


ignite thoughts into action

spark



 Indiana Governor's Council
for People with Disabilities

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in this issue on
Community Living:
SERVICES



Young woman reaches out



Long-time friends fulfill dream



Olmstead sets the standard

in this issue on
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SERVICES

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spark is a bi-monthly publication of the Indiana Governor’s Council for People with Disabilities, an independent state agency that facilitates change. Our mission is to promote the independence, productivity and inclusion of people with disabilities in all aspects of society. This mission is accomplished through planning, evaluation, collaboration, education, research and advocacy.

Suellen Jackson-Boner
Executive Director

Christine Dahlberg
Deputy Director

Becoming a valued member of your community requires that you go beyond your front door and into the neighborhood, meeting your neighbors, participating in neighborhood association meetings, taking part in local arts fairs and helping to plan community events.

In the June–July issue of Spark, we introduced our three-part series on Community Living and explored the first step: finding and securing affordable, accessible housing.

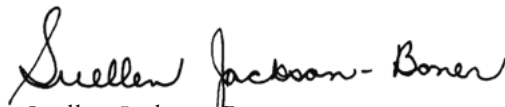
In this issue, we go outside your home to explore the community and determine to what extent the Americans with Disabilities Act (ADA) has been implemented, and what services and supports are available. By gaining insight into the “lay of the land,” both you and your neighbors can advocate for making the community more livable for everyone.

It’s also important to look outside the box of traditional services and connect with your peers for support. Building relationships and making friends within your community is invaluable – neighbors look out for each other and can be called upon when other supports can’t respond as quickly.

Throughout this issue of Spark, we’ll discuss what formal supports and services are currently available and the probable future of these programs. We’ll also shed light on informal supports and how to build a network – meshing various types of assistance and introducing cutting-edge concepts that could reshape how we live in the community – a community with life-long supports, available for everyone.

We hope the articles in this issue will inspire you to think of all the possibilities of what a society could be and how you can be a part of the conversation to shape your community.

Sincerely,



Suellen Jackson-Boner
Executive Director



A young woman reaches outside the box to achieve independence

Despite a medical condition that delayed her ability to walk as a child, Kiley Thompson, now 26, is taking all the right steps to achieve her independence. From the time she was four years old, when she was diagnosed with hydrocephalus – a condition that causes a buildup of spinal fluid around the brain, Kiley has confronted her disability with hope and determination to live her life without boundaries.

With help from her adoptive grandparents, Kiley has taken advantage of community supports and services to help her live her best life. Soon after her diagnosis, Kiley was enrolled in a program in her hometown of Marion, Ind., that helped her with daily living tasks and taught her how to walk.

Kiley continued to participate in local programming until the family

moved to Indianapolis, where she enrolled in Lawrence North High School. “Lawrence North has excellent programs and supports for people with disabilities, but once Kiley graduated, there wasn’t much out there for them to direct us to,” said Vicky Thompson, Kiley’s grandmother.

Then one day Vicky received a phone call from a former colleague explaining that she was forming Outside The Box (OTB). An Indianapolis-based nonprofit,

“She’s constantly learning, but there’s not pressure for her to perform at any certain level. She can just be herself.”

– Vicky Thompson, Kiley’s grandmother

OTB offers programming for adults with developmental disabilities while carrying out its mission to empower people with disabilities

to be the leaders in their lives and to create meaningful days.

“Outside The Box is Kiley’s life,” Vicky said. “It gives her something to look forward to, and she has lots of friends now. She’s constantly learning, but there’s not pressure for her to perform at any certain level. She can just be herself.”

Through OTB, Kiley receives art and dance classes and learns life skills like meal planning, cooking,

doing laundry and resume writing. Program participants are adults of all ages, who take part in volunteer activities,



Kiley Thompson, 26 years old, uses local programs and supports to actively engage in her community.

attend theatrical performances, take classes, visit parks and go shopping, among many other activities.

“I love going out in the community and being around people. I want to be out and live on my own. I want to be independent.”

