

# State of Alaska



Governor's Council on Disabilities and Special Education  
2006-2011 State Plan

# Governor's Council on Disabilities and Special Education



## Acknowledgements

The Governor's Council on Disabilities and Special Education would like to thank the many people who offered ideas and advice while this plan was being discussed and written. The Council traveled to Kenai/Soldotna, Eagle River/Chugiak, Kotzebue, Fairbanks, Nome, Petersburg, Wrangell, and Anchorage to learn what needs to be changed for people with disabilities. While in these communities, teams of Council members visited local programs to learn about services. Thanks to everyone who came to talk with the Council and taught us about their community's strengths and needs. The Council thanks its partners, individuals and families for their active commitment, leadership, and participation in the development and implementation of the plan.

# 2006-2011 State Plan



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### Who is on the Governor's Council?

The Governor appoints 28 people to serve on the Governor's Council. Six of every ten people on the Council are self advocates or are parents or guardians of someone who experiences a disability. Other people are appointed because they represent a state agency or organization. Members serve three year terms and may apply for reappointment when their term is up.

**Art Arnold** is the Special Education Director at the Department of Education and Early Development.

**Anna Attla** is a self-advocate from Anchorage.

**Julie Broyles** is a special education teacher from Anchorage and has a child with a disability.

**Teresa Bunson** teaches at and represents the University of Alaska.

**Milton Cheemuk** is a self-advocate from St. Michael, a small village.

**Russ Cusack** is the Chief of Rehabilitation Services at the Division of Vocational Rehabilitation (DVR)

**Beth Edmands** is the parent of an adult with disabilities and is from Anchorage.

**Kathleen Fitzgerald** represents the Center for Human Development in Anchorage, and has an adult daughter with disabilities.

**Jerry Fuller** works in the Commissioner's Office at the Department of Health & Social Services

**Taylor Gregg** is a self-advocate from Ketchikan.

**Betsy Grunch** is a self-advocate from Anchorage.

**Meghan Johnson** represents early childhood education and lives in Anchorage.

**Kris Johnston** is the parent of a youth with disabilities and is from Cordova.

**Deborah Kitelinger** has a young child with disabilities and is from North Pole.

**Bryan Knight** is a self-advocate from Anchorage.

**Banarsi Lal** represents the Alaska Commission on Aging and is from Fairbanks.

**Stacey Messerschmidt** lives in Tok and is the parent of a child with a disability.

**Irene Moreland** represents the Disability Law Center on the Council and lives in Wasilla.

**Lucy Odden** is a self-advocate from Anchorage.

**Jay Ramras** is a legislator from Fairbanks.

**Darrell Sanborn** is a special education administrator from Unalaska.

**Carla Shelton** is a parent of an adult with a disability who lives in Anchorage.

**Scott Sidell** is a parent of a child with a disability and lives in Bethel.

**Sarah Souders** is a parent of children with disabilities and is from Kenai.

**Donna Swihart** is a parent of children with disabilities and is from Wasilla.

**Arthur Walters** is a self-advocate from Seward.

## What are the beliefs of the Council?

The Council believes that:

People with disabilities should have control over their lives and be able to make their own choices

and that

People with disabilities should have equal opportunities in

School or learning

Transportation

Jobs

Owning a home

Staying healthy

Participating in the community





## Why does the Council write a five-year plan?

Every five years the Council is asked by the federal government to write a plan. Planning helps the Council decide what it would like to get done. It helps the Council focus on what is most important. Before writing the plan, the Council visits communities to find out what people think is important. Then the Council decides what action to take. The plan describes what the Council will work on during the years 2006-2011. The plan is sent to the federal government's Administration on Developmental Disabilities.

## What is the job of the Governor's Council on Disabilities and Special Education?

The Council advocates for change that improves the lives of people with disabilities. They advise the State about special education and about programs for infants and toddlers with disabilities. They recommend to the Alaska Mental Health Trust Authority how the State should spend its funds for people with disabilities. They also govern the Special Education Service Agency.



## What did the Council learn?

Many self-advocates, family members and providers spoke to the Council about the same issues. They talked about the need for more and better jobs. Others spoke about needing accessible and affordable housing. Some talked about needing transportation at any time of the day or night. Families shared stories about problems they had with school and being able to get child care. People talked about wanting to be more included in the community. Others said people need more access to certain types of health care, including counseling.



## What will the Council be working on?

This is a list of the main topics the Council will work on over the next five years.

