NHDSQC Meeting Minutes for September 17, 2025

Hybrid Meeting and In-Person.

Agenda:

Welcome and introduction (Emily Manire, Chair)
Chair Update & Announcements (Emily Manire, Chair)
Approve August Meeting Minutes (Vote)
Call and Review of Nominations for Chair and Vice Chair
Election of Chair and Vice Chair (VOTE)
Kelly Ehrhart -pending membership update (VOTE)
Bureau of Developmental Services Update (Jessica Gorton)
Committee Updates:

- Data (Chair, Emily Manire)
- Rules & Regulations (Chair, Stephanie Patrick)
- Self-Advocacy Groups (Kelly Ehrhart, Louis Esposito)

Follow up from Director Medicaid Enterprise Development report
Other Business and Announcements:

- Let Shanon know if you would like to receive a stipend
- Family Support Conference Workshop Suggestions (Karen Blake, Lisa Steadman)

Planning the October Meeting
Public Comment

Quality Council Members and Attendance:

Jessica Gorton	Bureau of Developmental Services	Present In-Person
Abigail Conger (Alternate)	Bureau of Developmental Services	Present Virtual
Tammy Mills *	People First of New Hampshire	Present In-Person
Roseann Tardiff * (Alternate)	People First of New Hampshire	Present Virtual
Krysten Evans (Alternate)	ABLE NH	Not Present
Louis Esposito *	ABLE NH	Present Remote
Gina Cannon	NH Council on Autism Spectrum Disorders	Present In-Person
Adam Schrier	Brain Injury Association, BIA	Present In-Person
Krystal Chase (Alternate)	Brain Injury Association, BIA	Not Present
Isadora Rodriguez-Legendre Chair of Membership Committee	NH Council on Developmental Disabilities (NHCDD)	Present In-Person
Jim Piet *	NH Council on Developmental Disabilities (NHCDD)	Present In-Person
Lisa Steadman * QC Vice Chair	State Family Support Council	Present In-Person
Karen Hatch * Chair of Recreation Committee	State Family Support Council	Not Present
Karen Blake*	State Family Support Council	Present Virtual
Donna Corriveau	Direct Support Provider	Present Virtual
Rich Crocker	Area Agency Board, Lakes Region Community Services	Present In-Person
VACANT	Area Agency Board	Position VACANT
Ann Sanok *	Area Agency Board, One Sky	Not Present
Marissa Berg Housing Committee Chair	Community Support Network Inc. (CSNI)	Present In-Person
Emily Manire QC Chair & Data Committee Chair	Private Provider Network	Present In-Person
Kenda Howell (Alternate)	Private Provider Network	Not Present
Mary St. Jacques	UNH Institute on Disability, IOD	Present In-Person
Jen Sulewski (Alternate)	UNH Institute on Disability, IOD	Not Present
Stephanie Patrick	Disability Rights Center (DRC)	Present In-Person
Kelly Ehrhart *	At Large Member Self-Advocate	Present Virtual

A Quorum was reached.

(*) Delineates family member of/or individual with a disability which counts toward an in-person quorum.

Guests or Members of the Public:

Julie Lago	Nominated for At-Large Member Seat Submitted for gubernatorial appointment on 7/16/24	Not Present
Jennifer Bertrand	Nominated for At-Large Member Seat Submitted for gubernatorial appointment on 7/16/24	Not Present

Guests; Vanessa Blaze, Tammy Drew, & Chase Eagleson

Welcome and introduction
All Council members and guests introduced themselves.

Chair Update & Announcements - Emily Manire We are pleased to share that Shanon has officially assumed the role of Administrator for the Quality Council. In this capacity, she has already been actively engaging with various committees and is taking the initiative to familiarize herself with the councils, their functions, and the many moving parts involved.
Shanon has also been diligently working on the minutes from several committee meetings. Her efforts have been instrumental in helping us stay organized and ensuring that everything remains on track.

Approval of August Meeting Minutes
Karen Moved to approve the minutes with the following corrections. Tammy second the motion.

