Maryland Developmental Disabilities Council
2017-2021 State Plan Overview

- What is “the Council”?
- Values/Vision/Mission
- The Council’s State Plan and Role in Maryland
- State Plan Goals, Objectives,
  Strategies, Outputs, Outcomes & Performance Measures
- Logic Model
What is “the Council”? 

The Maryland Developmental Disabilities Council, or “the Council,” is an independent, self-governing organization dedicated to advancing the inclusion of Marylanders with developmental disabilities in all facets of community life. Council members are appointed by the Governor and are similar to a board of directors in that they establish the priorities of the Council and help guide our work. Council members include people with developmental disabilities, family members, local and non-profit organizations, state agency representatives, and representatives of Disability Rights Maryland and the Maryland Center on Developmental Disabilities. The majority of Council members are people with developmental disabilities and family members. The Council is in a unique position to bring together people with diverse perspectives, experiences and knowledge in meaningful partnerships. This work is led and supported by a staff of five.

Council meetings are open to the public. The Council’s website provides Council meeting dates, agendas and minutes.

Values, Vision, and Mission

The Council’s State Plan defines how the organization will continue to implement its values, vision, and mission over the next five years.

Values: Empowerment, opportunity, and inclusion.

Vision: The Maryland Developmental Disabilities Council envisions a state where all people with developmental disabilities exercise control over their lives, reach their full potential, and lead healthy, fulfilling lives with enriching relationships.

Mission: The Maryland Developmental Disabilities Council’s mission is to advance the inclusion of people with developmental disabilities in all facets of community life by eliminating barriers, creating opportunities, empowering people, and promoting innovation.

The Council’s State Plan and Role in Maryland

In 1970, Congress established Developmental Disabilities (DD) Councils in every state and U.S. territory to improve the lives of people with developmental disabilities; to protect their civil and human rights; and to promote their maximum potential through increased independence, productivity, and integration into the community. To this end, every five years the Council develops a State Plan for Maryland, guided by input from public surveys, conversations with people with developmental disabilities, family members, advocacy organizations, service providers, legislators and state officials, as well as extensive research and analysis.
The full State Plan is lengthy and includes, among other things, a comprehensive review and analysis of child care, education/early intervention, housing, transportation, employment, informal and formal community supports, and other issues that impact quality of life for Marylanders with developmental disabilities. It is developed in accordance with the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (DD Act). The full State Plan and a work plan for the current year can be found on our website. The annual work plan includes specific expected outputs and outcomes and describes how the Council and grantees will evaluate progress.

This document, the State Plan Overview, is meant to be a shorter version of the State Plan and explains:

- What to expect from the Council’s work in Maryland in the next five years (through September 2021), and
- How the Council plans to use staff and financial resources.

Over-arching strategies in the State Plan can be summed up as:

1. Supporting self-advocacy and leadership development;
2. Educating and informing people with developmental disabilities, their families, legislators, and other stakeholders;
3. Raising expectations of families, schools, workplaces and the community at large;
4. Advocating for the creation or improvement of policies, programs, services, and laws;
5. Helping organizations develop skills needed to support people with developmental disabilities to live, learn, work and play alongside people without disabilities; and
6. Increasing access to services and supports.

We accomplish this through the advocacy work of Council members and staff and by awarding grants that support our State Plan objectives.

How is the work outlined in the State Plan funded? The Council receives an annual federal funding allocation administered through The Administration on Intellectual and Developmental Disabilities (AIDD). Disability Rights Maryland and Maryland Center for Developmental Disabilities are also authorized and funded through the DD Act. Our three organizations work collaboratively on shared priorities, as noted in the State Plan. The Council also partners with many other individuals and organizations.

**State Plan Goals**

The MD DD Council’s goals for the 2017-2021 State Plan are:

1. People with developmental disabilities effectively advocate for themselves and others and influence issues that are important to them.
2. People with developmental disabilities and their families are empowered to lead the lives they want and transform communities.
3. Children and adults with developmental disabilities meaningfully participate in all facets of community life, and are valued and supported by their communities.