### Self-Determination

- ✘ Work with the State to make sure rules allow people with disabilities to have choice and control over their services.
- ✘ Help self-advocates and their families learn about their rights and duties. Help them take part in meetings when decisions are being made. Make it easier for people with disabilities and their families to understand how services work.

### Employment

- ✘ Help create more jobs and careers for people with disabilities.
- ✘ Improve rules so that people with disabilities can work.
- ✘ Add more training and services to help people with disabilities work.

### Housing

- ✘ Advocate for more accessible housing.
- ✘ Support more choices for housing.
- ✘ Have more training on home ownership.
- ✘ Make housing more affordable for people with disabilities.

### Health

- ✘ Keep and improve Medicaid benefits.
- ✘ Encourage people with disabilities to be healthy.
- ✘ Make it easy to get health care services.
- ✘ Help people with disabilities prepare for an emergency or disaster.

## **Lifelong Learning**

- ✘ Make sure families and their children ages five and younger get the services they need.
- ✘ Be sure Alaska has enough staff to work with children when they are five years old or younger.
- ✘ Work to get enough trained special education teachers and other staff in the schools.
- ✘ Work to have enough services and funding so that people with disabilities get what they need in school.
- ✘ Make transitions to adult life work better for students.

## **Community Participation**

- ✘ Advocate for more and better transportation and snow removal.
- ✘ Make it possible for people with disabilities to be part of everyday community life.
- ✘ Help the general public understand how they can help people with disabilities participate in community life.
- ✘ Speak on behalf of people with disabilities to the Alaska Mental Health Trust Authority.
- ✘ Make sure there is enough staff to work with people with disabilities.

# About the Council

The mission of the Governor's Council on Disabilities and Special Education is to create change that improves the lives of Alaskans with disabilities.

To this end, the Council actively seeks input from and listens to self-advocates, family members, service providers and friends to learn what works, what needs to be changed, and how it should be accomplished. The Council takes public testimony at three annual meetings, holds community forums, committee meetings and other events throughout the state, as well as assembles task force or ad hoc committees to work on critical issues.

The Council values input from stakeholders and uses it to plan, impact legislation and regulations, advocate, and inform the public. In addition, the Council surveys self-advocates, family members and providers, researches best practices and trends, and inquires about the status of individuals with disabilities. Many people and partners contribute to the process that ultimately results in the five-year plan and subsequent action.

Alaskans with disabilities use a variety of services throughout their lives. Effective management of any large, complex system requires access to data, strategic planning and continuous quality improvement. The Council links the public with policymakers to ensure the thoughtful development of efficient and effective service delivery systems.

The Council has 28 members appointed by the Governor. At least 60 percent of the members must be people who experience a disability, or are members of their families, or guardians. The remaining members represent state agencies, special educators or other groups specified in law.

As the State Council on Developmental Disabilities the Council plans, builds capacity, and creates systems change on behalf of, and with individuals with developmental and other substantial disabilities and their families.

The Council also serves a variety of federal and state roles, combining the expertise of many stakeholders throughout the state into one unique Council. As the Interagency Coordinating Council for Infants and Toddlers with Disabilities, the Council plans, monitors, and advocates for early intervention services and programs. As the Special Education Advisory Panel to the State Department of Education and Early Development, the Council plans, evaluates and advocates for students receiving special education services. The Council serves as the governing board for the Special Education Service Agency (SESA). Finally, the Council makes recommendations concerning the status and needs of beneficiaries with developmental disabilities to the Alaska Mental Health Trust Authority.

# Accomplishments

**Over the years, the Council worked collaboratively with the legislature, administration and other stakeholders to:**

- Reduce high cost institutional services and enabled individuals to stay in their local communities using Medicaid Home and Community-Based Services (HCBS) Waivers;
- Contain costs and increase the number of persons served through the closure of Harborview Developmental Center and de-certification of Hope Cottages' ICF/MR facilities;
- Leverage a variety of resources to increase the employment rate of Alaskans with severe disabilities and reduce dependence on state services;
- Increase cost-effectiveness and savings to State of Alaska by conducting an examination of the two waiver programs administered by Developmental Disabilities;
- Leverage a variety of funds to increase availability of coordinated, accessible transportation helping people with disabilities and low-income individuals get to work; and
- Advocate for and secure a legislative increment to remove people from the waitlist for Developmental Disabilities services.

