

**TASK FORCE ON TRANSITIONS FOR PEOPLE
WITH DEVELOPMENTAL DISABILITIES**

November 19, 2008

10:00 – 3:00

NCIOM

Meeting Summary



ATTENDEES:

Task Force/Steering Committee: James Bodfish, Adonis Brown, Leza Wainwright, Robert Atwater, William Bingham, Almon Carr, Connie Cochran, Beverley Earle, Cindy Ehlers, Jean Farmer-Butterfield, Daniel Fox, Joan Johnson, Scott Keller, Annette Lauber, Matty Lazo-Chadderton, Karen Luken, Betsy McMichael, Michael Maybee, Marian McLawhorn, Maureen Morrell, Alexander Myers, Genny Pugh, I. Azell Reaves, Dave Richard, Holly Riddle, Michael Sanderson, Peggy Terhune, Jill Keel, Vivian Leon, Ellen Russell

Interested Persons/Staff: Jacqueline Cavadi, Freda Lee, Joan McAllister, Patricia Porter, Gina Price, Erin Russell, Sillar Smith, David Test, Laura Wooten, Kimberly Alexander-Bratcher, Mark Holmes, Jesse Lichstein, Thalia Shirley-Fuller, Pam Silberman

WELCOME AND INTRODUCTIONS:

James Bodfish, Ph.D.

*Director, Center for Development and Learning
Carolina Institute for Developmental Disabilities
University of North Carolina Chapel Hill*

Dr. Bodfish welcomed the attendees and asked them to introduce themselves.

NC EDUCATION OPTIONS; SECONDARY OPTIONS

Freda M. Lee, M.A.Ed.

*Consultant for Intellectual Disabilities, Secondary Education, & Transition Services
Exceptional Children Division
NC Department of Public Instruction*

The mission of the North Carolina State Board of Education is that “every public school student will graduate from high school globally competitive for work and post-secondary education and prepared for life in the 21st century.” Currently, for every 100 public high school students only 64 graduate four years later and even fewer are prepared for post-secondary education. Additionally, data show that a high school-level education or higher is now necessary to be a skilled person, as opposed to a total of six to eight years of education required in the 1950s and 1960s. In order to meet the goal of the Board of Education, North Carolina has changed its graduation requirements, placing more rigorous standards on all students.

A recent study of North Carolina high schools =showed poor outcomes for students with disabilities. Fewer than 42% of students with disabilities scored at or above Level III¹ on the 2006-2007 End-of-Course Tests in core academic areas. Students with disabilities who miss ten or more days of school are more likely than their peers to fail core academic courses and/or drop out. It is important to note that the definition of a student with a disability is any student with an Individual Education Plan (IEP); these data have not been sorted for level of developmental disability, and the majority of children with cognitive disabilities are not included in these data.

A review of national models and best practices provided several successful strategies to improve educational outcomes for students with disabilities. Early collaboration between all stakeholders was noted as one of the best ways to improve outcomes. Models that focused on students with significant cognitive disabilities cited positive behavior support, a continuum of special education in each high school, and co-teaching with regular and special education in the same classroom. The recommendations also included mentoring programs, drop-out prevention programs, and transition or bridge classes for students with developmental disabilities.

Comments/Discussion: The discussion focused on methods to collect developmental disability specific data and improve outcomes. In North Carolina, there are three exit documents: diploma, graduation certificate, and certificate of achievement. Many students with developmental disabilities are not graduating with diplomas. In order to increase that number, the group discussed the possibility of Graduate Education Development courses, extended time to complete required hours, continued studies to earn a diploma, educational based vocational training, and transition courses.

TRANSITION

David Test, PhD

*Project Co-Principal Investigator – Knowledge Generation
National Secondary Transition Technical Assistance Center
Department of Special Education and Child Development
University of North Carolina at Charlotte*

For future teachers, the curriculum in most institutes of higher education (IHE) fold secondary transition subject matter into the general curriculum, although there is an adapted curriculum for special education. Recently, there were requests from 14 universities for a transition course of study, but only one state currently has a certificate or license for secondary transition.

Data has been collected following students after leaving the school setting, using 35 annually collected state performance indicators Indicator 14 focuses on youth who had an IEP (i.e. children with disabilities), are no longer enrolled in secondary school, and are employed and/or enrolled in post-secondary school within one year of leaving high

¹ Students who enter the 9th grade for the first time in 2006-2007 and beyond are required to score at Achievement Level III or above on end of course assessments in English I, US History, Biology, Civics and Economics, and Algebra I.

school. The study was only able to contact 70% of the students meeting these criteria. More than half (53%) of them had dropped out of school, and only 43% received a diploma or certificate of achievement. There was discussion of the limitations of these data.