These goals interrelate and collectively support the Council’s values, vision, and mission. The work that will occur under each goal, outlined as objectives and strategies, will not occur in silos.
### Key:

<table>
<thead>
<tr>
<th>PM's</th>
<th>IFA</th>
<th>SC</th>
<th>OEC</th>
<th>ADV</th>
<th>FUND</th>
<th>QOL</th>
<th>PWDD</th>
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<tr>
<td>Performance Measures</td>
<td>Individual/family advocacy</td>
<td>Systems change</td>
<td>Outreach, education, and communication</td>
<td>Advocacy</td>
<td>Funding</td>
<td>Quality of Life</td>
<td>People with developmental disabilities</td>
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#### Goal 1

**People with developmental disabilities effectively advocate for themselves and others and influence issues that are important to them.**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Strategies/Major Activities</th>
<th>Outputs</th>
<th>Outcomes &amp; PM's</th>
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<tbody>
<tr>
<td>1.1 Support People on the Go of Maryland (POG) and local self-advocacy groups to be strong, effective, and influential.</td>
<td>1.1.1 Fund and support POG to build, train and support their membership, educate policymakers, build partnerships, advocate on issues and affect change. 1.1.2 Provide POG guidance and support regarding organizational and staff management based on annual assessment of need. 1.1.3 Provide Council support to local self-advocacy groups.</td>
<td><strong>IFA 1.1 #</strong> The number of people with developmental disabilities who participated in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work. 1.2.2 The percent of people who are participating now in advocacy activities 1.2.3 The percent of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.</td>
<td><strong>IFA 2.1 %</strong> After participation in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work.</td>
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1.2 Support opportunities for people with developmental disabilities to provide leadership training to | 1.2.1 Through the Council grant, POG leadership trains POG members and other people with developmental disabilities. 1.2.2 Provide small grant funding to the | **IFA 1.1 #** The number of people with developmental disabilities who participated in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work. | 1.2.3 The number of promising and/or best practices improved as a result of systems change activities. |

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<thead>
<tr>
<th>Section</th>
<th>Goal</th>
<th>Activity</th>
<th>Supporting Activity</th>
<th>Outcome Measure</th>
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<tbody>
<tr>
<td>1.1.3</td>
<td>Support and expand participation of individuals with developmental disabilities in cross-disability and culturally diverse leadership coalitions.</td>
<td>Identify cross-disability and culturally diverse leadership coalitions.</td>
<td>Inform people with developmental disabilities of opportunities to participate in coalitions, committees, and boards.</td>
<td>IFA 1.1.3 # of trainings</td>
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<td>1.3</td>
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<td>Inform people with developmental disabilities about transportation resources and provide transportation support when unavailable to support coalition participation.</td>
<td>OEC 1.1.3 # of trainings</td>
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<td>1.3</td>
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<td></td>
<td>Through the Council grant, POG assigns and mentors members to represent POG on cross-disability and culturally diverse leadership coalitions.</td>
<td>IFA 1.2.3 % The percent of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.</td>
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<td>1.3</td>
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<td></td>
<td>Through the Council grant, POG collaborates with other disability orgs during legislative session on shared priorities.</td>
<td>IFA 3.1 % The percent of people with developmental disabilities satisfied with a project activity.</td>
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<tr>
<td>1.4</td>
<td>Improve the ability of people with developmental disabilities to advocate</td>
<td>Develop an easy to use guide for people with developmental disabilities and their families about Maryland Developmental</td>
<td>IFA 1.1 # The number of people with developmental disabilities who</td>
<td>IFA 2.2.3 % The percent of people who are on cross disability coalitions, policy boards, advisory boards, governing bodies and/or serving in leadership positions.</td>
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<td></td>
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<td>are satisfied with a project activity.</td>
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</table>
| for what they want through meaningful participation in the individual planning process. | Disabilities Administration’s (DDA’s) Individual Plan (IP) process.  
**1.4.2** Support training related to the DDA IP process guide. | participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and/or systems.  
**IFA 1.2 #** The number of family members who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and/or systems. |

**Outcome**  
People with developmental disabilities lead the lives they want and policies and support systems help make this happen.
# Goal 2

People with developmental disabilities and their families are empowered to lead the lives they want and transform communities.

