



Individuals with Disabilities: Minimum Wage and Community Integration-Ken Capone Equal Employment Act

Phase-Out Plan 2017-2020

SUBMITTED OCTOBER 1, 2017



October 1, 2017

The Honorable Larry Hogan
State House 100 State Circle
Annapolis, Maryland 21401

The Honorable Thomas V. "Mike" Miller, Jr.
President
Senate of Maryland
State House, H-107
Annapolis MD 21401

The Honorable Michael E. Busch
Speaker
Maryland House of Delegates
State House, H-101
Annapolis MD 21401

Re: Report required by Health General Article §7-1012(d)(1) SB 417/Ch. 521,2016; HB 420/Ch.522, 2016 (MSAR # 10810)

Gentlemen:

Pursuant to Health General Article §7-1012(d) (1) SB 417/Ch. 521,2016; HB 420/Ch.522, 2016 the Maryland Department of Disabilities and the Maryland Department of Health - Developmental Disabilities Administration present the Equal Employment Phase-Out Plan. As required in the Ken Capone Equal Employment Act of 2016 the Maryland Department of Disabilities and the Maryland Department of Health- Developmental Disabilities Administration developed a four-year Maryland phase-out plan to end the ability of employers to pay their employees with disabilities sub-minimum wages.

If further information is required, please do not hesitate to contact Elizabeth Hall, Director of Interagency Affairs, Maryland Department of Disabilities. She may be reached at (410) 767-3652.

Sincerely,

A handwritten signature in black ink that reads "Carol A. Beatty".

Carol A. Beatty

cc: Sarah Albert, Department of Legislative Services (5 copies)

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EXECUTIVE SUMMARY

Pursuant to Health General Article §7-1012(d)(1), SB417/Ch.521,2016 & HB 420/Ch.522,2016 the Maryland Department of Disabilities (MDOD) and the Developmental Disabilities Administration (DDA) in partnership with relevant state agencies, including The Department of Commerce (MDOC) ,Maryland State Department of Education (MSDE), the Department of Labor Licensing and Regulation (DLLR) and the Division of Rehabilitation Services (DORS) shall develop and implement a plan to phase out subminimum wage jobs on or before October 1, 2020. Individuals with Disabilities – Minimum Wage and Community Integration-Ken Capone Equal Employment Act

- The phase-out plan shall include
 - *Identifying benchmarks and outcomes*
 - *Resources available and needed*
 - *Tracking outcomes*

The MDOD and DDA shall report their findings and recommendations to the Governor and, in accordance with § 2–1246 of the State Government Article, the General Assembly.

DDA and MDOD shall submit the plan by October 1, 2017 and provide progress updates on October 1 of 2018, 2019 and 2020

INTRODUCTION: FAIR LABOR AND STANDARDS ACT AND 14C CERTIFICATES (1938)

The term ‘14c certificate’ derives from a provision in section 14 (c) of the Fair Labor Standards Act or (FLSA) of 1938 and is the origin of ‘Individuals with Disabilities: Minimum Wage and Community Integration-Ken Capone Equal Employment Act’.

FLSA is a historic federal piece of labor legislation and was an integral part of President Franklin Delano Roosevelt’s ‘New Deal’ to aid in recovery from the Great Depression. It standardized many workplace conditions we as Americans take for granted such as the eight-hour work day, overtime, child labor laws and a standard minimum wage.

A lesser known provision in the FLSA is section 14(c) which specifically applies to employees with disabilities. Under section 14 (c) the United States Department of Labor can issue certificates to employers to legally allow them to pay the employees less than the minimum wage if it is deemed their ‘earning or productive capacity is impaired by age, physical or mental deficiency, or injury’.