– Kiley Thompson

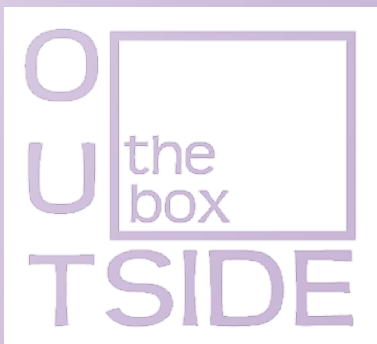
While Vicky admits OTB “fell” in the family’s lap, they have also worked hard to secure other reliable community-living supports. Kiley uses a transportation service to and from OTB, but the first company the family hired was not a positive experience. “They would arrive late or not at all, and they didn’t watch to make sure Kiley made it into the building,” Vicky said.

After seeking referrals from other parents, the Thompsons hired a new company and noticed an immediate difference. Kiley’s new driver is always on time and provides advance notice if delayed. “Kiley is very social, and she’s become friends with her driver, who takes her shopping and to

church services, even stopping for an occasional Burger King lunch,” Vicky added.

Kiley and her parents are also experiencing life on a Medicaid waiver waiting list. Kiley would like to live on her own in a supported-living home, but she is five to six years away from obtaining a necessary waiver. “Kiley deserves a life of her own,” Vicky said.

“I love going out in the community and being around people,” Kiley said. “I want to be out and live on my own. I want to be independent.” *



Creating meaningful lives

Helping people with developmental disabilities create meaningful days, meaningful careers and meaningful lives is the goal of Outside The Box. The nonprofit organization creates customized, individual services to help individuals with disabilities achieve their career and life aspirations.

Following career exploration and assessment, participants at Outside The Box work closely with staff in both individual and group

activities to learn and develop skills needed to achieve their goals. Activities take place both on-site and in the community, and depending on the participant’s needs, they meet three to five days per week.

For those participants who seek employment, Outside The Box assists with job development and placement, as well as provides services after employment is secured.

To learn more about Outside The Box, visit www.otbonline.org or call (317) 253-6658 (voice). *

Long-time friends fulfill a lifelong dream

Dennis Davis and Peggy Goldman have been best friends for 40 years – ever since preschool. Last year, together, they became first-time homeowners, fulfilling a long-awaited dream.

“We wanted to become homeowners because it was our dream since we were kids. We wanted to show everybody that a person with a disability can be just as vibrant as anyone else and can own a home and take care of it,” Goldman said.

“We wanted to show everybody that a person with a disability can be just as vibrant as anyone else and can own a home and take care of it.”

– Peggy Goldman, homeowner

The Partners in Policymaking graduates had been living in an apartment on Indianapolis’ south side when they began considering homeownership. “We took a shot in the dark and contacted Habitat for Humanity,” Goldman said. “They sent a lengthy application, and we didn’t think we had a chance. We really thought we would be denied.”

Much to their surprise, Goldman and Davis were soon approved for a Habitat home, and the friends enrolled in the program in January 2009. Extensive paperwork and

in-depth preparatory classes quickly followed, all aimed to prepare them for the responsibilities of homeownership. Goldman and Davis have already taken more than 30 classes each, with additional courses scheduled for the coming months.

Classes and paperwork aside, the friends were also extremely involved in the design and construction of their new home. “We helped design every inch of the house, so we knew exactly what we were getting before

moving in,” Goldman said. Because both Goldman and Davis use wheelchairs, the house was designed with their accessibility and specific needs in mind. They participated in “driving tests” where they maneuvered their way through hallways and bedrooms during construction, determining if widths needed to be adjusted. The house is also equipped with concrete walkways constructed at specific angles in place of entrance ramps.

The friends, along with their pet cat, moved into their new three-



bedroom, one-bath, east-side home on Nov. 10, 2010. “I can get around the house without bumping into anything, and the design and layout reminds me of my grandfather’s house,” Davis said, regarding his favorite elements of the home.

Since moving in, they have landscaped the yard (designed by Davis) and hung two screen doors. They also plan to fence their entire yard, front and back, with a sidewalk running along the interior.

