

#### This meeting is being held virtually.

Meeting called to order by **De Freedman**. The date was March 26, 2024, at 6:11 pm. The address of the meeting was Virtual, no physical address.

Attendance in Person: None - This meeting was virtual only

Attendance by Google Meets unless noted:

- Diedra (De) Freedman
- Brad Doyle
- Cynthia Macluskie
- Crystal Fox
- Pat Thundercloud by phone \*\*37
- Jaymie Moore

#### Absent:

• Shelly Vinsant

#### Public in Attendance:

None

Arizona Department of Administration (ADOA)

• Larry Allen

#### **AHCCCS IOC Liaison**

• Fredreaka Graham

Healthcare Plan Liaison

- Wendy Herring (Mercy Care)
- Ian Wilson (United HealthCare Member and Veteran Advocate)

#### DDD staff and Guests:

- Leah Gibbs (DDD Office of Individual & Family Affairs Administrator)
- **Diane Kress** (DDD District West Quality Manager)
- Joan McQuade (DDD Office of Individual & Family Affairs Manager)
- Morgan O'Hara (DDD IOC Liaison)
- Michelle Rademacher (DDD IOC Liaison)



#### District West IOC-Conference Call (2024-03-26 18:09 GMT-7)- Transcript

#### **Attendees**

+1 623-\*\*\*-\*\*37, +1 714-\*\*\*-\*\*75, Brad Doyle, Callie Walling, cynthia macluskie, Diane Kress, Diedra Freedman, Fredreaka Graham, Ian Wilson UHC, Jaymie Moore, Joan McQuade, Lawrence Allen, Leah Gibbs, Michelle Rademacher, Morgan O'Hara, Wendy Herring - OIFA Mercy Care

#### **Transcript**

This editable transcript was computer generated and might contain errors. Liaison has edited some of the transcript for accuracy and ease of reading. Any blue italics transcription was missed by the transcriber.

#### Call to Order

Diedra Freedman: I hereby call to order this regular meeting of the DES DDD District West Independent Oversight Committee. Today is March 26, 2024. The time on my computer is 6: 11pm. We are now meeting from 6 to 8 pm as a convenience for our members. It is a regular meeting of the IOC, it's being held electronically. The meeting is being recorded. A transcript of the recording, because we have a quorum, will be posted on the ADOA IOC website. In an effort to avoid excessive background noise and potential microphone feedback, please mute yourself when you are not speaking. You can unmute yourself by clicking on the microphone icon at the bottom left corner of your screen or elsewhere on your platform. The host of the meeting, that's Michelle, can mute you. But you can unmute yourself if you wish to speak.

#### **Conflict of Interest Disclosure Statement**

**Diedra Freedman**: Do we have anyone that has a conflict of interest to disclose. If there is, the committee member needs to disclose why. And we'll now have introductions of those present at this meeting.

#### **Welcome and Introductions**

**Diedra Freedman:** I am Diedra Freedman. I am the chair until you guys get sick of me and vote somebody else in. I am a retired New York attorney and a professional compliance officer by profession. My son, Andy, was a DDD member for seventeen years. He was a DDD ALTCS Mercy Care member for 17 years. I have served on various committees.



Crystal Fox: Hi I am Crystal Fox and I'm a registered RN. I have worked in behavioral health my entire life. I also have a special needs daughter, Tia, who is an adult now. who is still a member of DDD. I also have Tia's caretaker, Christa, she also has cerebral palsy and I employ her. And right now I'm exhausted too because I've been at the Capital for three months. So I am an Arizona Madd Mom right now.

**Brad Doyle:** I am Brad Doyle. I'm the parent of Curtis who is thirty seven. I've been dealing with DDD and being involved with the disability community, forever seems like. I am also a cafeteria manager. I am a union site leader, tons of stuff, OIFA United Healthcare, just been doing stuff for awhile.

**Cynthia Macluskie:** Hi Cynthia Macluskie president of Autism Society of Greater Phoenix. Member of the United Healthcare member committee also the Governance committee. I'm an insurance broker, expert in systems of care. I'm the mom to my son, Mark, who is turning twenty six and was in the DDD ALTCS system for eleven years.

Pat Thundercloud: I'm Pat Thundercloud, former PA, retired physician's assistant. I have a son. He is forty three years old and has Downs syndrome, had a stroke sometime in the first year. We've been with DDD in Arizona for about forty two years. Otherwise I'm not doing much right now, just retired.

**Diedra Freedman:** And Pat is the longest sitting DDD IOC member in history. Pat has been on the IOC since 2004. Our other longstanding IOC members are either in memorial or retired at this point.

Jaymie Moore: Hi everyone my name is Jaymie Moore. I am an adjunct professor at Grand Canyon University. I teach preservice teachers' classes focused on teaching children to read, all literacy based. I am also the associate director for a group home in the west valley that is funded through DDD. And I also have a private business where I teach children at their homes. My speciality is teaching children with dyslexia to read.

The remaining meeting attendees introduced themselves individually.

#### **Electronic Visit Verification (EVV) Update**

Diedra Freedman: Okay, are you guys ready for the first item on the agenda. It's Electronic Visit Verification Update. As promised at the meeting last month, Crystal and I formed a subcommittee. I did notes of what we discussed at the last meeting. Crystal doesn't have anything to add. If you want, I will read the email that I sent out earlier and then if anybody wants to discuss it, we'll discuss it. Otherwise, we'll move on and we can always bring it up next month. So we came up with three areas with questions; 1. Why are direct care workers required to sign out via the EVV system including third party practice management system being used by provider agencies by 11:59 and sign back in after 12:01 am during an nighttime shift? Is this a Sandata/EVV system requirement/limitation? Is this a DDD Wellsky system requirement/limitation? Is this restriction required by DDD and/or AHCCCS policies? If so, which policies? Is this an unintended consequence/result of system updates/data transfers/dumps being done by Sandata third party practice management system being used by provider agencies and/or Wellsky at midnight? 2. Provider agencies reprimand/discipline/penalize direct care workers when EVV errors occur and need to be fixed on the "backend". 3. Physical ...



Diedra Freedman: challenges/hardships and effects on delivery are caused when direct care workers need to sign in and out of EVV to switch service being provided during the same session, especially regarding attendant care. It was noted this happens several times during one shift depending upon the needs of the member being served. So what are the EVV implications/concerns/challenges now that Parents as Paid providers for minors children is a permanent program? What other implications, concerns or challenges do we have in addition to the use of EVV now that Parents as Paid providers for minors are a permanent program? I asked you to review the synopsis for tonight's meeting and we'd discuss how we'd like to move forward. I just heard that somebody's hand went up.

Cynthia Macluskie: Just tell me if I'm out of line. I did want to ask one thing because it's along the same road. Or I wanted to bring it to everybody's attention. My concern about the paid parent provider program, one of the concerns I have, is making sure that the IRS language matches our DDD ALTCS language so that providers know how to issue correct 1099 and W2 for Difficulty in Care income. And I think that is related to EVV.

**Diedra Freedman:** Cynthia, before we really discuss that with EVV, let's see if we can actually get a presentation from somebody from DDD in the next month. Can we get that Michelle, or Leah?

Michelle Rademacher: A presentation on EVV?

Diedra Freedman: No, a presentation on Parents as Paid Caregivers and

cynthia macluskie: Difficult of Care income

**Diedra Freedman:** What DDD is doing to educate its provider agencies about difficulty of care income so that they can educate their employees.

**Cynthia Macluskie:** Also making sure that DDD when they're writing policy, I would like to know that they are taking that into consideration when they are writing policy.

Leah Gibbs: You know the Parents as Paid caregivers. I'm sure you are all aware and saw the announcement that AHCCCS received approval from CMS around their proposal. However, we have yet to be able to learn what is in the totality of that proposal. AHCCCS has been invited and will be presenting some information on our Public Town hall that is scheduled for the first Thursday evening in April, April the 4th regarding the Parents as Paid Caregiver program. But I know they are kinda of feverishly getting some decisions and guidance and pulling some things together and we don't have that information yet. Cynthia, I need to share with you that the Parents as Paid Caregivers is an AHCCCS program that DDD is implementing. We can take forward the request, but as a state agency, we generally do not give advice or direction on things related to the IRS or the process of taxes or to the income of direct care workers. I'm not going to tell you DDD won't do it. I'm going to tell you that I'm not aware that we have ever done that before.



Cynthia Macluskie: I'm not expecting that. In fact, I would hope

**Leah Gibbs:** Hope that we do not because it's not appropriate.

**Cynthia Macluskie:** Absolutely. My one concern that I'm having is the definition of extraordinary care and making sure that it matches the IRS definition so that providers and parents as paid caregivers have an easier time of navigating that. If we have different definitions, I think it's gonna be way more complicated.

#### 00:14:45

**Cynthia Macluskie:** *I'm not even sure* it's a DDD necessarily issue. It might be an AHCCCS issue. And I did submit a comment on it. But I just wanted to bring it up...

Leah Gibbs: Good.

Cynthia macluskie: because De mentioned paid parent providers and...

Diedra Freedman: right

Leah Gibbs: Sure.

Cynthia Macluskie: the EVV. and I think it is related to that. And so that's why I was just.

**Leah Gibbs:** I think it's wonderful that you brought it up. I am very grateful that you put it in for public comment. And the definition that we're going to use for Extraordinary Care is one of those things that is on the table for discussion waiting for AHCCCS to make some finalization there. So I think that we might be a little premature. I just want you to be aware of all that. There's a lot that we don't know yet.

**Diedra Freedman:** Hey Frederica. Do you think we could get somebody from AHCCCS to do a presentation for us to answer our questions?

**Fredreaka Graham:** And yeah,...it sounds like Leah said that someone would be having something on the fourth of April.