To determine the subminimum wage of the employees with disabilities, employers perform a time study measuring the productivity of employees with a disability with employees without a disability performing the same work

MARYLAND 14C CERTIFICATES AND 2016 MARYLAND LEGISLATIVE SESSION

The world for people with disabilities has changed dramatically since FLSA was enacted. Advancements in medical care, increased emphasis on community – based settings, and landmark civil rights legislation such as the Americans with Disabilities Act have enhanced the quality of life for people living with a disability today. In a parallel fashion, the employment opportunities for people with disabilities have also expanded as a result of better understanding of how the skills and abilities of individuals with a wide range of disabilities can translated into paid work, particularly with the right supports, new assistive technologies, and an economy shifting away from the more common factory-based employment at the time FLSA was implemented.

State governments have been made aware of the concerns expressed by the disability advocacy community who view subminimum wages as a violation of the civil rights people with disabilities as well as the increasing number of federal lawsuits being brought against some states for 14(c) violations.

One potential way to address such concerns is to pass state legislation making the 14(c) section inapplicable to the state. This had been done once before prior to Maryland’s legislation. New Hampshire had banned 14 (c) certificates through state legislation in the spring of 2015. New Hampshire’s required efforts required a slightly different approach as there were no employers that were paying their workers sub-minimum wage.

In Maryland, the catalyst for the legislation began with both the provider and advocacy community. Note that the term ‘provider’ and ‘employer’ can be used interchangeably in this context, understood as the providers are the organization which provide the employment to the people with disabilities, which, while allowable, is not considered a best practice. The desired employment outcome as articulated across federal agencies is individualized, integrated, competitive employment, meaning the individuals are paid at or above minimum wage, work alongside peers without disabilities and are paid and receive benefits commensurate with individuals without disabilities working for the same business in the same or similar jobs.

In 2014, The Arc of Maryland and Maryland Works convened a workgroup to study the effect of 14c certificates. The resulting recommendation was to collaborate with other organizations to explore options for phasing out 14c certificates.

In 2015, People on the Go, a Maryland self-advocacy organization, composed of and for people with intellectual and/or developmental disabilities, conducted a membership survey and determined their members supported a 14(c) certificate phase-out as well.

People on the Go then began collaborating with other stakeholders resulting in the legislation for the Maryland 2016 legislative session called the Individuals with Disabilities – Minimum Wage and Community Integration-Ken Capone Equal Employment Act or the EEA.

The EEA legislation was based on previous federally-introduced legislation to repeal section 14(c) of the FLSA called the, ‘Transitioning to Integrated and Meaningful Employment Act’ or TIME Act. The TIME Act, introduced to the House of Representatives during the 2015 session, would have repealed 14 (c) section of the FLSA by giving states a three- year phase period to all of the providers who hold 14c Certificates.

INDIVIDUALS WITH DISABILITIES – MINIMUM WAGE AND COMMUNITY INTEGRATION, KEN CAPONE EQUAL EMPLOYMENT ACT: PHASE-OUT PLAN

The main provision in the EEA is the development and implementation of a phase-out plan of Maryland’s current providers who have a 14c certificate over four years. The EEA was effective October 1st, 2016 and providers have until October 1st, 2020 to transition all their employees to employment paying subminimum or above wages. On October 1st, 2016 there was also a provision banning any organization who had not previously held a certificate from applying for a new certificate.

PHASE-OUT PLAN DEVELOPMENT

To develop the phase-out plan, a group of state and non-state stakeholders formed the EEA workgroup with leadership from the self-advocacy disability community and state disability agencies, MDOD and DDA. From October 2016 – June 2017 the workgroup met to discuss how the plan should be developed and tracked. Members of the workgroup included representatives from Maryland Department of Disabilities, Developmental Disabilities Administration, Department of Commerce, Department of Labor and Licensing Regulation, Maryland State Department of Education, Maryland Works, Maryland Association of Community Services, The Arc Maryland, People On the Go and the Maryland Developmental Disabilities Council.

The work group gathered data from all relevant agencies (DLLR, DDA, DORS, US DOL) to gain a comprehensive understanding of how many providers currently have 14c certificates, when the certificates were expiring, and how to move forward in tracking the phase-out over the next four -years.