# Current Conditions

## Economic Factors

Alaska does not have a sales or income tax; instead, government is funded by royalties from fluctuating oil prices. Although the price of oil is currently high, legislators are reluctant to commit to expenditures they will not be able to sustain when oil prices drop and production declines. Any drop in State revenues significantly impacts every aspect of the economy in Alaska from government to non-profit agencies to the private sector.

The federal government is a major contributor to the Alaskan economy. Its investment in Alaska ranges from health and social services (e.g. Medicaid, Native health care, Social Security and grants to non-profits) to the military and basic infrastructure projects like roads and sanitation.

Unemployment rates vary widely across the state ranging from less than 6% to over 20%. Since the economy in many remote communities is based on subsistence rather than cash, jobs are scarce and limited to seasonal activities.

While the Department of Labor and Workforce Development does not collect unemployment rates for people with disabilities in Alaska, Cornell University reported that Alaska's employment rate for people with disabilities decreased from 53.9 percent in 2003 to 47.6 percent in 2004. Alaska's State of the State survey of adults with developmental disabilities and their guardians indicated that nearly 43% of the respondents were currently unemployed. Of those not currently working, 65% would like to have a job. However, this survey was conducted mainly through provider agencies, and the

rates should not be interpreted as representative of the entire adult population of people with developmental disabilities.

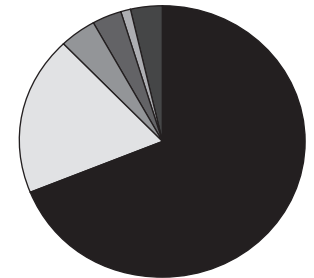
The Council asked providers and stakeholders about the major barriers to employment. Reasons cited included :

- needing help on the job (42.5%),
- inability to find employment (33.7%),
- lack of training (33.1%),
- concern about losing benefits (22.1%),
- lack of transportation (20.4%), and
- lack of assistive technology (16.6%).

## Cultural and Social Factors

The U.S. Census Bureau reports the following demographic characteristics of Alaska's population.

Native Hawaiian	1%
African American	3.5%
Other	3.5%
Asian	4%
Alaska Native	19%
Caucasion	69%



Transportation is limited in Alaska. In urban areas the bus and curb-to-curb service does not operate at all hours, whereas in rural areas creativity is needed to meet transportation needs. Some communities, for example, use four-wheelers as their primary mode of transportation. The transportation system continues to be inadequate.

# Unserved and Underserved Groups

Alaska's State of the State survey revealed that 71% of the respondents thought they could use more help getting involved in community activities. Other barriers to community participation mentioned by stakeholders included funding for trained supports (49.2%), lack of opportunities for recreation (38.7%), lack of friends (31.5%), having money for recreation and leisure activities (20.4%), and public transportation (18.8%).

## Political Factors

Alaska is the first state in the country with no public or private intermediate care facilities. Generally, the Alaska legislature and administration is supportive of community-based services for people with developmental disabilities, but as a result of several years of level funding, only people in crisis have been selected for services. There are still long waiting lists. For the first time in many years, funding was obtained in 2006 to remove people from the wait list.

In addition to the state, borough, and city layers of government, Alaska's municipal and tribal governments provide services. These are created under different authorities with their own separate powers and rules of procedure. Regional and village corporations formed under the Alaska Native Claims Settlement Act (ANCSA) are sometimes perceived as another level of government. While these corporations are private for-profit corporations, they may be perceived as the entity formed in lieu of a reservation system. Included in the mix are regional Native non-profit corporations that function as health, housing, education and other service providers. Because these entities have a strong tradition of local control, the Council works with local communities, when invited, to help them identify local issues and solutions and provides technical support on

an as needed basis.

Alaska's complex system of local government includes 148 city governments, 20 villages organized as federal corporations under the terms of the Indian Reorganization Act, numerous traditional councils which serve as the local governing body, and 14 boroughs in Alaska, which are similar to counties in other states. Alaska has 53 school districts and 503 schools serving over 133,000 culturally, linguistically, and ethnically diverse students.

## Individuals with Autism Spectrum Disorders

For unknown reasons, the number of individuals identified with Autism Spectrum Disorders nationally continues to climb. Several evidence-based programs are effective in ameliorating or reducing the impact of autism; however, these programs are not widely available in Alaska. Families raising children with Autism Spectrum Disorders face many challenges in obtaining appropriate and effective intervention and support. There is a lack of trained providers to work with adults with Autism Spectrum Disorders.