Diedra Freedman: At a DDD town hall meeting. Can we get that same person at our April meeting here?

**Fredreaka Graham:** Do you know who it is, Leah? Is it? Because I'm not sure who the person is at this point. You're on mute. Sorry.

Leah Gibbs: Okay, I apologize for talking on mute. Dara and...

Fredreaka Graham: No worries. Dara.

Leah Gibbs: Jackena are the two that are planning to attend the April Town Hall.



**Fredreaka Graham:** Okay. Yeah, let me send an email right now to the two of them and request, see if someone is able to come to your April meeting.

**Diedra Freedman:** I appreciate it. Fredreaka, the thing is that even though we're talking about parents as paid caregivers for children under 18, what Cynthia's talking about, also pertains to parents as caregivers for their children who are over 18 and reside in their homes, so.

**Fredreaka Graham:** Okay, and so I'm clear you're asking for the same presentation that they're doing on the fourth or are you asking for something more specific?

#### 00:20:00

**Diedra Freedman:** That presentation would be fine. As long as they could answer some questions. If you can't answer.

Fredreaka Graham: Okay, so I'll give you a heads up that they may ask ahead of time what questions you may have so that they're able to prepare for that. So if you don't mind putting that in writing to me so that I can send it over to them. That way they'll have it in writing exactly what you're seeking. And I can get that sent over to them tonight.

**Diedra Freedman:** Can you do that Cynthia? Can you put your questions in an email to Fredreaka, Jacana and Dara? But you...

Cynthia Macluskie: Yeah, I'll do it right now.

Diedra Freedman: know Dara and Jacana.

Cynthia Macluskie: Should I send the email to Michelle? Is that how it's supposed to be done?

**Diedra Freedman:** You cc Michelle and cc Larry. Whenever we do anything for the IOC we always cc Michelle as a courtesy and...

Cynthia macluskie: Okay.

Diedra Freedman: cc Larry because we're required by Lawrence CC Larry.

Crystal Fox (from De's computer): Yeah. And it actually would help me too ...

Cynthia Macluskie: Okay.

Crystal Fox: because I still haven't figured out how to write off Tia even though she lives with me. so

**Diedra Freedman:** Okay, so does anybody else have anything to say about EVV or do we want to table that until next month?



**Brad Doyle:** I just have to follow up. I lost my connection when Cynthia first started talking. You were talking about the terminology regarding exceptional care. Do you mean difficulty of care or? What did I miss? Is this just about Parents, under the age of 18, as paid providers. What did I miss Cynthia?

Cynthia Macluskie: So let me just explain briefly. What happened was, difficulty of care income, according to the IRS, is not considered income. And the way that I discovered it is I was helping several people being kicked off of Medicaid because of this difficulty of care income. And when I kind of dug into it, there's a conflict between the IRS and CMS on how they look at this income. And each state makes their own decision. Jamie Schneider was kind enough to listen to me and some attorneys and made the decision that AHCCCS would not use difficulty of care as income as income for qualifying for Medicaid but it does qualify for income for food stamps. And difficulty of care income is defined by the IRS of doing a home and community service from someone who lives in the home with the child or adult who's getting that service in the home, and I have a flier that I put together that I can share all the information from the IRS.

Brad Doyle: That's what I thought we were going. I played a pretty large role in the background regarding. I started doing that back in 2004. In the actual decision that was put out by the Internal Revenue Service in 2014. It's IRS decision 2014-6. It's regarding the Banning versus the commissioner or the IRS. I contacted the attorney that represented the parent that was in California. I spent about a good decade working on this. The issue will be that in the IRS statute, the federal statute, states "placed by the court". And also it almost makes it to where the parents will have to declare it as income. My understanding is the reason why difficulty of care payments were treated differently is because the adult children over 18. I mean, I don't think they've tried to address it for the people that are under 18 yet because the statute will apply differently to them than it does to a individual with disabilities living with a guardian and/or family members after the age of 18. So I think they're in a gray area here. Am I Wrong Cynthia?

Cynthia Macluskie: What I'll say is I'm not a tax accountant and I'm not an attorney but I've spoken to several and it might be a little bit of a gray area but not as big of a gray area as you think. And what was shocking to me was how many Families with adults who have difficulty of care income didn't know that they could treat it that way. And you're right. It's a little bit of a gray area for parents under the age of 18. So everybody has to decide how they view it and...

Diedra Freedman: Okay. I'm

Cynthia macluskie: I've shared two pages of documents for them to make their own decision.

**Diedra Freedman:** I just need to jump in here. Jackena and Dara from AHCCCS are only going to be able to address whether difficulty of care income is counted toward AHCCCS eligibility...

00:25:00

Brad Doyle: right. right

Diedra Freedman: If you want to talk about the other things, we're gonna have to bring other people in.



Brad Doyle: Sorry, sorry I just thought. sorry I missed out on that. Sorry.

Cynthia Macluskie: The only reason I was bringing this up at this forum is to make sure that AHCCCS.

Cynthia macluskie: And DDD do not have a different definition then the IRS or...

Diedra Freedman: right

cynthia macluskie: that it's going to get even more convoluted.

**Diedra Freedman:** It's already convoluted because obviously DES and AHCCCS have a different definition because it gets counted for food stamps, but it doesn't get counted for AHCCCS eligibility and AHCCCS is not in charge of food stamp eligibility DES is. So

Brad Doyle: Sorry.

**Diedra Freedman:** It's okay. I just want to make sure that we understand when we invite guests to our meetings. That we don't ask them. To go beyond the scope of what they are authorized to share with us because I personally know Jackenna in Dara. I've been working with them now for 15 years. And I can tell you that those two ladies understand this issue thoroughly. But because they work for AHCCCS. They are only authorized to give us information regarding AHCCCS and AHCCCS eligibility. Not all the other issues.

**Brad Doyle:** Thank you for that point of order Madam chairman.

Diedra Freedman: We like to invite people here. We are all very dedicated people who, except for Pat and Jaime, can have sharp elbows. And I just want to make sure that people want to continue to come to our committee and they know exactly that we are going to honor what they are authorized to do and can't do even though we know they try their best to stretch things as much as they possibly can without getting smacked. If that makes sense. So

Diedra Freedman: And Jackenna and Dara certainly fit in that category. So they try to be as helpful as they possibly can, but continue to be employed. All right. Does anybody else have anything to say about the EVV update? Do we want to ask Jackenna and Dara to join us next month for the issues regarding hardship payments and AHCCCS eligibility? We'll have a discussion about that. We can discuss the other issues. I just want to make sure that we don't ask them. And again just because we're not getting information we can ask for that information. We can talk about it among ourselves. So we can put that on the agenda. Somebody want to make a motion?

**Diedra Freedman:** Actually, to put it on the agenda, we don't have to make a motion. It can be my decision. So we'll just go ahead and we'll put it on the agenda for next month since obviously we want it.

Cynthia macluskie: Thank you.



#### Behavioral Health Crisis System

Diedra Freedman: And we can move on to Behavioral Health crisis system.

**Diedra Freedman:** Crystal's going to give us an update of what's going on down at the Capitol since she's now pitching a tent and living there.

Crystal Fox: Yeah pretty much.

**Diedra Freedman:** And then if anybody else has any questions or comments, we'll go ahead with those. Floor is all yours.

Crystal Fox: So a few of the DD bills that I heard were the Paid Provider, that went through and went to Appropriations. So to give a slight increase for providers,...

#### 00:30:00

Crystal Fox: of course, it'll all go to the budget committee and stuff after all this is done. There was an interesting one on newborn screening again. This isn't exactly DDD, but I'm sure that these kids eventually end up in DDD for Duchenne Muscular Dystrophy. There's a really nice lady. And again, it just kind of happened to be that I met up with her a couple times. She was in the same committees. Where they're trying to do newborn screenings and again they have to make Appropriations for that and that has passed so far through the committee, so it'll actually be a cost savings in the end, but it'll get The newborn screening so they can get treatment sooner. I don't think ECT ended up getting any further. I haven't seen it come through the house. Let's see, there was one more of Senator Wadsack's Bill that went through for DDD but I can't remember what it was. Behavioral Health Wise, I don't know if there's a whole lot of affects DDD except for that kind of an offshoot is. Go ahead, Cynthia.

**Cynthia Macluskie:** I just wanted to say, I think for the very first time and you were there, I think for the very first time the IDD community partnered with the mental health community and we had a day at the Capitol. And I think for our first time it went pretty well. I think there's some things you can do to improve it for next year. But it was nice to see us making those kinds of connections and building more relationships.

**Diedra Freedman:** The other thing we need to understand is anything that affects the behavioral health system affects DDD members because they are entitled to mental behavioral health services and even though there are currently not a lot of dual diagnosis IDD and SMI, serious mental illness individuals, We know that those individuals are under identified.

**Cynthia Macluskie:** The research now is showing De, that 35% of those with IDD have are dually diagnosed. So I doubt that those numbers hold true for us in the state of Arizona simply because we haven't done a good job of screening for that. But that is what the research is saying 35% of people with IDD also have mental illness.



Crystal Fox: Yeah. Yeah, I know when I do the PRC meetings, I remind people when I get down and look on the PCSP (Person Centered Service Plan) that when somebody's got a diagnosis of bipolar or schizophrenia or schizoaffective as well as the DD diagnosis, I remind them that they should have an SMI, at least evaluation. Hardly any of them do. We don't do very good at that. And that would actually give them a little bit more resources in the SMI system as well as clinics and counseling and stuff that they would also qualify for. So I try to but they are underrepresented. I don't think the DDD system knows to request that evaluation.

**Cynthia Macluskie:** I will say that DDD, in the past maybe didn't do a great job, but I've seen an effort from DDD to do that. What I have seen is pushback from families who find that label to be upsetting or intimidating. And also to not understand that there may be additional benefits. So I...

