

A plain language version of the **Minnesota Olmstead Plan**

At the State of Minnesota, we believe that if you have a disability, you should have the same chance as people without disabilities to:

- Live close to your family and friends.
- Make a difference in your community.
- Get a good education.
- Enjoy your job.

We want all people with disabilities in Minnesota to get the support they need to live their life to the fullest. The Minnesota Olmstead Plan is like our map. It tells us how to get there.

Where are we going and how do we get there?



The Minnesota Olmstead Plan has goals that the State of Minnesota uses to see if we're getting closer to our vision. If we're successful in achieving our goals, then we know we're going in the right direction. But you can't just set a goal and hope it happens. You need a plan to follow. The Minnesota Olmstead Plan also says what the State of Minnesota plans to do to reach our goals.

Note to readers: This is a plain language version of the [Minnesota Olmstead Plan](#). This version gives an overview of what's in the larger Olmstead Plan. This version doesn't change anything that is in the full Olmstead Plan.

The definitions of words that you find **emphasized in bold** are on [page 22](#). These important words are **emphasized in bold** and linked to the definitions the first time they show up in the plan, starting on page 3.

The Minnesota Olmstead Plan has goals and plans in these important areas:

- Person-Centered Planning..... 3**
- Transition Services 5**
- Housing and Services..... 7**
- Employment..... 8**
- Lifelong Learning and Education 10**
- Timeliness of Waiver Funding..... 12**
- Transportation 13**
- Healthcare and Healthy Living 14**
- Positive Supports and Crisis Services 16**
- Community Engagement 18**
- Preventing Abuse and Neglect..... 19**
- Assistive Technology 21**

Other things you'll find in this document:

- Definitions of important words..... 22
- Answers to your questions about the Minnesota Olmstead Plan 23
 - Why is it called “Olmstead”?..... 23
 - Why do we have this plan? 23
 - Who created the plan? 23
 - Who is in charge of the plan?..... 24
 - Who makes sure the Olmstead Plan is followed and we reach the goals? 25
 - How was this plain language version of the Olmstead Plan written? 25
 - What if I have ideas to share about the Minnesota Olmstead Plan?..... 26
 - What if I want to read the full version of the Minnesota Olmstead Plan?..... 26

Do you need this document translated or in a different format?

Call 651-296-8081 or email MNOlmsteadPlan@state.mn.us.



Person-Centered Planning

Person-centered planning is about finding out what's important to and for a person with a disability to help them make decisions about their education, their job, or where they live.

Person-centered planning starts with discovering what's important *to* you. The most important thing to you could be something like:

- Being comfortable
- Learning new things
- Keeping everything the same
- Visiting new places
- Having privacy
- Going to worship services

Person-centered planning is also about discovering what's important *for* you. The most important thing for you might be:

- Staying healthy
- Being safe
- Having enough money

Person-centered planning starts with listening to you and respecting what you say. In person-centered planning, you'll get asked questions like:

- What are your goals?
- What's important to you?
- What are you good at?
- What are your dreams for the future?
- Do you like where you work now? Where do you want to work?
- Do you like where you live now? Where do you want to live?

Some people with disabilities may want help answering these questions and making decisions. That's okay! A family member, friend, or guardian can help.

If you don't know what's most important to you or for you yet, that's okay, too! Part of person-centered planning is learning about what's out there. You might get to visit different places to see how other people live. Then you can decide what's right for you.

Once they listen to you about what's important, the people supporting you find ways to help make it happen. You get to say what you want! Because you know what works best for you.

Where are we going?



All people with disabilities get to decide for themselves where they live, learn, and work.

You get to say what you want through person-centered planning. You get the information you need to make the best decisions for yourself. You get to choose your services.

How will we know if we're on the right path?



Goal 1

People with disabilities are asked what they want.

You should be asked about:

- Your goals and what you're good at
- Your dreams and what you want from life
- The way you like to live your life
- What you like to do, like what you do for fun or how you like to practice your religion
- Where you want to live
- Where you want to work



Goal 2

People with disabilities are in charge of their lives and their services.

You should:

- Get to make big decisions about your life
- Get to make little decisions about your life
- Always be in charge of the help you get from other people

How will we get there?