“People said we would never make anything of ourselves, and that we could never own a home,” Goldman said. “We can look at them now and be so proud.” *



Olmstead sets the standard more than a decade later

In 1995, two Georgia women filed a lawsuit against their state, claiming their confinement to a state psychiatric hospital was an infraction of the Americans with Disabilities Act (ADA). The women asserted they should have been provided a community-based alternative to institutionalization, according to the ADA's Title II, which states that a person with a disability should not be excluded from public services or subjected to discrimination by state or local government.

The U.S. Supreme Court agreed with the women, as four years later it delivered the historic *Olmstead* ruling. In its 2010 report, "10-Plus Years after the *Olmstead* Ruling," the National Senior Citizens Law Center (NSCLC) states, "The ruling has been extremely prominent in both legal and non-legal circles.

For many, *Olmstead* has become shorthand for the principle that institutionalization should be a last resort for persons who need long-term services and supports." It is through *Olmstead* that disability rights advocates hold states accountable for operating public programs in ways that support and empower inclusive community living.

"The *Olmstead* decision was as monumental to civil rights as was *Brown vs. the Board of Education*," said Sally Conway, deputy chief, U.S. Department of Justice, at a July 2011 ADA-Indiana conference. "It was significant and a great breakthrough."

The eleven years following the *Olmstead* decision have seen an increase in the use of state and federal statutes aimed at reducing institutionalization.

Most prominently has been the use of home- and community-based services (HCBS) waivers – also called Section 1915(c) of the Social Security Act – established to assist state Medicaid programs in the advancement of non-institutional care. Indiana currently administers five HCBS waivers through the Indiana Family and Social Services Administration's Division of Disability and Rehabilitative Services (DDRS) and Division of Aging (DIA).

Three Indiana waivers are available to assist individuals with developmental disabilities, which include: the Autism (AU) waiver, the Developmental Disabilities (DD) waiver and the Support Services (SS) waiver. Two others – the Aged and Disabled (A&D) waiver and the Traumatic Brain Injury (TBI) waiver – serve people

with severe physical disabilities or chronic health conditions. While each waiver includes unique qualifying guidelines, all five waivers carry two consistent eligibility requirements:

- The recipient would require institutionalization in the absence of the waiver or other home-based services.
- The total Medicaid cost of serving recipients on the waiver (waiver cost plus other Medicaid services) cannot exceed the total cost to Medicaid that would have been incurred for serving the recipients in an “appropriate” institutional setting had the waiver not been granted.

Indiana has made positive progress in the fight against institutionalizing people with disabilities, successfully closing all of its state-run institutions for people with developmental disabilities; however, there is currently a waiting list of about 19,000 individuals for the three waivers serving people with developmental disabilities.

“The Olmstead decision was as monumental to civil rights as was *Brown vs. the Board of Education.*”

– Sally Conway, deputy chief, U.S. Department of Justice

When President Barack Obama took office in 2009, he made program awareness a priority, enacting a “Year of Community Living.” “Our agencies were ordered to double our efforts and do whatever we could to help people with disabilities live safely, happily and productively in their communities,” said Karen Davis,



legal director, Indiana Protection and Advocacy Services (IPAS).

Despite favorable legal rulings, the introduction of new inclusive programs and the President’s support, Olmstead’s goal of eliminating the institutionalization of people with disabilities is still far from being realized. “People are still away from their communities, not having the opportunity to succeed or fail, which is the full human experience,” Conway said.

Perhaps one of the largest issues hindering further development of the HCBS cause is Medicaid.

“From its beginning, Medicaid has had an institutional bias,” Davis said. As described in the NSCLC report, such bias is shown by Medicaid’s mandatory institutional coverage, but the optional waiver coverage often has enrollment limitations, expenditure caps and stringent income restrictions. Also, federal law mandates that

while Medicaid programs cannot usually cover payments for room and board, hospital care and nursing home stays are exempt from the restriction since room and board costs are mingled with health care services. This disparate coverage often leaves people with disabilities no choice but to enter an institution to ensure financial coverage of their needs.