Diedra Freedman: right

**Cynthia Macluskie:** but I've seen improvement from the DDD standpoint of trying to educate families. I'm not to say, that there's not more work to be done, but partly our families are not complying.

Crystal Fox: Yeah.

**Diedra Freedman:** Hey Cynthia. I just want to make sure that we further connect the dots. You've been seeing that since 2019 in the establishment of the DDD OIFA office, right?

Cynthia Macluskie: Yes, I yes.

Diedra Freedman: We just want our records clear.

**Cynthia Macluskie:** I just want to add that, and this is no fault to necessarily the health plans or DDD, but I do think those that have serious behaviors and complex needs have a really difficult time getting Medical Care.

#### 00:35:00

Cynthia Macluskie: Because the outpatient facilities don't want people with mental illness or behavior. And then when they go impatient for Behavioral Health Services the hospitals and behavioral health clinics will not do any of the workups that need to be done to identify the medical issues that are causing the behavior. And the last three times I've seen that actually work, it took the medical director from AHCCCS and the medical director from the health plan. So, I would love it if OIFA would really start working on connecting those dots between Behavioral Health and serious medical issues that are not being screened for in an appropriate way because of their complex behaviors.

**Diedra Freedman:** Leah's working on that that's why we have an Integrated Health Plan. And we were just talking earlier, Off the Record, about how they've been able to backdoor their advocacy services for Acute Care physical health because they Provide services for the whole person. Not just somebody...



**Cynthia macluskie:** I think it's a billing issue. But I don't know I'd love it if anybody on this committee or anybody in the world could figure it out. But it shouldn't take an AHCCCS medical director and a medical director of a health plan to get somebody good medical care because they are IDD and have behaviors.

**Diedra Freedman:** I think everybody agrees with you on that. Does anybody have anything else on the behavioral health? You were going to tell us about the four bills Crystal.

Crystal Fox: These are mostly related to serious mental illness. So not necessarily with DDD, but anybody who has the basic entitlements of serious mental illness. So there's four bills that have gone through. One of them for serious mental illness has to do, we just went to Appropriations today, it just passed. It was on not having to have six, 6, different step protocols for SMI. That it would be one. So the medications would, at least for psychosis disorders, you wouldn't have to have trials of three and four, five different medication failures before getting the medication that they need. So this one was a single step therapy, a single failure and then the doctor could prescribe the medicine he wants.

Crystal Fox: The other one that went through is on data collection, and it has to do with the speaking, the RBHAs and the SMI clinics and collecting and Mercy Care and the other one that's in that, AZ Complete Health. They're supposed to start collecting data about homeless SMI, which again that wouldn't affect DDD too much but suicide attempts, hospitalizations, repeat hospitalization, stuff like that. That would probably affect because we do have some DDD members that like to come to the hospital a lot.

Crystal Fox: And then the big one that I've been doing is John's Law. That has to do with my ex-husband's death and that has to do with, Again, I don't think this would affect too many DDD members, but it has to do with screening for involuntary treatment. And it would affect a few because there's some at ASH, but it's that process. The process where the involuntary, the CBI, UPC, they have to collect history, collateral information from families or from the group home or from whoever knows the person last and it will become part of their medical record, that collateral information, in order to help them inform whether they need a involuntary evaluation to go to ValleyWise. And there are a few people obviously that have been through that system in DDD, just a very small minority. But it gives a voice to the family...

#### 00:40:00

**Crystal Fox:** And Guardian, who's ever involved with that individual.

**Diedra Freedman:** Anybody else have anything about the Health crisis system that they want to bring up? Leah

Leah Gibbs: I was taking notes and I thought you said there were four bills and I wrote down three.



Crystal Fox: One of them is a combination. I'm not as good if I would have come better prepared. I would have actually had my papers in front of me, but I came from the Capital. So I'm at De's. I don't have my papers, but one of them actually has a Four parts, and it has to do with, they're supposed to make a survey. Which again is just like any survey that the rest of us have. Did your clinic do what they were supposed to do when you discharged from a hospital? Did you get the medication stuff like that? This one will affect DDD and actually I kind of wanted to make this DDD as well. When they go from one place to another, hospital to group home, to wherever they're going, that there's a better check of medication errors and medication oversight during that transition of care.

Crystal Fox: Also having to do with discharge planning, that's part of one of the bills. And then I don't think this affects DDD, but it has to do with peer supports and that the peer supports needs to be better trained, especially when dealing with psychosis disorders, but also if DDD uses peer supports, which I don't know if you do, they would have to be. And if you do use peer supports, it would be training in dealing with people with intellectual disabilities. We didn't take that part up, but that this one is specific to psychosis disorders, not putting peer supports in a crisis situation with...

Crystal Fox: Again, this may happen with DDD members. So sometimes peer supports aren't really that trained because they don't have the staff at the facility. The peer supports are sent out in a crisis and they've been put in danger with people who are psychotic because they don't know how to deal with that crisis situation. That's not the job that they are trained for. So again, training peer supports in dealing with psychosis. And again, if this ends up being an issue, we may want to do something with DDD with that as well. That they're trained in intellectual disability as well. And the other thing that's come up in just overview of everything that I've talked about with a couple of the Legislatures is there's becoming more increase in and again, I don't want to get into the medical marijuana thing, but there's more and more increased documentation and evidence that the marijuana is causing psychosis. And so it is causing schizophrenia. And so as our DDD members become older, a lot of them are treating their individuals with marijuana because of behavioral health concerns, epilepsy, whatever it is. And I'm just kind of giving everybody a heads up that this may become more of an issue for our members as marijuana becomes so accessible. That they get psychosis.

Diedra Freedman: Hey Leah.

**Leah Gibbs:** I want to thank you for the advocacy that you're doing and I want to share with you that recently, within the last six months, AHCCCS has been working on updating the training requirements for credentialed peer supports as well as credentialed family supports and IDD training is now in both of those curriculums as a mandatory component. So part of it is already happening. I just want you to know about that, okay.

Crystal Fox: Okay. That's good news. Yeah.

Diedra Freedman: Does anybody else have anything on the Behavioral Health Crisis System?

Diedra Freedman: Okay, we're ready to move on to.



**Cynthia Macluskie:** De. I just wanted to thank you for doing, you guys are doing great work down with the Capital and I just really appreciate it. And I just want to thank you because I know how hard that is. So Thank you.

Diedra Freedman: That's Crystal. That's not me.

Crystal Fox: I tried.

Diedra Freedman: We just, off the Record, discussed why I will not be effective down at the Capitol.

00:45:00

#### **Service Delivery Concerns and Discussion**

**Diedra Freedman:** So and as Brad reminded me nicely I have mellowed in the last decade. Okay, we're ready to move on. Service delivery concerns and discussions. And any health plan input is certainly welcomed and desired. Are there any service delivery concerns that we need to discuss besides the stuff that we discussed over EVV? Is there a problem here in District West that we don't know about that should be brought to our attention?

Cynthia Macluskie: De, I'm not aware of anything right now.

**Diedra Freedman:** Okay, this is an, I dropped the ball on this and I apologize. I put this on here. I received a lengthy email from a DDD member that I don't want to discuss the Individual's issues. I want to discuss the systemic issues. So let's table this for next month

Cynthia Macluskie: Okay, now that you mentioned that I think I. Yeah.

Diedra Freedman: We'll table it for next month and we'll talk about it in depth. I'll send you guys an email.

#### <u>Discussion, Review, and Possible Action regarding any policy issues of</u> <u>concern to IOC Members including requests for education presentations for</u> the new year

**Diedra Freedman:** Discussion, review, and action regarding any policy issues of concern to IOC members including Any education presentations that we want?

**Diedra Freedman:** Do we have any policy issues of concern to IOC members including any education presentations that we want? Do we have any policy issues?

**Cynthia Macluskie:** I did a comment on DDD put out a new attendant care, homemaker policy and I had some very serious concerns with that policy. I did submit public comment on that. I don't know if we're talking about Policies that are still open for public comment or only policies that are already effective.

Diedra Freedman: Any policy We didn't limit it. So any policy.



**Cynthia Macluskie:** So I do have some concerns with the Personal Care homemaking policy that DDD put out for public comment. I felt like it was way more restrictive than the AHCCCS policy. Which seems to be a trend. And then I've been reading some other policies, but I gotta be frank with you. It's impossible to keep up with DDD right now. They're releasing 10 or 12 policies a week. And some of these are not small changes.

Diedra Freedman: Mm-hmm

**Cynthia Macluskie:** So I wish they would slow down. So some of us could keep up. Some of us actually have to earn a living too. So I don't know if anyone else is reading them, but there's a lot coming out and there are a lot of changes.

Crystal Fox: Yeah, I agree. There is a lot.

Cynthia Macluskie: And I'm concerned that there's not enough people paying attention.

**Diedra Freedman:** It's difficult to pay attention because they're technical.

Diedra Freedman: I attended a presentation last week regarding DDD Behavior group homes. And the only thing they wanted to talk about was the language in the regulation. They didn't want to talk about anything else. And basically what they did was they changed group homes to include the words and Behavior group homes. So it's basically the same regulation. And there was something in there about clothes hooks that yeah, so that people wouldn't be able to self injure themselves with and when I asked a question about exactly whether or not DDD would be issuing subsequent guidance for providers on which types of hooks would be acceptable. They told me they don't like to do that because it confuses people. I found that very interesting considering that I represent providers. The more information that they have to comply upfront, the better.

#### 00:50:00

**Cynthia Macluskie:** I guess if you don't tell them, then when they don't do it, it's easier not to enforce the rules because it's unclear. Just saying. I'm struggling with that when it comes to enforcement with some of these rules between the health plans, AHCCCS, and DDD.