Human Services (DHS), Employment and Economic Development (DEED), Education (MDE), and Administration (Admin) are in charge of reaching the person-centered planning goals. Overall, the state will:

- Help people with disabilities know about person-centered planning and how it should work, so that they can take the lead.
- Get more people to take jobs working with people with disabilities and train them to do person-centered planning.
- Help the staff who work with people with disabilities (like case managers) know how to do person-centered planning.
- Give the staff who work with people with disabilities tools that help them do person-centered planning, like a list of the questions they have to ask when someone needs services.
- Give people with disabilities access to what they need, like **assistive technology**, to reach their goals and live their life to the fullest.



Transition Services

Transition services help people with disabilities move from living in **segregated** places to **integrated** places.

When people are segregated, they are kept away from people who are different from them. A person with a disability who lives in a segregated place lives just with other people with disabilities. They are kept away from people who don't have disabilities.

When people are integrated, they can be around people who are different from them. A person with a disability who lives in an integrated place lives where they can be around people who don't have disabilities, if they want to. So, they might live in a community where people of all abilities work, go to school, play, and shop.

Do you live in...

- a group home?
- a nursing home?
- another place where all the people around you have disabilities?

If you do, then you should have the opportunity to live somewhere that is more integrated. If you want to live somewhere more integrated, where you can be around people who don't have disabilities, you can choose that. It is up to you to decide if you want to stay where you live now, but you have choices.

Where are we going?



People with disabilities live in the most integrated setting that they choose.

You get to live where you can be around people who don't have disabilities, if you want. You get to decide where to live using person-centered planning.

Some people with disabilities might not be able to decide on their own. They might need help from a family member or someone else. That's okay! You can get help deciding what's the best place for you.

How will we know if we're on the right path?



Goal 1

More people with disabilities in Minnesota will move from living in a segregated place to an integrated place.

People with disabilities who live in segregated places should be given the opportunity to move to a more integrated place. They should be able to choose whether to stay somewhere segregated or get help to move somewhere more integrated.



Goal 2

People who are ready to leave the Anoka Metro Regional Treatment Center move out faster.

After getting the care they need, people get to leave the Anoka Metro Regional Treatment Center and move somewhere more integrated.



Goal 3

More people will move out of the Minnesota Security Hospital every month.

After getting the care they need, some people who live at the Minnesota Security Hospital are ready to move somewhere more integrated. They should get to leave the Minnesota Security Hospital if they are ready.



Goal 4

Anyone with a disability who moves gets to use person-centered planning.

If you're deciding to move, you get to use person-centered planning.

How will we get there?

Human Services (DHS), Corrections (DOC), and Minnesota Housing are in charge of reaching the transition services goals. Overall, the state will:

- Help people with disabilities can use person-centered planning whenever they move from one place to another, so that they get to be in charge of their life.
- Support people with disabilities who are moving from segregated places to integrated places.
- Help people with disabilities know about the different places they could live, so they can make their own choice.
- Help people with disabilities who are leaving a jail or prison get the support they need.



Housing and Services

Housing is the place you live. Maybe you live in a house or an apartment. Maybe you live by yourself, or have roommates, or live with your family.

Services are the help you get to live where you want to live. For example, someone might have a person who helps them live in their own apartment.

You should get to decide where to live and get the services you need to live there. At the State of Minnesota, our job is to help get you the services you need to live where you want. Services could help you find an apartment or help you pay your rent. It's also our job to help you learn about all the different places you could live.

Where are we going?



People with disabilities get to choose where to live and get the help they need to live there.

You get to know about all the places you could live. The State of Minnesota helps you get available services you need to live where you choose.

How will we know if we're on the right path?



Goal 1

More people with disabilities will get help renting an apartment.

The State of Minnesota has money to help certain people with disabilities pay for housing, like helping them pay rent on an apartment.

How will we get there?

Human Services (DHS) and Minnesota Housing are in charge of reaching the housing and services goal. Overall, the state will:

- Help people with disabilities use person-centered planning to decide where to live.
- Ask people with disabilities how they find places to live and how they make choices about where to live.
- Find out what makes it hard for people with disabilities to find a place to live and try to make it easier.
- Help people with disabilities know about the different places they could live, so they can make their own choice.
- Work to make more places to live that people with disabilities can afford.
- Help people with disabilities get help paying for their housing.



Employment

Competitive integrated employment means that you work with people who don't have disabilities, and you get paid the same amount of money and get the same benefits (like healthcare and time off) as people without disabilities who do the same job as you. So you get paid at least minimum wage for working part-time or full-time in a place where people without disabilities work, too.

