



NHDSQC Meeting Minutes for December 17, 2025

Hybrid Meeting and In-Person.

Agenda:

Welcome and introduction (Emily Manire, Chair)
Chair Update & Announcements (Emily Manire, Chair)
Approve November Meeting Minutes (Vote)
System Review Committee – Outline Structure
Autism Council Update (Isadora Rodriguez-Legendre)
Legislative bills (Marissa Berg & Karen Blake)
Bureau of Developmental Services Update (Abigail Conger)
Committee Updates:

- Self-Advocacy Groups (Kelly Ehrhart, Louis Esposito)
- By-Laws

Other Business and Announcements:

- Annual Reports
- Family Support Conference update (Karen Blake & Lissa Steadman)
- Let Shanon know if you would like to receive a stipend

January 21st Meeting -Strategic Planning from 9am to 3pm to be held at the CSNI office; 11 S. Main Street Concord NH

Public Comment

Quality Council Members and Attendance:

Jessica Gorton	Bureau of Developmental Services	Not Present
Abigail Conger (Alternate)	Bureau of Developmental Services	Present In-Person
Tammy Mills *	People First of New Hampshire	Present In-Person
Roseann Tardiff * (Alternate)	People First of New Hampshire	Not Present
Louis Esposito *	ABLE NH	Present In-Person
Krysten Evans (Alternate)	ABLE NH	Not Present
Gina Cannon*	NH Council on Autism Spectrum Disorders	Present In-Person
Tammy Drew	Brain Injury Association, BIA	Not Present
Adam Schrier (Alternate)	Brain Injury Association, BIA	Not Present
Lauren Cole (Alternate)	Brain Injury Association, BIA	Present Virtual
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 Virtual
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	Not Present
Donna Corriveau	Direct Support Provider	Not Present
Ann Sanok *	Area Agency Board, One Sky	Not Present
Kelly Ehrhart *	Area Agency Board	Present Virtual
VACANT	Area Agency Board	Position VACANT
Marissa Berg Housing Committee Chair	Community Support Network Inc. (CSNI)	Present In-Person
Emily Manire QC Chair & Data Committee Chair	Private Provider Network	Present Virtual
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
Jennifer Bertrand*	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:

Guests; Howard Clark and Lisa Beaudoin

Welcome and introduction

All Council members and guests introduced themselves.

Chair Update & Announcements - Emily Manire

No current updates. We will move a few things around on the agenda.

Approval of November Meeting Minutes

Lisa motioned to approve the minutes with corrections. Gina second the motion.

Corrections –

- Bureau of Developmental Service (BDS), this time was not used for an update however was to review articles published.
- Page 5, paragraph 2 – should note in the off years to conducting a full background check providers are required to submit an attestation.
- Typo, Joshua Gehling name was spelled incorrectly.
 - ✓ Motion passed with all in favor: Abigail Conger, Tammy Mills, Gina Cannon, Isadora Rodriguez-Legendre, Jim Piet, Lisa Steadman, Marissa Berg, Emily Manire, & Kelly Ehrhart
 - ✓ Abstain: Louis Esposito, Lauren Cole & Jennifer Bertrand
 - ✓ Out of the room: Mary St. Jacques & Stephanie Patrick

Autism Council Update - Isadora Rodriguez-Legendre & Gina Cannon

- Autism Council just completed the Annual report and will be voted on at January's meeting.
- Pending legislation proposing the elimination of the Autism Council. The Council is preparing to justify its continued need and value. Several notable accomplishments from the past year were highlighted, including completion of the annual report, which is expected to be released following a vote in January.
- The Council also supported work on the Blue Envelope Program, which was passed into law last session. This program allows individuals with autism and other anxiety-related disabilities to obtain a blue envelope from the DMV. The Developmental Disabilities Council is supporting the creation of a one-page informational document explaining the program, including eligibility, application process, benefits, and a description of the

envelope. This effort will be done in collaboration with Autism Council members, though it is not an official Autism Council committee.

