plan to work together for a brief period? Or can you envision an ongoing alliance?

It's also important to establish — at the outset — [deadlines and goals you can measure](#). What's more, each person involved should understand those objectives and his or her role in making them a reality.

3. Sharing Is Caring

To truly reap the rewards of such an association, nonprofits ought to pool talent and facilities. For instance, your team might use the other organization's kitchen, while their staff members take advantage of your conference room. Likewise, your social media experts could help them attract new online followers, while their proposal writers work their magic for you.

4. Stay in Touch

Even the strongest partnerships can fall apart if the two sides don't communicate often enough. It's vital to [talk over every aspect of a project with your partners](#) and to keep gathering as many ideas as you can.

On top of that, take the time to simply check in with your associates occasionally, since doing so can build trust and goodwill. Should obstacles or problems arise, both groups will probably feel more comfortable reaching out to one another for help.

5. Assess the Process

Once you've completed a cooperative project, you should get together with the other team to evaluate the process. During the conversation, people can share their opinions about what went well and what aspects could stand improvement. If the attendees would feel more comfortable, they could express those thoughts anonymously in writing. This type of honest dialogue may allow future ventures to go more smoothly.

Do these community living collaborations involve plenty of hard work? They sure do, but they're worth it. Scores of nonprofits have sustained legendary unions over the years, some of which include:

- [Ontario's Special Needs Strategy](#) - matches service providers to young people with disabilities throughout the province.
- [The Pennsylvania Workforce Development Association](#) - links a wide range of organizations to help people find jobs and obtain vocational training.

- [Hawaii's Center for Tomorrow's Leaders](#) - teams up with schools to inspire students and teach them how to make positive contributions to their communities.

With careful planning, a selfless combining of resources and an efficient system of communication, your organization and your partners could join the ranks of the esteemed coalitions listed above.

Once you have your partnership in place, you'll need to be able to jointly track your programs and the clients participating in them. By having that information [available online](#) both organizations can easily access the information anywhere, any time.

Looking for tips on enhancing your client experience? Download the free guide: [6 Tech-Savvy Ideas that Enhance \(and simplify\) Client Care](#).



The Internet of Things

by Jean Bezek, MediSked, LLC

The "Internet of Things" is a term for devices that collect and transmit data via the Internet. It's also the future for collecting data and measuring health, wellness, and other outcomes for people.

Interconnectivity and "smart" devices are everywhere. If your device connects to another source via Bluetooth, and/or syncs to the cloud, you've got one. In addition to being ultra-convenient, this connection provides the opportunity for data to be shared. The "Internet of Things" (IoT) is a term for devices that collect and transmit data via the Internet. It's also the future for collecting data and measuring health, wellness, and other outcomes for people.

While you may not realize it, data is being shared between the device and its connection. What data is being collected? Is it data that could help you in any way? If so, what could you do with it?

From items that allow technology within a residence to be connected, to wearables and medical devices, estimates show that there will be 50 to 200 billion connected devices by 2020. SOURCE <http://www.fool.com/investing/general/2016/01/18/internet-of-things-in-2016-6-stats-everyone-should.aspx>

The popularity (and affordability) of wearable technology has exploded in recent years. Data shows that 48% of people who use wearable tech are between 18 and 34 and 71% of 16 to 24 year olds want wearable tech. SOURCE <http://www.forbes.com/sites/bernardmarr/2016/03/18/15-mind-boggling-facts-about-wearables-in-2016/#bd25ae4773ed>