You should get to choose what job you have and where you work. Your job should be something you like doing. It should be something you get to do for a long time, if you want, with ways to move up or

get promoted. And you should get to learn about different kinds of jobs, so that you can make the best choice. If you can't work, that's okay. If you don't want to work, that should be your choice, too.

Where are we going?



People with disabilities get to choose competitive integrated employment in a job they like.

How will we know if we're on the right path?



Goal 1

The State's Vocational Rehabilitation Services and State Services for the Blind will help even more people with disabilities get competitive integrated employment.



Goal 2

More people with disabilities who receive services from some Medicaid funded programs will get competitive integrated employment.



Goal 3

More people with developmental cognitive disabilities will go from high school into competitive integrated employment, where they work with people who don't have disabilities and get the same pay and benefits.



Goal 4

More people who have or had a mental illness will get jobs as Peer Support Specialists helping other people with some of the same life experiences and challenges.

Peer Support Specialists help people who are dealing with a mental health challenge they've also faced. We want more places that provide mental health services to hire Peer Support Specialists to work with people who are dealing with mental health challenges.

How will we get there?

Human Services (DHS), Education and Economic Employment (DEED), Education (MDE), and Minnesota Housing are in charge of reaching the employment goals. Overall, the state will:

- Find better ways to count how many people with disabilities have competitive integrated employment, meaning a job where they work with people who don't have disabilities, getting the same pay and benefits as people who don't have disabilities.
- Help people with disabilities have choices for where they want to work.
- Encourage companies to hire more people with disabilities in competitive integrated employment.
- Help more students who get special education services get competitive integrated employment.



Lifelong Learning and Education

One way we learn is by going to school. But we can learn outside of school, too.

There's a law called the Individuals with Disabilities Education Act that says students with disabilities have to be in the **most integrated setting** in school. This means they get to spend as much time as possible learning in the same classrooms as students who don't have disabilities.

If you get special education services, then you should have an **individualized education program (IEP)**. An IEP sets goals for students with disabilities and says what type of help they need in school to reach those goals. IEPs are created by a team that includes the student, their family, their teachers, and others. An IEP also says how a student with a disability will be supported when they leave high school. Students might go into a training program, go to college, get a job, or do something else.

People with disabilities should be able to keep learning after leaving high school. You can keep learning in college, in community education classes, in an advocacy training program, through adult education, at your job, at a day program, or just by living in your community.

Where are we going?



People with disabilities are always learning in the most integrated setting.

This means people with disabilities get to spend as much time as possible learning with people who don't have disabilities.

How will we know if we're on the right path?



Goal 1

More students with disabilities will spend most of their time in school learning in the same classrooms as students who don't have disabilities.



Goal 2

More students with disabilities will go to a college where they learn in the same classrooms as students who don't have disabilities.



Goal 3

IEP teams will know about all the ways they can help students with disabilities.

When IEP teams know about all of the services available, students and families can make choices about what they need to learn in the most integrated setting.

How will we get there?

Education (MDE), Corrections (DOC), and Human Services (DHS) are in charge of reaching the lifelong learning and education goals. Overall, the state will:

- Help schools encourage positive student behaviors in all classrooms and in the school community, so that all students, including those with disabilities, have what they need to be successful.
- Help all students with disabilities get the help they need, including those with disabilities that are not very common.
- Increase the graduation rate for all students with disabilities and close the gap in graduation rates between white students with disabilities and students of color with disabilities.
- Help students with disabilities who are leaving juvenile detention, like the Minnesota Correctional Facility in Red Wing, to move back into their home school district.
- Give more support and tools to students with disabilities going to college.
- Train educators who are part of IEP teams on all the things that can help students with disabilities spend more time in the most integrated setting, including assistive technology.



Timeliness of Waiver Funding

Some people with disabilities need help paying for their services, so that they can live in an integrated place. An integrated place is somewhere a person with a disability can be around people without disabilities. A **waiver** lets the State of Minnesota help pay for services for people with disabilities in their home and community.

Some people need to get a waiver faster than other people. At the State of Minnesota, we look at a few things to decide how fast someone needs a waiver. We track how many days it takes for a person with a disability to get a waiver to make sure it isn't taking too long.

Where are we going?