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</table>
| 2.1 Increase knowledge and skills of people with developmental disabilities and families through education and training. | **2.1.1** Research models for leadership development that are replicable, address regional needs and support ongoing advocacy.  
**2.1.2** Create an RFP focused on leadership development for PWDD and families.  
**2.1.3** Use the Council’s Education and Training Sponsorships to support local and issue-specific trainings that increase knowledge and skills that people with developmental disabilities and family members use to advocate for themselves and others.  
**2.1.4** Fund small grants to local and statewide organizations to increase knowledge and skills of PWDD and families. | **IFA 1.1** # The number of people with developmental disabilities who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and/or systems.  
**IFA 1.2** # The number of family members who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and/or systems.  
**OEC 1.1.1** Participant diversity  
**OEC 1.1.2** # of events sponsored | **IFA 2.1** % After participation in Council supported activities, the percent of people with developmental disabilities who report increasing their advocacy as a result of Council work.  
**IFA 2.2** % After participation in Council supported activities, the percent of family members who report increasing their advocacy as a result of Council work.  
**IFA 2.2.1** % The percent of people who are better able to say what they want or say what services and supports they want or say what is important to them  
**OEC 2.1.1** # of PWDD with increased knowledge  
**OEC 2.1.2** # of family members with increased knowledge |
| 2.2 MDCC, DRM (Disability Rights Maryland previously MDLC) and Maryland Center for | **2.2.1** Track changes occurring with DDA system collaboratively with DRM and MCDD.  
**2.2.2** Determine plan for preliminary | **SC 1.5.1** # The number of Council supported systems change activities with | **IFA 2.2.1**% The percent of people who are better able to say what they want or say what services and supports they want or say |
| | | | |
| **Developmental Disabilities (MCDD)** will work together to develop and widely disseminate materials that explain critical aspects of the DDA service system in a way that is easily understood and usable by people with developmental disabilities and their families. | activities collaboratively with DRM and MCDD.  
**2.2.3** Partner with DRM and MCDD to identify priority topics.  
**2.2.4** Develop a template and protocol for the development of the materials.  
**2.2.5** Develop branding for consistency and to be recognized as the “go to source” for understandable materials.  
**2.2.6** Develop materials on at least top two priority topics.  
**2.2.7** Translate into Spanish.  
**2.2.8** Widely disseminate. | organizations actively involved.  
**OEC 1.1.6** # of materials produced  
**OEC 1.1.9** # of people receiving communication materials | what is important to them.  
**OEC 2.1.1** # of PWDD with increased knowledge  
**OEC 2.1.2** # of family members with increased knowledge |

### 2.3 Increase knowledge and understanding of issues of importance to people with developmental disabilities and their families.

| **2.3.1** Establish advisory committee of PWDD & family members to improve effectiveness of communications. Use advisory committee to provide feedback on communications as needed.  
**2.3.2** Refine and improve the Council’s newsletter, News You Can Use communications, Facebook, Twitter and website to maximize impact.  
**2.3.3** Increase number of people receiving Council communication & connected on social media platforms.  
**2.3.4** Utilize Council communications to disseminate information about healthcare, transportation, and social relationships (first priorities selected by Council).  
**2.3.5** Conduct webinars. Review outcomes of past webinars and refine as necessary. | **IFA 1.1** # The number of people with developmental disabilities who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect their lives, the lives of others, and/or systems.  
**IFA 1.2** # The number of family members who participated in Council supported activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and/or systems.  
**IFA 3.1** % The percent of people with developmental disabilities satisfied with a project activity.  
**IFA 3.2** % The percent of family members satisfied with a project activity. | **OEC 2.1.1** # of PWDD with increased knowledge  
**OEC 2.1.2** # of family members with increased knowledge |
| OEC 1.1.9 # of people receiving communication materials |
| OEC 1.1.8 # of resources disseminated |
| OEC 1.1.11 Social media analytics (likes, fans, followers, etc.) |

**Outcome**
People with developmental disabilities and their families have the information and skills to flourish and create change in their communities.
### Goal 3
**Children and adults with developmental disabilities meaningfully participate in all facets of community life, and are valued and supported by their communities.**