- Page 4 – first paragraph, last sentence- should read; Every service coordination agency has a weekly meeting, most use this meeting to discuss service authorizations, this also give them an opportunity to ask questions regarding policies and what is needed.
- Page 4 – third question – should read; Yes, the guidelines are available online in a user-friendly format, as well as in the official rule and the waiver. However, not everyone is aware that the waiver service is referred to as HEM517.
- Page 4 – last bullet – clarify what council; will add Family Support.
- Corrections of spelling errors.
- Marissa was listed as present; however, her alternate, Barbra Stokilski, attended in her place.
    - ✓ Motion passed with corrections, all in favor: Jessica Gorton, Tammy Mills, Louis Esposito, Gina Cannon, Isadora Rodrigues-Legendre, Jim Piet, Lisa Steadman, Karen Blake, Emily Manire, Mary St Jaques, Stephanie Patrick, Kelly Ehrhart & Donna Corriveau
    - ✓ Abstain: Adam Schrier, Marissa Berg,
- Adam is in the process of becoming an Alternate with Tammy Drew taking over.

Call and Review of Nominations for Chair and Vice Chair - vote

September is the designated month for voting on the Chair and Vice Chair positions. Although the last election was held just nine months ago, we are proceeding now to realign with our regular schedule.

Nominations were requested in advance, and the only nominations received were:

- Chair: Emily Manire
- Vice Chair: Lisa Steadman

For those attending online, please email your votes for both Chair and Vice Chair to the admin. Those attending in person have been provided with ballots. Once all votes are submitted, they will be tallied.

Please note: Write-in candidates are allowed.

- ✓ With **11 in-person votes** and **4 online votes**, the results are as follows:
  - **Chair:** Emily Manire has been elected.
  - **Vice Chair:** Lisa Steadman has been elected.

Kelly Ehrhart -pending membership update – vote

The Membership Committee has reviewed Kelly Ehrhart's term and determined that her membership is due for renewal. After careful consideration, the committee would like to recommend Kelly for renewal and put her forward as a candidate to continue serving.

Mary motioned to approve membership for Kelly Ehrhart. Jim second the motion.

- ✓ Motion passed to accept Kelly as a member, all in favor: Jessica Gorton, Tammy Mills, Louis Esposito, Gina Cannon, Isadora Rodrigues-Legendre, Jim Piet, Lisa Steadman, Karen Blake, Emily Manire, Mary St Jaques, Stephanie Patrick, Adam Schrier, Marissa Berg, & Donna Corriveau.
- ✓ Abstain: Kelly Ehrhart

A formal request will be submitted to the Governor's Office.

Membership Committee – Isadora Rodrigues-Legendre

- We Have not yet received a response from the Governor's Office regarding membership appointments. The Membership Committee is actively exploring additional ways to move the process forward.
- Carrie has resubmitted the list of names for appointments, but to date, there has been no response or indication of progress.
- Isadora is aware of another council that recently had approved membership. She will be reaching out to them to learn more about how they were able to successfully complete the process, in hopes it may provide insight or alternative steps we can take. Maybe go thought the Governor's Commission on Disability.
  - ✓ Stephanie encourages the Council to explore the possibility of pursuing a legislative change regarding the membership appointment process, although it may be too late this year, something to consider for next year.

Specifically, she suggests amending the current language—
from: *"approved by the Governor"*
to: *"the Governor will be notified, and if no objection is received within 30 days, the membership is considered approved."*
This approach would retain the Governor's authority to object to any nominees she finds inappropriate, while also streamlining the approval process and reducing delays.

- The Membership Committee discussed the possibility of reviewing the bylaws to determine whether individuals who have been approved by Council for recommendation to the Governor could be granted limited or provisional membership rights while awaiting formal appointment. This would allow those individuals to participate in some capacity during the interim period, pending official confirmation from the Governor's Office.
- Of the individuals previously pending appointment, Jennifer Bertrand is the only candidate who remains available and interested. The Membership Committee will be following up on her application to move it forward.
  Unfortunately, the other candidates have withdrawn for various reasons. This presents a good opportunity to revisit current vacancies, review pending applications, and discuss the application process to ensure clarity and encourage new interest.
  - ✓ Jim expressed concern that prolonged waiting periods for official appointments may lead to increased dropouts among candidates. He emphasized that unless there is a change in the legislation to streamline or clarify the appointment process, the Council may continue to face challenges in maintaining membership.