LEGISLATIVE COMPONENTS

Below are the required legislative components addressed in the following phase-out plan. Please note order in which they are listed below is the order in the legislation and not the order they are listed in the plan. In the plan below the tracking of outcomes (4) was incorporated in the development of the benchmark and desired outcomes (1) requirement. It is then followed by the list of resources (2) with its four subcategories and lastly the federal and state funding programs.

This information will be updated on a yearly basis.

(1) Benchmarks and desired outcomes for each year of the phase-out;

(2) A list of the resources necessary to ensure that individuals with disabilities receive support according to the needs and preferences of the individuals and in an integrated setting, regardless of the nature or, severity of the individuals' disabilities;

- (i) best practices and resources for accessing funding and resources, including for staffing, transportation, and other needed services and supports;
- (ii) best practices and resources for decision making by the individual or the individual's representative, as appropriate;
- (iii) best practices and resources for accessing medical or behavioral support needs; and
- (iv) best practices and resources for addressing family members' concerns or opposition

(3) Application for and use of all federal and state funding programs, including programs available under Medicaid waiver amendments and resources under the Workforce Innovation and Opportunities Act, to assist individuals with disabilities to obtain competitive, integrated employment; and

(4) The tracking of outcomes of individuals with disabilities on the basis of: (i) Wages; lii) Unemployment rates; (iii) The number of individuals who move from subminimum wage positions to competitive, integrated employment; and (iv) The number of individuals who move from subminimum wage positions to nonpaying activities.

BENCHMARKS AND DESIRED OUTCOMES

All benchmarks and desired outcomes are grounded in the required legislative component. Below are the plans for tracking 14c certificates status, wages, unemployment rates, competitive integrated employment and non-work activities throughout the four-year phase-out.

14C CERTIFICATE METHOD AND PLAN

To track 14c certificates partners gathered data from the United States Department of Labor (DOL), and DDA to verify 14c certificate status paying close attention to the expiration date of each certificate. The certificates are reissued on a two-year cycle. Legally, the current 14c certificate providers can renew until October 1st 2020 which includes an option for partial renewal in 2019.

The plan is to track each year how many 14c certificates are in use in Maryland to be accomplished using a collaborative interagency approach.

The baseline data will be provided through DOL's yearly revised spread sheet listing all registered 14c certificates at the beginning of each calendar year. MDOD, DLLR and DDA will collaborate to update any changes annually before October 1st of 2017-2020 and do a summary of the trends.

Annually there are specific benchmarks will be addressed in the summaries as detailed in the Table 1. For every year of the phase-out updated lists of providers and their 14c certificate status will be provided.

BENCHMARK 1 - ANNUAL 14C CERTIFICATE TRACKING

TABLE 1 ANNUAL 14C CERTIFICATE TRACKING PLAN

Quality Assurance -Provider	
Outcome: Maryland will have no 14c certificate holders by 10/1/20	
Strategy: To track all 14c certificate holders	
Action Step <ul style="list-style-type: none"> Gather data on all current 14c certificates on an annual basis 	Measures <ul style="list-style-type: none"> Total Number of Maryland 14c certificates Number of Maryland 14c certificates expired Number of Maryland 14c certificates expired and not renewed Number of Maryland 14c certificates renewed
Benchmarks	
2017	<ul style="list-style-type: none"> Infrastructure in place to track all Maryland 14c certificate holders Baseline data <ul style="list-style-type: none"> Total Number of Maryland 14c certificates <ul style="list-style-type: none"> Number of Maryland 14c certificates expired by time of annual report <ul style="list-style-type: none"> Number of Maryland 14c certificates expired and not renewed Number of Maryland 14c certificates renewed
2018	<ul style="list-style-type: none"> Reduction in Total Number of Maryland 14c certificates from 2017 Number of 2018 Maryland 14c certificates in active use Number of 2018 Maryland 14c certificates in not in active use <ul style="list-style-type: none"> The number of 2018 Maryland 14c Certificates in active use will be fewer than the number of 14c Certificates not in active use
2019	<ul style="list-style-type: none"> Reduction in Total Number of Maryland 14c certificates from 2018 Number of 2019 Maryland 14c certificates expired by time of annual report Number of 2019 Maryland 14c certificates partial renewal <ul style="list-style-type: none"> Number of 2019 Maryland 14c certificates expired and not renewed will be a larger percentage than the Number of 2019 Maryland 14c certificates partial renewed
2020	<ul style="list-style-type: none"> Reduction in Total Number of Maryland 14c certificates from 2019 Number of 2020 Maryland 14c certificates by October 1, 2020 Number of Maryland 14c certificates expired