Diedra Freedman: Yeah. ...

Cynthia Macluskie: So you need

**Diedra Freedman:** There would have to be somebody who was actually effectively enforcing things which is a whole other conversation...

Cynthia Macluskie: agreed

Diedra Freedman: without Government official immunity, which is a whole other discussion.



**Cynthia Macluskie:** Leah, I'm just curious about. And I don't know if you can answer, but it does seem excessive, the amount of policies you guys are putting out right now.

Leah Gibbs: I can tell you that there's a lot of work going on right now. I think I let the committee know a while ago that the Division is working toward accreditation for the NCQA, National Quality. And in the process of working toward that accreditation, we recognize that we weren't as transparent as we needed to be in some policies and that we've been doing a great deal of policy changes for that compliance. I can also tell you that every year our regulator through AHCCCS updates their policies and every time they make a policy change we need to do a corresponding policy change to be sure that we continue to be in compliance. And so, there's kind of a dual thing going on right now and as for slowing down, I can...

Diedra Freedman: Okay.

**Leah Gibbs:** I can tell you that within our, my own, Department, I just had four brand new policies go through policy review teams that are about to go out.

Cynthia macluskie: Seriously. You're just killing me.

Diedra Freedman: Leah, I'm just gonna put it on the record. This is my personal opinion after two decades.

Leah Gibbs: Uh huh.

**Diedra Freedman:** Despite all the work that you have done with the DDD OIFA, there is still mistrust from the community toward DDD and so...

Leah Gibbs: That's not going to fix overnight, De. It's just not.

**Diedra Freedman:** I understand and I do not want to take away from your efforts. When we're talking about dealing with OIFA. It's a totally different ballgame than dealing with the rest of DDD.

**Cynthia Macluskie:** I do also have concerns though. One of the things is, you're taking stuff out of one policy. And then you're moving it into a different policy and that's very hard for anybody to track what's going on. And so it does seem a little deceptive to me because it's...

**Leah Gibbs:** And I'm really sorry that it's perceived. That way I really truly am, but the intent was to clean up our policies to better align with the AHCCCS policies and...

Cynthia macluskie: It's just hard to follow,...

**Leah Gibbs:** I don't blame you. Now, there should be a note though in that summary telling you that, right. Okay.

**Cynthia Macluskie:** No, there is a note. It's just, I read policy and I have to go, "wait what is happening?" So to me, it makes it inaccessible to a certain number of the members and their families and...



Leah Gibbs: I understand.

Cynthia Macluskie: That is concerning to me and that's not on you, Leah. But it is still concerning.

**Leah Gibbs:** I understand, but Yeah, I please thank you. And I want to thank you for making the public comment that you did around your concerns with the attendant care policy and...

**Leah Gibbs:** I can tell you that anytime we get public comment back on a policy, our policy team sends that right back to the subject matter experts who were responsible for Designing that policy in order to address those public comments. Now I can't tell you exactly where they are with the attendant care one because I'm not involved in that one, but I can tell you that no public comment comes in and is ignored.

Diedra Freedman: Okay.

Cynthia Macluskie: I appreciate it, and I have one other question. Sorry De.

Diedra Freedman: It's all right.

**Cynthia Macluskie:** To me and I feel like I'm pay attention and what's going on within the community. And Zane seems to have a new person that's showing up at all sorts of meetings. And she's supposedly, What is her name, I mean what is her job? She's a conflict resolution or it's...

#### 00:55:00

Diedra Freedman: conflict resolution manager.

**Leah Gibbs:** That would be Rachel.

**Cynthia Macluskie:** Yeah, and so I've never heard Rachel's name or seeing her and I cannot tell you how many texts and emails. And phone calls. I've gotten from families and providers who are all asking. "Who is she and why is she and everybody's business all of a sudden?" And so I'm just curious if you are allowed to answer or you could add anything to that.

Leah Gibbs: I want to be careful about how I answer that question. I can tell you that it's a position that Zane hired. I honestly don't remember how long ago. But there's only one Zane and DDD continues to grow at a clip of five plus percent every single year. And when we're growing from a base of 54,000 members at a 5% growth. We have a lot more members with a lot more activity. We're hiring more staff. We're trying to adjust to those needs and there are certain issues that would elevate to Zane's office. And he has had to bring on board help because he can't do it all. And Rachel's position is there to help navigate when we need to make sure that there are multiple systems, that we're doing the right things, that we're following the right rules, that we are responding appropriately. And so she is kinda, I don't want to call her a right hand, She is another member of our leadership team. And that is her function, to help with those things. We're growing.

Diedra Freedman: Yep.



Cynthia Macluskie: Yeah, thanks. Thank you.

Diedra Freedman: Hi Jamie.

Jaymie Moore: Hi everybody. Can you hear me?

Diedra Freedman: Yes.

Jaymie Moore: Okay, I just wanted to speak about the policies a little bit from a vendor's point of view and also how it affects our Members in the group home. So, we just completed our new vendor contract which all of the vendors have been required to do, which was a very large and rigorous process. Once the contract has been approved, then we have to rewrite our policies and procedures. And that looks like it's going to be due, they'll be checking in some time around July. I am the one who writes the policies and procedures and it is a very rigorous job. I often have to do a lot of research in order to understand it, send many emails to DDD, the vendor provider email, to ask questions.

**Jaymie Moore:** And often the answer is ambiguous and the issue that I have with that is that when those policies come up in a member meeting, in one of their pcsp meetings, and nobody has the answer. So I started emailing. I continue to get an ambiguous answer.

Jaymie Moore: So I just wanted to bring that up. And then also, when I do write the policies and procedures when something is ambiguous, I'll reach out. I don't get much help and then when I submit my policies and procedures, we will receive the highlighted areas back in an email that are not approved and we don't get any information as to why it wasn't approved. So I'm kind of just like I don't know how else to describe it but kind of like trying to find the answers in the dark because there's no answers for me, which really in the end. It affects the members because I don't have the answers for them and I'm trying to create a policy out of something that's not solidified information. I'm not saying that all of the policies are like that, I'm saying many of them have been.

Diedra Freedman: Hey, Jaymie. The one piece of advice that I can give you is, if it's policy interpretation regarding a specific member, that's when you send an email to Joan McQuade because she's the, it used to be called, Chief Advocate. I don't know what we're calling her now, but send it to Joan when it involves an individual member. It can't be just interpretation of the policy for everybody. But if it's interpretation of the policy for one specific member, and you ask Joan to get you an answer because it is going to affect the quality of life for that individual, Joan's boss, Leah Gibbs, who is the OIFA administrator...

#### 01:00:00

**Diedra Freedman:** Will make sure that Joan is empowered to get that answer because the OIFA office doesn't like to leave any members hanging. Am I

Chat Message: Joan McQuade: JMcQuade@azdes.gov

Cynthia macluskie: Thank you for your email.



Joan McQuade: Jaymie, I just put my email in the chat.

Jaymie Moore: That's great. I'm driving right now. Is it possible for somebody to send me her email?

Because I don't know if I'm gonna still be on the call.

Diedra Freedman: Yeah, Michelle's going to send it to you.

Joan McQuade: Michelle will send it to you.

Jaymie Moore: Okay. Thank you.

Jaymie Moore: Thank you so much. I appreciate that.

Diedra Freedman: And just so you know.

Diedra Freedman: Just so in the chain, Joan is Michelle's boss.

Jaymie Moore: Okay. Thank you.

Joan McQuade: She'll get it to me.

Leah Gibbs: And I'm actually Joan's boss's boss.

Diedra Freedman: That's right.

Joan McQuade: Yeah. There's somebody in between us.

Diedra Freedman: That's right. I'm sorry.

Jaymie Moore: Okay.

Joan McQuade: I call Leah my grand. She's my grand boss.

Diedra Freedman: But anyway, Joan...

Jaymie Moore: Thank you. Ladies.

**Diedra Freedman:** In my personal experience. Joan is very helpful. But you have to have a specific member that she's inquiring on behalf of, otherwise the doors are not going to open for her. Remember how. You weren't here when we were talking before we got on the record,...

Jaymie Moore: Yes.

**Diedra Freedman:** But we talked about people who are really good at stretching things and backdooring things and Whatever needs to be done for the member.

Jaymie Moore: mmm



Diedra Freedman: Joan is one of those people.

Jaymie Moore: That's good to know. Thank you.

Diedra Freedman: The reason she works for Leah.

Diedra Freedman: Anybody else have any policy comments?

#### <u>Discussion, Review, and Possible Action regarding any policy issues of</u> <u>concern to IOC Members including requests for education presentations for the new year.</u>

Diedra Freedman: Are there any presentations that anybody would like between now and our May meeting? Michelle is working on getting us a couple. We had asked for the team from Arizona Disability Rights, whatever the former Arizona Disability Law Center is now calling itself. We had asked for them to give us the same update that they gave to the Developmental Disabilities Planning Council a few months ago on the monitoring project that they're doing regarding group homes and individuals with serious behavior issues and they've yet to tell Michelle, despite her best efforts, when they're going to be able to do that presentation for us. And then we've got Our good friend Jeffrey Yamamoto who is now the DDD liaison with the Division of Child Services. He's going to come and give us an update on what he's been doing since he got thrown into the Shark Tank in July with his new job after he left us.

**Diedra Freedman:** We don't want to put him on the hot seat, but we want to hear the improvements that he has been making with the DCS DDD liaison and the system improvements that they've made. So we're waiting to hear when Jeffrey will be available to do that presentation for us. Did we say August, Michelle, for Jeffrey? Have we come up with a date for Jeffrey yet?

Michelle Rademacher: Let me check because I want to say it might have been August. One moment.