- The Autism Council is made up of professionals and family members from across the state. Part of the role of both this Council and the Autism Council is to share information back with the communities and organizations they represent, ensuring broad communication across the network. Members were encouraged to share updates within their organizations, particularly with groups that support or may be impacted by the potential elimination of the Autism Council, to ensure stakeholders are informed and aware of the issue.
- It was noted that the primary sponsor of the bill is Wayne MacDonald, and there are no additional sponsors. The bill number and title were identified as HB 1337.
 - ✓ Concerns were raised about a lack of community understanding regarding the proposal to eliminate the Autism Council. Members encouraged individuals impacted by autism, including family members, to submit testimony, contact legislators, and communicate the importance of maintaining a council specifically dedicated to autism-related needs, particularly for individuals who do not qualify for waiver services.
 - ✓ One member added an opinion that the effort to eliminate the Autism Council may be part of a broader political agenda to reduce funding and oversight bodies, noting that the Council may be viewed as an easy target.
 - ✓ There has been increased participation from the larger community, including the addition of new members to the Autism Council, which was viewed positively.
- A question was raised regarding whether increased attendance reflected participation by official Autism Council members. It was clarified that there were two recent months in which meetings were not held due to not meeting quorum requirements. The most recent meeting was a combined November/December meeting, as both scheduled dates fell on or immediately following holidays.
 - ✓ It was noted that the majority of attendees were current Autism Council members or individuals who have applied for membership as family representatives or individuals with lived experience.
 - ✓ As with many councils and commissions across the state, appointments submitted to the Governor's Office have remained pending for an extended period. Members reported that candidates forwarded approximately six months ago have not yet received confirmation of appointment.

System Review Committee – Outline Structure – Stephanie Patrick

A suggested framework for a new committee was included as an attachment in the meeting materials. It was noted that at the previous meeting, the Council voted to form a committee to conduct an in-depth review of the recent three-part article series. The purpose of this work is to identify potential system gaps and weaknesses and to develop recommendations to address those



concerns. The goal is to complete this work and present suggested recommendations by August or September at the latest.

The proposed committee would include members of the Council, as well as invited guests with subject-matter expertise, to provide insight into specific areas of the system they oversee or are most familiar with. The framework is intended to provide clear structure and ensure shared understanding of the process, recognizing that final decisions rest with the Council.

The proposed structure includes a series of two-hour meetings, held approximately once per month, with additional meetings in February if needed. Meetings would be scheduled in advance, ideally in early January. Each meeting would feature one or more invited experts who would present on their role within the system and discuss identified gaps or challenges.

The proposed topic sequence includes:

- **January:** Bureau of Developmental Services (BDS) overview, including how system components are intended to work together.
- **February:** Licensing and Certification, with a focus on enhanced family care settings, which are certified rather than licensed.
- **March:** Provider organizations, with participation from provider network representatives.
- **April:** Complaints and sentinel events, including the Office of Planning and Legal Services, DHHS, and potentially Adult Protective Services (APS) and Area Agencies.
- **May:** Adult Protective Services and the Abuse Registry.
- **June:** Law enforcement, prosecutors, and the criminal justice role within the system.
- **July:** Development and review of final recommendations and preparation of a report for Council consideration in July or August, depending on progress.

It was further proposed that the committee use a consistent set of questions for each invited group to allow for comparable information gathering. These questions would address roles in protecting individuals with disabilities from abuse and neglect, perceived system gaps, barriers to safety, legal or regulatory shortcomings, responsibility for system oversight, and how individuals and families are informed of their rights and reporting processes.

Meetings would be open to the public, and attendance would be encouraged from legislators, staff, families, and other stakeholders. However, given time constraints and the proposed two-hour meeting structure, there would be limited opportunity for open dialogue or extended back-and-forth discussion. The focus would be on presentations and information sharing rather than facilitated conversation, as meetings are expected to run short on time.

- ✓ Asking consistent questions of each participating entity will be critical to effectively identifying common themes and trends. Maintaining the same set of questions will

support the development of a matrix to compare feedback and inform final recommendations.

- ✓ During Executive Committee review the previous week, there was consensus that the process should be closely managed, particularly regarding the volume of public input and the extent of back-and-forth discussion. Given the limited two-hour timeframe for each session and the complexity of the subject matter, the priority will be to gather factual information and perspectives directly from each entity to ensure productive use of time.

A question was raised regarding the role of medical providers and medical review processes within the system. One member shared past experience at an Area Agency where medical events were reviewed by on-staff nursing staff and asked whether the proposed framework includes procedures for identifying medical red flags, internal medical reviews, and follow-up on injuries. Concerns were expressed about situations in which injuries may be documented but not adequately reviewed, reported, or escalated.

