

2009 Program Performance Report

October 1, 2008 through September 30, 2009

3/1/2010



To follow is the 2009 Federal Fiscal Year's Project Performance Report. The goals and objectives for performance targets are summarized briefly. In addition to the performance targets summaries, the Reporting Year's Expenditures are defined as well. Once the report was completed it was submitted to the US Department of Health and Human Services for review and approval. The report was due on or before December 31, 2009 and was approved.

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Grantee: New Mexico
Reporting Period: 10/01/2008 - 09/30/2009

OMB Clearance No.: 0980-0172
Expiration Date: 08/31/2012

Section 1 - Identification

State: NM - New Mexico		Federal Fiscal Year Reporting: 10/01/2008	Through: 09/30/2009
Name of person to contact regarding PPR information			
Last name: Putnam	First name: Pat	Middle initial W	
Email Address: pat.putnam@state.nm.us			
Contact Person's Phone number: Area Code 505 Exchange Digits 476 Other Digits 7321 Extension:			
Did your Designated State Agency (DSA) change this fiscal year? No	If Yes, name of new DSA:		If Yes, is the new DSA a Service Provider?
State Authority Establishing Council by: State Statute	Has the Executive Order/Statute changed this year? No		

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Section 2 - Comprehensive Review and Analysis Update

A. COMPREHENSIVE REVIEW AND ANALYSIS UPDATE:			
<p>Please provide an update on the comprehensive review and analysis in your State Plan. Include a description of the adequacy of health care and other services, supports, and assistance that people with developmental disabilities receive 1) in ICF(MR)s; and 2) through home and community-based waivers. (limit 4,000 characters):</p> <p>The New Mexico executive branch continues to pursue a state health care plan ensuring that all New Mexicans have health insurance coverage. The DDPC will advocate for coverage for persons with DD in the next year. Money Follows the Person (MFP), legislation passed in 2007, however the program was not implemented despite press coverage and community response. ICF (MR) s have seen little to no change. Insurance rates and workers comp have risen sharply causing financial difficulties for some providers. The question of MFP applying to ICFMR is still unanswered. Mi Via the NM DD Self-directed waiver, provided services to 171 individuals who transferred from the traditional DD Waiver, D&E Waiver and other programs to the new self-directed waiver. Mi Via is the only waiver service for people with brain injury, currently there are 484 waiting with brain injury. The 2008 legislative session resulted in the following allocations for services: Developmental Disabilities. \$10 million to reduce the waiting list for DD waiver services, \$1 million for FIT early intervention services and \$267,000 in additional funding for the DD Planning Council for guardianship services provided by its contractors. A new Statewide Coordinated Long-Term Care System, (CoLTS), began July 1, 2008. The logistics and details regarding consumers with DD will be on the front burner in the upcoming year as rules, and procedures are developed for this program. House Memorial 6, which continued the efforts of House Joint Memorial 34 called for DDPC to convene a Task Force to review guardianship issues effecting adults with disabilities. The Task Force recommendations were approved by legislators impacting the following: Uniform Health Care Decisions Act, Mental Health Care Treatment Decisions Act, Mental Health and Developmental Disabilities Code, Probate Code and Office of Guardianship Act. Reports are available upon request. The DD waiver waiting list continues to grow as does the D&E waiver list. However, with the 10 million recently allocated in the 2008 special legislative session, The DD waiver list should reduce by 400 individuals during the next fiscal year. The D&E Waiver continues at funding level capacity.</p>			
B. Waiting List-Please report any change in number (from last year to this year) of individuals with developmental disabilities on waiting lists for services.			
Section 2 - B. Waiting List Number	Waiting List Name	Number in Plan or previous PPR	Number in FY__
1	DD Waiver	4380	4609
2	D&E Waiver	12221	15438
3	Medically Fragile Waiver	55	0
4	Mi Via BI (Self Directed) Waiver	0	484

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Section 3 - EM-2/3: Employment - Outcomes & Narrative

SECTION 3: EM	
2. COUNCIL RESULTS FOR REPORTING YEAR IN EMPLOYMENT(EM): People get and keep employment consistent with their interests, abilities and needs:	
EM01. Adults have jobs of their choice through Council efforts:	21
EM02. Dollars leveraged for employment:	0
EM03. Employers provided vocational supports to students on the job:	0
EM04. Businesses/employers employed adults:	0
EM05. Employment programs/policies were created/improved:	0
EM06. People facilitated employment:	0
EM07. People trained in employment:	0
EM08. People active in systems advocacy about employment:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
EM09. People trained in systems advocacy about employment:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
EM10. Other(1):	93
EM10. Other(1): Description Information and Referral Service provided.	
EM10. Other(2):	0
EM10. Other(2): Description	
EM10. Other(3):	0
EM10. Other(3): Description	
3. Narrative Description Of Council Results For Reporting Year In Employment. (Maximum 2,500 Characters):	
EM01 - Through our DDPC Center for Self Advocacy, we have provided direct employment for 3 individuals with developmental disabilities and 19 individuals with developmental disabilities on contract.	