Bureau of Developmental Services (BDS) Update - Jessica Gorton

BDS is currently hosting a series of Developmental Disabilities (DD) and Acquired Brain Disorder (ABD) listening sessions to gather feedback and input from the community.

- The next in-person session will take place on September 17, 2025, from 4:00 PM to 6:00 PM at the Brown Building in Concord.
- Additional sessions will be held in Gorham and virtually on (date and time to be announced).

These sessions are an opportunity for individuals to share their experiences and perspectives. The sessions are being facilitated by Mary from the Institute on Disability (IOD), which may help participants feel more comfortable speaking openly, as they are not being led directly by the department.
All are encouraged to attend and participate.

- There have been questions about whether BDS will be summarizing and publicly sharing the input gathered from the listening sessions.
  Typically, listening sessions do not include formal summaries or reports, not due to a lack of interest, but rather due to limited capacity and bandwidth. In public comments they

most certainly do. The primary purpose of these sessions is to hear directly from individuals and families, and while the feedback is taken seriously, it may not always be formally compiled or published. Lindsay is happy to join any group to give some overarching bullet points or what people have asked to incorporate into the waiver. There will most likely be some slides created in preparation for the public comment around the myths or misunderstandings.

- ✓ There is a common misconception that there is a waiting list for In-Home Supports (IHS) services. This is not accurate — there is no official waiting list for IHS. However, individuals and families may experience delays in accessing services, primarily due to challenges in finding an available provider. While this can feel like being on a waitlist, the delay is related to provider capacity.
- ✓ Another myth regarding the IHS waiver, particularly those who are only accessing limited services like respite is they cannot also access other supports available under the waiver, this is not true. Individuals using the IHS waiver may still be eligible for a variety of other services, such as: Camp, Environmental modifications and communication access devices.
- ✓ Another myth for IHS waiver is that you must be receiving In Home Residential habilitation to access the waiver, this is not accurate. Some families just simply are not at that level or place where they want In Home Residential. They may just need - EMOD, Respite or community integration services, etc.

Question -
Is funding always available for services once an individual is found eligible?

- There are no slots, although there had been slots at one point for waiting list for services. After the initial 171A eligibility is done where someone learns that they are eligible for developmental services, then they can proceed on to the IHS waiver application or any waiver application. Even if you are waiting to find an In-Home residential rehabilitation provider, or adult service provider for day and residential, you might still be able to access your Case Manager or Service Coordinator or some of those modifications; assistive technology devices or other supports to still help.

BDS has received feedback and would like to clarify a few important points regarding documentation requirements:

- Doctor's Recommendations and Letterhead
  While it is commonly believed that a doctor's recommendation must be provided on official letterhead, this is *not* a formal requirement. Although using letterhead is considered a best practice, it is not mandated.
- When a Doctor's Recommendation Is Required
  There has been some confusion about whether all CIS require a doctor's recommendation. To clarify: a doctor's recommendation is only required when the cost of any *single* service exceeds $2,000.

BDS has also received public input on this policy and is currently reviewing whether the $2,000 threshold is effectively supporting service utilization management or if it may be creating unnecessary administrative burden.

One of BDS's liaisons will be relocating out of state. At this time, neither DHHS nor the State is able to accommodate remote or fully remote work arrangements. As a result, the liaison team will be down another member, bringing the current number of vacant liaison positions to two.

Due to a statewide hiring freeze, filling these vacancies is currently on hold. While there is a waiver process available through the Governor's Office, it includes specific criteria for approval. BDS is actively exploring this option and remains hopeful that they will be able to pursue a waiver to address staffing needs.

In the meantime, this reduction in staffing will have an impact. If you hear from anyone, particularly service coordination agencies or provider agencies, who are experiencing delays in obtaining authorizations or assistance, please notify BDS directly.

The liaison who is departing has not yet informed all their assigned regions. BDS will be reaching out to the affected regions shortly to share an interim operational plan to ensure continuity of support.

Comment -

- Isadora encourages the Bureau and the department to explore obtaining waivers for qualified staff that are willing to work remotely at least as a stopgap for during this hiring freeze. It takes 3 months to get a waiver and then they only allow you to post internally and then you need to apply for another waiver to post externally. That is not a reasonable amount of time for the level of support that the Bureau liaisons provide for our community.