- ✓ Members discussed the importance of ensuring this issue is addressed somewhere within the committee's work plan so it does not fall through the cracks. It was suggested that this topic could be incorporated into the April session, which would include Area Agencies, provider agencies, and service providers, as each entity plays a role in documentation, review, and responsibility for follow-up.

The group also discussed the importance of the Sentinel Event Review Committee within DHHS. Sentinel events were identified as a key mechanism for reviewing the most serious incidents, and it was noted that this perspective would be addressed during presentations from the state. Clarification was provided that sentinel events have a specific definition and differ from critical incidents. Sentinel events include unanticipated deaths, permanent loss of functioning, suicides, sexual assaults, and other serious injuries, as well as incidents involving law enforcement. Community providers and DHHS staff who provide direct care are required to report all sentinel events under an established DHHS policy.

- ✓ Members noted that distinguishing between critical incidents and sentinel events would be an important discussion point and may be useful to include in the system overview, as this topic is likely to arise across multiple presentations. It was acknowledged that this issue was raised during Executive Committee discussions and should be captured in the committee's work to ensure comprehensive review.

It was suggested that presenters be encouraged to provide any written materials in advance of their sessions or submit them afterward, as compiling and synthesizing the information will be a significant task. Members emphasized the importance of the Council's commitment not only to conducting the review but also to dedicating sufficient time to organizing the information and developing meaningful recommendations.

- ✓ Noted that additional questions related to accountability may be important to include. These include identifying existing accountability levers, assessing their effectiveness,

determining which entities have access to those levers, and understanding the mechanisms for enforcing accountability across different stakeholder groups. Members agreed that these questions align with the broader theme of accountability and could be incorporated into the standardized set of questions used for each presentation.

Members discussed the timeline and scope of the committee's work. One concern raised was whether the process could be expedited to complete the review by June, rather than July, in order to allow time for dissemination of findings and public discussion with individuals with disabilities, families, and other stakeholders.

- ✓ It was noted that completing the work by July would require the committee to have a draft ready by the second week of June to allow sufficient time for review before the July Quality Council meeting.

It was acknowledged that the timeline is ambitious, especially given the volume of information to review, the need for legislative engagement, and the upcoming election year, which may affect legislators' focus.

- ✓ Members agreed that public sharing of findings is important, both to inform ongoing discussions and to guide potential legislative actions.

A question was raised regarding the focus on enhanced family care, independent living, and individuals living with their families, and whether other program types should be included.

- ✓ It was clarified that starting with enhanced family care allows for a manageable scope, as rules and policies differ across program types. While this review will not encompass the entire system, findings could inform ongoing work and future reviews of other areas, including day programs, group homes, and services under different waivers, such as the Choices for Independence waiver. Members agreed that a complete systemic overhaul within six months is not feasible, but the committee's recommendations could serve as the foundation for longer-term system improvements.

Comments:

- A member emphasized the need for practical outcomes for families and individuals. They suggested creating a clear guide showing which entities and staff are accountable for abuse or neglect and how to recognize warning signs. They also noted that organizations on the Quality Council could issue guidance quickly, rather than waiting months, to address past gaps, improve accountability, and help families identify red flags.
- A member noted that the Self-Advocacy Leadership Team has done significant work on abuse and neglect. They emphasized the importance of continuing this work and exploring new ideas that could lead to positive, practical solutions.
- A member expressed interest in hearing directly from the state departments and agencies involved in investigations of abuse and neglect. They emphasized the importance of understanding where lapses occurred, what can be done differently, and what changes the agencies plan to make to ensure the safety of individuals. It was noted that systemic

changes, such as the loss of direct contact between agencies and providers, reduced oversight at the local level. Members agreed that hearing from state agency representatives about accountability, breakdowns in the system, and the impact of these changes is critical. This aligns with prior comments emphasizing the need for clarity on responsibility and oversight in the redesigned system.

