

# Direct Connection

MISSOURI DIVISION OF  
DEVELOPMENTAL  
DISABILITIES



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CONNECTING WITH THE  
DIVISION OF  
DEVELOPMENTAL  
DISABILITIES

Missouri Department of  
Mental Health

Division of  
Developmental  
Disabilities

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Jefferson City, MO 65102

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573-751-4054

## Facilitating Individualized Services and Supports

**THE DIVISION PROMOTES INDIVIDUALIZED SERVICES AND SUPPORTS THAT HELP – INCREASE INDEPENDENCE, INTEGRATION, INCLUSION, PRODUCTIVITY, AND SELF-DETERMINATION – AND IMPROVE HEALTH AND SAFETY.**

**PAID SUPPORTS** – Many times, when families and individuals with disabilities think of services and supports, they think about paid services such as residential care, assistance with adaptive equipment, personal assistance, or respite care. These supports are usually paid for by Medicaid, Medicaid Waiver, private funds, or other monetary sources. Paid supports help individuals with disabilities and their families, but additional support, called natural support, is equally important.

**NATURAL SUPPORTS** – As defined in the Lanterman Developmental Disabilities Services Act, Section 4512 of the Welfare and Institution Code, Part (e): “Natural Supports” means personal associations and relationships typically developed in the community that enhance the quality and security of life for people, including, but not limited to, family relationships; friendships reflecting the diversity of the neighborhood and the community; association with fellow students or employees in regular classrooms and work places; and associations developed through participation in clubs, organizations, and other civic activities.

Natural supports are an important part of each person's life. Individuals with and without developmental disabilities need natural supports because they are vital in helping to promote the development of a healthy and happy life. A person serving as a natural support should recognize that an individual makes his or her own contributions to the relationships. Service providers and/or anyone interested in the life of someone else can contribute to building natural supports.

Natural supports allow a person to gain confidence by contributing toward a meaningful association or relationship. Developing natural supports is based on what the individual wants rather than what professionals recommend. Importantly, natural supports allow for an environment that fosters laughter, attention, respect and love. Natural supports will support the choices of an individual and provide a safety net when things go wrong.

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The State of Missouri has been collaborating with stakeholders in the *Natural Supports, Friendship, and Social Capital Workgroup* since January 2014. For more information about this workgroup, contact Kyla Eversman at [Kyla.Eversman@dmh.mo.gov](mailto:Kyla.Eversman@dmh.mo.gov).

**SELF-DIRECTED SUPPORTS (SDS)** -- Self-Directed Supports (SDS) is an option for service delivery for individuals with developmental disabilities who wish to exercise more choice, control, and authority over their supports. SDS is founded on the principles of Self-Determination. Under this option, the individual or their designated representative has employment and budget authority. This authority allows individuals and families to hire, train, and schedule their own employees, using an individualized budget.

**Missouri Autism Centers**

Cardinal Glennon Knights of  
Columbus Behavior Clinic  
St. Louis, MO 63110  
314-577-5609  
[www.cardinalglennon.com](http://www.cardinalglennon.com)

Children's Mercy Hospitals and  
Clinics, Developmental  
Center/Autism Center  
KC, MO 64108  
816-234-3674  
866-512-2168 (Toll Free)  
<http://www.childrensmc.org/Autism/>

MU Thompson Center for Autism and  
Neurodevelopmental Disabilities  
University of Missouri  
Columbia, MO 65211  
573-884-6052  
<http://thompsoncenter.missouri.edu/>

Southeast MO State University  
Autism Center for Diagnosis and  
Treatment  
Cape Girardeau, MO 63701  
573-986-4985  
[autismcenter@semo.edu](mailto:autismcenter@semo.edu)

## Missouri Autism Centers Make an Impact

In 2008, Missouri responded to a critical public health need by providing funding to three diagnostic clinics across the state for the express purpose of reducing the amount of time a child waited before being evaluated for autism spectrum disorder. A fourth site was added in 2009, and the Centers immediately began implementing plans to address their wait lists.

Five years have passed with compelling data demonstrating that more children are being referred and wait times are being reduced. With the recent release from the CDC of autism prevalence rates reaching 1 in 68, Missouri's investment in diagnostic services continues to pay dividends for children and families.