While New Hampshire continues to strongly support community-based services, there remain instances of local resistance, often referred to as "Not In My Back Yard" (NIMBY). This resistance reflects a broader challenge faced not only in our system but across others as well, where some community members may not fully align with the belief that all individuals deserve to live and be supported within their communities.

New Hampshire has a long history of strong advocacy and support for community-based services. In recent years, the Department has prioritized efforts to expand in-state capacity for individuals with more intensive support needs, those who, in the past, were often served out of state due to limited in-state resources.

A few years ago, the Department began targeted efforts to increase capacity by working with

existing provider agencies and welcoming new providers to the state. The goal: bring more individuals home to receive services in their own communities.

- As part of this initiative, approximately 115 new residential placements ("beds") have been created statewide.
- Since 2023:
    - 46 individuals have successfully transitioned back to New Hampshire.
    - An additional 11 individuals have approved providers and are preparing to return.
    - Another 11–12 individuals are actively working to identify providers and begin the transition process.

This effort reflects a broader commitment to person-centered care and ensuring that individuals can live and thrive in their home communities, supported by appropriate and sustainable services.

As efforts to expand intensive community-based services continue, there has been an increase in media coverage and community feedback, particularly related to individual transitions back to New Hampshire. Transitions, especially for individuals with intensive support needs, can be complex and may involve periods of dysregulation as individuals adjust to new environments.

When these transitions are visible to neighbors or the broader community, concerns may arise. In some cases, this has resulted in calls for institutionalization or suggestions that certain individuals should not be supported in the community. These sentiments are often rooted in a lack of understanding of the services being provided and can be troubling when such language gains traction.

It is important to ensure that isolated incidents are not being sensationalized, which could lead to undue fear or stigma around community-based services. Current data does not support the idea that bringing people home to New Hampshire is failing. On the contrary, the numbers reflect ongoing success and progress in building capacity and supporting individuals in more person-centered settings.

BDS is actively monitoring the situation and will continue to assess whether certain concerns reflect systemic issues or are specific to the challenges of intensive transitions. As needed, BDS will gather and share data.
Council members are encouraged to stay informed about public discourse surrounding these services and help promote accurate, balanced communication to support understanding, reduce stigma, and reinforce the state's commitment to community integration.

Questions –

- Is this anything that the DRC gets initially engaged in or made aware?

- ✓ DRC is aware of this. They are trying to prepare now to address any legislative solutions that might be proposed. They are thinking about how they can work with the Bureau and work with other partners to try to head off some of the issues, as this is something that could impact the whole state of New Hampshire. There was already a bill last year to put some restrictions, it did not pass. It was not easy to educate legislators about why this was not the right way to go. Sometimes looking at individual cases it is difficult to prove that it is disability discrimination that is happening in these local cases when they talk about zoning. They have considered putting out some information, a standard letter that states that you cannot discriminate against people with disabilities within your zoning rules.

- Is there any progress on those individuals who are needing/seeking higher levels of support?
  - ✓ If that is what the team decision has been to engage Josh Galing. The RGA grant-funded homes those 115 beds, there is some criteria in each of those contracts that says; the focus of this is to bring people home to New Hampshire or someone who might be at risk of going out of state. Josh or Gary would have a lot more helpful information. Engage Josh or Rachel to see if it would fit under those criteria or what the anticipated movement. The other goal is to make sure that we have appropriate step down, services at this intensity are never meant to be long-term support options. We want to see people moving into less restrictive environments.
  - ✓ We need to show there was no other provider available in the state able to take this individual before those funding could be pursued and that can be rather cumbersome for individuals, teams and service coordination, especially now with the number of new providers in the state. - Loop in BDS especially if the planning team is saying there is another provider raising their hand and saying yes, but the team does not necessarily feel like it's a good fit, it's an important piece that cannot be forgotten. Make sure BDS is part of the conversation to really hear what people are asking.