People with disabilities who need a waiver to help pay for services in their home or community get that help without it taking too long.

The amount of time it takes for a person with a disability to get their waiver funding is based on how fast they need it.

How will we know if we're on the right path?



Goal 1

People who need a waiver will get the funding they need as soon as possible, but it should not take more than 45 days.

How will we get there?

Department of Human Services (DHS) is in charge of reaching the timeliness of waiver funding goal. They will:

- Track how long it takes for people who need a waiver to get one. If it's taking too long, we'll figure out how to do it faster.
- Train the people who give out waivers on how long it should take and help them do it more quickly.



Transportation

Transportation is how you get from one place to another. You might drive, get a ride from someone you know, take an Uber or other ride share, take the bus or train, bike, or walk.

Transportation is an important part of life. Having the transportation you need will help you live the life you want. You should have access to transportation that works for you and that helps you be part of your community.

Where are we going?



People with disabilities will have choices for transportation they can afford and that works for them, so that they can work, live, learn, and see people they want to be with.

How will we know if we're on the right path?



Goal 1

More curb ramps, crosswalk signals, and sidewalks will be made so people with disabilities can use them.



Goal 2

Buses and other public transportation choices will run for more hours in Greater Minnesota.



Goal 3

There will be more bus routes and other public transportation options available in Greater Minnesota.



Goal 4

Buses, trains, and other public transportation options will be on time more often.



Goal 5

More people with disabilities will have regular bus or train routes they can take close to where they live.

How will we get there?

Transportation (MnDOT) and the Metropolitan Council (the Met Council, which runs Metro Transit and Metro Mobility) are in charge of reaching the transportation goals. They will:

- Listen to the ideas of more people with disabilities when we're planning new transportation projects so we can get their ideas.
- Make sure when roads, bridges, and crosswalks are built we make them more accessible for people with disabilities.
- Track how many people with disabilities are using public transportation.
- Work together with cities and counties to make transportation better for people with disabilities.



Healthcare and Healthy Living

Healthcare is services or help you get from someone like a doctor. Healthcare can help you get better if you're sick or can help you do things that will keep you from getting sick in the first place.

Healthy living is all about the choices you make that help you stay healthy, like getting exercise, eating good foods, sleeping well, and taking your medicine.

Some people with disabilities have a hard time finding a doctor near them, and they might not have health insurance that helps pay for their doctor visits. Some doctors don't have experience treating people with disabilities or don't know how to do it respectfully.

Where are we going?



People with disabilities get the healthcare they need to live a healthy and happy life.

How will we know if we're on the right path?



Goal 1

Fewer people with disabilities who have to stay in a hospital will end up back there again in the same month.

People with disabilities are more likely than people without disabilities to leave the hospital and then have to go back.



Goal 2

More people with disabilities will go to the dentist when they need regular care for their teeth instead of going to an emergency room.

Having a healthy mouth and teeth helps you stay healthy. We want to make sure people go see a dentist for dental care, instead of going to an emergency room when they need care for their teeth.

How will we get there?

Human Services (DHS) and Health (MDH) are in charge of reaching the healthcare and healthy living goals. They will:

- Help people with disabilities have access to the doctor and dentist when they need it and before things get bad and they get really sick.
- Create more clinics that have all of the health services people need in one place, like somewhere you could get both a regular checkup and see a specialist.
- Help doctors to know how to take care of people with different kinds of disabilities.



Positive Supports and Crisis Services

All people should be treated like they matter, with dignity and respect. You should never be hurt or treated like you're not a human being.

If a person with a disability is doing something that could hurt them or someone else, they should get **positive supports** that help them. First, positive support should figure out why the person is acting in a way that isn't safe. Like by asking the person, what do you need? Then positive support helps them find a more positive way to get what they need, helps make a plan, and checks to see if the plan is working.

Positive supports help people with disabilities live, learn, and work in the **most integrated setting**. Positive supports should always be person-centered, meaning that you get to be in charge of what happens and make the decisions.

When a crisis happens, like an emergency or accident, an illness or mental health challenge, or something else, people with disabilities should get the help they need to keep living as normally as possible. This support is called **crisis services**.

Sometimes a person can't control themselves or their body. Sometimes when that happens, the person needs to be **physically restrained**, meaning they are held in a safe way. People with disabilities can only be physically restrained in an emergency, when it's the only way to keep them and other people from getting hurt.