## Rural and Remote Communities

Alaska faces unique geographic and demographic challenges unlike those encountered in any other state. Vast distances separate communities; severe weather, and the lack of a road system all impact transportation and access. Further, small community populations make it unfeasible for many disability services to be provided in Alaska's remote villages. As a result, individuals living in these communities often receive limited and infrequent support and services.

## **Infants and Toddlers with Disabilities**

The majority of infants and toddlers served through Alaska's Early Intervention/Infant Learning Program (birth to three), are those with a 50% or greater delay in one or more areas of development or a diagnosed condition resulting in a high probability of a 50% or greater developmental delay. Children meeting this eligibility guideline are entitled to services through the Individuals with Disabilities Education Act. Funding levels for Infant Learning Programs prohibit them from serving children with less severe delays and those at risk, meaning some children miss obtaining services during their most critical years of development, when intervention is most cost-effective.

## **Individuals Transitioning to Adulthood**

When students with developmental disabilities turn 22 and are no longer eligible for school, their transition to adult life may be disrupted if they are not able to move into adult services. Supported employment and supported living help maintain skills developed during the school years, and lead to productivity and inclusion in community life. Without supports, individuals often spend their days unproductively and begin to lose independence and skills.

## **Individuals with Aging Caregivers**

Some parents continue to care for their adult children well into their senior years, when providing such care becomes increasingly difficult. For the well-being of the individual with a developmental disability and the parents' peace of mind, it is important to have

a plan for the time when parents are no longer able to provide care. The number of individuals aged 40 and over who are waiting for services continues to grow. Anecdotally, the Council hears of many other individuals who have never applied for services. When advance plans are not made, individuals may be faced with a crisis, and a lack of thoughtful transition planning.

## **Individuals with Fetal Alcohol Spectrum Disorders**

Alaska has a high prevalence of fetal alcohol spectrum disorders. In response to a high demand for identification, diagnosis, training and on-going support, Alaska received funding to develop regional, multidisciplinary diagnostic teams, increase public awareness of ways to prevent fetal alcohol spectrum disorders, and develop some support services. However, the capacity to meet the needs of the children with fetal alcohol spectrum disorders and their families remains a challenge. Not every individual with a fetal alcohol spectrum disorder has a developmental disability, but many do.

## **Individuals with Dual or Multiple Diagnoses**

The ability to serve people with developmental disabilities who also experience a mental health or substance use disorder is a constant challenge. Separate funding and service providers who are not cross-trained present barriers to effective services and outcomes as well as individual and family satisfaction.

# Major Issues

## Students with Serious Emotional and Behavioral Disturbances

A lack of in-state services and coordinated interagency support for children needing help with emotional and behavioral concerns has become an escalating problem. Training for parents, educators and mental health providers continues to be a pressing need. The state's "Bring/Keep the Kids Home" initiative is designed to improve services within Alaska; therefore, participation in planning and monitoring the progress of this project is of utmost importance.

## Individuals with Traumatic Brain Injury

Some people with traumatic brain injury function very similarly to persons with developmental disabilities, with the exception of the age of onset in many instances. Many need services that are of extended or life long duration, and are individually planned and coordinated. Provider capacity and the adequate funding to meet the needs of individuals with traumatic brain injury are problematic.

## Individuals with Developmental Disabilities who are Aging

The number of individuals with developmental disabilities who are 60 or above will greatly increase with the "baby boom" generation. The life expectancy of individuals with developmental disabilities is similar to that of the general population; however, some have accelerated age-related changes associated with specific disabilities. Issues that are important to this group of individuals include aging in place, maintaining good health, and having support to maintain productive and meaningful lives as long as possible.

## Parents with Developmental Disabilities

Increasing numbers of persons with developmental disabilities are becoming parents, but are at risk for having their children removed from their homes or having their parental rights severed. There is a pervasive assumption that because of their disability, they are incapable of caring for their child. The lack of training for child protection workers in supporting individuals with developmental disabilities creates an additional barrier.

## Workforce Development

Alaska has a shortage of personnel to provide direct support services to individuals. The shortages extend across many professional roles such as physical, occupational and speech therapists, early interventionists, respite, supported employment and supported living providers. The growth in the number of individuals requiring supports exacerbates the shortage. Both recruitment and retention efforts are needed to develop and maintain an adequate workforce.

## Quality Assurance

Of utmost importance is the assurance that people with disabilities receive quality services that protect their health, safety and well-being. Having a strong quality assurance program in place is necessary, especially for those individuals who cannot speak for themselves. Given the difficulty of recruiting and retaining high quality staff, this issue becomes even more critical. Providers look to quality assurance to help improve their services and agencies.