- Developmental Rights Center (DRC) is conducting an in-depth investigation into systemic failures related to abuse and neglect, including cases referenced in recent articles as well as other incidents, including more recent deaths. The investigation allows access to confidential records not available to the public, families, or reporters. A report is expected to be released in the summer.
- Quality Council's public meetings cannot review confidential details, these meetings can still focus on broader lessons learned, accountability, and system improvements. The goal is to use insights from different system stakeholders to identify actions that can be taken within existing control and resources, as well as highlight areas where additional resources or authority would be needed to improve safety and oversight.
- This is going to take time. That's not to say that the DRC won't conduct its own investigation in parallel, or that the Bureau or DHS might not provide public comment or have their own process regarding what was shared and how they respond. This certainly doesn't prevent any agency from doing their own work. We're looking at many parts of the system all at once, and it will take time to bring in experts who can address the different components they oversee. We might be able to expedite the process by a month or two but moving faster than that would be challenging.
- For parents of children who cannot advocate for themselves when they are being abused or neglected, we know that abuse and neglect are not new—they are ongoing problems. The layers of bureaucracy often prevent warning signs from being properly flagged, which delays meaningful change in the system. This is what drives frustration among families and leads some to call for dismantling our locally based system in favor of something else. I see this as another opportunity to honestly do better. It's going to be uncomfortable, and some entities will have to confront that discomfort. We need to truly pay attention to the signs, look for them actively, and implement accountability measures that are both family-friendly and person-centered
- There's a lot to review, and many pieces to consider as we work on mapping out how things are supposed to function. As you mentioned, some areas might require more than one meeting to fully cover. We may also find opportunities to adjust or regroup participants based on their accountability to one another. As we move forward, I think it will become clearer which pieces are closely connected, which could help us streamline the process and cover things more efficiently.
- One area not reflected here is guardians, especially public guardians, interest in their roles and how they support oversight in the settings where people receive services. Also, it may be worth looking at private professional guardians.

- Request for the representative from the office of client and legal services to be a part of those conversations.
- Question - whether there are respite beds available for individuals or families in urgent situations. For example, if someone needs to be pulled from a placement immediately due to abuse or another emergency, are there safe places for them to go?
 - It's not just a matter of whether a bed exists about having an open bed in a location that can temporarily house someone while the situation is assessed, an investigation occurs, and a long-term plan is developed. For uncertified beds, there are ways to fund emergency placements through crisis dollars, which can then transition to residential funding once the provider is certified. The key is to ensure that the person can move safely and that the provider can receive funding to continue services.
- I also wonder whether families and individuals know this exists. Even without all the details, they should know that if they report a concern and need to leave a placement, there is somewhere safe to go without fear of repercussions.
 - As a provider, we do face emergency placements, whether due to abuse, hospitalization, or other sudden circumstances. We constantly monitor our "inventory" of open beds in certified homes. For example, at the National Center, we have two group homes, and sometimes we use one of those rooms for emergency placements. This is something providers can speak to in more detail when we cover that section.

Stephanie motioned to proceed with the plan, allowing Emily and the executive committee flexibility to make adjustments as needed; while also beginning to set dates, sending invitations for the first sessions, and finalizing the questions so we can start in January. Isadora second the motion.

- ✓ Motion passed with all in favor: Abigail Conger, Tammy Mills, Louis Esposito, Gina Cannon, Lauren Cole, Isadora Rodriguez-Legendre, Jim Piet, Lisa Steadman, Marissa Berg, Emily Manire, Mary St. Jacques, Stephanie Patrick, Kelly Ehrhart & Jennifer Bertrand

Stephanie thinks Lisa and Jennifer's points are very important: while this is going to be a long process, we need some response and acknowledgment now.

The points about the length of this process were very well taken and appreciated the thoroughness. That said, she would like to suggest that the council consider drafting a letter to the Governor and the Secretary of DHS. We are very concerned about what is happening right now and feel it's important to hear from them directly.

Public statements from both the Governor and the Secretary so far have been minimal, so a letter could express that we need to know how they are addressing these issues within their systems.



We can also outline our planned meetings and express our commitment to this work, while requesting their active participation and engagement.

Isadora motioned to have the letter drafted and ready to vote on at January's meeting. Emily second the motion.

- ✓ Motion passed with all in favor: Abigail Conger, Tammy Mills, Louis Esposito, Gina Cannon, Lauren Cole, Isadora Rodriguez-Legendre, Jim Piet, Lisa Steadman, Marissa Berg, Emily Manire, Mary St. Jacques, Stephanie Patrick, Kelly Ehrhart & Jennifer Bertrand.