**Crystal Fox:** Whatever happened with that group that AHCCCS hired to do the surveys and everything on the crisis system for intellectual disabilities. Whatever happened with that?

Michelle Rademacher: Are you talking about Jon Myers group or are you talking about?

Diedra Freedman: Yeah, she's talking about Jon's group that Cynthia was involved in.

Cynthia Macluskie: Hello. It's not Jon's group.

Diedra Freedman: They just paid the bill, right Cynthia.

**Crystal Fox:** I don't remember the name Jon.

**Cynthia Macluskie:** So I'll tell you where we're at with it. It's basically based on Diane Davis Wilson and my work over the last 10 years. Then Erica, before she left, wrote The Crisis report for us.



01:05:00

**Cynthia Macluskie:** Arizona Developmental Disability Planning Council has been helping us and funded a survey for us.

**Crystal Fox:** No, this was a group from out of state. Yeah. Where's that?

**Cynthia Macluskie:** That's the START. Yeah, we were gonna have the START present weren't we. But I'll just finish with ours.

Diedra Freedman: Yeah.

Cynthia Macluskie: I don't think the survey, I wasn't thrilled with our survey. I think it could have been better. But we did find some interesting information and you are going to see another report come out just on some of the improvements we've found in the crisis system and then things that have not been addressed yet and I don't believe START is going to address it either. so It's nice that AHCCCS and DDD and everybody thinks that's such a fabulous program, but it doesn't solve the one thing that I don't know that anybody can solve, which is if you are an individual with IDD, And you can't ask for and agree to accept help. And you're having behaviors that could be considered confrontational or disruptive. Crisis will call law enforcement and...

Diedra Freedman: Yeah.

**Cynthia Macluskie:** That's the issue that we would like to see fixed, has not been addressed, except to say Solari admitted that what we see is actually true. And so there's a lot of work that still needs to be done around that specific issue.

Crystal Fox: Yeah. That and that and...

Cynthia Macluskie: So that's really our group.

Crystal Fox: that we have to send everybody out of state because we have no facility that treats.

**Cynthia Macluskie:** Yeah, or how about that CBI is completely inappropriate for any of our members and yet the only thing you have. And even CBI says they're not the right place for IDD members and...

Crystal Fox: People, anybody.

**Cynthia Macluskie:** Yet somehow we think that they are. So they're still serious issues that I think need to be addressed in the Crisis and Diane and several of us have been working on Crisis for over 10 years. and we have seen some improvement in some areas, but the biggies are not easily solved and on a nationwide level, are also not solved. If there was a state that solved it, we would love that but We haven't found one.

**Crystal Fox:** Yeah, no DDD needs to have their own crisis system within DDD that you call, which I know would be costly, but they need to be trained in both. That would be the only



Cynthia Macluskie: What that was suggested was that, and I think in the past Leah's talked about this, that there were DDD mobile units. Those were drastically reduced. They were suggested at the Capital again last week and I'm not a fan of that because we are not the state of Maricopa. We have a rural State and everybody deserves care. And so whenever people come up with the solution of, we can afford to do this in Maricopa County, it really irritates me because it doesn't address the issue Statewide and the only thing that I've seen to be more effective is Scottsdale's crisis teams. Scottsdale's police CIT trained officers going out with social workers. But that is a special Grant. I don't know how we would get that grant for every Police Department, so it's complicated.

**Diedra Freedman:** That's the way it was done 40 years ago in New York, Cynthia. And that's the way it's still done in New York. So

**Cynthia Macluskie:** Yeah. It works very well in Scottsdale. It's like getting that funding to make that happen, especially in the rural areas.

Cynthia Macluskie: I mean when you look at Scottsdale, I think they have either 65 or 70 percent of all officers CIT trained. And then you look at the City of Phoenix Which is less than 15%. The national goal is 25%. And Phoenix is down over a thousand officers. So it's hard to keep their training up when they're short officers and then when they train them they leave. So I mean it's a complicated issue that I think everybody cares about but there's this issue with IDD people not being able to accept the help and...

#### 01:10:00

**Cynthia Macluskie:** not be the ones asking for the help instead. It's the parent calling usually or the group home and then and then if they have any kind of destructive Behavior at all in any way, then it's always law enforcement that called. so It's upsetting. I find the systems to care about it too. It's not If they don't care. There's not an easy solution.

#### **DDD and AHCCCS Policy Notification Review and Discussion**

**Diedra Freedman:** Okay, do we have any other policy issues? Anything that we want presentations on for the upcoming meetings?

#### **DDD Staff updates**

Diedra Freedman: And we're ready to move on to our DDD staff updates. Michelle, you want to take over?

**Michelle Rademacher:** Okay, Diane did you happen to have an update tonight? And I hope your internet is doing much better.



Diane Kress: Yes, we certainly took care of that immediately. So I apologize for all that colandering mess up. But thank you. Yes, so I have just a couple things from the last IOC meeting. I know Michelle, you had sent me some information and it was discussed or brought up about the reports, wanted to ask if that was anything that DDD or just in QA reviewed and yes, we do review those reports a monthly and so they're looked at a higher level again with all of the different I guess types and categories that incidents. It is tracked and Trend. We also do look at a district level. And so we do review if there's anything that's tracking Trend and if we see any type of a trend. We do follow up and do unannounced visits to those different locations or the group home or ADH homes. So I did want to let you know that we do review those. We also do make from a higher level, I guess systemic. I know I think that was mentioned, That we will do those unannounced visits to those settings and follow up with those incidents. We also, yes.

**Diedra Freedman:** So Diane, are you able to do a presentation for us on the new incident report? I mean, I know you can't do a presentation for us on the AHCCCS database system because you're not hooked up to the AHCCCS database system yet, but can you walk us through the new incident report and what you're tracking and trending and...

Diedra Freedman: how you're tracking and trending it.

**Diane Kress:** That I can do. So I did ask that and we did do a presentation early in February to, I think, the HealthCare system. So I could certainly grab that presentation and send it with you guys, kind of give you a little overview that we had shared with that group. So I'd be more than happy to do that.

Diedra Freedman: Can we put you on the schedule for next month to do that presentation for us?

Diane Kress: That would be fine if that works with Michelle. And yes, I'd be more than happy to do that.

**Diedra Freedman:** And then when DDD is actually hooked up with the AHCCCS database system, you can do a follow-up for us and walk us through that.

Diane Kress: Are you talking about the portal, correct?

Diedra Freedman: Yeah, eventually.

**Diane Kress:** Yes. I was gonna lead into that. We still don't have any update at this moment as far as when that we will transition. Again, there are things that we're working on because we've dealt with FOCUS for how many years. That seems to be part of the transition pieces that kind of, have a few extra pieces that have to be done so

Diedra Freedman: God help us that you don't hire WellSky to do that transition,...

Diane Kress: I don't know Leah,...

Diedra Freedman: But that's my personal opinion.



01:15:00

Diane Kress: you might have the answer for that but

**Leah Gibbs:** What I do know, Diane, and I've talked to Carl about it and Carl as you know oversees our quality Department here in DDD. That when the time comes that we start talking about transitioning to the portal, there will be training for all IOC members around that and certainly we can wrap that around with you, Diane, to share in that training, but we don't have a date, De. We don't have a date. Yeah, I know,...

Diedra Freedman: Yeah, I know But we want Diane to do it for us.

Leah Gibbs: Yeah, I know you know.

Diedra Freedman: Yeah, good report, right?

Leah Gibbs: I hear I'd like to say as long as she's comfortable. I'm fine with that.

Diane Kress: yeah.

**Diedra Freedman:** We don't want to get you in trouble with the powers above you Diane, but we're comfortable with you. So. We would want you to do it.

Diane Kress: Thank you. I will certainly let them know. Thank you for that. I guess let me see on my list here. We've got that. I mentioned last month that we were looking at a quality supervisor position that had opened because they had retired. I wanted to let you know that we do have someone that will be starting April 1st. Her name certainly is very familiar, and I'm so glad to have her back. Delorah Grant will be coming back as the quality supervisor.

Diedra Freedman: wow. Delorah's coming back.

Diane Kress: So yeah. Dolorah's coming back so couldn't pass up that opportunity.

Diedra Freedman: Okay. Cynthia

Diedra Freedman: Anybody DDD District West who has an issue?

Cynthia Macluskie: Yes.

**Diedra Freedman:** Before you send an email to Joan, send an email to Delorah Grant. Actually Jaymie is the one I should tell.

Cynthia Macluskie: Okay.

**Diedra Freedman:** Jaymie, send your email to Delorah. She'll help you if it involves a specific individual. And if Delorah can't help you Joan will help you.

Jaymie Moore: Thank you.



**Diane Kress:** We will work together. I know that it's kind of a role reversal. So she's again excited to come back as a supervisor.

Diane Kress: So it's again.

**Diedra Freedman:** For those of you who do not know, Delorah Grant is old school and has as big as Arizona and a commitment to the DDD District West members and other DDD members to match the size of her heart. She's one of those people who knows how to navigate the system. I don't know how quality got her back and Leah didn't snap her up because she fits right in with Leah's crew. But we love Delorah Grant.

**Diane Kress:** Yeah, she might have an opportunity to do that as well. So, again she does have a big heart. but we are very very excited to have her come back.

Leah Gibbs: It's true.

**Diane Kress:** So I lucked out because again there I shared with my team just within the month of February. We had entered just for our district over close to 900 incidents and that's a high volume just within just our district. We're already almost at 600 and we're getting close to finishing March. So that's a lot of incident reports, but

Diedra Freedman: You also need to put it into perspective. We are the largest District in DDD. so.