## **Self-determination**

Individuals with disabilities and their families want more direction and control over their own supports and services. They want to choose what services they receive and the provider of those services, both at the agency and direct service level. Many want control over their funding. They want independent service coordinators who work for them rather than for agencies. Individuals with disabilities want services and supports that will help them be valued, participating members of their local communities.

At the same time, many people with disabilities have had limited opportunities to learn self-determination skills. The earlier an individual receives training and opportunities to practice self-determination skills, the more likely he or she is to use them effectively and responsibly. Although self-determination skill development could be built into the Individualized Education Plan (IEP), particularly with students in transition from school to adult life, the IEP seldom includes opportunities to gain these skills.

## **Access to Services**

When an individual needs services, it is often years before they begin to receive them. Because there are more individuals than can be served with available funds, the State maintains a list of those who wish to receive services. An added complication is the need for an integrated data management system that can better track the status of individuals on the list, and maintain up-to-date information about their needs. An Ad Hoc Committee on the Wait List developed a series of recommendations for managing the list. Monitoring the progress toward achieving the recommendations, and participating actively as the system is redesigned will be an important focus of the Council.

## **Appropriate Assessment for Students in Special Education**

No Child Left Behind regulations require schools to administer annual assessments at grade level to all special education students each spring. The regulation should provide the IEP team with the opportunity to choose the appropriate annual assessment instrument for each student. This would allow standardized assessments to be chosen for each child in a meaningful way that would show progress, strengths and areas that need more attention in daily instruction rather than proficient or not proficient.

# Goals and Objectives

## SELF-DETERMINATION

### Goal 1: People have choice, flexibility and control over the services and supports they receive

Objective 1.1: Advocate for new or amended State-level public policies that promote consumer choice, flexibility and control.

- Advocate for a consumer-controlled funding mechanism for DD services such as micro-boards and/or a self-directed waiver.
- Work with the Department of Education & Early Development to promote individual and family choice, flexibility and control through the Individualized Education Plan (IEP).
- Work with the Division of Senior & Disabilities Services on the implementation of the Long-Term Care and Cost Study.
- Encourage the inclusion of principles of self-determination in care coordinator and case management training.
- Work with the Department of Health & Social Services to ensure a practice of including residents of group homes and individuals who receive agency-based services in the development of agency rules, policies, procedures and regulations.
- Work with state agencies, provider associations and organizations, self-advocates and families as appropriate to promote and/or develop programs, regulations, and policies that enhance consumer choice, flexibility and control.
- Work to develop an independent care coordination system.

Objective 1.2: Increase the knowledge and skills of Alaskans with disabilities and their families regarding rights, responsibilities, self-determination, self-advocacy, systems navigation and the policymaking process.

- Support and promote the use of the Center for Human Development Self-Determination Toolkit.
- Advocate for the inclusion of self-determination training within existing curricula and training programs (e.g. IDEA/IEP/IFSP training for parents).
- Explore strategies and funding to increase self-determination activities for self-advocates.
- Continue Partners in Policymaking training for people with disabilities and their families.
- Educate providers, agencies and families about self-determination and encourage its use as a guiding principle.
- Encourage the development and sustainability of self-determination support groups for self-advocates and families.

Objective 1.3: Promote ways for people with disabilities and their families to communicate regularly with public policymakers.

- Recommend and promote people with disabilities and their families for positions on public policy decision-making bodies and advocate for the supports they need for full participation.
- Provide information, technical assistance and leadership training to help self-advocacy and family support groups maintain and expand their organizations.
- Support the Key Coalition and Key Campaign activities.
- Disseminate information to individuals that assists them in advocating at the local, state, and federal level.
- Create opportunities for people with disabilities and their families to advocate for changes in public policy.

## EMPLOYMENT

### Goal 2: People get and keep employment consistent with their interests and abilities.

Objective 2.1 Develop strategies to significantly increase career opportunities for people with disabilities.

- With partners, develop and implement a coordinated outreach campaign to educate private and public sector employers about tax incentives and benefits of hiring people with disabilities.
- Increase public awareness of the benefits of employing people with disabilities.
- Engage, promote, and award employer champions who hire people with disabilities.
- Increase resources and support for self-employment opportunities, such as micro-enterprise.
- Advocate for broader choices and opportunities in employment based on needs, interests and current vocational assessment.
- Advocate for opportunities for people to advance and develop new skills in the workplace.