Comments -

- This is a great opportunity for education and bringing that fourth into the communities.
- There was a Supreme Court case in the 80's that centered around prohibiting towns to use zoning ordinances to discriminate against folks. Area Agency have printed copies. The concerning thing about one of the op-eds was that it was from an influential legislator and it cited that individuals with disabilities living in the community is like a train on financial resources in towns. Which is not true at all. We will need to be looking to some legislation surrounding zoning. We will need to work hard as a system to make sure that people with disabilities continue to be able to access housing in the community without any discrimination.
- General housing issues that everyone in New Hampshire is facing is a problem. What are the Area Agencies or the service providers going to do with the younger population

moving out of their parent's homes and out of New Hampshire. We can only build so many group homes. We need market-rate, community-based, accessible, integrated housing options for people with disabilities.

- ✓ There were two committees, one of them is a standing committee on Housing. This is a legislative committee, and it started last year. Then there was an offshoot of that, that specifically focused on people with disabilities, not just developmental, but thinking about things like accessibility and the realities of trying to find housing as a person with a disability. This committee is supposed to be restarting. Last year they heard a lot of information for different members of the community, there were different community groups there, with the intent to really think about what are some of the barriers, like new housing opportunities and work that is being done by all of these different housing organizations, ensuring that those entities make accessible housing for people with any sort of disability. Other discussions around topics such as - employment, not everyone who needs housing has a full-time job. Supported housing, not everyone needs a home care provider living with them 24/7. Some of the discussion that also comes out of that is the benefit of the laws that have changed around ADUs; a dwelling unit that is attached to a main house, an in-law apartment. CSNI supported last year that there was an increase in size to two bedrooms, this allowing for a person to live there and somebody to take care of them, when they needed it and to meet that person's needs. Towns cannot override that.
- ✓ There have also been conversations in Connecticut area and other parts of our state. There are successful independent apartments that also include some of the people that live there. Support services as well or making that just a little bit easier to access and there has been some interest and momentum in similar models in New Hampshire. There is a passionate parent out there who is actively working to bring some of these models into New Hampshire. Question of how Medicaid fits into that, if that if the funding source, because a lot of the models might not meet the home and community-based settings criteria. Is it truly community-based or is it a little more institutional in nature and not quite community-based. We want integrated living, so not envision anything where every individual might be accessing a benefit program.
- ✓ New Hampshire is also abysmally unprepared for the aging population.
- ✓ There are two supported housing models in the state under the HCBS framework on the CFI waiver. While the Easterseals building in Rochester was initially intended to follow one of these models, that plan has since changed.

- Gina reported to the Council that she had engaged with two of the three major contractors planning apartment developments in the Concord area. In those discussions, she encouraged the inclusion of accessible units, targeted either for individuals with disabilities or for seniors wishing to age in place. Since those conversations, two of the

three developers have paused their projects. It's worth noting that similar accessibility concerns have also been raised by other advocacy groups, reflecting a broader push for inclusive housing design in new developments.

- Vanessa shared there are attempts to roll back the ADU, Accessory Dwelling Units allowances in the next session.
- ABLE has been actively working on this topic. They currently have a couple of Legislative Service Requests (LSRs) in progress with legislators, with the goal of submitting them this week. Two of these LSRs are confirmed to be moving forward. One may take the form of a study, while another will focus on implementing universal design standards in new developments. In addition, ABLE is in the process of restructuring their housing task force to create a more inclusive, community-based model. A key part of this work will involve educating municipalities and developing resource guides to support implementation efforts.
- There are legal requirements for accessibility in newly developed housing, and the Council should initiate a discussion on developers' obligations under the Americans with Disabilities Act (ADA), the Fair Housing Act, and the specific requirements regarding the number of accessible units. It is important for the Council to consider what role it can play in influencing this issue.
  Related legislation is likely to be introduced in the upcoming session. In preparation, the Council may want to develop a formal statement highlighting the importance of community-based services and the value of including people with disabilities in all communities. Having a statement on record would allow the Quality Council to respond quickly and effectively to legislation as it moves through the process, whether in support or opposition.
  Stephanie has offered to lead a small group in drafting this statement. She will be joined by Emily, Mary, Isadora, and Kelly. The group will prepare a draft for the Council to review at the next meeting.

Committee Updates:

A couple of the committees that have not been meeting have been removed, they have not met regularly, or we necessarily did not need updates for this meeting.