TABLE 2: 2017 14c CERTIFICATES EXPIRED AND NOT RENEWED

Eighteen providers who have 14c certificates did not renew their certificate as of the publishing of this report. The eighteen not renewed is 44 % of the total forty-one 14c certificate providers.

#	Provider Name	Certificate Start Date	Certificate End Date
1.	Bay Community Support Services, Inc.	2/1/2015	1/31/2017
2.	Goodwill Industries of Monocacy Valley, Inc.	3/1/2015	2/28/2017
3.	Service Disabled Veterans Business Association	3/1/2015	2/28/2017
4.	State of Maryland Thomas B Finan Hospital Center	4/16/2015	3/31/2017
5.	Francis X. Gallagher Services	5/1/2015	4/30/2017
6.	Hagerstown Goodwill Industries, Inc.	5/1/2015	4/30/2017
7.	The Arc of Montgomery County	6/1/2015	5/31/2017
8.	The Arc of Southern Maryland	6/1/2015	5/31/2017
9.	Spring Dell Center, Inc.	7/1/2015	6/30/2017
10.	The Arc of Baltimore	7/1/2015	6/30/2017
11.	The Arc of Northern Chesapeake Region	8/1/2015	7/31/2017
12.	The Arc of Prince George's County	8/1/2015	7/31/2017
13.	Springfield Hospital Center	8/1/2015	7/31/2017
14.	The Center for Life Enrichment, Inc.	8/1/2015	7/31/2017
15.	Community Living, Inc.	8/1/2015	7/31/2017
16.	C.H.I. Centers, Inc.	9/1/2015	8/31/2017
17.	Delmarva Community Services	11/1/2015	10/31/2017
18.	Ellicott Enterprises, Inc.	12/1/2015	11/30/2017

TABLE 3: 2017 14 C CERTIFICATES EXPIRED AND RENEWED

Seventeen providers who have 14c certificates renewed their certificate as of the publishing of this report. The seventeen renewed is 41 % of the total 14c certificate providers.

#	Provider Name	Certificate Start Date	Certificate End Date
1.	Chimes District of Columbia	4/1/2017	3/31/2019
2.	Dove Pointe, Inc.	3/1/2017	2/28/2019
3.	Lower Shore Enterprises, Inc.	4/1/2017	3/31/2019
4.	Center for Social Change	5/1/2017	4/30/2019
5.	Goodwill Industries of the Chesapeake	6/1/2017	5/31/2019
6.	Scott Key Center	8/1/2017	7/31/2019
7.	Somerset Community Services, Inc.	7/1/2017	6/30/2019
8.	Providence Center, Inc.	3/1/2017	2/28/2019
9.	The Chimes Inc.	5/1/2017	4/30/2019
10.	The Benedictine School	5/1/2017	4/30/2019
11.	Humanim	6/1/2017	5/31/2019
12.	Appalachian Crossroads	9/1/2017	8/31/2019
13.	The Arc of Washington County	10/1/2017	9/30/2019
14.	Friends Aware, Inc.	11/1/2017	10/31/2019
15.	Athelas Institute, Inc.	6/1/2017	5/31/2019
16.	Chesterwey Center Inc.	12/1/2017	11/30/2019
17.	Worcester Co Developmental Center	8/1/2017	7/31/2019

14C CERTIFICATE PROVIDER NOTES

At the time of this report there are six 14c Certificate providers which have not communicated with DDA and/or DLLR on the current status of their 14c certificate. However, all the 14c Certificate providers who are listed as active in Maryland by US DOL have been contacted multiple times via letter and phone call to ensure they are aware of the legislative changes.