Where are we going?



People with disabilities get positive, caring support when they need it. That support is based on what they want and need, and it helps keep them safe and living in the most integrated place possible, especially in a crisis.

How will we know if we're on the right path?



Positive supports goals 1–5

Increase the use of positive supports, so that fewer people with disabilities need to be physically restrained to keep them safe in an emergency, no matter whether it's where they live, work, or go to school.



Crisis services goals 1 and 2

More children and adults with disabilities will get the mental health services they need without having to leave their community.

(Note to readers: Crisis services goal 3 isn't being reported anymore)



Crisis services goal 4

If a person with a disability ends up in the hospital because of a crisis, they will get the help they need to move into a stable, permanent place to live.



Crisis services goal 5

People with disabilities who have a life crisis will get the care they need in less than 10 days.

How will we get there?

Human Services (DHS), Education (MDE), Health (MDH), and Corrections (DOC) are in charge of reaching the positive supports and crisis services goals. Overall, the state will:

- Help people with disabilities get the positive, caring help they need.
- Make sure **restrictive procedures** are used only when needed and allowed.
- Help students with disabilities get the positive supports they need, so that they don't get segregated from other students or removed from school.
- Look at how we're doing with crisis services for people with disabilities and do a better job with the services.
- Make it easier for people with disabilities to get the services they need, including mental health services.



Community Engagement

A community is a group of people who live in the same place or all have something in common. **Community engagement** is when a community—a group of people—gets to be part of deciding something that will affect their lives.

Community engagement is an important part of the Minnesota Olmstead Plan. We use community engagement to decide on:

- The Olmstead Plan goals
- How we're going to reach the goals
- What to do if we aren't reaching the goals

As we work on reaching the Olmstead Plan goals, we know people with disabilities want us to:

- Know you are the experts of your own lives.
- Include you in the decisions that affect your lives.
- Listen to each of you about what you dream about and hope for in your lives and communities.
- Make sure people who don't usually get to be involved are included.
- Use what you told us to make our decisions.

Where are we going?



People with disabilities get to be part of their communities and connect with other people in the ways they want.

How will we know if we're on the right path?



Goal 1

More people with disabilities will get to tell the state what they think about policies and programs, so that the state can make those things better.



Goals 2 and 3

More people with disabilities will share what they think about the Olmstead Plan, including what they think is missing and how to make it better.

Every year, we look at the Minnesota Olmstead Plan to see if we met our goals. We do community engagement to hear what people in Minnesota think, especially people with disabilities. We want to hear from more people with disabilities about what they think of the Olmstead Plan.

How will we get there?

The Olmstead Implementation Office is in charge of reaching the community engagement goals. They will:

- Help more people with disabilities learn about how they can participate in groups that tell the state government what they think of state policies and programs.
- Get more people with disabilities to tell us what they think about the Olmstead Plan.
- Make sure communication about the Olmstead Plan gets to people with disabilities and they can read it, if they want to.
- Make sure community engagement includes people of color who have disabilities and people with disabilities who are indigenous.



Preventing Abuse and Neglect

We want to keep people with disabilities from being abused or neglected.

Abuse is when someone hurts another person. It can include things like hitting or kicking, making threats or yelling, and locking someone in a room. **Neglect** is when someone doesn't take care of the person who they're in charge of helping, like not feeding them or not giving them medicine they need that they can't get themselves.

People with disabilities are more likely to be abused or neglected than people who don't have disabilities. They're also more likely to not tell anyone they're being abused or neglected.

Where are we going?



People with disabilities are not abused or neglected.

How will we know if we're on the right path?



Goal 1

The State of Minnesota will make a plan to help people in Minnesota know what to do if they see a person with a disability being abused or neglected.



Goal 2

Fewer people with disabilities will go to the hospital or a doctor because they have been hurt by abuse or neglect.



Goal 3

Fewer people with disabilities who have been abused or neglected will be abused or neglected again.

If a person with a disability is abused or neglected, action will be taken so it doesn't happen again.



Goal 4

Fewer students with disabilities will be abused or neglected.

How will we get there?

Human Services (DHS), Health (MDH), Education (MDE), and the Ombudsman for Mental Health and Developmental Disabilities are in charge of reaching the preventing abuse and neglect goals. Overall, the state will:

- Teach the public, especially people with disabilities, what abuse and neglect looks like, how to stop it from happening, and what to do if it happens to them or someone else.
- Teach people who work with people with disabilities what abuse and neglect looks like, how to stop it from happening, and what to do if they see it.