The enormity of HCBS waiver waiting lists also poses problems. “Developing additional Medicaid waivers is the most obvious step,” Davis said, addressing ways to combat the overflow. Davis hopes that Indiana House Bill 1001 will lead to more waivers. The bill’s Section 144 called for the formation of a study committee to determine ways to cut aggregate and per capita waiver costs. “I encourage people with disabilities and advocates to reach out to members of that committee and help them understand the need for additional waivers,” Davis said.

Davis explains that work must be done now to lower the census at privately owned institutions if Indiana is to become a champion and leader for other states. “Three large, private institutions [for people with developmental disabilities] remain in Indiana, and we can do a better job in eliminating census at those,” Davis said. “The more inclusive we are, the better it is for everyone.”

To view the entire NSCLC report, “10-Plus Years after the Olmstead Ruling,” visit www.nslc.org. To learn more about the Medicaid Oversight Commission, visit www.in.gov/legislative and click on “study committees.” *



Community supports available to enhance independent living

Freely living and participating in a community is an important goal for people with disabilities. Too often, however, lack of funding and other obstacles prevent individuals from full community participation. A number of community supports and services are available to combat barriers to inclusion and assist people with disabilities in their transitions to independent community living.

Money Follows the Person

Established by Congress under the Deficit Reduction Act of 2005, the Money Follows the Person (MFP) program authorizes a total payment of \$1.7 billion for state efforts to transition current institutionalized Medicaid enrollees into home- and community-based services (HCBS). In 2010, Congress extended MFP's expiration year

from fiscal year 2011 to fiscal year 2016.

Transition support for eligible MFP recipients includes:

- 1. detailed information** to assist with decision making;
- 2. an assessment conducted by a nurse** to ensure the individual can move safely and live independently;
- 3. access to a case manager, a transition nurse and other transition services** through the local Area Agency on Aging; and
- 4. post-discharge follow-up** to certify the individual's move satisfactorily meets independent and community-based needs. Participants also receive assistance in determining where to live, arranging

To be eligible for Indiana's Money Follows the Person program, an individual must:

- Have lived in a nursing facility or hospital for at least six months
- Be Medicaid eligible for 30 days prior to discharge
- Have health needs that can be met through services available in the community
- Voluntarily consent to participation by signing a consent form
- Be eligible for either the Aged & Disabled (A&D) or Traumatic Brain Injury (TBI) waiver

medical care, obtaining access to a 24-hour emergency response service – Personal Emergency Response System (PERS) – and increased transportation.

Individuals can remain covered by the MFP program for 365 days, at which time the Home- and Community-Based Services (HCBS) waiver will provide comparable services. Under the Patient Protection and Affordable Care Act (PPACA), Congress prohibited a state's ability to limit the number of enrollees in the MFP program; however, states are still allowed to impose income limits.

For more information please visit the website, www.in.gov/fssa/da/3475.htm, or call toll-free (888)-673-0002.

Community and Home Options to Institutional Care (CHOICE)

If an individual is determined ineligible for Medicaid, or if the individual is currently Medicaid-eligible but is requesting unavailable services, the Community and Home Options to Institutional Care for the Elderly and Disabled (CHOICE) program may offer another option. In addition to those who are ineligible for Medicaid, CHOICE is also available to individuals at least 60 years of age or persons of any age who have a mental or physical disability and who are at risk of losing their independence.

CHOICE offers coverage for many services and supports, such as attendant care, therapies, nurses, home modifications, medical equipment, vehicle modifications and transportation. There are no income limitations for receiving services, but individuals whose income is above 150 percent of the federal poverty level must share in the cost of services based on a sliding scale.



To learn more and apply for services, contact your local Area Agency on Aging. Find your local agency at www.iaaaa.org or call, toll-free, (800) 986-3505 (voice).

Caregiver Support

Short-term relief, provided on an “as needed” basis, is available to aid caregivers for individuals with developmental disabilities through the state-funded Caregiver Support program. Caregivers may apply for the program's financial assistance only if the individual(s) for whom they are caring are not receiving any other state assistance, including Medicaid waivers or CHOICE services. Those on waiver waiting lists, however, are still eligible to apply.