Updates are available upon request and will be included in the annual report.

WAGES, UNEMPLOYMENT RATES, COMPETITIVE INTEGRATED EMPLOYMENT AND NON-WORK ACTIVITIES

MARYLAND EMPLOYMENT OUTCOME INFORMATION SYSTEM

Utilizing resources within DDA’s existing data infrastructure the EEA Phase-Out Plan will track the legislative components of the EEA. DDA has partnered with the Institute on Community Inclusion (ICI) in creating the Maryland Employment Outcome Information System. This system is designed to help DDA and its community of stakeholders to develop the supports and infrastructure to

provide longitudinal data that support Maryland's goals to improve both participation in integrated employment and the quality of employment outcomes.

Providers report on each person who receives DDA funded employment or day services twice a year using a secure web-based reporting tool. Data is collected for a specific two-week point in time twice each year. The data collection happens in the Fall (usually October) and in the Spring (April or May). The data collected in this initiative is public and can be viewed at <https://www.statedata.info/mdda/>

Information tracked on each person includes their involvement in the following categories of activities during a 2 week period:

Individual Competitive Job

Individual has a full or part time job in the typical labor market where the majority of persons employed are not persons with disabilities. The business is located within the community and is not owned or operated by the support organization. The person is on the payroll of the community business.

Individual Contracted Job

Individual has a full or part time job in the typical labor market where the majority of persons employed are not persons with disabilities. The business is located within the community but the person is on the payroll of the human service organization, or the human service organization schedules and supervises the work.

Group Integrated Job

The individual works in a group of 2 to 8 individuals with disabilities in a community setting that includes meaningful interaction with individuals without disabilities. This would typically include work settings described as enclaves or mobile work crews.

Facility-Based Job/Sheltered Work:

Individual works in a group of individuals support organization, but may also occur in large groups in other settings such as a large enclave. This category would include any group larger than 8, and smaller group settings that involve little or no contact with workers without disabilities. Typically the position is located in a facility or business owned or operated by the support organization, but may also occur in large groups in other settings such as a large enclave.

Community Based Non-Work

Unpaid time spent in integrated community settings, supported in a group of 4 people with disabilities or less, while having access to others without disabilities who are not paid staff or family members. Activities occur at locations available to and used by members of the general community, and include interactions with members of the general community to the same extent as participants without disabilities.

For all employment outcomes, providers report wages earned, hours worked and access to benefits.

This data allows the DDA to track individuals working under 14c certificates for less than minimum wage and their movement toward integrated competitive employment and/or time spent in engaging in community-based non-work.

Person Centered Planning Data

Aside from the aggregate state data, Individual data is also tracked through the use of a Person Centered Plan (PCP). The DDA, in conjunction with a group of stakeholders, has developed a new PCP tool that will be utilized by all people receiving DDA funded services. It includes an Employment focus area page that asks about a person's employment status, including whether they are making wages less than minimum wage.

If a person is not currently employed in Competitive Integrated Employment, there are fields in which the person and his/her team can identify the barriers and create strategies for addressing them. These are required fields and are tracked and facilitated by the individual's Coordinator of Community Service (CCS).

LEGISLATION AND DATA LANGUAGE NOTES

The terms used in the legislation are not the same terms used in the data.

Please note the following:

The DDA data collection does not track an unemployment rate, per se. Instead, it looks at aggregate system wide data and can provide numbers within the service system related to various employment outcomes. As stated above, individual level data such as unemployment is tracked in each person's PCP. It is not possible to include this data in this report.