Data (Chair, Emily Manire)

Historically the Data Committee had a calendar of quality topics, the following are some of the topics that are of importance to have as a council.

1. **Human Rights Complaints**
   Rescheduled from the August meeting.
   We try to do it twice a year, although sometimes we only seem to get to it once a year as there is a lot going on. We want to make sure there is a month we have that report out to Melissa Nemeth and her team.

2. **327 Reports**
   Annual reports to CMS:
   - DD – February
   - ABD – April
   - In Home Supports – June

   Lindsey McGee from BDS in on our council and will let us know when a good time for that is to be reported out, based on when it is submitted and when we get feedback from CMS.
3. **Wait List Data**
   Option to distribute the full report in advance.
   If there are a waitlist or individuals waiting for services or waiting to become eligible. Families who are found eligible for services, funding and waiting because they can't find providers.
   Waitlist time for families once they are found eligible for the waiver and the waiting for the BDS and the Medicaid office to demine them eligible for Medicaid.
4. **Certification Status**
   Presenter: Peter Bacon
   Certify residential services, CFI, or community-based services. It's been a while since he visited this group. Wealth of information with regards to certification deficiencies, are there trends in deficiencies, how they work with providers to make sure they meet all the certification requirements.
5. **Employment Data for Individuals Served (ELS)**
   Presenter: Ashley Wilson
   Discussion on employment trends and outcomes.
   Employment leadership group meets quarterly, there is a person who is spearheading that, so we want that data. We know the database has been down; however, this is information we want. We need to keep this on the radar; this is an important data indicator.
6. **Intensive Treatment Services (ITS)**
   Presenter: Joshua Galing
   Updates on individual coming back to New Hampshire
7. **HCBS Setting Overview**
   Presented by Mary in July 2025; potential follow-up.
   Look to revisit this regularly**.** Updates on how that's going and any concerns.
8. **Rules & Regulations Update**
   Presenter: Stephanie Patrick
   This is an ongoing effort for our Rules & Regulations Committee, and at times, we need to ensure we focus on specific data points within that process.
9. **Workforce Development – Direct Support Professionals (DSPs)**
   Suggested topic for discussion.

10. **Medicaid Implementation Updates**
    Speaker: Olivia May
    Presented in August, Director of Medicaid Enterprise Development. We should have it back on a regular basis.
11. **Commissioner Update**
    Speaker: Commissioner Weaver
    Giving us her high-level point of view on an annual basis.

It can be challenging to fully explore these data points during full Council meetings. Moving forward, our plan is to have speakers first present to the Data Committee, where a deeper dive into the data analysis can take place. Following that, they may be invited to present a shorter summary to the full Council. Once the calendar is finalized, if there are specific topics that are especially important to you—or that you want to be directly involved in—you're encouraged to attend the Data Committee meeting for that month.

If you have a topic that you would like to see on the calendar, email Emily.
Other Data topics

- Data regarding families who are waiting to be found eligible for Medicaid.
- Redetermination
- 90 day start over – if families submit paperwork and it's lost or misplaced.
- BDS oversaw waiver when somebody closes and then reopens there is no gap. So, if they have 60 days to get everything addressed and reopened and they go back to the original day, providers cannot check in with EVV so they are not going out. So it is functionally impacting people.

Rules & Regulations (Chair, Stephanie Patrick)
Over the past several months, the Rules & Regulations Committee has discussed updates to the rules governing Designated Receiving Facilities. There are four DRF-related rules, currently the Bureau of Developmental Services (BDS) is planning only *technical* changes to these rules. Given that changes to DRF rules will be minor, the Committee will now focus on reviewing the existing DD Waiver. While the Quality Council previously provided BDS with input on potential new services, a key step reviewing the current waiver in full was missed.

Due to current funding limitations, BDS may not be able to add new services at this time. However, reviewing the waiver in its current form remains important to ensure alignment with community needs and previous feedback.

The October meeting has been rescheduled for October 6th, from 12:00 PM to 1:30 PM. These meetings will focus on drafting comments and suggestions on the current DD Waiver, building on past input shared with BDS. A summary of the Committee's recommendations will be presented to the Council in November.