Caregiver Support funds are distributed on a first-come, first-served basis, and applications must be completed in person by the primary caregiver at a Bureau of Developmental Disabilities district office.

To find your local bureau, go to www.in.gov/fssa/ddrs/4088.htm and click on the district in which you live for contact information. *

State Plan for Independent Living

Indiana's State Plan for Independent Living for 2011–2013 includes a number of goals to enhance independence for people with disabilities:

- Conduct advocacy activities to raise awareness of disability issues.
- Increase opportunities to develop leadership skills.
- Expand the network of Centers for Independent Living.
- Strengthen the structure of Indiana's independent living services.
- Improve collaboration with organizations to enhance independent living services.
- Implement outreach activities to inform people with disabilities of available services.

To read Indiana's full plan or learn more about independent living centers, go to www.icoil.org. *

Livability – more than just accessible

Achieving full community integration is an idea often met by making adjustments to enhance accessibility and encouraging individual involvement. But, despite improvements that have created more inclusive environments, gaps still remain – leaving barriers and limitations.

Innovative concepts and creative thinking are needed to grow well-rounded communities that eliminate all obstacles and offer infinite opportunities for people with disabilities. One such concept that has gained momentum in the last decade is “Livable Communities,” a broad, all-encompassing idea that embraces independence and personal choice on all sides – socially, economically, civically and physically.

Phillip B. Stafford, Ph.D., director of the Center on Aging and Community of the Indiana Institute on Disability and Community, says livable communities are tailored to meet the unique needs of their residents. A true livable community is formed after evaluating the accessibility needs of its residents, and features and programs are developed to meet diverse individual needs.

A 2008 report from AARP’s Public Policy Institute outlines findings from a survey that identified barriers to livable communities, and offered strategies for creating

livability in a number of areas:

Housing: A diverse mix of affordable, accessible housing options must be situated in close proximity to daily necessities – stores, restaurants, health care facilities, etc. – to create more walkable neighborhoods.

Transportation and mobility: To increase use of available public transportation, commercial and residential developments should be focused in areas near public transit options. Furthermore, innovative initiatives can overcome typical transportation obstacles. For instance, Atlanta, Ga., piloted a voucher program that provided funds to older residents to purchase rides to and from bus and train stops.

Land use: The AARP survey found that expansion typically takes place in less dense, underdeveloped areas, rather than in existing urban areas. AARP’s Public Policy Institute suggests offering incentives for businesses and homeowners to locate in areas with existing infrastructure, as well as incentives encouraging individuals to live near their places of employment.

Collaboration and communication: Communities and governments must work together to plan efficient land use, as well as to create consistency and accountability among programs and services for people

with disabilities. Furthermore, government agencies must collaborate in collecting and managing information to allow people with disabilities and others to conveniently access resources. An example of this is the 2-1-1 phone service for community referrals (see the resources list on page 15 for more information).

Public education and involvement in community planning: To build communities that effectively serve residents’ needs, planners must know what those needs are. Involving people with disabilities in community planning ensures that neighborhoods, public facilities, programs and other aspects are accessible for and inclusive of all individuals.

Leadership: When public officials lead or endorse livable communities, it’s more likely that others will follow. Engaging elected officials and collaborating with organizations is key to achieving livability.

Some towns in Indiana are beginning to evaluate the necessity of a tailored livable community. Linton, Ind., has been working for more than four years to create such a community that will better serve its aging population and others, including people with disabilities. To learn more about livable communities, visit www.aarp.org. *

Best practices for hiring and working with a PCA

Living independently in your own home is a common aspiration for anyone, with or without disabilities. However, at one time or another, everyone needs to call upon the assistance of others in their community. For people with disabilities, hiring and working with a personal care attendant (PCA) offers the best of both worlds – receiving necessary support and assistance and sustaining an independent, community-based lifestyle.