In addition to increasing diagnostic capacity, the Centers have met to create and refine data collection measures which are submitted to the Office of Autism Services quarterly. Some months ago, the Centers embarked on the topic of creating a shared data repository. Together with the Office of Autism Services, the Centers are exploring the value of sharing data as well as identifying inherent challenges. Thus far, Centers have agreed to use the Autism Treatment Network (ATN) recommended diagnostic battery as well as to identify 50 data elements believed vital to populate a repository. Further discussions related to gaining consensus on minimum data sets, forming a Scientific Advisory Committee, and developing requisite interclinic memoranda of understanding will continue. How would a data repository for individuals with autism spectrum disorder relate to Individualized Services and Supports? Diagnostic and demographic information can translate into better public policy. Better public policy advances better services and supports and the effective use of public funds.



# Missouri Autism Projects

Missouri’s five Autism Projects have existed for over two decades. A grassroots effort on the part of families began in the late 1980s and materialized as a pilot project with the Division of Developmental Disabilities (DD) for twenty counties in mid-Missouri. By 1994, the Projects were developed statewide with an appropriation of \$3.5 million.

The Autism Projects exist to provide needed supports to individuals with autism and their families. In fact, the statute (633.220 RSMo) states that the Division of Developmental Disabilities shall establish programs and services “designed to enhance persons with autism spectrum disorders and families’ abilities to meet needs they identify...” Each Autism Project has a Parent Advisory Committee connected to it and appointed by the Division of Developmental Disabilities. These committees make recommendations about funding, providers, and services to the Director of DD. In addition, each Autism Project operates a little differently in response to those recommendations.

Currently, the Missouri Autism Projects are funded at about 7.5 million dollars. These funds are strictly Missouri tax dollars. That funding is distributed among the five Projects based on recommendations made to the Director.

As the division has engaged Targeted Case Management entities to provide case management to individuals enrolled with DD, the knowledge and experience of how to access Autism Project services have drifted somewhat. Where once Support Coordinators could rely on “oral history” to guide the process, it now may be that no one in the organization has that specialized knowledge. An unfortunate and unintended result could be that families who might be eligible for Autism Project services do not get them.

For that reason, the Office of Autism Services began creating and formalizing processes and protocols for each Project. It was decided early on to use the internet as the repository of information for both families and Support Coordinators. All links to the Missouri Autism Project web pages are active. All Project pages may be accessed at <http://dmh.mo.gov/dd/autism/AutismProjects.htm>, and there is a link to an overview of Missouri’s Autism Projects at <http://dmh.mo.gov/dd/autism/>.

The Office of Autism Services encourages families to review the links associated with the Autism Project in the region in which they reside. The objective is to provide families knowledge and resources about programming and supports for which they may be eligible.

Finally, the Division has identified staff in each Regional Office as Autism Navigators. These staff have specialized knowledge about autism and resources that families might use. Those individuals and the Regional Office they serve may be found at <http://dmh.mo.gov/docs/autism/ANRosterbyPACregion.pdf>. Anyone with questions about the Autism Projects or the Division of Developmental Disabilities may contact the Autism Navigator for assistance.





# Taylor's Story

Taylor Gosney, age 19, lives in Monroe City with his mother and father. His two older brothers are grown and out of the home. Taylor will attend Mississippi Valley State School in Hannibal until he is age 21. Because Taylor is approaching the end of his formal schooling, his education plan has focused less on academics and more on living skills. Taylor has autism and is non-verbal, but he finds many ways to communicate by writing notes, using his NOVA chat communication device, and through his laughter, smiles, and delightful sense of humor. Taylor has been able to recognize letters of the alphabet since the age of three. He loves to listen to music, play games on his electronic tablet, and work.

His mother, Sheila Gosney, said that she noticed dramatic changes in Taylor around his first birthday. He stopped making eye contact and using language. Sheila took him to a general pediatrician who told Sheila that Taylor was fine. Sheila knew something was not right and persisted to seek evaluations for him. Taylor was diagnosed with autism before his second birthday.

Throughout the years, Taylor received some services through his school and through providers contracted with the Department of Mental Health. But it has not been an easy journey. Sheila said on many occasions, crises would occur. Taylor, who has obsessive compulsive disorder (OCD), would become frantic and go into frenzies, sometimes hitting and pushing Sheila, whom he loved most. Sheila suspects Taylor's aggressive actions may have been due to his inability, at times, to communicate effectively. Sheila indicated that OCDs do not have to sprout into big ugly monsters but rather, can be tamed to livable levels. She believed Taylor seemed to need more help than he was getting and more organization in his life. Finally, when Taylor turned 18, he was able to get a Partnership for Hope Waiver slot which has opened up a wealth of opportunities for him.

In October 2013, Taylor was approved for self-directed supports offered through the Partnership for Hope Waiver. This meant Taylor was able to get connected with Matthew Harris, a Community Specialist in the area. Sheila was optimistic that Matthew's services would be beneficial for Taylor, as Matthew had a good reputation in the community, a college degree in psychology, and much experience working with individuals with disabilities. Although Sheila described Taylor's first visit with Matthew as rough, she said that within 5-6 months, Taylor made tremendous improvements.