Since joining BDS, Josh Galing has demonstrated strong commitment to expanding community-based services. His leadership has led to increased service access, improved funding, better contractor alignment, and strong partnerships, including with the Institute on Disability (IOD).

The DRF model has evolved significantly in recent years, from a facility-like setting to a more community-based home model. Rules need to reflect this shift toward inclusion. Committee members and the Council are encouraged to identify and share examples of positive progress from the past 5–6 years, especially those supporting community integration.

Self-Advocacy Groups (Kelly Ehrhart, Louis Esposito)

Self-Advocacy groups have been using a hybrid model, which has proven to be the most effective approach. This format allows for both in-person engagement and flexibility of virtual participation. Importantly, it facilitates 1:1 conversation within the group, adding real value to participant experience and encouraging deeper connections.

Recent Training at Community Bridges:
A successful training session was held last week at Community Bridges.

- Participants included members from People First Advocacy Group and the ABLE Group.
- A total of 10 individuals received training.
- Key discussion topics included marriage, supported decision-making, and other core advocacy issues.
- Feedback indicates a strong interest in continued training opportunities.

Ongoing Challenges and Goals:

- Transportation and logistics remain significant barriers to participation.
- Groups are exploring ways to bring training directly to the communities in a manageable way.
- The current plan is to offer training once a month, rotating agency by agency to improve accessibility and reach.
  The Advocate Conference is scheduled for next month (October).
- Attendance is a concern, particularly from individuals in day programs.
- Any support to encourage or facilitate attendance, especially from within programs, would be appreciated.

Other Group Updates:

- The Nasha group met recently, with 5 to 6 people in attendance.
- The next Self-Advocacy meeting is scheduled for October 24.

If organizations or individuals require support with transportation, they are encouraged to reach out to: ABLE, Service Coordinators or Provider Networks
Information about transportation resources and support has already been sent to all advocacy groups.

Follow up from Director Medicaid Enterprise Development report

Due to time constraints, the full report will be postponed until October. In the meantime, the following key updates and considerations were shared:

- The Medicaid team is actively developing a communication strategy to inform stakeholders of upcoming changes.
- They are also addressing workforce challenges due to a hiring freeze, which will likely impact operations and service delivery capacity.
- The Council is encouraged to consider:
    - What issues or developments are most important to keep on the radar.
    - What feedback or concerns members are hearing from the community or stakeholders.
- The Council may wish to evaluate whether to submit a formal letter expressing concerns about:
    - The hiring freeze and its operational impact.
    - Broader implications of Medicaid policy changes.
- CSNI, as part of the Medicaid Matters coalition, has shared a timeline of upcoming Medicaid changes via their Facebook page.
- Many of these changes are related to Medicaid expansion, particularly the Granite Advantage program.
- However, it's important to note:
    - Most individuals receiving community-based services are not enrolled in Granite Advantage.
    - Therefore, while concerning, these changes may not directly affect the Council's primary population at this time.

Given the evolving nature of these developments, the Council should consider:

- Whether to issue a formal statement or letter to stay engaged and highlight potential indirect impacts.
- Continuing to monitor developments and maintain a presence in the broader Medicaid policy conversation.

Other Business and Announcements:

- CSNI Website – Family Resources Page
  A new *Family Resources* page has been added to the CSNI website. It features a series of questions with clickable buttons that direct users to the appropriate sections of the BDS website. If you have suggestions for additional topics or content, please contact Marissa.
- Transportation Equity Task Force Session – Friday
  An upcoming session will focus on volunteer driving opportunities. All interested parties are encouraged to participate.
- Mental Health Revive and Thrive – Next Week
  Next week will feature a Revive and Thrive mental health event, including a panel presenting various mental health resources available to the community.

- ATinNH Webinar – Smart Home Support
  ATinNH will be hosting a webinar highlighting their lending library and discussing how they can assist with smart homes and smart technologies.
- BDS Friday Updates
  The Friday updates from BDS have been consistently valuable and informative.

Public Comment

- Roseann shared that Claremont Schools are currently experiencing a funding shortfall.
- Kelly reported attending an Advocacy Conference in Washington, D.C.

Kelly made a motion to adjourn the meeting. Mary seconded the motion.
The meeting was adjourned at 11:57 AM.