For purposes of this plan, the legislation terms equivalence are as follows:

Subminimum wage pay rates are tracked at the individual level. State wide data is tracked on the following outcomes twice a year for all individuals receiving Day and/or Employment Services:

- Individual Competitive Job
- Individual Contracted Job
- Group Integrated Job
- Facility Based/Sheltered Job
- Self-Employment
- Community Based Non Work
- Volunteer Job
- Facility Based Non Work

BENCHMARK 2 - WAGES

WAGES BENCHMARK TABLE

Quality Assurance –Wages	
Outcome: Individuals that are employed, will make minimum wage or above by 2020	
Strategy: Collect data from receiving funding for Day and Employment services	
<u>Action Steps</u>	<u>Measures</u>
1. Track wages of employee	<ul style="list-style-type: none"> • Average wage of an individuals in Day/Employment Services in any time of employment
Baseline Data and Benchmarks	
2017	<ul style="list-style-type: none"> • Infrastructure in place to track wages of people in DDA services • Baseline data <ul style="list-style-type: none"> ○ Average wage of individuals working in various categories of employment • Benchmarks • Infrastructure in place to track the following in future reports
2018	<ul style="list-style-type: none"> ○ Average wage of individuals working in various categories of employment October 2017 and May 2018 ○ Analysis of data ○ Average wages will be higher in 2018 than in 2017
2019	<ul style="list-style-type: none"> ○ Average wage of individuals working in various categories of employment October 2018 and May 2019 ○ Analysis of data Average wages will be higher in 2019 than 2018
2020	<ul style="list-style-type: none"> ○ Average wage of individuals working in various categories of employment October 2019 and May 2020 ○ Analysis of data Average wages will be higher in 2020 than 2019

2017 WAGES OUTCOMES

INFRASTRUCTURE

Utilizing the Maryland Developmental Disabilities Administration Employment Outcome Information System, DDA and MDOD can track wages twice yearly (October, May) and track the wages in a four-year period.

Wage Data collected in October 2016

Activity	Average Gross Wage	Average Hourly Wage	Total Wages
Individual Competitive Job	\$419.26	\$10.38	\$987,776.13
Individual Contracted Job	\$351.99	\$9.82	\$151,004.99
Group Integrated Job	\$239.23	\$8.63	\$254,303.25
Facility Based/Sheltered Job	\$81.45	\$4.93	\$195,898.34

Wage Data collected in May 2017

Activity	Average Gross Wage	Average Hourly Wage	Total Wages
Individual Competitive Job	\$436.10	\$10.67	\$1,029,200.16
Individual Contracted Job	\$416.30	\$10.69	\$138,627.67
Group Integrated Job	\$247.01	\$8.56	\$257,882.09
Facility Based/Sheltered Job	\$83.56	\$6.43	\$175,967.93

Analysis

For the Facility-Based/Sheltered Job pay the average wage increased 30% from \$4.93 to \$6.43 in a six-month period. Going forward DDA and MDOD will monitor this trend for the duration of the phase-out

BENCHMARK 3 - EMPLOYMENT RATES

EMPLOYMENT BENCHMARK TABLE

Quality Assurance – Type of Employment and/or Activity	
Outcome: Trackable data related to employment and activity outcomes for people receiving Day and Employment Services	
Strategy: Collect data from DDA through their employment data initiative	
<p>Action Steps</p> <p>1. Track number of people employed in various settings.</p>	<p>Measures</p> <ul style="list-style-type: none"> • Number of people employed in the categories of: <ul style="list-style-type: none"> ○ Individual Competitive Job ○ Individual Contracted Job ○ Group Integrated Job ○ Self-Employment ○ Volunteerism ○ Facility-Based Job/Sheltered Work ○ Community Based Non-Work ○ Volunteer Job ○ Facility-Based Non-Work
Benchmarks	
2017	<ul style="list-style-type: none"> ▪ Number of people engaged in each of the following activities in October 2016 and May 2017 ▪ Individual Competitive Job ▪ Individual Contracted Job ▪ Self-employment ▪ Volunteering ▪ Group Integrated Job ▪ Facility-Based Job/Sheltered Work ▪ Community Based Non-Work ▪ Volunteer Job ▪ Facility-Based Non-Work
2018	<ul style="list-style-type: none"> ▪ Number of people engaged in each of the following activities in October 2017 and May 2018 ▪ Individual Competitive Job ▪ Individual Contracted Job ▪ Self-employment ▪ Volunteering ▪ Group Integrated Job ▪ Facility-Based Job/Sheltered Work ▪ Community Based Non-Work ▪ Volunteer Job ▪ Facility-Based Non-Work ○ Analysis of Data