When it comes to hiring a PCA, Gary Byrnett has become an expert. For the past 27 years, Byrnett has gained experience in the PCA hiring process through his quest to find PCAs that best accommodate his needs. Through his experience, Byrnett has developed some rules to live by when hiring a PCA:

- To prevent criminal issues that might arise with a PCA, look into the potential attendant's criminal history. "Make sure to run a background check on any PCA that is going to be working with you in your home. They have access to a lot of your personal information and belongings," Byrnett said.
- Determine if you will hire the PCA independently or through an agency. If an agency is not used, be sure to follow standard protocol for hiring an employee: post a job description, collect resumes, conduct interviews and request references. Potential

PCA candidates can be found through independent living centers such as accessABILITY (www.abilityindiana.org), newspaper classifieds or even word of mouth.

- The interview stage is crucial, as it allows you and potential PCAs the opportunity to interact. Strive for a face-to-face interview and focus on questions about the candidate's professional experience, trainings/certifications and proposed solutions/reactions to different scenarios.

Once you've found a PCA, you will need to train the attendant on how he or she can best attend to your specific needs. Start the relationship right by encouraging an open dialogue and ensuring he or she understands your expectations.

Managing a PCA is much like any other employer-to-employee relationship. It requires that you monitor the attendant's performance and provide feedback. Try keeping a log of the PCA's attitude, behavior and tasks and then scheduling periodic reviews.

Start the relationship right by encouraging open dialogue and ensuring that he or she understands your expectations.



As an employer, you may have responsibilities related to employment taxes or other requirements. Consult the IRS website at www.irs.gov and search for "household employee."

For more assistance and resources on finding and working with a PCA, contact your local Independent Living Center. Find a center near you at www.in.gov/fssa/ddrs/2762.htm. *



What's next in the world of supports and services?

Support is a universal term that resonates with individuals from all walks of life. No matter the environment, the circumstances or the background, everyone needs some type of support to reach their full potential as engaged members of the community. And it's no different for the 12.6 percent of individuals living in Indiana with a disability (www.icoil.org/report.pdf).

The future of supports and services for individuals with disabilities has been unsure at best due to recent legislative actions and budget cuts. With pressure from both the federal and state levels, agencies throughout Indiana have struggled to find innovative and resourceful ways to continue providing necessary supports and services while also planning for a brighter future.

New legislative action causes setbacks

The most recent legislative session nearly put a hold on state services when the Indiana General Assembly was on the brink of exceeding the deadline for passing the state's new budget bill. After long hours and much debate, the Assembly finally reached an agreeable budget, which included many spending reductions affecting services and programs for people with disabilities.

One stipulation that advocates didn't anticipate was a requirement for the Indiana Family and Social Services Administration (FSSA), specifically its Division of Disability and Rehabilitative Services (DDRS), to reduce costs by 20 percent, and to continue cutting their budget by another 10 percent over the next two years.

Kim Dodson, associate executive director of The Arc of Indiana was shocked by the surprising budget cuts. "This was definitely alarming because it showed us the direction in which services for people with developmental disabilities are heading," Dodson said.

One of the most impacted areas is health care services, including cost cuts to the Medicaid waiver program. By July 1, 2012, DDRS must present a plan to the Joint Commission on Medicaid Oversight to reduce aggregate and per capita cost of the Developmental Disability waiver. The budget bill also proposed suggestions for lowering the cost of the waiver, including requiring cost participation by a recipient whose family income is more than 500 percent of the federal poverty level (\$112,000 for a family of four).

Dollars allocated to the CHOICE program were maintained at existing amounts – \$48 million each year of the biennial budgeting period. The budget allows \$15 million to be used for the Medicaid Aged and Disabled waiver for Fiscal Year (FY) 2011–12, and \$18 million to be used in FY 2012–13.

Another program affected by the budget reallocations is First Steps, which helps families access early intervention services for infants and toddlers experiencing early signs of developmental disabilities. Copayments increased for families earning between 651 and 850 percent above the federal poverty level, and maximum monthly copayments doubled. Furthermore, the “unit of service” changed from 15 minutes to one hour, and copays are owed per unit.