**Diane Kress:** Yes, We have the largest geographic area. I believe District East has the highest member. I believe we are second now, used to be Central. so times have changed and

**Diedra Freedman:** right Yeah, but that geographic area. means that we have more rural stuff than East district. so

Diane Kress: Yep, we do. We have the largest I believe more group homes too. so

Diedra Freedman: along with prisons

Diane Kress: That's a whole other conversation. I will.

Diedra Freedman: But that's all for us, Diane?

Diane Kress: No, that's all I have De. Thank you so much. Are there any questions?

Diedra Freedman: Who's next Michelle?

Michelle Rademacher: Thank you, Diane. Joan would be next please.



Joan McQuade: Hi again, everybody. We have a new staff. We have an old staff, new staff too, but it's one of our contractors that is now becoming a full-time state employee as a redactor. And she's starting. April 1st seems like it's the big day. And as long as when all these folks show up, nobody says April fools, it will be good but she'll be starting on Monday. And also we're going to be getting a fourth redactor because we've been dealing with a backlog of incidents. We're wanting to be able to get everything out to you as quickly as we can.

#### 01:20:00

**Joan McQuade:** So I'm in the process of getting a contractor in to assist until we get ourselves to a position where we're in good shape. And that's really the only update that I have today.

Diedra Freedman: Okay, who's next Michelle?

Michelle Rademacher: Okay, it's Leah, the best for last.

Leah Gibbs: We won't say best, but we will say last. Hi everybody. So I want to give you some update on where we are with some of our ARPA projects because I keep reporting out that we are providing training to the behavioral health agencies in best practices and supporting people with IDD and I have some statistics that I know they're getting to be about a month old, but I want to share with you what I have anyway. So we've talked about that we're rolling out the training through the Relias platform. And there have been as of the end of January, 47 Behavioral health individual agencies that have enrolled one or more staff into the training. We've had 2029 individuals complete one or more of the courses that are part of that 12 course library that we've identified for behavioral health professionals supporting people with IDD. And 13,115 courses have been completed. We also continue to offer a weekly. It's a virtual led training that is co-trained with our Behavioral Health Administration here in DDD and an OIFA staff person around DDD, our relationship with our health plans, the relationship in supporting people with their behavioral health needs. And we've had 1,127 individuals complete that training. The team that is doing this work is also planning two conferences for behavioral health professionals. One conference will be in May and it'll be in Tucson and one in September in Phoenix. They have themed the conference, "Bridging the Gap for individuals with IDD and Behavioral Health needs". The target attendees are going to be the behavioral health provider agencies, their supervisors, counselors, case managers, peer and family support Specialists, Behavior coaches and others who interact with and work with our DDD members. The Phoenix conference is also going to have an extra day to it and it is going to be including a track for medical professionals as well as Behavior analysts. At this point in time...

Diedra Freedman: Hey Leah,...

Leah Gibbs: Yeah.

Diedra Freedman: Can I just ask you a question about this?

Leah Gibbs: You bet.



**Diedra Freedman:** I'm assuming, and you can tell me if I'm incorrect, that you are doing that in partnership with United and Mercy Care.

Leah Gibbs: Absolutely. We are yep. And then we have also been able to work with the organizations in order to ensure that people who attend will be eligible for continuing education credits for attending the conference. So Those are all rolling out and we're staying very busy at that. And then the other ARPA project is the ARPA Positive Behavior Support project. We have been providing train-the-trainers to qualified vendor training staff to be certified to deliver that training to the direct support professionals who work for those agencies. We started mid-January. And as of last week, we have over 420 individual trainers certified to go out and provide that training. We continue to support Raising Special Kids who are providing that training at no charge to family members, caregivers, and interested IOC members who would like to take it. They are providing the training. It's a full eight hour day, but they're breaking it up and Raising Special Kids some months. They're doing it in two, four hour segments and other months they're doing it in four, two hour segments to try to accommodate families to make that training. And Raising Special Kids is also providing a weekly drop-in technical assistance opportunity for anyone who's completed the training. That is not just limited to family members, but any direct support professional or...

#### 01:25:00

**Leah Gibbs:** Even people who've been certified to be trainers, if they want to come in and have a dialogue to be able to answer questions and provide information, those drop-in sessions are available to them.

Diedra Freedman: Hey Leah, Are those only in person or...

Leah Gibbs: they're virtual. Yeah. ...

Diedra Freedman: are they? Okay.

**Leah Gibbs:** The train-the-trainer, we are requiring those to be in person. But we are traveling the state to make it available to people who live outside of Maricopa County and so we continue to do that. We ended up adding more training classes because of the interest and the response rate. So we have classes scheduled until the end of April and then we will assess at that time what the need looks like and we will add more classes as needed. For purposes... Yeah.

Diedra Freedman: if you are speaking of the rural areas.

Leah Gibbs: oops, you went on mute De.

Diedra Freedman: Sorry about that. Have you partnered with NARBHA?

Leah Gibbs: Sorry. We do a lot of

Diedra Freedman: The NARBHA Institute if you guys partnered with them



**Leah Gibbs:** I can't tell you that directly I can tell you that we are very much connected to the northern Arizona Peer and Family Coalition and... I would want Christina to answer the question about NARBHA because I don't feel comfortable answering that.

**Diedra Freedman:** It's just a great way to connect with Behavioral Health Providers up north even though. Even though whatever the plan up there is. It's now owned by Blue Cross Blue Shield.

Leah Gibbs: right

Diedra Freedman: They still have the NARBHA Institute going.

Cynthia Macluskie: Health Choice

Diedra Freedman: so they

Leah Gibbs: there's also Blue Cross Blue Shield up there too. Yeah.

Diedra Freedman: Right, but Health Choice.

Cynthia Macluskie: Health Choice is owned by Blue Cross Blue Shield. We have a new RBHA up there.

**Diedra Freedman:** Right, but Health choices has taken over the NARBHA Institute and administration. So even though they're not the RHBA up there anymore, they're still well connected with Behavioral Health Providers. and their Last I knew their medical director up there is still Dr. Carol, who's also affiliated with the NARBHA Institute. And he used to be with AHCCCS and he's a big supporter of Behavioral Health Services. So I am sure...

**Diedra Freedman:** That he would be excited to partner with you and get the word out regarding the PBS program and also the virtual trainings that you have available to AHCCCS registered providers.

**Leah Gibbs:** Really appreciate that very much and I'll talk to Christina and we will do some Outreach there. Cynthia, you have your hand up.

**Cynthia Macluskie:** Yeah, I um, two questions. One is super excited about the event that you're doing in Tucson and up here. And I'm wondering if I can get some information about being a vendor. We're gonna "Be Safe" Kind of train-the-trainer next February and we're looking for 50 people to train, preferably people that work with DDD population, preferably in the rural areas and so we want to get the word out and I feel like behavioral health professionals would be perfect individuals to do this work. So I think it would be a great opportunity for us to sort of advertise "Be Safe". And get people interested and So any information that you could share with me about.

**Leah Gibbs:** I appreciate that. My amazing colleagues, Ian and Wendy, are on the call tonight and they have those direct contracts with those Behavioral Health agencies and have systems in place about sharing information so that when you're ready and have a flier or information we can actually share it with them who can share that out and get it. I don't mean to speak for you both, but I hope you're okay.



**Wendy Herring - OIFA Mercy Care:** I just unmuted. I got so excited. And I'm very usually very talkative, but I'm cutting out little bunnies for this event I'm going to. So I wasn't but I was paying attention. But I heard that. Could you put your email in the chat, Cynthia and...

Chat Message: Cynthia Macluskie: cynthia@cmacinsurance.com

Cynthia Macluskie: Yeah.

01:30:00

**Wendy Herring - OIFA Mercy Care:** then we'll connect. And I will connect with you because I have this meeting all the time and I know Ian does as well so we'd love to share that information. Thanks, Leah.

Cynthia Macluskie: That is awesome. I just did it. And then yeah,...

Wendy Herring - OIFA Mercy Care: awesome

**Cynthia Macluskie:** Are you letting people be a vendor?

**Diedra Freedman:** Hey, Cynthia, before you go further, explain to Wendy this isn't the job you get paid to do. This is your volunteer work at Autism Society of Greater Phoenix, the godmother of "Be Safe".

Cynthia Macluskie: Is there a difference?

**Diedra Freedman:** Even though you favor your business email address.

Cynthia Macluskie: Yeah. I give you business email because I don't always check my personal every day, but I check my business every day. And "Be Safe", I've been doing for many years. It's like my baby. I'm super passionate. We started it when an individual was shot and killed in Mesa. And so the whole goal of the program is to work with IDD people to teach them how to interact safely with law enforcement and then Because we need law enforcement to help us do that training. It actually trains law enforcement and it builds communities and it's saved lives and Arizona Complete Health gave us a \$25,000 grant to Train 50 trainers in Arizona to keep this work going.

Wendy Herring - OIFA Mercy Care: okay.

**Cynthia Macluskie:** So would love everybody's help and I was just thinking if you had a vendor table or something Leah. No.

Leah Gibbs: Cynthia I'm not directly involved, I'm reporting to you but I'm not involved in the conference. ...

Cynthia Macluskie: Got it.

**Leah Gibbs:** Dr. Suzanne Arnold, you've met her before I think, right?

Cynthia Macluskie: Yeah, even the capital actually the other day.



**Leah Gibbs:** Yeah, she is the one who's overseeing that particular project. I have the PBS one. She has the other one. Okay.

**Cynthia Macluskie:** Okay, and then my other question was are you doing the DDD conference for families again this year or not?

**Leah Gibbs:** Yes, ma'am. I will be, but it's not been publicized yet because I'm still working with business Ops to get the funding available to pull it off, but Zane has asked me to do two this year, one in Tucson and one in Phoenix. And I do plan to do that.

Cynthia Macluskie: Here, let's say.