Objective 2.2 Advocate for the adoption of new or amended State-level public policies that enable people with disabilities to gain meaningful employment.

- Investigate and research the advisability of adopting the Javits Wagner O'Day Act at the State level.
- Promote and develop policies regarding work as an expectation among individuals with disabilities, their families, service providers and the public.
- Advocate for work incentives that promote increased economic self-sufficiency among people with disabilities.
- Make better use of existing employment-related resources and funds.
- Develop and/or change policy to increase the availability of employment-related resources.

Objective 2.3 Promote the availability of training, services and supports that enable people with disabilities to work.

- Promote training for educators and service providers on best practices and creative employment opportunities for people with disabilities.
- Advocate for more training for employment-related support staff.
- Promote the use of mentors or job coaches to help individuals with disabilities succeed in their jobs.
- Advocate for new sources of funding to promote employment.
- Promote programs for individuals with disabilities to develop their employability skills.

## HOUSING

### **Goal 3: People live in accessible, affordable and safe homes in the community.**

#### Objective 3.1 Increase the availability of accessible housing options.

- Work with the Alaska Mental Health Trust Authority and other stakeholders to expand affordable and accessible housing options for people with disabilities.
- Promote the concepts of universal design to the Alaska Housing Finance Corporation, Denali Commission, developers, builders and the public through a public awareness campaign.
- Advocate for a percentage of homes built to universal design/visitability standards.
- Promote training and incentives for architects and home builders to increase the supply of accessible housing, and homes built to universal design and visitability standards.
- Disseminate information about housing options and resources widely (i.e. care coordinators, teachers, families).
- Advocate for increased home modification services.
- Explore obtaining federal and /or state tax breaks for building universal design housing.

#### Objective 3.2 Stimulate the development of a full array of housing options

- Advocate for more emergency housing, including homeless shelters.
- Develop housing/programs for 18 year olds transitioning out of foster care, including those with FASD.
- Explore strategies to promote enforcement of the Fair Housing Act.
- Advocate for reducing the long waiting list for Section 8 vouchers.
- Advocate for increasing the number of points given to individuals with disabilities and families, on waiting lists for housing vouchers.
- Advocate for expanded affordable housing options for people with disabilities.
- Promote the development of housing options for people with disabilities in areas accessible to community amenities.

Objective 3.3 Increase training about home ownership and housing options

- Promote the development of home ownership training for individuals with developmental disabilities to include home maintenance, money management, Individual Development Accounts, and other applicable life skills training.
- Develop white paper outlining people's rights to live in residential settings.

Objective 3.4 Support the Development of a Housing Trust and Other Measures to Eliminate Financial Barriers to Obtaining Housing

- Work with AMHTA and other partners to establish a housing trust (seeded with AMHTA funding).
- Advocate for expanding and making permanent the AHFC pilot project on use of vouchers for home ownership.
- Partner with interested organizations to build more homes for people with disabilities.

## HEALTH

### **Goal 4: People are healthy and benefit from the full range of needed health care services.**

Objective 4.1 Promote the continuation and improvement of existing Medicaid benefits

- Work with the Division of Senior & Disabilities Services to implement recommendations of the Long-Term Care and Cost Study.
- Advocate for Medicaid funding that is sustained and adjusted for inflation.
- Advocate to continue preventive and restorative dental coverage for adults on Medicaid.
- Advocate for the exploration of an assessment tool that more effectively evaluates the strengths and needs of the individual.
- Collaborate with the Medical Care Advisory Committee and other stakeholders to remove the disincentives for doctors, dentists and other medical providers to accept Medicaid patients.
- Explore the potential for Medicaid and private insurance to fund preventive behavioral health services for children under the age of five.
- Explore the use of a Medicaid State Plan option to provide needed services to individuals with autism.
- Advocate for the removal of barriers to needed services within the Medicaid system.

Objective 4.2 Promote wellness for individuals with disabilities

- Work with community partners to promote training and outreach to improve communication, referral and holistic care among those who provide health care to individuals with disabilities.
- Work with the Advisory Board on Alcohol and Drug Abuse to increase public awareness of the health impacts of drugs and alcohol on children.
- Work with partners to promote wellness, encourage physical exercise and improve access to preventive health care to reduce of the prevalence of overweight and obesity, especially among people with disabilities.

Objective 4.3 Promote easy and full access to a comprehensive array of health care services.