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<tr>
<td><strong>3.1</strong> Increase the expectations that family members, providers, educators and others have about people with developmental disabilities.</td>
<td><strong>3.1.1</strong> Utilize current communications modalities: newsletter, NYCU, Facebook, twitter and website. <strong>3.1.2</strong> Develop new strategies, including the use of first-person accounts such as interview, blogs and video. <strong>3.1.3</strong> Conduct a Photo Contest.</td>
<td>OEC 1.1.8 # of resources disseminated OEC 1.1.9 # of people receiving communication materials</td>
<td>OEC 2.1.2 Family members with increased knowledge OEC 2.1.3 Providers with increased knowledge and skills IFA 1.2 # The number of family members who participated in Council supported in activities designed to increase their knowledge of how to take part in decisions that affect the family, the lives of others, and/or systems. IFA 3.1 % The percent of people with developmental disabilities satisfied with a project activity. IFA 3.2 % The percent of family members satisfied with a project activity. SC 1.4.1 # The number of people trained or educated through Council systemic change initiatives.</td>
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<tr>
<td><strong>3.2</strong> Increase access to informal and formal support for families of people with developmental disabilities across the lifespan.</td>
<td><strong>3.2.1</strong> Co-lead the Community of Practice for Supporting Families (CoP) <strong>3.2.2</strong> Expand the number of CoP partnering organizations. <strong>3.2.3</strong> Support and fund local CoP initiatives. <strong>3.2.4</strong> Support statewide CoP initiatives. <strong>3.2.5</strong> Analyze, identify &amp; engage with partners from culturally diverse communities and organizations</td>
<td>SC 1.1.1 # The number of policy and/or procedures created or changed. SC 1.3.2 # The number of promising practices supported through Council activities SC 1.5.1 # The number of Council supported systems change activities with organizations actively involved.</td>
<td>SC 2.1 # The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute or regulation changes. SC 2.2 # The number of Council efforts <strong>that were implemented</strong> to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration.</td>
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<tr>
<td>3.3</td>
<td>Increase access to inclusive opportunities in early childhood care and education, school, and out of school time activities.</td>
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<tr>
<td>3.3.1</td>
<td>Use Council funds to provide technical assistance to improve the ability of child care providers to support children with disabilities in their programs.</td>
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<tr>
<td>3.3.2</td>
<td>Advocate for more training and technical assistance for child care providers funded by other entities.</td>
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<td>3.3.3</td>
<td>Advocate for a formal dispute resolution process within the Office of Child Care to address discrimination complaints against child care providers.</td>
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<td>3.3.4</td>
<td>Advocate for the creation or improvement of statewide policies and practices relating to special education and teacher preparation and professional development so more students have access to the general education curriculum, appropriate assessments and the services and supports needed to succeed.</td>
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**SC 1.1.1** # The number of policy and/or procedures created or changed.

**SC 1.3.2** # The number of promising practices supported through Council activities.

**SC 1.5.1** # The number of Council supported systems change activities with organizations actively involved.

**OEC 1.1.4** # of child care providers trained

**OEC 1.1.8** # of resources disseminated

**OEC 1.1.9** # of people receiving communication materials

**ADV 1.3.1** # of committees/workgroups/advisory councils served on

**SC 2.1.1** # The number of policy, procedure, statute, or regulation changes *improved* as a result of systems change.

**SC 2.1.2** # The number of policy, procedure, statute, or regulation changes *implemented*.

**SC 2.1.3** # The number of promising and/or best practices *improved* as a result of systems change activities.

**SC 2.1.4** # The number of promising and/or best practices that were *implemented*. 

**OEC 2.1.5** # of child care providers with
### 3.4 Increase access to inclusive post-secondary education opportunities for people with intellectual disabilities.

<table>
<thead>
<tr>
<th>3.4.1</th>
<th>Partner w/ MD Dept Of Disabilities, MHEC (higher ed commission) &amp; at least two universities to identify and pursue sources of start-up costs.</th>
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<tbody>
<tr>
<td>3.4.2</td>
<td>With stakeholders, support 1-2 universities to design sustainable inclusive programs.</td>
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<tr>
<td>3.4.3</td>
<td>Support, monitor and assess status of inclusive post-secondary programs initiated in year 1.</td>
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<tr>
<td>3.4.4</td>
<td>Advocate for implementation of best practices.</td>
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<tr>
<td>3.4.5</td>
<td>Work with MDOD &amp; MSDE to identify ways to advocate for and support the development of dual enrollment programs at community colleges that incorporate best practices.</td>
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<tr>
<td>3.4.6</td>
<td>Work with MDOD &amp; MSDE to improve and expand inclusive dual enrollment programs at community colleges.</td>
</tr>
</tbody>
</table>

### SC 1.5.1 # The number of Council supported systems change activities with organizations actively involved. (document of dual enrollment programs in MD)

### SC 1.3.2 # The number of promising practices supported through Council activities.

### SC 2.1 # The number of Council efforts that led to the improvement of best or promising practices, policies, procedures.