The executive committee will review and tighten up the framework that was recommended from all the feedback. This includes adding questions, capturing input from medical providers and their community, and including guardians, especially public guardians.

The next step is identifying a meeting time. Times that were provided did not work for Jessica. Since we want Jessica at the table as an important stakeholder, we'll reach out to her for dates and work backward from there. Once we have those dates, we can schedule the first meetings.

Email Shanon if you're interested in joining the committee. We'll include as many participants as possible, but if you commit, please plan to attend every meeting. Life happens, of course, but consistent participation is important as we pull together all the data and capture all pieces of the system. We will need to make an in-person quorum.

Legislative bills - Marissa Berg

There is still a lot of bill language we're waiting to see finalized. Updates almost daily, and there are several efforts underway to roll back some of the education gains from last session. There are a handful of bills that move toward greater institutionalization. One that is especially concerning involves the creation of centralized schools for the delivery of special education services.

There is also a bill proposing a study on creating a new long-term state psychiatric hospital, which would represent another form of institutional care. In addition, there are a few outlier bills, one I've been watching, though it's unclear whether it will gain traction, involves citizen's arrest. That could pose significant risks for people with developmental disabilities and increase the likelihood of harm or injury.

At this point, we're continuing to monitor all these bills. Through CSI's work, the special education bills have been grouped into their own category for our area agency legislative liaisons to track. While there's nothing that appears to be an immediate threat to the service system right now, these proposals are certainly concerning and warrant close attention.

- **HB 1293** would tax certain properties owned by charitable and nonprofit organizations, and that could directly affect many nonprofits, especially our disability partners.

Wondering whether DRC is planning to follow the bill related to centralized schools for the delivery of special education. That approach doesn't align at all with IDEA or the requirement for education in the least restrictive environment, and also very interested in learning more about the bill related to institutional care.

- I would say yes, likely, to be honest that right now DRC is overwhelmed by the sheer number of harmful bills that have already been proposed, many of which don't even have final language yet. They are trying to prioritize where the disability impact is most direct and where we can have the greatest influence. They can't engage on every landlord-tenant bill, even though many of them essentially strip tenants of their rights. The volume of this session is overwhelming.
- That said, we absolutely welcome partnerships and invitations to collaborate. Special education and education support more broadly are clearly under attack. If you look at what's happening in general education policy, there's a significant focus on special education under that umbrella. We're seeing proposals involving budget caps that disproportionately affect special education, education freedom accounts that don't benefit students with disabilities, and several other concerning bills.
- There's also a bill to increase the use of restraint and seclusion, which is being closely tracked. Overall, what this really comes back to is how legislators are viewing disability, often treating students with disabilities as cost centers or price tags. That mindset will absolutely affect how schools treat these students.
- The consolidation bill mentioned, for example, stems from schools lacking related service providers like OT, speech, and PT. The idea seems to be that consolidating services into centralized locations would save towns money, rather than complying with IDEA requirements around least restrictive and most inclusive environments. The focus is cost efficiency, not student outcomes.
- We're very concerned about the long-term effects. In five to ten years, we're going to see students who are far less included than they are now or have been over the past decade. We're moving backward. And it's not just special education; there are also bills targeting multi-tiered systems of support and other training and infrastructure that students rely on.
- Looking not only at special education bills but also general education legislation that has crossover impacts, like education freedom accounts, open enrollment, and other policies. It's coming from all directions, and we're working closely with other organizations to monitor developments and keep everyone informed about what we're seeing.

On housing, one of the things that has been noticed is how complex many of these bills are. We're not all housing law experts, and understanding the real-world implications of some of this language for people with disabilities is challenging. From our organizational perspective, we're going to need to take a closer look at how these proposals affect people, especially since so much of it is deep in the weeds.

In terms of housing opportunities, particularly affordable and accessible housing, we are not seeing much of a push for truly accessible housing. Not "check-the-box" accessibility, but real accessibility that works for people. We're trying to closely monitor and better understand the language as it comes out.

Tenant protections are a separate area from zoning, and that's a whole different part of housing law. New Hampshire Legal Assistance is really taking the lead on tenant protection issues.

- Marissa can talk with Karen and Debbie Johnson and see if they'd be willing to come and give this group an overview of what they're seeing, since tenant protection cases are what they work on every day. That could be helpful for grounding this discussion.