Matthew goes on 2-2 ½ outings with Taylor per week. Matthew takes Taylor to volunteer activities at the church, the Senior Nutrition Center to portion out food for Meals on Wheels, and to the food bank. Matthew and Taylor also go on shopping excursions to the grocery store and to Taylor's favorite thrift store, and they eat out at restaurants, attend ballgames, and go to the bowling alley. During these outings, Matthew helps Taylor develop skills such as:

maintaining focus, listening to and answering questions, communicating with others, crossing streets safely, reducing self-stimulatory behaviors, carrying and spending his own money, and making his own choices. Matthew is able to direct and redirect Taylor in ways to which Taylor appropriately responds, and this positive behavior reinforcement translates into Taylor responding better to Sheila.

By all accounts, Taylor has blossomed since Matthew has entered his life as a Community Specialist. Matthew proves that with proper supports and services tailored to meet an individual's unique needs, persons like Taylor with disabilities can realize their fullest potentials. As Matthew will continue to work with Taylor on transitioning from secondary education to adulthood, it seems that the possibilities are endless for Taylor.



Taylor Gosney uses his NOVA chat communication device to order his favorite lunch at C & R Market in Monroe City.



# Spotlight on Community Specialist

## **MATTHEW HARRIS, COMMUNITY SPECIALIST, MAKES POWERFUL IMPACT ON LIVES OF INDIVIDUALS AND THEIR FAMILIES**

Matthew Harris didn't intend to become a Community Specialist. In fact, he had several job offers along the way – ones that promised greater stability and benefits. In the end, he said, "I prayed and left it in God's hands."

Matthew Harris, a father of three, works as a Community Specialist, supporting individuals in and around Monroe City. He has substantial experience supporting individuals in previous positions at Job Point in Columbia where he worked as an Employment Consultant, a Job Readiness trainer, and a Job Developer – all with the goal of matching individuals with employers; at County Connections as a Support Coordinator where he traveled extensively to serve individuals in the northeast corner of the state; and at Learning Opportunities/Quality Works, Inc. as a Community Services Coordinator. Matthew claims that this experience together with a college degree in psychology provided the necessary foundation to promote successful outcomes in his role as a Community Specialist.

Matthew's leap of faith has paid dividends for those he supports. He currently supports four individuals and confesses to a lot of stress – both in waiting for service authorizations to renew and in the day-to-day challenges of assisting individuals to gain independence.

The rewards are great, however. Matthew commented upon the first individual for whom he provided Community Specialist services. This young man had been spending approximately 60% of his time in day services and the rest job coaching with a custodian. This routine had existed for this individual for five years with no decrease in supports. Matthew began working with this individual who currently works with little to no support from Matthew, has secured a driver's license, and is working toward buying a car. He plans his days independently and looks forward to living more independently. Already, Matthew estimates an approximate 30% reduction in the cost of supports. Matthew finds his work to be rewarding when he sees individuals with whom he works grow and succeed.



Taylor Gosney (center) hangs out with his mother, Sheila Gosney, and Community Specialist, Matthew Harris.

Supporting individuals with Autism Spectrum Disorder is a particular strength for Matthew. He attributes that strength to having personally experienced spectrum-like symptoms, giving him empathy for those with communication or sensory issues. Additionally, he attributes DD's Tools Training as important in establishing boundaries and implementing expectations. Success and progress, Matthew believes, are the result of providing more choice and the opportunity to communicate.

Matthew stresses the importance of building relationships with the individuals he supports but also emphasizes the equal importance of establishing and maintaining strong relationships within the family. He believes the success of the Community Specialist lies in the ability for one individual to conduct an assessment, develop an individualized plan, and implement that plan.

Matthew states that everyone has struggles, whether he or she had a developmental disability or not, and the individuals he supports have the same expectations as anyone else. He adds that they may need individualized support to overcome barriers and meet those expectations but, ultimately, they can succeed and when that happens, everyone benefits.

## Meet DD's New Youth Transition/ Employment Director



Duane Shumate is the new Director of Youth Transition/Employment Services for DD. Duane previously worked with Vocational Rehabilitation for 20 years. He served as a Counselor assisting individuals with disabilities in achieving their employment goals and as a District Supervisor for the past 13 years. As a District Supervisor, Duane was a co-chair of the VR and Employment Service Provider ad hoc team which redesigned employment services, reporting requirements, and implemented best case practices.