Across the board, funding cuts have hurt both service providers and the individuals receiving supports and services, according to Melissa Madill, executive director of the Indianapolis accessABILITY Center for Independent Living. To cut spending, many service organizations must reduce staff and other resources, creating further negative implications for people with disabilities.

“These cuts are leaving people with disabilities at risk of falling through the cracks, and the more that those funds are cut, the wider those cracks get. We are really trying to be the net that catches these people, but it’s turning into an uphill battle,” Madill said.

In addition to the budget reallocation, other legislative actions have also impacted services for people with



disabilities. The most visibly affected service was education. The School Scholarship HB 1003 will provide scholarships to low-income students to pay the costs of tuition and fees at a public or private elementary school or high school that charges tuition. However, private schools that accept these vouchers do not have to comply with the Americans with Disabilities Act’s (ADA) accessibility guidelines, which means fewer students with disabilities will be able to take advantage of the opportunity.

Another law relating to education is the Special Education Grants HB 1341. The law requires a school corporation to expend a proportionate share of its state special education grant on providing special education services to students placed in nonpublic schools.

What’s next?

As concerns continue to grow with the current state and future of supports and services, Dodson and Madill both have recommendations for improvements.

Both agree that teamwork is going to be a major facet of a new plan to improve the quality of life for individuals with disabilities. Madill pushed for a joint effort from both advocates and the government, saying, “I really hope that we can use the current climate at the state and federal levels to really sit down, roll up our shirt sleeves and find a better way to help people with disabilities.”

Dodson mirrored that recommendation by proposing the idea of service providers throughout Indiana creating a united front and working together to make sure they are not duplicating services.

Improving the current status of employment has been a main component of The Arc of Indiana’s agenda for upcoming legislative sessions. According to the Center for Personal Assistance Services (PAS), Indiana has a 65.9 percent unemployment rate for individuals with disabilities. Dodson commented on the need for a change, “Employment is key for young adults with disabilities. We need to create more opportunities.”

Advocacy efforts will be crucial to the improvement of the future of supports and services, but Dodson feels a strong focus will be on education. While some topics are undoubtedly on the General Assembly’s list for the next session, such as health care and education, other issues important to people with disabilities need to be pushed by advocates to get legislators’ attention. *

Madison, Ind., to address hundreds of ADA violations

After a federal investigation launched in 2006, the city of Madison, Ind., has reached a settlement agreement with the U.S. Department of Justice to address 300 violations of the Americans with Disabilities Act (ADA). The settlement, which requires all modifications to be underway within six months, was signed on the 21st anniversary of the ADA, July 26, 2011.

Modifications throughout the city will enhance the lives of more than 2,000 people – or 21 percent of Madison residents – who have disabilities, according

to the *Madison Courier*. Most of the violations were found in the city's public facilities, including city hall, a community sports complex, parks, a public swimming pool and other recreational areas. An elementary school in the area will also undergo many changes.

Changes to the facilities include ensuring restrooms are accessible, making park and other ground surfaces even, building accessible entryways and providing listening devices in the City Council chamber and adjoining conference room. Also, the settlement requires the local police

department to establish a written policy for working with people with disabilities, as well as an emergency evacuation plan for those individuals.

Madison Mayor Timothy Armstrong is also implementing changes beyond those deemed necessary by the Department of Justice. Armstrong has hired an engineering firm to inspect additional facilities that were not part of the federal investigation.

To read the full settlement agreement, visit www.ada.gov/madison_pca/madison.htm. *

Governor's Council policy statement

The Governor's Council for People with Disabilities board members have developed a policy platform, "Community Supports for Children and Adults," outlining the Council's position on providing and enhancing services for Hoosiers with disabilities.

Policy Statement: People with disabilities are full participants in their communities based on their desires and choices.

Beliefs and Conditions: People with disabilities report their lives are better when they live in their own homes and in communities of their choosing. When supports are needed, people with disabilities prefer a wide array of options in the type, location and provider of services and supports that best meet their needs and desires.