Many of the advocacy organizations are in regular communication with one another. They come together frequently to share information, track legislation, and coordinate around disability-related impacts, so there is ongoing collaboration happening behind the scenes.

Question for Isadora, does the DD council identify priority legislation that it tracks? And do you anticipate the council conducting research and analysis on policies such as the proposal to create centralized schools for the delivery of special education services?

- Yes, that bill is on their priority list. They also have a longer list of bills where the language is still emerging and may raise concerns. Right now, Vanessa and Chase are working on identifying priorities and looking for opportunities to collaborate with other groups and organizations so they can divide the work and be as effective as possible, especially given the number of proposals that could limit people with disabilities from living full, community-based lives.

Typically, once they identify their top ten or so priority bills, they share them on the website and send regular email updates to our Policy Committee members, usually on a weekly basis once the legislative session begins. That doesn't mean those are the only bills they are monitoring, but they are the ones receiving the most focused attention. Please let Isadora know if you'd like to be added to that list.

HB 370 - Reestablishing the commission to study the delivery of behavioral crisis services to individuals with mental illness with an impairment primarily due to intellectual disability.

- The DRC & DD Council are following this bill and receiving regular updates from Vanessa and Chase, this is one that they will be tracking. They recently had a council member appointed to the study committee whose children have both intellectual and developmental disabilities and mental health conditions. We'll have more information to share as that work progresses.

Bills that are popping up which will disproportionately affect what we're doing areas that is a direct violation of the protocol, so we are tracking

We're also tracking the anti-DEI bills that are starting to surface, because they will disproportionately affect the work we're doing. One example is Medicaid-funded mobile dental clinics. If those services are targeted to specific high-need communities, they could be challenged under anti-DEI frameworks, even though they exist to address access gaps.

Because of impacts like this, we're closely monitoring all of these bills and assessing how they could interfere with essential, community-based services.

Another highlight that there are several anti-vaccine bills or proposals that would restrict access to vaccines. Marissa has already started conversations with the DD nursing group to better understand how limiting vaccine access could impact individuals, especially children with complex medical needs and developmental disabilities. This is a specific area we're monitoring closely because of the potential health and safety implications.

Bureau of Developmental Services Update - Abigail Conger

The In-Home Supports Waiver has been approved by CMS. We were able to submit it earlier this fall and responded to a request for additional information from CMS, and we now have full approval effective January 1, 2026. I'll send an email to the council with details on where to find the materials, but there is also a link on the website with a comparison tracker. That tracker shows the changes from the previous waiver to the newly approved version, so folks can easily see what was updated as part of the renewal.

As a reminder, these waivers are approved for five-year periods, so this waiver will run from January 1, 2026 through December 31, 2030.

This past fall, we also completed the informal public comment period for the DD & ABD waiver. In January or early February, we'll begin releasing dates for the formal public comment period and move forward with the full submission process. The DD waiver renewal date is September 1 for the next five-year cycle, and the ABD waiver renewal date is November 1 for the next five years.

Lindsey and Ashley will be working intensively over the next three months to get those waivers submitted. We're hopeful that the updates and the experience working through the In-Home Supports Waiver with CMS will help make the DD and ABD waiver processes go more smoothly as well.

There are family-friendly materials on the website for the In-Home Supports Waiver, such as plain-language summaries and short informational videos, BDS will now be updating those with the finalized information now that the waiver has been approved. This will allow us to reflect on any additional changes to services accurately.

- Recommended once those updates are live, send an alert to your mailing list, to make sure people know the information is available and can easily access it on the CSNI website.

Committee Updates:

Self-Advocacy Groups -Louis Esposito & Kelly Ehrhart

Kelly and Louis have been discussing her local advocacy group. Currently, attendance is low, usually 2-3 people consistently. While they get a monthly calendar, the meetings aren't always consistent, and sometimes they're scheduled in weeks when other commitments conflict.

One concern is that the group is staffed by a provider, and the staff member often dominates the conversation, quickly shutting down feedback from participants. This raises a few questions:

- Are other advocacy groups facing the same issue, where staff primarily drive the meeting rather than supporting it?
- When the meeting is marketed only to clients of that specific vendor, is it truly open to the wider community?
- The timing is after hours—would attendance improve if meetings were held during the day when people are looking for community-based programming? Could we explore locations like the YMCA or local libraries for daytime meetings?