Duane received his Bachelor's Degree in Psychology and his Master's Degree in Educational and Counseling Psychology from the University of Missouri. He has presented at national and state conferences on employment services, career counseling, and effective practices. He was the recipient of the 2012 Missouri Rehabilitation Association Administrator of the Year Award.

Duane's vision is to inspire hope and create pride through employment for all individuals. His goals are to collaborate with DD stakeholders while continuing to implement best practices at the individual and organizational level which promote efficient and effective high quality outcomes for individuals with intellectual and developmental disabilities. Email Duane at: [Duane.Shumate@dmh.mo.gov](mailto:Duane.Shumate@dmh.mo.gov).

## Federal Perspective

### **FINAL FEDERAL RULE REGARDING CHANGES TO THE MEDICAID HOME AND COMMUNITY BASED SERVICES PROVIDED THROUGH THE 1915(C) WAIVER PROGRAM RELEASED**

On January 10, 2014, the Centers for Medicare and Medicaid Services (CMS) published the final rule regarding changes to Home and Community Based Services (HCBS). This rule defines a home and community based setting in Medicaid HCBS programs. It also defines the person-centered planning requirements and clarifies the timing of amendments and public input requirements when states propose modifications to HCBS waiver programs and service rates. The rule became effective March 15, 2014.

More information about this rule is available at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html>

### **On Autism...**

*"A treatment method or an educational method that will work for one child may not work for another child. The one common denominator for all of the young children is that early intervention does work, and it seems to improve the prognosis."*

-Temple Grandin



# Missouri DDD Tiered Supports Initiative

## THE TIERED SUPPORTS PROCESS: IMPROVING IMPLEMENTATION OF POSITIVE SUPPORTS FOR QUALITY LIVES

Missouri Division of Developmental Disabilities Tiered Supports initiative provides technical assistance, training, and coaching for agencies to design data systems in order to implement evidenced-based positive support practices. Agencies participate in the process voluntarily and work in collaboration with the regional behavior resource teams.

Behavior Resource Teams:

- Help individuals achieve meaningful relationships, a predictable environment, and the opportunity to develop skills.
- Help families obtain the knowledge, skills, tools, and support necessary to teach and encourage desirable behaviors and prevent challenging behavior.
- Help agency personnel teach and train staff to use effective, preventive strategies and to develop the capacity to teach and encourage desirable behaviors and to address challenging behavior using evidence-based practice

Many of the skills families and staff need can be gained from the Tools of Choice Training.

Find out more about the Missouri DDD Tiered Supports initiative at:

<http://dmh.mo.gov/docs/kcro/EssentialComponentsforImplementationofTieredSupports.pdf> .

## Calendar of Events

**August 1, 2014** – TASH Regional Conference, St. Louis, Missouri, University of Missouri-St. Louis

To view a complete schedule and register to attend, visit: <http://tash.org/eematters> .

**August 14, 2014** – Mental Health Commission Meeting, Higginsville, Missouri

To view 2014 meeting schedule, visit: <http://dmh.mo.gov/about/diroffice/commission/2014MeetingSchedule.htm>

**August 17-19, 2014** – 2014 Real Voices, Real Choices Conferences, Tan-Tar-A Resort and Conference Center

This event is sponsored by the Missouri Mental Health Foundation (MMHF)

To learn more about this event, visit: <http://missourimhf.org/2014-real-voices-real-choices-conference.php>

**September 12, 2014** – Missouri Commission on Autism Spectrum Disorder, Children's Mercy Hospital, KC, MO

To learn more information, visit Missouri's Open Meeting Notices website at: <http://www.mo.gov/meetings/>

**October 6-7, 2014** – MU Thompson Center for Autism and Neurodevelopmental Disorders 9<sup>th</sup> Annual Autism Conference, Capitol Plaza Hotel, Jefferson City, MO

To learn more about this event, visit: <http://muconf.missouri.edu/AutismConf/>



*"Individualized supports are important to me because they allow me to acquire staff that are trained with the knowledge of my specific disability in order to assist me, and, who are dedicated to making my life more comfortable and safe."*

-Susie Summers

Susie Summers (foreground) participates in an activity at Art Inspired.

MISSOURI DIVISION OF  
DEVELOPMENTAL  
DISABILITIES



Improving lives THROUGH  
supports and services  
THAT FOSTER self-determination.

Division of  
Developmental  
Disabilities

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Fostering Self-determination



Supporting Families



Facilitating Individualized  
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Developing Accessible Housing



Promoting Employment First

[www.dmh.mo.gov/dd](http://www.dmh.mo.gov/dd)

MISSOURI DEPARTMENT OF MENTAL HEALTH