### SC 2.2 # The number of Council efforts that were implemented to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

### SC 2.1.3 # The number of promising and/or best practices improved as a result of systems change activities (increased # of inclusive dual enrollment programs at community colleges)

### SC 2.1.3 # The number of promising and/or best practices improved as a result of systems change activities. (universities in process of establishing program)

### SC 2.1.4 # The number of promising and/or best practices that were implemented.

### QOL 2.2.1 # of students with intellectual and developmental disabilities attending inclusive college programs in Maryland
| 3.5 Increase community-based employment opportunities for people with developmental disabilities, including people with significant support needs. | 3.5.1 Participate in the development of Maryland’s newly-required plan to phase out sub-minimum wage 14c certificates. | SC 1.1.1 # The number of policy and/or procedures created or changed.  
SC 1.2.1 # The number of statute and/or regulations created or changed  
SC 1.3.2 # The number of promising practices supported through Council activities (Employment First recommendations)  
SC 1.5.1 # The number of Council supported systems change activities with organizations actively involved. (# of committees/workgroups/advisory councils served on by Council staff)  
OEC 1.1.4 # providers supported  
OEC 1.1.8 # of resources disseminated  
OEC 1.1.9 # of people receiving communication materials  
SC 2.1 # The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute or regulation changes.  
SC 2.1.1 # The number of policy, procedure, statute, or regulation changes improved as a result of systems change. (14c phase out plan developed)  
SC 2.1.2 # The number of policy, procedure, statute, or regulation changes implemented (Employment First advisory group recommendations & 14c phase out plan implemented)  
SC 2.1.3 # The number of promising and/or best practices implemented.  
QOL 2.2.3 # of sheltered workshops closed  
OEC 2.1.4 # of providers increasing their | 3.5.2 Monitor and advocate for effective implementation of the state’s minimum wage phase-out plan. | 3.5.3 Fund technical assistance, peer support and other activities to increase provider capacity and support innovation that leads to more employment and other inclusive community-based alternatives. | 3.5.4 Advocate for change in state policies and programs. | 3.5.5 Engage in and support communication strategies that increase people w/developmental disabilities and their families’ awareness, understanding and support for community employment. | 3.5.6 Advocates for improved policies/practices that result in students with developmental disabilities having job exploration opportunities and work experience while in school. | 3.5.7 |
### 3.6 In collaboration with people with developmental disabilities, their families, and stakeholders, increase opportunities for people with developmental disabilities living in rural areas to find and maintain employment by reducing barriers unique to rural areas.

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<tbody>
<tr>
<td>3.6.1</td>
<td>Support and fund technical assistance opportunities for providers in rural areas that are customized to their needs.</td>
<td>SC 1.5.1 # The number of Council supported systems change activities with organizations actively involved.</td>
</tr>
<tr>
<td>3.6.2</td>
<td>Develop and implement communication strategies for rural areas to support Employment First.</td>
<td>SC 1.3.2 # The number of promising practices supported through Council activities.</td>
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<tr>
<td>3.6.3</td>
<td>In collaboration with stakeholders in rural areas and through research of best practices, identify and support approaches that address challenges unique to rural areas.</td>
<td>OEC 1.1.4 # of providers supported</td>
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<tr>
<td>3.6.4</td>
<td>Advocate for policies that address rural needs.</td>
<td>OEC 1.1.7 # of communications developed</td>
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<td>OEC 1.1.10 mode of communication</td>
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### 3.7 Increase access to community-based services and supports.

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<tr>
<td>3.7.1</td>
<td>Advocate for increased funding for the Autism Waiver that results in more children and their families receiving needed services.</td>
<td>OEC 1.1.5 # of legislators and policymakers educated</td>
</tr>
<tr>
<td>3.7.2</td>
<td>Advocate for increased funding</td>
<td>SC 1.1.1 # The number of policy and/or procedures created or</td>
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#### QOL 2.2.2 # of PWDD employed in integrated settings

#### QOL # of students with work experience while in school

### 3.6.1 Support and fund technical assistance opportunities for providers in rural areas that are customized to their needs.

SC 1.5.1 # The number of Council supported systems change activities with organizations actively involved.

SC 1.3.2 # The number of promising practices supported through Council activities.

OEC 1.1.4 # of providers supported

OEC 1.1.7 # of communications developed

OEC 1.1.10 mode of communication

### 3.7.1 Advocate for increased funding for the Autism Waiver that results in more children and their families receiving needed services.

