April through June of 2016 saw the continued implementation of Minnesota’s Olmstead plan and significant accomplishments toward people with disabilities living, learning, working and enjoying life in the most integrated setting. Highlights include:

**Housing access services**
- The Housing Access Services grant helps people with disabilities who use certain state plan services and/or home and community-based waiver services move to a home of their own. Between 2009 and the end of the second quarter 2016, more than 1,700 people used Housing Access Services to move to homes that were not provider owned, leased or controlled. The Housing Access Coordination waiver service is now informed by successful practices proven in the Housing Access Services grant and covered by all disability waivers for reimbursement through Medicaid.
- In June, Minnesota Security Hospital in St. Peter reached a new high with 12 people transitioning to more integrated settings. One individual was provisionally discharged from Minnesota Security Hospital and another moved from the Transition Services Program. Both were individuals who had resided at the security hospital for more than 12 years.

**Positive practices website**
- The new Positive Practices and Supports website—MNPSP.org—launched in May. MNPSP.org offers resources, materials and information including the Positive Support Manual. DHS is now developing opportunities, such as conferences, stakeholder groups, webinars and promotional materials, to market the website and increase awareness of positive supports to people, their families and providers.

“I didn’t get to choose whether or not to have a disability, but I do get to choose how I live with a disability.”
“MY Vault” helps people make informed choices

Disability Benefits 101 (www.DB101.org) introduced a new “My Vault” feature. DB101 is a website that brings together information and tools for people with disabilities to learn how earned income affects their benefits. Short videos make learning easy and more help is available with links to live chat, as well as phone numbers to the Disability Linkage Line, 1-866-33-2466.

This year DB101 introduced a new “My Vault” feature that offers a protected place to store information, the ability to share information with others if desired, individualized benefit information and streamlined “estimators” to see how work affects benefits.

Anyone can access “My Vault” through their DB101 account. If a person does not have an account, he or she can create one by registering at the top of the DB101 website under “register.” Professionals who work in the disability services field and others who support people with disabilities can also create their own personal vault.

Find out more at www.DB101.org

Informed choice in employment

- Sixteen organizations completed the employment informed choice pilot. The process helps professionals provide information about employment options so a person can make choices for themselves. The pilot was co-sponsored by DHS, the Departments of Education and Employment and Economic Development. The state agencies used the experience gained through the pilot to improve the Employment Informed Choice Toolkit. The Toolkit is available through the Disability Benefits 101 (DB101) website. In June, about 200 support planners received training on the toolkit.

FACT Team selected

- DHS selected South Metro Human Services to provide the state’s first Forensic Assertive Community Treatment (FACT) team. FACT builds on the success of Assertive Community Treatment (ACT), commonly called a “hospital without walls.” ACT allows a person with mental illness to receive services at home, stay out of the hospital, maintain competitive employment and live independently. FACT will serve individuals in correctional facilities with severe mental illnesses who are re-entering the community, a highly underserved population that often has complex, high level of treatment, rehabilitation and services.

FACT will serve individuals in correctional facilities with severe mental illnesses who are re-entering the community.
Expanding person-centered practices

- The Disability Linkage Line now serves as the platform for communicating with people and their families and supporting them to access and benefit from person-centered practices.

- DHS released a new set of materials, “What Does Person-Centered Mean For Me? An Introduction,” to help people with disabilities understand what they can expect from person-centered practices.

- About 250 professionals regularly participated in monthly Support Planner Professionals Learning Community webinars to develop their person-centered practices skills.

- DHS launched a Person-Centered Practices Community of Practice on May 19, 2016. The group is meeting monthly for 10 sessions. Although organized by DHS, the group is becoming self-sustaining. This will be a model for others interested in forming similar communities of practice.

- DHS sponsored a training on May 16, 2016, “Understanding the Hows and Whys of Supportive Decision Making.” Over 400 people participated to learn more about how to support people, with or without guardians, to make informed decisions for themselves.

- Four organizations are in their second year of the two-year Person-Centered Organization training.

- Since October 2015, over 900 people received training and in person-centered thinking and 250 people received person-centered planning training. The training was sponsored by DHS through a contract with the University of Minnesota.

- In fiscal year 2016, six people completed training to become person-centered practices trainers.

Competency Restoration Program

When a person is accused of committing a crime but is deemed by the Court to be mentally unfit, the State of Minnesota sends him or her to a mental health facility to receive treatment before standing trial. Today, even though many of these patients could be served in a less-intensive setting, they are cared for at the secure Minnesota State Hospital (MSH) or at Anoka Metro Regional Treatment Center (AMRTC), which provides hospital-level of care.

This means that some people are receiving a more intense level of care than they need—a misuse of scarce resources. As a result, other people who desperately need that high level of care are not able to access it.

To address this problem, the 2016 legislature funded a third level of care to serve this population: the Competency Restoration Program. This Program will provide the appropriate level of care for people being treated prior to standing trial in a new secure community residential program. Approximately 20 hospital beds at Anoka and 10 secure beds at MSH will open up to serve others.
Why do I have a disability? Why me? Why does anybody have a disability? These are questions that anybody might ask. Why do we have struggles and challenges? And why do some have more than others? It’s not that easy for me to do what I want to do because I have a condition called kernicterus. What is kernicterus? When I was hardly a day old, I got sick with severe newborn jaundice resulting in kernicterus. For me that means athetoid cerebral palsy, auditory neuropathy, which means my hearing is like a static-y radio, visual tracking difficulties and so much more.

So, what is it like to live my life? Sometimes it’s really hard and I have down days. It’s as if my muscles all have their own individual brains and none of them are listening to the brain in my head. Think about having to rely on someone else to give you a drink of water or feed you or arriving at restaurants where you simply can’t go in because there are stairs. A three-inch step or curb is a mountain that can’t be climbed when using a power wheelchair. Imagine that most people cannot understand your voice and that it takes you one or two minutes to type every sentence that you want to share. It is annoying sometimes when people don’t realize that I have a lot to say and need them to take the time to listen.

I didn’t get to choose whether or not to have a disability, but I do get to choose how I live with a disability. A lot of the time, I find a way to fight my goofy muscles and try to do what I am able to do. I work hard to live life without limits. I love to learn, especially about creative writing, literature and history. I love school and I love to read. Being an author means the world to me because writing calms my soul.

Can I fight the difficulties on my own? Can anyone face challenges on their own? No. I am lucky because I have amazing parents, helpers and friends. I have a team of doctors and therapists. All of them try to figure out what will help me do the things I want to do. I also have a brother who loves me and is my best friend. Grandparents, aunts, uncles and cousins are part of my team. People, even strangers, hold me in their hearts. I find courage in knowing that people believe in me and support me.

What is my dream and what is in my future? I will do what I want to do and live where I want to live. Do I want to be forced to work and live where I don’t want to? Nobody does. I will be starting college next year and even though the employment rate for people with disabilities working full time is only about 26 percent in Minnesota, I will do what it takes to work in a meaningful job where I will give back to society. I am determined. I am a human being like any other. We all have challenges and struggles we face. I choose the possibilities not the disability.

Justin Smith is a recent high school graduate from White Bear Lake Area High School. See his commencement address.

For more information and the complete Olmstead Plan, visit mn.gov/dhs/op/