- Advocate for more specialists trained in providing appropriate services to individuals with autism spectrum disorders, developmental disabilities, other cognitive impairments and behavioral challenges.
- Collaborate with private and public health planning groups to increase access to specialists and specialty clinics statewide, including the use of telehealth.
- Advocate for improved access to mental and behavioral health evaluations and services.
- Advocate for improved access to counseling for the whole family.
- Work with the Alaska Mental Health Trust Authority, the Division of Behavioral Health and other partners to plan, develop and implement the “Bring the Kids Home Initiative” that will allow children and their families to received needed services in Alaska.
- Work with relevant State agencies and other key stakeholders to prevent fetal alcohol spectrum disorders and better serve those affected by prenatal alcohol exposure.

Objective 4.4 Provide support and technical assistance to the agencies responsible for emergency and disaster preparedness.

- Ensure that emergency plans are inclusive of people with disabilities and that needs for equipment, medical supplies, medication, communication, and transportation have been considered.
- Work with Emergency Preparedness planners statewide to develop voluntary registration programs to alert first responders to where people with disabilities live.
- Advocate for training of police, fire and medic personnel on how to work with people who experience disabilities during an emergency situation.

## LIFELONG LEARNING

### Goal 5: Children receive prevention and early intervention services.

Objective 5.1 Complete tasks assigned to the Council as Alaska's Interagency Coordinating Council for Infants and Toddlers with Disabilities.

- Advise and assist the Office of Children's Services (the lead agency) in the performance of their responsibilities set forth in Part C of the Individuals with Disabilities Education Improvement Act of 2004, particularly the identification of the sources of fiscal and other support for services for early intervention programs, assignment of financial responsibility to the appropriate agency, and the promotion of the interagency agreements.
- Advise and assist the Office of Children's Services in the preparation of Part C applications and amendments to the Individuals with Disabilities Education Improvement Act.
- Advise and assist the Department of Education & Early Development regarding the transition of toddlers with disabilities to preschool and other appropriate services.
- Prepare and submit an annual report to the Governor and to the Secretary of Education on the status of early intervention programs in Alaska for infants and toddlers with disabilities and their families and disseminate widely.
- Advise and assist the lead agency and the Department of

Education & Early Development regarding the provision of appropriate services for children from birth through age 5.

- Advise appropriate agencies in Alaska with respect to the integration of services for infants and toddlers with disabilities and at-risk infants and toddlers and their families, regardless of whether at-risk infants and toddlers are eligible for early intervention services in Alaska.

Objective 5.2 Advocate for the provision of needed services in a timely manner for all children from birth through age five and their families.

- Advocate for the State to adopt a 25% delay for eligibility for Part C/Infant Learning Program services.
- Advocate for increased funding to meet underserved and unserved needs statewide.
- Ensure comprehensive parent support training pertaining to the Individuals with Disabilities Education Act, Individual Family Service Plans, transitions, and advocacy.
- Support sensitive and thorough transition services for families and children between Early Intervention/Infant Learning and school services.

Objective 5.3 Advocate for a well-trained, highly qualified, and sufficient workforce of specialists, associates and paraprofessionals to provide statewide early intervention services in a timely manner.

- Ensure that comprehensive training and support occur for early interventionists and related service providers pertaining to the Individuals with Disabilities Education Act, Individual Family Service Plans, transitions, assessment, data collection and monitoring.
- Support the creation of an Occupational Therapy degree program at the University of Alaska Anchorage.
- Advocate for adequate compensation and benefit packages to attract and maintain well-trained specialists, qualified professionals, associates and paraprofessionals.

**Goal 6: Students reach their educational goals, hopes and dreams.**

Objective 6.1 Complete tasks assigned to the Council as Alaska Special Education Advisory Panel on the education of students with disabilities.

- Advise the Department of Education & Early Development and the State Board of Education & Early Development of unmet needs within the State in the education of children with disabilities.
- Comment publicly on any rules or regulations proposed by the State regarding the education of children with disabilities.
- Advise the Department of Education & Early Development in

developing evaluations and reporting on data to the Secretary of Education.

- Advise the Department of Education & Early Development in developing corrective action plans to address findings identified in Federal monitoring reports under the Individuals with Disabilities Education Improvement Act of 2004.
- Advise the Department of Education & Early Development in developing and implementing policies relating to the coordination of services for children with disabilities.
- Advise the Department of Education & Early Development on the education of eligible students with disabilities who have been convicted as adults and incarcerated in adult prisons.
- Prepare and submit an annual report of panel activities and suggestions to the Department of Education & Early Development and disseminate widely.