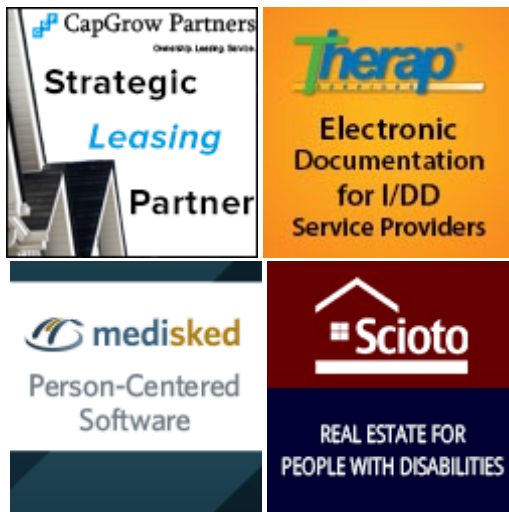
Wearable technology devices (watches, bands, etc) come pre-configured to submit their data to certain apps and data collection points. Bathroom scales, blood pressure cuffs, glucose meters, thermometers and more all allow for Bluetooth connectivity, and can wirelessly transmit the collected data into another system.

What if your agency could take all of that data, and have it added to the individual's electronic record? What if a provider, oversight, or member of a person's circle of supports could be alerted in real-time of an issue? If an individual has a goal of becoming more active for better health, and they join a gym and determine that they will attend 3 days a week, their wearable can track and document that activity. If an individual requires observation logs for seizures, a smartwatch is available (currently in clinical trials) that includes nervous system monitoring for seizures. If the individual's level approaches a pre-defined setting, an alert can be issued to their network. Why fill out a sleep chart when a bracelet can do it for you? What if that information also was added to a person's electronic record?

As regulations and requirements continue to focus on contemporaneous documentation and measuring improvement, data becomes increasingly valuable. Wearables and other smart technology allow agencies the opportunity to obtain real-time data from those within their service network.

As electronic records and associated software platforms continue to evolve, consider the options your agency may have to try out these devices and tie them back to your current systems. Consider a small group, a single residence, or program where the participants are open to technology, and set up those connections.

The Internet of Things is helping to take time away from documenting charts, freeing staff to work hands on with individuals and also catching alerts before they become issues. It's the future of health and safety supports and it's here now.



Member Benefits

The ANCOR Marketplace Benefits You!

The ANCOR Marketplace gives ANCOR members special insight into new products and services as they appear in the I/DD marketplace — products and services that will help grow providers' businesses.

The ANCOR Marketplace (www.ancormarketplace.org) is an easy to navigate site that gives ANCOR members a special insight into new products and services. The various offerings are conveniently categorized, which makes shopping for I/DD products, such as software systems, housing solutions, merger and acquisitions prospects, insurance services and more, a smooth browsing experience.

The [ANCOR Marketplace](http://www.ancormarketplace.org) also features customer reviews and testimonials by other I/DD executives, thereby helping providers evaluate their choices.

Find out more about the ANCOR Marketplace — contact ANCOR's Development Director, Marsha Patrick (mpatrick@ancor.org).





Did You Know: Dell and Furniture Concepts

Check out these special offers for ANCOR members!

"Did You Know" feature vendors in the ANCOR Services Corp.'s Shared Resources Purchasing Network!



Did you know that **Dell** offers special discounts to ANCOR members with impressive savings on desktop computers, laptops and more? [Details](#)



Did you know that **Furniture Concepts** offers sofas, loveseats, chairs & recliners in 100's of soft & supple fabrics designed to resist bodily fluids, bacteria, microbes, stain & soiling? [Details](#)

Click to visit the [SRPN!](#)



SRPN: What Members Are Saying...

The Shared Resources Purchasing Network (SRPN) partners with national companies to provide significant savings to ANCOR Members.

The [Shared Resources Purchasing Network](#) (SRPN), administered by the ANCOR Services Corporation, partners with national companies to provide significant savings to ANCOR Members and supports ANCOR programs. Members who use the SRPN enjoy savings and leading purchasing practices, and can rededicate their savings to needed programs. The SRPN discounts with selected vendors also apply to Members' employees, persons served by the organization and their families.

"When it comes to EPI's needs, from staff to direct services, we look to the [SRPN](#) with its vendor partners for dependable products and services. We seem to always find the products and support we need."

-Chris Sparks, Exceptional Persons, Inc., IA

For more information, including a list of SRPN vendor partners, visit [ANCOR Services Corporation](#) or contact Marsha Patrick at mpatrick@ancor.org



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