The National Secondary Transition Technical Assistance Center (NSTTAC) helps states collect and report indicator 13 data. The NSTTAC is charged with generating knowledge that provides an evidence-based foundation for secondary transition practices. The group has designed a website for the results of their literature review, which focused on quality and results. The taxonomy includes student focused planning, student development skills, and program structure. Family involvement and interagency collaboration are areas still being researched to find evidence-based practices. The group has identified 29 evidence-based practices and developed 67 Research to Practice lesson plan starters. They are available on the website which will have an online library in December. (Handouts on the evidence based practices were provided to the group and are also posted to the NCIOM website.)

There are several areas of discussion in the field of secondary transition. Individual education plans (IEP) must have a secondary transition plan beginning at age 14, including measurable plans and goals. Discussion has focused on post-school goals, permission in advance of needed changes, specifications for student's course of study, and the low number of states in compliance (6). Interagency collaboration is another hot topic. Cleveland County Schools is one of best models of interagency collaboration. They use an IEP team with both in-school interagency and community team members. Another good example is Watauga County Schools. They begin meeting to plan for the student's transition at age 14.

Comments/Discussion: The discussion focused on evidence-based methods to improve the post-secondary transition. Suggestions included developing a state and local level interagency collaboration process that is consistent, creating and/or strengthening programs focused on transitioning to post-secondary education, expanding access to the occupational course of study, and identifying and developing funding sources and mechanisms. Other suggestions included better assistive technology and participation in the data collection process.

POST-SECONDARY

Sillar Smith

State Director of Compensatory Education and Special Populations

North Carolina Community College System

The Compensatory Education program is a statewide community college program designed for adults with intellectual and developmental disabilities. The program intends to compensate for inadequacies in the early education of adults with intellectual and developmental disabilities. Compensatory Education was first implemented in 1983 and is now available at all 58 community colleges in the state at no cost to students. The program is administered under the North Carolina Community College System Academic

and Student Services Division's Basic Skills Department and receives both federal and state funds. The federal funds are used for programmatic purposes and the state funds are generally used to hire a part-time coordinator.

The program focuses on preparing students to function as independently as possible. The curriculum focuses on language, math, social science, community living, consumer education, health, and vocational education. Each unit includes lessons based on tasks with suggested behavioral objectives, success criteria, teaching strategies and resources. Eligible students must be at least 17 years old and be diagnosed with intellectual or developmental disabilities, or a similar level of functioning, by a qualified professional. Students must be pre- and post-tested annually using the Comprehensive Adults Student Assessment System (CASAS) or the Providing Options for the Workplace Education and Rehabilitation (POWER). Classes are held in various settings both on community college campuses and in the community.

Comments/Discussion: The discussion focused on inadequacies in the current system of compensatory education and how to make improvements. The program has not been updated since its implementation, and the level of funding has only slightly increased. Federal restrictions on funding limit the curriculum and do not reflect the work being done in schools. There are current efforts to update the program of study through the Workforce Development Act. Other items of discussion included revamping the system, inconsistencies across the state, possible dual enrollment in high school and community college for students with intellectual disabilities, Graduation Education Development and certificate programs in the community colleges, transitions courses to help guide students through the process, and the need for better data on students and their outcomes.

POST- SECONDARY OPTIONS

*Michael Sanderson, MPH
Best Practices Unit Manager
Children and Youth Branch
NC Division of Public Health*

The Carolina Health and Transition (CHAT) project focuses on the transition from pediatric care to the adult health care system. The transition is a process that moves from a child and family-centered model to a patient-centered model. The movement to the adult health care system contributes to adolescents assuming adult roles and functions. The goal is to focus on uninterrupted care as the individual moves from adolescence to adulthood. The program is designed for children and youth with special health care needs, including conditions such as developmental disabilities.

There are several priorities that youth with disabilities need for success in adulthood, and health is ranked third. The number of youth with special health care needs (YSHCN) is steadily increasing and the availability of health care providers is decreasing. More than half of surveyed families report a lack of satisfaction with their health care provider, and North Carolina ranks below the national average in receiving necessary services to make the successful transition to adult health care. In a national survey, only 12.9% of families have discussed transition with their doctor and only 21.1% talked about how to maintain

the youth's health insurance. A survey of youth indicated a strong interest in personal involvement in their health care.