2019	<ul style="list-style-type: none"> ○ Number of people engaged in each of the following activities in October 2018 and May 2019 <ul style="list-style-type: none"> ▪ Individual Competitive Job ▪ Individual Contracted Job ▪ Self-employment ▪ Volunteering ▪ Group Integrated Job ▪ Facility-Based Job/Sheltered Work ▪ Community Based Non-Work ▪ Volunteer Job ▪ Facility-Based Non-Work ○ Analysis of data
2020	<ul style="list-style-type: none"> ○ Number of people engaged in each of the following activities in October 2019 and May 2020 <ul style="list-style-type: none"> ▪ Individual Competitive Job ▪ Individual Contracted Job ▪ Self-employment ▪ Volunteering ▪ Group Integrated Job ▪ Facility-Based Job/Sheltered Work ▪ Community Based Non-Work ▪ Volunteer Job ▪ Facility-Based Non-Work ○ Analysis of data

2017 COMPETITIVE INTEGRATED EMPLOYMENT AND OUTCOMES

INFRASTRUCTURE

Baseline Data from October 2016

Activity	Number of Individuals in Activity
Individual Competitive Job	2,356
Individual Contracted Job	429
Group Integrated Job	1,063
Facility Based/Sheltered Job	2,401
Self-Employment	49
Community Based Non Work	4,994
Volunteer Job	2,703
Facility Based Non Work	6,405
Unduplicated Total	11,739

Baseline Data from May 2017

Activity	Number of Individuals in Activity
Individual Competitive Job	2,360
Individual Contracted Job	333
Group Integrated Job	1,044
Facility Based/Sheltered Job	2,111
Self-Employment	45
Community Based Non Work	5,169
Volunteer Job	2,808
Facility Based Non Work	6,233
Unduplicated Total	11,328

From the baseline data provided this year MDOD and DDA will monitor the trend for the next three years.

BEST PRACTICES AND RESOURCES

The last section is centered on best practices and resources. This was compiled by the EEA workgroup.

LEGISLATIVE COMPONENTS

A list of the resources necessary to ensure that individuals with disabilities receive support according to the needs and preferences of the individuals and in an integrated setting, regardless of the nature or severity of the individuals' disabilities

- (v) best practices and resources for accessing funding and resources, including for staffing, transportation, and other needed services and supports;
- (vi) best practices and resources for decision making by the individual or the individual's representative, as appropriate;
- (vii) best practices and resources for accessing medical or behavioral support needs; and
- (viii) best practices and resources for addressing family members' concerns or opposition

OVERVIEW

MDOD and DDA are continuously collecting and disseminating examples of best practices and resources to serve Marylanders better. Below are a few examples. MDOD and DDA welcome any additions.

BEST PRACTICES AND RESOURCES— ACCESSING FUNDING AND RESOURCES

According to the Developmental Disabilities Administration, the best practices for supporting people in integrated settings, regardless of the nature or severity of the individuals' disabilities include the use of the person-centered planning and customized employment.

PERSON-CENTERED PLANNING

Person-centered planning can include any number of tools, and should highlight what things are important to the person, what supports are needed to achieve personal goals and employment outcomes, strategizing on ways people can spend more time in typical, community settings, how to support the facilitation of relationships and how to ensure choice in all aspects of life

CUSTOMIZED EMPLOYMENT

Customized employment is a process by which a person's skills, interests and abilities are matched up with the needs of an area employer to create a mutually beneficial job match. This process includes community-based work trials and development of an individual plan; Individualized Job development, job negotiation and job placement; and /or intensive and ongoing job coaching as needed to support someone in long-term success in their jobs.