OEC 1.1.5 # of legislators and policymakers educated

SC 1.1.1 # The number of policy and/or procedures created or

### SC 1.1.1 # The number of policy and/or procedures created or

### SC 2.1 # The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute or regulation changes.

### SC 2.2 # The number of Council efforts that were implemented to transform fragmented approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

### SC 2.1.3 # The number of promising and/or best practices improved as a result of systems change activities.

### SC 2.1.4 # The number of promising and/or best practices that were implemented.

### OEC 2.1.2 # of providers increasing their knowledge

### QOL 2.2.2 # of PWDD employed in integrated settings

### SC 2.2 # The number of Council efforts that were implemented to transform fragmented

### SC 1.1.1 # The number of policy and/or procedures created or

### OEC 1.1.5 # of legislators and policymakers educated

### SC 1.1.1 # The number of policy and/or procedures created or

### SC 2.1 # The number of Council efforts that led to the improvement of best or promising practices, policies, procedures, statute or regulation changes.

### SC 2.2 # The number of Council efforts that were implemented to transform fragmented

### QOL 2.2.2 # of PWDD employed in integrated settings

### QOL # of students with work experience while in school

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<tr>
<th>3.7.3</th>
<th>Advocate for and support waiting list policies that improve access to services.</th>
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<tbody>
<tr>
<td>3.7.4</td>
<td>Advocate for policies and program changes that result in improved services and supports for people with developmental disabilities.</td>
</tr>
<tr>
<td>3.7.5</td>
<td>Advocate for improvements in laws and regulations.</td>
</tr>
</tbody>
</table>

allocated to the DDA waiting list resulting in more people receiving the supports and services they need and want.

| changed. |
| SC 1.2.1 | The number of statute and/or regulations created or changed. |
| SC 1.3.2 | The number of promising practices supported through Council activities. |
| SC 1.3.3 | The number of best practices created. |
| SC 1.4.1 | The number of people trained or educated through Council systemic change initiatives. |
| SC 1.5.1 | The number of Council supported systems change activities with organizations actively involved. |
| FUND 1.2.2 | Funding for DDA waiting list. |
| FUND 1.2.3 | Funding for Autism Waiver. |
| ADV 1.3.1 | # of committees/workgroups/ advisory councils served on. |

approaches into a coordinated and effective system that assures individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.

| SC 2.1.1 | # The number of policy, procedure, statute, or regulation changes improved as a result of systems change. |
| SC 2.1.2 | # The number of policy, procedure, statute, or regulation changes implemented. |
| SC 2.1.3 | # The number of policy, procedure, statute, or regulation changes improved as a result of systems change activities. |
| SC 2.1.4 | # The number of promising and/or best practices that were implemented. |
| QOL 2.2.5 | Increased # of people receive DDA services. |
| QOL 2.2.6 | Increased # of people receive services through Autism Waiver. |

### Outcome

People with developmental disabilities achieve their full potential in all facets of community life side by side people without disabilities.
#### LOGIC MODEL

The Logic Model provides an “at a glance” view of how the resources we invest relate to the activities we engage in and lead to the outputs, outcomes and impact we seek.

<table>
<thead>
<tr>
<th>Resources (needed to support activities)</th>
<th>Activities (specific approaches related to objectives)</th>
<th>Outputs (deliverables measured by count or other data)</th>
<th>Short-term Outcomes (changes as a direct result of implementation activities)</th>
<th>Long-term Outcomes (changes as a direct result of implementation activities)</th>
<th>Impact</th>
</tr>
</thead>
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<td>Federal AIDD allotment</td>
<td>Communicate/ conduct outreach</td>
<td>Newsletters, Facebook posts, website, other media</td>
<td>More people with developmental disabilities and their family members are involved in advocacy efforts</td>
<td>More people with developmental disabilities serve in leadership positions</td>
<td>People with developmental disabilities lead the lives they want and policies and support systems help make this happen</td>
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<td>DD Act; Program guidance and instructions</td>
<td>Provide/sponsor education, training, and technical assistance</td>
<td>Education and outreach events Online education and training materials Providers supported</td>
<td>Increased knowledge of DDA system and individual planning process</td>
<td>More youth with developmental disabilities are educated in an integrated setting with their typical peers</td>
<td>People with developmental disabilities and their families have the information and skills to flourish and create change in their communities</td>
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