Kelly and Louis also discussed the content of meetings. For example, when she suggested discussing topics like sexual exploitation, the staff said it was "too touchy" and that the room had to be "read." This illustrates the broader problem: advocates can't set the agenda; staff are controlling the discussion.

Currently, attendance is mostly just a few people, and if these issues aren't addressed, membership isn't growing. They want to explore ways to market these advocacy groups more broadly, to other private providers, in-home supports, and potentially the general public. The focus would still be on disability advocacy, but opening access could increase engagement.

- How to support advocacy groups without staff taking over the agenda
- What training the staff have in person-centered practices
- Whether any contracts or policies are limiting staff understanding or flexibility

Overall, we want to strengthen advocacy groups so that participants can lead discussions, membership can grow, and meetings are truly community driven.

Able has been working with People First of New Hampshire to organize a candlelight vigil to remember individuals who have been neglected or abused and who have passed away within our system. We're targeting Saturday, January 10th for the event, with a snow date of January 17th. The vigil will start around 4 p.m., around dusk, to acknowledge the solemnity of the moment. More information will be shared in the coming week.

This is an opportunity for people to come together, mourn, and honor those affected. While recent articles highlighted three specific deaths, the reality is that many more people have died under the BDS/DHS system who may not have received media attention.

Within our People First circles, we've been discussing how to expand advocacy efforts to reach individuals who might not normally attend small advocacy events. The goal is to ensure that all individuals, including those not typically exposed to advocacy training, know how to access help and support. We're exploring ways to broadcast this vigil widely and develop strategies for training and supporting people to advocate for themselves effectively.

By-Laws – Emily Manire

A few months ago, the Quality Council discussed forming an ad hoc committee to review our bylaws and ensure they're current. This committee would also recommend any necessary revisions.

Kelly, Lisa & Isadora will set up a time over email to review them.

Other Business and Announcements:

- Annual Reports
 - Carrie, our previous administrator, has been working hard on drafting the last two years of annual reports. One report is already complete, and the other is very close to being finalized. These reports have been a long time in the making, and she has done a thorough and comprehensive job. Once finalized, both reports will be posted on our website and fully accessible.
- Family Support Conference update - Lisa Steadman
 - The Family Support Conference is starting to pull together presenters. On Friday night, we will gather for pizza at the planetarium, as there are enough councils participating to make that a group event. The main conference will take place on Friday and Saturday. On Sunday, we're planning optional "pay-your-own-way" gatherings, where families can participate at designated locations. These will be pre-arranged with the venues. Families can either attend at their own expense or, if their council chooses, the council can cover the cost.

- Let Shanon know if you would like to receive a stipend.

January 21st Meeting -Strategic Planning from 9am to 3pm to be held at the CSNI office; 11 S. Main Street Concord NH

Public Comment

- 1099 if paid over \$600.00
- From conversations in the community, it seems there is a shift toward people focusing only on themselves and their families, rather than the community. This mindset appears to be influencing legislation and proposed bills. The challenge is reminding people that individuals with disabilities are valuable community members, not just a dollar sign, and that supporting everyone may require contributing more resources to ensure no one goes without basic needs.
 - This is why it's so important for people to vote and engage with legislators. In New Hampshire, the deck is stacked, but staying involved, asking questions, holding officials accountable, and participating in campaigns, matters. We've also been discussing that people with disabilities should consider running for office. Even if winning seems unlikely, being a candidate puts you on the stage, part of the conversation, rather than just in the audience hoping someone else represents your interests.
 - The issues are systematic. Housing is a major concern for people with disabilities, but it's also a statewide problem affecting everyone. Frustration grows as people see high property taxes, especially in a state without income or sales tax, while funds for services feel limited. This affects areas like supportive education, which faces budget cuts because high costs and inflation create pressure to reduce spending. The challenge is balancing fiscal concerns with the need to maintain essential supports for vulnerable populations.
 - With Kelly now sitting as a Board member we have At-Large seats open. Currently, we have two applicants in the queue, one from the initial set and one more recent. The membership committee met last week to plan how to engage these candidates and potentially schedule interviews for next month. We now have a regularly scheduled committee meeting, so interviews are likely to happen then. If you know individuals with lived experience of intellectual or developmental disabilities who would be strong candidates for the Quality Council, please share either Isadora's or Shanon's information with them so they can apply.

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