### Objective 6.2 Govern the Special Education Service Agency (SESA).

- Assure that the SESA provides assistance to Alaskan school districts and early intervention programs serving students with low incidence disabilities, who live primarily in rural and remote parts of Alaska.
- Assure that the SESA promotes and supports student, family and community centered education that is personally and culturally relevant.
- Assure that the SESA provides individualized supports and accommodations for equal, appropriate access to learning.
- Assist the SESA in addressing other state needs which relate to the education of individuals who experience low incidence impairment as external funding is identified and secured.
- Monitor and update the SESA board policies and procedures as needed.
- Develop strategies to recruit and retain more special education teachers and paraprofessionals with particular emphasis on rural Alaska (i.e. incentives, mentoring, career fairs).
- Ensure comprehensive parent support training on the Individuals with Disabilities Education Act, Individual Education Plans, transition services, and advocacy.
- Ensure comprehensive training and support for the implementation of a community-based, seamless system approach across life to assist with transitions from program to program.
- Advocate for the development of transition-specific trainings (e.g. persons-centered planning, career exploration, assistive technology, benefits planning, etc) for special education staff through classes and workshops.
- Ensure that all statewide assessments are developmentally appropriate.
- Explore whether the State foundation funding formula and Child Count policies result in resources that match averaged enrollment over the school year.

### Objective 6.3 Advocate for a well-trained and highly qualified workforce sufficient to meet the needs of families, children and youth with disabilities.

- Ensure that teachers, paraprofessionals, administrators, and related service personnel have comprehensive training and support in special education, the Individuals with Disabilities Education Act, Individualized Education Plans, transition services, self-determination, vocational accommodations, assessment, data collection and monitoring.

Objective 6.4 Advocate for funding systems, policies and priorities that promote a quality education and lifelong learning for, and community participation by all Alaskans with disabilities.

- Research the impact of the existing funding formula and child count policies on school districts and advocate for change if warranted.

Objective 6.5 Pursue statewide system change related to transition from school to adult life.

- Promote the use of Employability Standards in the schools.
- Strengthen transition plan expectations to focus on employment or post-secondary education as an outcome.
- Develop strategies to link youth with disabilities to mentors.
- Disseminate information about scholarships, apprenticeships, and post-secondary education to youth with disabilities.
- Strengthen linkages among the educational, vocational rehabilitation and workforce development systems.
- Provide information to youth with disabilities, family members, service providers, state agency staff, and school staff about transition services that encourage work as an expectation.

## COMMUNITY PARTICIPATION

### Goal 7: Every individual is a valued, participating member of his or her community.

Objective 7.1 Improve and expand transportation options and pedestrian access statewide.

- Continue to collaborate with the Alaska Mobility Coalition to enhance transportation options statewide.
- Improve and expand private and public transportation services.
- Provide training for transportation providers, consumers and employers.

Objective 7.2 Promote physical and social access to community life for individuals with disabilities.

- Increase inclusive recreation through education, training and opportunities in communities throughout Alaska.
- Research and develop extended day recreation opportunities across the state.
- Advocate for increased availability of affordable, appropriate child care for children with disabilities.
- Advocate for a statewide system of inclusive child care training.
- Work with the Alaska State Community Service Commission to increase participation in volunteer activities by persons with disabilities.

- Assist with implementation of the Help America Vote Act.

Objective 7.3 Enhance public awareness to create opportunities for community participation

- Continue public media campaigns to educate communities about people with disabilities and their needs.
- Eliminate barriers so that individuals can make choices and exercise control while remaining safe in their community.
- Enhance public awareness of voting rights among people with disabilities.
- Work with partners to implement strategies identified during the Alliance for Full Participation Summit.
- Develop the next generation of individual, organizational and community leaders.
- Build communities that welcome and support people with disabilities.
- Upgrade the workforce and establish performance expectations.

Objective 7.4 Complete tasks assigned to the Council as Alaska's State Council on Developmental Disabilities through system change, capacity building and advocacy activities.

- Develop, monitor, implement, and evaluate the Council's five year State plan



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## ACKNOWLEDGEMENTS

The Governor's Council on Disabilities and Special Education thanks everyone who participated in the planning process for helping us understand the statewide issues affecting Alaskans with **disabilities and coming up with proposed solutions. The Council's five-year goals, objectives and strategies** are a direct result of your input.



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Five Year Plan 2006-2011

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