RESOURCES— ACCESSING FUNDING AND RESOURCES

In the state of Maryland, several resources exist for accessing funding. Depending on eligibility, a person with a disability can access funding through DDA, DORS, and the Maryland Transit Authority Mobility.

Best Practices and Resources— Decision Making and

BEST PRACTICES – DECISION MAKING

The Developmental Disabilities Administration (DDA) is committed to the values and systems change related to Employment First. All people of working age who receive waiver funded services are supported by a Coordinator of Community Services (CCS) to engage in Person Centered Planning to best understand how to navigate their personal path to employment, with Integrated Competitive Employment being the ultimate goal. Each path to employment is based on each individual's experiences, interests, goals and talents and can include paid and unpaid supports as developed in the Person Centered Plan.

The DDA supports community providers to raise their capacity and ability to support people with disabilities (regardless of type or severity of disability) to work toward integrated community employment as well as inclusive community membership. This support occurs through the DDA's Employment First initiative and direct and indirect technical assistance regarding organizational change toward community-based models of support.

For more information about the specific services that DDA provides go to <https://dda.health.maryland.gov/Pages/home.aspx>

RESOURCES— DECISION MAKING

There are several resources for decision making that have been developed in Maryland.

Maryland Developmental Disabilities Council

- *Planning Now* (available at: http://www.md-council.org/wp-content/uploads/2014/03/PlannGuide-v10_FINAL.pdf)

Maryland State Department of Education- Division of Rehabilitation Services

- Career Counseling and information & referral services required by Section 511 of WIOA: http://dors.maryland.gov/crps/Documents/14c_InformationReferralResources.pdf

BEST PRACTICES AND RESOURCES— ACCESSING MEDICAL OR BEHAVIORAL SUPPORT NEEDS

BEST PRACTICES – ACCESSING MEDICAL OR BEHAVIORAL SUPPORT NEEDS

DDA’s website outlays all current best practices such as behavioral supports. More can be found at their website <https://dda.health.maryland.gov/Pages/Behavioral%20Support%20Services.aspx>

RESOURCES— ACCESSING MEDICAL OR BEHAVIORAL SUPPORT NEEDS

Depending on eligibility a person with disabilities can access medical needs and/or behavioral supports through DDA.

BEST PRACTICES AND RESOURCES FOR ADDRESSING FAMILY MEMBERS’ CONCERNS OR OPPOSITION

BEST PRACTICES FOR ADDRESSING FAMILY MEMBERS’ CONCERNS OR OPPOSITION

Person Centered Planning done by DDA and/or DORS can address concerns of family members or opposition on an individual basis ensuring any intervention fits the specific circumstance.

RESOURCES FOR ADDRESSING FAMILY MEMBERS’ CONCERNS OR OPPOSITION

Depending on eligibility services can be utilized through DDA and/or DORS

FEDERAL AND STATE FUNDING PROGRAMS

Maryland actively pursues federal grants and other funding to support Employment First. DDA has also recently added two new waivers in addition to the existing waiver.

Recent grant awards have included receipt of a Disability Employment initiative (DEI) grant from the US Department of Labor to increase the capacity of America’s Job Centers to serve individuals with significant disabilities, and MDOD continues to closely monitor federal opportunities.

The Developmental Disabilities Administration (DDA) is in the process of transformation to create a flexible, person centered, family oriented system of supports so people can have full lives.

The DDA’s community-based service delivery systems includes various home and community-based services and supports provided through either a Medicaid State Plan or Waiver program or via DDA State funded services.

The DDA's transformation focuses on 5 essential focus areas, including: self-advocacy, self-determination, support families, employment first and independent supported living. Part of this transformation is the redrafting of Community Pathways Medicaid Waiver, including new service

definitions that focus on the essential areas and the addition of 2 new waivers: the Community Supports Waiver and the Family Supports Waiver. Both new waivers have a target start date of January, 2018.

Along with new waivers, the DDA is providing technical assistance and training to Coordinators of Community Services (CCSs) in Person Centered Thinking and Person Centered Planning and how to support people on their path to employment and community membership.