- Find out who's at risk of being abused or neglected and help them before it happens.
- Make sure people know about places that serve people with disabilities that aren't following the rules to prevent or report abuse and neglect.
- Take action after abuse or neglect happens so it doesn't happen again.
- Train staff at all schools on how to keep students safe and how to report abuse and neglect.



Assistive Technology

Some people with disabilities need **assistive technology** to help them be independent and do things on their own. You might need assistive technology to live and learn in the most integrated setting around people without disabilities.

Assistive technology can be anything that helps a person with a disability do something that would either be hard or impossible without help. There are lots of examples of assistive technology, like:

- A mobility aid like a cane to help a person walk
- Software on a computer that reads things out loud
- A grip to help hold a pencil
- Lights that flash when someone rings the doorbell

At the State of Minnesota, we have many programs that help provide assistive technology to people with disabilities.

Where are we going?



People with disabilities get the assistive technology they need to learn, work, and live life to the fullest in the most integrated setting.

The goals for assistive technology are found in other parts of the Olmstead Plan. The assistive technology goals and plans for reaching those goals can be found in the Olmstead Plan under [Person-Centered Planning](#), [Transition Services](#), [Employment](#), and [Lifelong Learning and Education](#).

Definitions of important words

Abuse is when someone hurts another person. It can be things like hitting, kicking, making threats, yelling, or locking someone in a place they can't get out. (Go back to page 19).

Assistive technology can be anything that helps a person with a disability do something that would either be hard or impossible to do without help. (Go back to page 5).

Community engagement is when a community gets to be part of deciding something that will affect their lives. (Go back to page 18).

Competitive integrated employment means you work with people who don't have disabilities, and you get paid the same and get the same benefits (like healthcare and time off) as people without disabilities who do the same job as you. (Go back to page 8).

Crisis services are the help a person gets to keep living as normally as possible when a crisis happens, like an accident, illness, or something that could be dangerous. (Go back to page 16).

Individualized education program (IEP) is a plan that sets goals for students with disabilities, including what happens after high school, and says what type of help the student needs to reach their goals. (Go back to page 10).

Integrated means being around people who are different from you. (Go back to page 5).

The **most integrated setting** or **most integrated place** is the place you can learn, work, or live with people who don't have disabilities as much as possible.

Neglect is when someone doesn't take care of a person who they are supposed to take care of. (Go back to page 19).

Person-centered planning is about finding out what's important to and for the person with a disability and making sure they get to make decisions about their education, their job, or where they live. (Go back to page 3).

Positive supports are those kinds of things that are said and done in a caring, kind, and comfortable way, so people with disabilities can live, learn, and work in the most integrated setting. (Go back to page 16).

Restrictive procedures are when a person is physically held, for example **physically restrained**, or secluded, meaning put in a room away from others where you can't leave. (Go back to page 17).

Physically restrained is when someone is held in a safe way. (Go back to page 16).

Segregated means being kept away from people who are different from you. (Go back to page 5).

Waivers let the State of Minnesota help pay for services for people with disabilities in their home and community. (Go back to page 12).

Answers to your questions about the Minnesota Olmstead Plan

Why is it called “Olmstead”?

“Olmstead” is the last name of a person. That person was part of an important court case called *Olmstead versus L.C.*, which was decided in 1999.

Two women from Georgia who have disabilities wanted to live in their community, not in an institution. But Tommy Olmstead, who worked for the state government, would not let them live where they wanted. The Supreme Court said the women should not have to live in an institution.

The Supreme Court said states can’t keep people with disabilities from living, working, or interacting with people who don’t have disabilities. The court said people with disabilities have the right to make their own decisions about their lives. The United States Constitution and a law called the Americans with Disabilities Act give people with disabilities these rights.

Why do we have this plan?

We have the Minnesota Olmstead Plan to make sure people with disabilities get to live, learn, work, and enjoy life in the most integrated setting possible. Former Governor Mark Dayton used his power as governor to create the Olmstead Subcabinet and told the group to write the Minnesota Olmstead Plan.

We also have this plan because the Minnesota Department of Human Services (DHS) and some people who sued DHS for alleged abuse at a DHS facility in a court case called *Jensen* agreed to create the Minnesota Olmstead Plan to make things better for all people with disabilities in Minnesota.