However, needed services are often cost prohibitive or simply unavailable.

Available public resources are biased to institutional and facility-based care, limiting choices to achieve full participation in their community. As a result many people with disabilities and their families are forced to accept unsatisfactory living conditions and to wait years for alternative options.

To read the Council's full policy statement, visit www.in.gov/gpcpd/2350.htm. *

Community support and service resources

Indiana Centers on Independent Living

www.in.gov/fssa/ddrs/2762.htm

Independent living centers throughout Indiana offer a number of supports and services to help people with disabilities participate and be included in all aspects of society. To find the center nearest you and locate contact information, visit the website above.

The Indiana Institute on Disability and Community

www.iidc.indiana.edu
(812) 855-6508 (voice)

The Indiana Institute's Center on Aging and Community provides educational, innovative programs to help individuals who are aging or have disabilities enhance their community participation, leadership skills and more. To learn more, visit the website above and click on "Center on Aging and Community."

The Clearinghouse for Home and Community Based Services

www.hcbs.org
(617) 552-3484 (voice)

The Clearinghouse for Home and Community Based Services is a one-stop, comprehensive database that brings together resources, tools and information on a number of topics to promote independent living for people with disabilities. The website allows you to search for helpful information by topic, state, source or resource type.

Indiana 211 Partnership, Inc. (IN211)

www.in211.org
2-1-1 (voice)

Indiana 211 Partnership, Inc. (IN211) is a nonprofit organization that provides quick referrals for human services by dialing 2-1-1.

National Alliance on Mental Illness (NAMI)

www.nami.org
(317) 925-9399 (voice)

NAMI Indiana is a nonprofit grassroots organization dedicated to improving the lives of people with serious and persistent mental illness by providing a network of support, education, and advocacy services.

Family & Social Services Administration (FSSA) Division of Disability & Rehabilitative Services (DDRS)

www.in.gov/fssa/ddrs
(800) 545-7763 (voice)

The Division of Disability & Rehabilitative Services (DDRS) enhances the quality of life for individuals with disabilities by creating a central hub that educates and provides resources on supports and services. The DDRS provides continuous, life-long support for citizens in need of disability and rehabilitative services in Indiana.

Aging Indiana

www.AgingIndiana.org
(812) 855-6508 (voice)

Aging Indiana is the first state version of the national AdvantAge Initiative, created in 1999 to evaluate communities based on "elder friendly" measurements and encourage improvements identified by those results. Aging Indiana conducted research in 2008 among 15 service areas across the state. The data and results can be found on its website, categorized by county, demographics and other areas. The website also provides a model for creating an elder friendly community.

The Arc of Indiana

www.arcind.org
(800) 382-9100 (voice)

The Arc of Indiana is dedicated to helping people with developmental disabilities learn, live, work and play in their communities by eliminating barriers to inclusion. The organization provides helpful, clear information and access to numerous resources promoting independent living. In addition to offering educational events, creating innovative initiatives and keeping individuals informed about the latest developments in the disability community, The Arc advocates for policy direction that leads to the best lives possible for people with disabilities.

ignite thoughts into action

spark



We welcome your suggestions
for newsletter content and
ideas concerning the actions
of the Council.

phone: (317) 232-7770
email: GPCPD@gpcpd.org

www.in.gov/gpcpd



Register now for the 2011 Conference!

Look for registration materials for the 2011 Conference for People with Disabilities, coming in the mail soon. The exciting two-day event will take place Nov. 29 and 30 at the Westin hotel in downtown Indianapolis. Themed "Celebrating Community," the Conference will explore all the people and places that combine to bring a community to life. Join us as we discover how advocacy, ingenuity and ambition can empower people to make their community a better place to work, learn and live to the fullest.

The deadline to submit a scholarship application is Oct. 21, 2011. Registration materials will also be available online at www.in.gov/gpcpd. The registration deadline for the Conference for People with Disabilities is Nov. 18, 2011. If you have any questions, please contact the Governor's Council at (317) 232-7770 or GPCPD@gpcpd.org.