Leah Gibbs: I don't have a save the date even, I've got to get the funding and then I've got to get the venue and the date and then I'll have a date but I am aiming for fall just to let you know. There's a lot going on. And it takes a long time to plan that. I want to do it right, but I'm gonna do it. Okay, so if you're okay, I'd like to keep going about where we are with PBS. So in our Positive Behavior Support training, we have been collecting data on people who are taking classes, not only the trainers, but the qualified vendors who are training their staff are having everyone complete a pre-assessment and post assessment So that we can measure how much people improved and how much knowledge they learned from the training. We're also doing a post training survey and we are planning a three month post assessment for people who are the trainers to make sure they're retaining that information. So that we're doing spot checks to make sure that we know people are doing what we need them to do. Go ahead De.

**Diedra Freedman:** Yeah, you're collecting that data. Are you going to have the quality team be looking at numbers to see if incident reports are down and there's improvements in quality because of the PBS training?

Leah Gibbs: We are doing a lot of different things around it and part of the challenge is, just to let know, that when there's an incident report, we don't necessarily know that individual received PBS, that staff member had PBS training or not and we don't want to measure it in a way that the vendor Community gets the wrong impression and we don't want people to not report. So we're being real sensitive about that. But another data point that we are looking at is for members who have Behavior treatment plans. Where we have certain agencies who are working with us here that we're going to be doing a six-month preimposed for the number of incidents of Target behavior for a particular member knowing their staff are PBS trained and the incidents of that Target Behavior six months later so that we can try to see some definitive data associated with that. We're struggling to be perfectly honest. There's a big team who's meeting around data analytics and having the right messaging and getting the right data to demonstrate the value of this training. but I continue to be very, very excited about it. I'm sure you can kind of tell. And then my other topic, I wanted to share with the committee that I am just incredibly excited about is that we have hired another new position to join our OIFA team..



01:35:00

**Leah Gibbs:** And this position is going to be dedicated to doing Outreach to crisis and First Responders around best practices in interacting with people with IDD. We're going to be partnering with Solari for their staff.

Leah Gibbs: We're going to be working with AHCCCS and their team to develop training and to go out and do that training around the state and we have a person that I just hired who I don't want to scare her away, but I'm so excited. She has experience in working in Police Department, in working in juvenile justice, in working in the court system, as well as a social worker here with DDD. I think it's like if I were to say please pour me the perfect person. I'm really excited about her background, her energy and everything else and she's gonna be starting with my team the first of April. It's gonna take some time to do our research and development and build the training but we are thrilled to pieces to be able to have a dedicated staff for that purpose. And thank you Zane for his ongoing support of the vision of what we want to build. He's been wonderful.

Diedra Freedman: Okay, Leah you have one more update. You have to give.

Leah Gibbs: Darn, what's that?

Diedra Freedman: what's that lunch that I have to go to next month because we all

**Leah Gibbs:** Have to? I figured Michelle was going to do that update.

Diedra Freedman: All right.

**Leah Gibbs:** I was going to save that for her and...and think of it as a wonderful opportunity to celebrate you, rather than have to.

Diedra Freedman: All right. We'll have Michelle.

Diedra Freedman: No, I owe Richard.

Leah Gibbs: That's true. So those are my updates on this. Does anybody have any questions? Thanks,

Michelle.

Diedra Freedman: Okay, Michelle, who's next?

Michelle Rademacher: We have gone through the DDD staff update.

Diedra Freedman: Who's next?

**Michelle Rademacher:** And we'd be looking at either health plans or Larry.

#### **Updates from Integrated Health Plans & AHCCCS**

**Diedra Freedman:** Why don't we do the health plans and we'll do Larry. Hey Wendy, welcome, We're putting you on the hot seat.



Wendy Herring - OIFA Mercy Care: Thank you. I love that. I was born in the hot seat. I don't have anything. But to say that I, Tyson's usually here and he had a conflict. So I'm here so he may be back. But to be honest I kind of want to come back because I really enjoyed the energy and spirit and dedication and I'm not just saying that, that's actually from the heart and it was a terrific meeting. So if you would all just jump me in, vote me in that's good.

Chat Message: Wendy Herring - OIFA Mercy Care: wendy.herring@mercycareaz.org

Diedra Freedman: Cynthia

Cynthia Macluskie: I just wanted to give Mercy Care a shout out. We had an individual who's Aug. Com. device was confiscated by a SNIF and they even had the gaul to have a written policy that gave them permission to violate this person's civil rights. I'm grateful to Mercy Care for A. leadership being available on a Saturday to let me notify them what was happening for the quick resolution for that member. And I love the partnership that we have with both United Healthcare, Mercy Care, you guys do a great job. And so do you, Leah.

Wendy Herring - OIFA Mercy Care: But he is awesome. Thank you. I'll take that back.

Diedra Freedman: Hey lan.

**lan Wilson UHC:** Yeah. Thanks. Thanks too. Nothing for United Healthcare, but I'm happy to take any questions.

**Wendy Herring - OIFA Mercy Care:** I always forget the questions part, Ian. So thank you for reminding me of the questions part.

**Cynthia Macluskie:** I have a question and Ian I don't know if you can't answer it, Which is maybe you can't but I know that there is an issue with being able to verify Medicaid with the health plans. And I know that there's been some issues with people getting prescriptions filled due to the data breach with Change Whatever and...

#### 01:40:00

**Cynthia Macluskie:** So I'm just curious if you feel that's affecting our United Health Community members in Arizona. And if you feel like that's been resolved or if you have any information.

lan Wilson UHC: To speak to it specifically, Cynthia. I know that most of the Change Health Systems that had been affected by the data breach have been or are currently being brought back online. To speak specifically to Arizona members, I can't say whether or not they have been affected in a negative way, but I don't expect any significant changes. At least to their detriment moving forward and that's all I really can say without guessing.

Chat Message: Ian Wilson UHC: ian.w.wilson@uhc.com



**Cynthia Macluskie:** I understand you saying anything because I know it was a loaded question, and so I appreciate your answer.

Ian Wilson UHC: Absolutely.

Diedra Freedman: Hey Leah.

**Leah Gibbs:** Hi Cynthia. I wanted to share that as you know, as you come across any individual member that's experiencing a challenge. You're really great about escalating that and you can escalate it through us or through lan or whomever you need to.

lan Wilson UHC: Yeah, absolutely. Thank you for saying that as well. Yeah, of course Cynthia, that's always.

**Cynthia Macluskie:** And I'm getting excited because you're gonna be getting an email from me to him tomorrow morning about some member issues and you not simply United, but definitely a pharmacy issue that still needs to be addressed. And I am so grateful that you guys are always willing to accept my emails.

Diedra Freedman: Just make sure you're CCing Joan.

Cynthia Macluskie: Okay.

**Leah Gibbs:** And Cynthia, I don't know if you're aware that DDD has a pharmacist on staff who also works with the health plans?

Cynthia Macluskie: Good, Maybe you can boss around a certain company and make them behave.

**Leah Gibbs:** I Try Not to boss people around, but we'll watch for any emails.

Diedra Freedman: All right, Leah, I forgot to ask you before but I'm wondering, Is there a way that we can actually get an org chart for District West? We have it for DDD, but we don't have it for District West. It's available on the DDD website, but it only goes are you

**Leah Gibbs:** There is and it's a really high level org chart on the website.

**Leah Gibbs:** I don't know the answer for that. But Michelle, if you could make a note of it, we can certainly contact Mary Demery and ask about it.

Diedra Freedman: because you don't want me to have to ask for a motion and then we get a question

Leah Gibbs: I'll just ask Michelle to ask and remind me and I'll follow up with Mary. Okay?

#### <u>Updates from Arizona Department of Administration</u>

Diedra Freedman: I appreciate it. So who's next, Larry?



Diedra Freedman: Did we lose Larry?

Lawrence Allen: Good evening. No, I'm here. How are you today?

Diedra Freedman: Hey, Larry.

Lawrence Allen: Yes.

Diedra Freedman: I have not done your training because I can't get into your system, Larry.

Lawrence Allen: the G email AZ learning?

Diedra Freedman: Yes.

Lawrence Allen: And they didn't help you or you're...

Diedra Freedman: waiting

Lawrence Allen: You're waiting?

Diedra Freedman: I'm waiting.

Lawrence Allen: That was gonna be my update today is the committee members who have not completed

the training. Please do so.

Lawrence Allen: There's just a few of you haven't done yet. So.

Diedra Freedman: And my next question for you, Larry: Why are the last four numbers of my social security

number part of my number for the training?

Lawrence Allen: no idea

Diedra Freedman: Yeah, I didn't appreciate that at all.

Lawrence Allen: Okay.

Diedra Freedman: So, how do we get that change?

Lawrence Allen: I don't know De.

Diedra Freedman: All right. I only say that because we discussed it at the last meeting and I made it clear that I hope that that wasn't the case and it is the case. Especially after we've just talked about the Change

HealthCare data breach. So I don't mean to give you a hard time Larry. It's just reality.

Lawrence Allen: No problem.

Diedra Freedman: Okay, sorry.



Lawrence Allen: Thank you.

01:45:00

Diedra Freedman: Do we have any other updates or is that it?

Lawrence Allen: No, that's it.

#### **Updates from DDD IOC Liaison**

Diedra Freedman: Hi, you're it, Michelle.

Michelle Rademacher: Okay, so I have your metrics information.

Michelle Rademacher: As Diane was talking about the incident reports. I've got specific numbers for what we sent in February. What was loaded for the committee to review in the shared Drive was a total of 805 redacted incident reports. This included 53 open and 752 closed reports. Also as you had prefaced earlier the Volunteer appreciation luncheon is approaching. That date is April 24th. However, the volunteer coordinators would love it if they could get an RSVP by April 10th. Let me know if you did not receive the invitation. It comes as DDD volunteer appreciation event email. And there's a form to fill out. The volunteers would love it if you could fill out the form, even if you're not going to attend, the reason being is they're looking to make sure they can have your mailing Address confirmed so that they can send certificates out if you're not going to be present for the luncheon.