Who created the plan?

At the State of Minnesota, we began working on the Minnesota Olmstead Plan in 2012. It took a long time to create the plan, and it was completed in 2015.

We got ideas from a lot of different people for what should be in the Olmstead Plan. Most importantly, people with disabilities and self-advocates told us what they wanted in the plan.

We heard that:

- Safety is very important for people with disabilities.
- People with disabilities should be the ones making decisions about their lives.
- People with disabilities need to be part of making decisions about things that affect them.
- People with disabilities need to have options and choices.
- Services need to be affordable or not so expensive.
- State agencies need to be honest about what they're doing as part of the Olmstead Plan.
- Services, programs, and communication need to be accessible to people with disabilities.
- People want to trust the information that's being collected by the state about them.
- There are things standing in the way of people with disabilities living, learning, and working in the most integrated setting.
- Everyone needs more training and help.

Every year we look at how we're doing. We ask people with disabilities, "Are we reaching the goals of the Minnesota Olmstead Plan? Are we closer to our destination?" Like on a road trip, even with a map, you might take a wrong turn. So, we check to see if we're heading in the right direction. If we find things blocking our way, we update the Minnesota Olmstead Plan to get back on the right path.

Who is in charge of the plan?

The Olmstead Subcabinet is in charge of making sure the State follows the Minnesota Olmstead Plan and is heading towards our goals. The people in the group called the Olmstead Subcabinet work for these state departments and offices:

- Corrections (DOC)
- Education (MDE)
- Employment and Economic Development (DEED)
- Health (MDH)
- Human Rights (MDHR)
- Human Services (DHS)
- Minnesota Housing
- Public Safety (DPS)
- Transportation (MnDOT)
- Veterans Affairs (MDVA)
- The Metropolitan Council (the Met Council, which runs Metro Transit and Metro Mobility)
- The Governor's Council on Developmental Disabilities
- The Office of the Ombudsman for Mental Health and Developmental Disabilities

All of these state departments or offices play an important role in the lives of people with disabilities.

All of them are responsible for making sure the Minnesota Olmstead Plan is successful.

The Olmstead Subcabinet gets help from the Olmstead Implementation Office. The Olmstead Implementation Office is a small team of people who work for the Olmstead Subcabinet. The staff at the Olmstead Implementation Office have two main jobs:

1. They measure whether the State of Minnesota is reaching the Olmstead Plan goals and tell the Olmstead Subcabinet and other people in the State of Minnesota.
2. They get more people with disabilities, their families, and supporters to give ideas about how to make the Olmstead Plan better.

During the year, the Olmstead Implementation Office surveys people with disabilities. This is called the *Quality of Life* survey. People with disabilities get to say what the State of Minnesota is doing that's good and what could be better. In this survey, we've heard that many people with disabilities don't get to make decisions about their lives.

Who makes sure the Olmstead Plan is followed and we reach the goals?

State agencies each take their parts of the Olmstead Plan and create step-by-step workplans to reach the goals. If the goals aren't being met, then the Olmstead Implementation Office works with the state agencies to help them get back on track.

You can find the workplans and how we're doing with the goals on the Olmstead Implementation Office website: mn.gov/olmstead.

How was this plain language version of the Olmstead Plan written?

The Olmstead Implementation Office got help writing this plain language version of the Minnesota Olmstead Plan from people who work for Management Analysis and Development (MAD), which is part of the State of Minnesota.

The Olmstead Implementation Office asked people with disabilities and others in the Community Engagement Workgroup to read it and give their ideas to make it better and easier to read. The Olmstead Implementation Office also asked people who work for the Governor's Council on Developmental Disabilities for help to make it better and easier to read.

What if I have ideas to share about the Minnesota Olmstead Plan?

There are four ways to send us your ideas. Pick the way that works best for you:

1. **Call us** at 651-296-8081.
2. **Email us** at MNOlmsteadPlan@state.mn.us.
3. **Go to our website** (mn.gov/olmstead) and select “Contact us.”
4. **Mail us a letter:**

Olmstead Implementation Office
400 Wabasha Street North
Suite 400
St. Paul, Minnesota 55102

What if I want to read the full version of the Minnesota Olmstead Plan?

You can find the full Minnesota Olmstead Plan on our website: mn.gov/olmstead.