The CHAT Project is designed to assure that children and youth with special health care needs receive needed services as well as comprehensive, coordinated care within a medical home. The project hopes to accomplish this goal through the development of health care transition materials, education and mentoring, evaluation and dissemination, and collaborative health promotion. There are currently three primary initiatives aimed at youth, families, and providers; two supporting initiatives focused on youth mentorship and leadership and care coordination, and an evaluation component that will develop surveys and a database. The various partners of the project have been very productive, and there are detailed plans to continue the program by integrating systems, planning for sustainability, and addressing systemic, structural, and psychosocial barriers.

Comments/Discussion: The discussion that followed focused on challenges to a successful health care transition, including the various skills students need, insurance coverage, case management, information sharing, guardianship and health care power of attorney education, need for competency based training for direct support staff, effectively engaging schools and other partners, the transition to specialty care (including obstetrics and gynecology), allied health professional training, and regional variation in access to providers.

*Joan McAllister, MSW
LINKS State Coordinator
NC Division of Social Services*

The North Carolina LINKS program is designed to help youth successfully transition from foster care to adulthood. The program focuses on seven outcomes: 1) enough money to live on, 2) safe and stable place to live, 3) sufficient education and vocational training, 4) avoidance of high risk behaviors, 5) support network of five caring, responsible adults, 6) postpone parenthood, and 7) have access to health care and health insurance. Any youth who is in the Department of Social Services (DSS) foster care system as a teenager, is a legal US resident, and has less than \$10,000 in reserves is eligible for the LINKS program. The eligibility criteria is as general as possible to cover as many children as possible. There are eligibility variations by county, but they all must serve young adults who aged out of their county DSS custody and youth at least 16 years old who are now in DSS foster care custody.

The LINKS services include assessment of life skills, planning based on individual goals, helping youth access resources, tough love, LINKS special funds (reimbursement for critical needs that if not addressed would lead to a cascade of consequences), the positive youth development approach, and experiential learning. The program is funded by both federal and state funds based on the number of participants, ranging from \$500 to \$500,000 annually. This program is voluntary and youth must make a contribution to help achieve their highest level of self sufficiency.

Every county must report data on the youth who age out of DSS foster care. Most youth who leave foster care do not want a continuing relationship with the system. The data presented are based on the roughly one-half of youth who had sufficient contact to provide information. The outcomes vary significantly by county. However, about one-third of those who are in contact do not have enough money to live on, 13.9% are not in safe and stable housing, 25.7% have dropped out of high school, 46.2% are engaging in high risk behaviors, 40% cannot identify five caring and responsible adults, 20% are single parents, and they tend to have more health problems than their peers who remain in foster care.

North Carolina does have some special provisions for youth who age out of foster care. Youth up to age 21 are eligible for Medicaid, and there are two dedicated scholarship programs for youth aging out of foster care. If students meet the criteria they may be eligible for Education Training Vouchers up to \$5000 or the NC Reach Scholarships, which include full scholarship to any University of North Carolina system school and all North Carolina public community colleges.

Discussion: The discussion that followed focused on the small number of youth served by the program and effectively increasing access to services. The number of youth who transitioned out of foster care last year (n=634), who have disabilities (n=58), and particularly developmental disabilities (n=13) is very small.

*Gina Price, LPC, M.S., CRC, LCAS, CSI
Program Specialist
NC Division of Vocational Rehabilitation*

The Division of Vocational Rehabilitation (VR) provides services to consumers with a variety of needs. In 2008, more than 35% of people served had a developmental disability. The number of consumers who apply for and are being served by VR has increased significantly in the past few years. Individuals applying for services must have a disability that substantially impacts their employment potential and it is determined that services will likely lead to employment. All services must be associated with a specific vocational goal.

There are several post-secondary services available through VR covering a broad array of needs. They include guidance and counseling; testing, evaluation, and specialized assessments; rehabilitation engineering services; home, vehicle, and job site modifications; assistive technology; cognitive retraining for people with brain injuries; personal assistance; work adjustment training based in the community and facilities; work adjustment job coaching; vocational/college training; supported employment; benefits counseling; and assistance with transportation related to employment.

Comments/Discussion: The discussion that followed focused on the need to choose services from either the adult or juvenile system, cooperative agreements between the Department of Public Instruction and schools to provide student transportation, resources

specific to the post-secondary transition, the importance of long-term follow-up, and costs of these services and supports.

General Discussion: The participants discussed the need for state and local interagency collaboration, regional transition coordinators and/or specialists, community college program revisions, sharing of data, increased medical and dental Medicaid reimbursement, post-secondary education including the community college and university systems, segregated settings and programs for students with intellectual and developmental disabilities, new state positions for developmental disabilities, flexibility in funding so that support can be focused on the individual, and pay-for-performance.