Diedra Freedman: Hey, Michelle.

Michelle Rademacher: yeah.

Diedra Freedman: I am asking everyone, Except those of us who are employed during those hours and can't get out of it, AKA, Brad, And I don't know about Jamie. I'm asking everybody else to please if you can possibly show up. I consider it a personal favor because we need to recruit more of us. So we need to show support for our volunteer coordinators. And we need to work on strategy to get more members. We got to figure it out because the six of us just aren't making it. So we should have 15 people on this committee. There should be no excuse. So if Wendy and Ian know of anybody who would be appropriate. We would love them. We're nice people. We don't bite sometimes. But whatever we can do to get more members, we have to work on it because we are not reading the incidents we should be reading and only Crystal is attending PRC on behalf of all of us. So we should have at least three members attending PRC, but when there's only six of us, that's not possible. There should be 15 of us and if we can get to 15, Then I get to say adios and retire which would be nice because I've been doing this five years. As has Brad and Cynthia.

Crystal Fox: You can't retire. And he's not retiring. That's a joke.

Diedra Freedman: The other thing that we need to talk about is we have no Vice chair. So somebody's got to step up and volunteer to be Vice chair



Cynthia Macluskie: Brad, Brock

Wendy Herring - OIFA Mercy Care: Ever I have a brainstorm. So my brainstorm and...

Diedra Freedman: Sure.

Wendy Herring - OIFA Mercy Care: I didn't like, out myself at the beginning, of what my street cred was but I worked for DDD as a support coordinator way back when. And I have a son that lives with autism who's 27 who is terrific and cool. But I'm also the mom who doesn't like it when my support coordinator comes in the house and we've had 25 of them and he's only 27 so do that. But I wonder out loud, so that was my street cred. But I wonder out loud, if and before I came to OIFA, I've only been in this role for a month or maybe six weeks. I don't know but I've never seen anything in my email about asking to volunteer as a caregiver. So what does that look like? I'm just curious.

Diedra Freedman: Yeah, I can, did you put your email address in the chat? Okay.

**Wendy Herring - OIFA Mercy Care:** I did. and this is just coming from my mom's lens and not, I'm just playing Devil's Advocate...

01:50:00

Diedra Freedman: Yeah, no. No, I appreciate it.

Wendy Herring - OIFA Mercy Care: because I've never seen anything.

Diedra Freedman: We need members with specific expertise.

Wendy Herring - OIFA Mercy Care: I was curious. I see. Okay.

Diedra Freedman: From categories, but here's the thing. Being a parent is one of those categories.

Wendy Herring - OIFA Mercy Care: Okay.

**Diedra Freedman:** So I will send you the information and if you have any friends, We would appreciate you putting in a good word for us since you attended our meeting.

Wendy Herring - OIFA Mercy Care: then that's terrific because again, I'm new to the system and these meetings and Maybe I don't know what questions to ask. So I guess it's good that I've asked the questions. Now I know and I am also native Phoenician so I know a lot of people. I know this is recorded too so now I'm in big trouble.

Diedra Freedman: Yeah, and you don't have to. You don't.

Wendy Herring - OIFA Mercy Care: Cynthia's raising her hands.

Diedra Freedman: You don't have to live in District West to be on DDD District West IOC.



Wendy Herring - OIFA Mercy Care: Okay.

Diedra Freedman: I'm going to out Cynthia who lives in Cave Creek. But Cynthia likes us.

Wendy Herring - OIFA Mercy Care: Okay.

Diedra Freedman: So that's why she don't.

Cynthia Macluskie: I do.

Wendy Herring - OIFA Mercy Care: That's beautiful.

Diedra Freedman: Besides the fact that I voluntold her, so she Didn't have a choice.

Cynthia Macluskie: It's true.

Wendy Herring - OIFA Mercy Care: Thank you for sharing that. I really appreciate it.

Cynthia Macluskie: Wendy, I got your email. And so lan, I want to shoot an email and I don't have yours. So if

you could put it in the chat that way I can connect with you both regarding "Be Safe"...

lan Wilson UHC: Yeah, of course.

Wendy Herring - OIFA Mercy Care: I shot you an email and copied De on it. Besides cutting out bunny

rabbits. I sent an email.

Cynthia Macluskie: thank

Diedra Freedman: sorry to hijack you Michelle, but I'm trying to get you.

Wendy Herring - OIFA Mercy Care: Sorry, Michelle.

Diedra Freedman: I'm trying to get you more of it Wrangle, Michelle.

Michelle Rademacher: No. right right

Diedra Freedman: I know that that's your goal in life to have more district West IOC members to have to

Wrangle.

Diedra Freedman: Because I'm sure.

Michelle Rademacher: No.

Diedra Freedman: You've been assigned to all of us, Michelle, not just me.

Michelle Rademacher: No worries, and you just jump in any time and that was very important information

and it's I think Wendy being with her experience and her time in the area this is a good connection.



**Diedra Freedman:** They are, problem is, I don't think Mercy Care will let her be an IOC member. Yeah, otherwise,...

Michelle Rademacher: No. But she knows people.

Wendy Herring - OIFA Mercy Care: It's true and I really am nice to my support coordinators.

Diedra Freedman: I would.

Wendy Herring - OIFA Mercy Care: I don't make them all be outside just the but. I don't know.

Diedra Freedman: Wendy it's okay.

**Wendy Herring - OIFA Mercy Care:** Which I was too. So I should be really kind and I am really a nice person.

**Diedra Freedman:** If you ever came to the Avondale DDD office. There's a dart board with my picture on it. After 17 years ...

Wendy Herring - OIFA Mercy Care: my that level but it's the

**Diedra Freedman:** Trust me I was there. And wasn't necessarily for my child. It was because I had awesome support coordinators for my child, but it was because I told all these other parents how to navigate the system.

Wendy Herring - OIFA Mercy Care: It's a really rough job. It was a beautiful job, but it's a hard job. So

Diedra Freedman: Do we have anything else, Michelle?

Wendy Herring - OIFA Mercy Care: all right.

Michelle Rademacher: Yes, the last thing I just wanted to bring up was that we do have a list of future topics For agenda and presentation specifically. So tonight, we knocked off the list because some things are going to happen next month. Diane's going to present a high level overview of the quality of DDD quality's incident reporting form. And next month we're looking at Frederica is going to help us with AHCCCS and presenters for Parents as Paid Caregivers. So the rest of the list we do have Jeffrey on here and I originally thought about April for him, but it looks like we are, April meeting is pretty full. We could do May if the committee wants; with the Justice Reach-in liaison was what was proposed for August. And then we're still working on Disability Rights Arizona for the group home monitoring pilot program. We're still kind of tying that up because they sort of want to present at Statewide. I do have Anne Klein and a discussion on the START program on the list as well.

01:55:00

Diedra Freedman: Yeah.



**Michelle Rademacher:** And then I also have Christina Hedges. Last time you had her here you thought, I believe, I made notation that a presentation from her was desired regarding her behavioral health Advocacy work.

Diedra Freedman: Yes.

Michelle Rademacher: So it's just a matter of where we want to plug all these in.

Diedra Freedman: Whenever you can get them for us, Michelle. We're in whatever get them for us.

Michelle Rademacher: Then that list us.

Diedra Freedman: It's not due to your lack of trying. We understand it's through the scheduling and other

bureaucratic political issues

Michelle Rademacher: Then I will just make sure I keep the committee in the loop and I'll keep you in the

loop as these come together.

#### **Discussion and Review of Incident Reports and Behavior Plans**

**Diedra Freedman:** That's good. And it is 8:05. I don't think there's anything in executive session that we need to do. Are there any specific incident reports anybody wants to talk about or any specific behavior plants? So we don't need to go into executive session. Do you have any discussion and review of incident and behavior plans that we don't have to go into executive session for?

Crystal Fox: Naturally, we'll skip those today. Then I'm ready to adjourn.

#### **Adjournment**

Diedra Freedman: It's 8:06 pm. And when's our next meeting, Michelle?

Michelle Rademacher: The next meeting is April 23rd.

**Diedra Freedman:** So April 23rd Diane's gonna do a presentation for us. And our friends from AHCCCS hopefully are going to do the same presentation that they do in April 4th at the DDD town hall meeting, correct.

**Diedra Freedman:** It is 8:06 everybody. We brought it in two hours. We try because we started late. So thank you for your time. Those of you who celebrateEaster, have a great Easter and those of you who celebrate Passover, Have a great Passover. And the rest of you just Have a great month. The reason to party up.

Crysta Fox: If you're lonely, come down hang out at the Capitol with me.



Meeting ended after 01:57:54 W



For all of February 2024 IRs, the Committee members have been given a total of 805 incident reports in the Shared Drive. This included 53 open and 752 for closed reports.

Type	Open	Closed
Accidental Injury	1	98
Consumer missing	2	5
Deaths	3	2
Emergency Measures	0	7
Human Rights	6	16
Legal	2	0
Medication Errors	3	46
Neglect	17	60
Other Abuse	2	4
Other Behavior	3	306
Other Injury Unknown	5	193
Physical Abuse	9	12
Property Damage	0	3
Suicide	0	0
TOTALS	53	752

The IRs will be reviewed by the committee members.

Number of Questions for Quality Improvement Manager, QIM: 0

Members of the committee will comment on incident reports directly and the liaison will send them to QIM.

All PRC meetings are being attended by Crystal Fox.

Number of Behavior Plans turned in by IOC Members: unknown

The Program Review Committee (PRC): unknown