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Section 3 - ED-1: Life Goal Area (Education) Goal ED 1 Non-Compliance with IEP's

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
EDUCATION AND EARLY INTERVENTION(ED): Students reach their educational potential and infants and young children reach their developmental potential.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: ED
(i) Implementer:	<input checked="" type="checkbox"/> In house <input type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): NM Protection & Advocacy (Disability Rights New Mexico)	
iii) Beginning date: 01/01/2009	Ending date: 06/30/2009
(iv) Part B \$39,000	Other(s) \$22,666
(v) Intermediaries/Collaborators:	<input checked="" type="checkbox"/> State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)NM Public Education Department, Special Education Office	
b)Local School Districts	
c)Regional Educational Collaboratives	
d)Parent Training Institute/Parents Reaching Out	
e)New Mexico ARC	
f)Statewide Transition Coordinating Council	
g)DD Grassroots Project	
(vi) Check Primary Type of Activity:	
<input type="checkbox"/> Outreach	<input checked="" type="checkbox"/> Training
<input type="checkbox"/> Technical Assistance	<input type="checkbox"/> Supporting & Educating Communities
<input type="checkbox"/> Interagency Collaboration & Coordination	<input type="checkbox"/> Coordination with related Councils and Committees
<input type="checkbox"/> Coalition Development & Citizen Participation	<input type="checkbox"/> Informing Policymakers
<input type="checkbox"/> Demonstration of New Approaches to Services and Supports	<input type="checkbox"/> Other(s)
<input type="checkbox"/> Programs Barrier Elimination, Systems Design & Redesign	
Project Activity Description P&A provided legal clinics addressing the IEP & legal processes available when schools fail to meet the IEP goals & objectives. Training provided to Families & School personnel.	

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Section 3 - ED-1: Life Goal Area (Education) Goal ED 2 Life Span Transitions

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
EDUCATION AND EARLY INTERVENTION(ED): Students reach their educational potential and infants and young children reach their developmental potential.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	

State: NM - New Mexico	Life Goal Area: ED
(i) Implementer:	<input type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): UCED - Center for Developmental Disabilities	
iii) Beginning date: 07/01/2007	Ending date: 06/30/2009
(iv) Part B \$56,000	Other(s) \$0
(v) Intermediaries/Collaborators:	<input type="checkbox"/> State Protection and Advocacy System <input checked="" type="checkbox"/> University Centers of Excellence
List Other Collaborators:	
a)Preschool Network	
b)EPICS - Native American Parent Training Institute	
c)Statewide Transition Coordinating Council	
d)Family & Community Partnership Division, CDD	
e)Special Education, Public Education Department	
f)Local School Districts	
g)Early Childhood Programs	
(vi) Check Primary Type of Activity:	
<input type="checkbox"/> Outreach	<input type="checkbox"/> Training
<input type="checkbox"/> Technical Assistance	<input checked="" type="checkbox"/> Supporting & Educating Communities
<input type="checkbox"/> Interagency Collaboration & Coordination	<input type="checkbox"/> Coordination with related Councils and Committees
<input type="checkbox"/> Coalition Development & Citizen Participation	<input type="checkbox"/> Informing Policymakers
<input type="checkbox"/> Demonstration of New Approaches to Services and Supports	<input type="checkbox"/> Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
Project Activity Description Increase early childhood parent leader's capacity to articulate transition process thru leadership trng. Increase reps on transition initiatives pre-school - school. Project showcased, SpecialQuest website	

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Section 3 - ED-2/3: Education - Outcomes & Narrative

SECTION 3: ED	
2. COUNCIL RESULTS FOR REPORTING YEAR IN EDUCATION AND CHILD DEVELOPMENT(ED). Students reach their educational potential and infants and young children reach their developmental potential.	
ED01. Students have the education and support they need to reach their educational goals through Council efforts:	0
ED02. Infants and young children have the services/supports needed to reach developmental goals through Council efforts:	137
ED03. Students transitioned from school to community and jobs:	0
ED04. Children transitioned from early intervention and pre-school to inclusive schools/classrooms:	84
ED05. People on waiting list(s) received services/supports:	0
ED06. Dollars leveraged for education:	0
ED07. Education programs/policies created/improved:	0
ED08. Post-secondary institutions improved inclusive education:	0
ED09. Schools improving IEP practices:	4

ED10. People facilitated inclusive education :	0
ED11. People trained in inclusive education:	0
ED12. People active in systems advocacy about inclusive education:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
ED13. Parents or guardians trained regarding their child's education rights:	568
ED14. Other(1):	171
ED14. Other(1): Description Information and Referral Services provided.	
ED14. Other(2):	0
ED14. Other(2): Description	
ED14. Other(3):	0
ED14. Other(3): Description	
3. Narrative Description of Council Results for Reporting Year in Education and Early Intervention. (Maximum 2,500 Characters): The NMDDPC has adopted a strategy to contract with the Disability Rights New Mexico (DRNM) to provide outreach to parents of children in special education programs through clinics and workshops. This project conducts special education clinics that include an overview training plus individual consultation with students or parents of students in special education. These clinics provide individual advocacy in cases related to the failure to implement IEP's and provide significant potential for systemic change. The project also provides for systemic approaches to improving the delivery of special education services, which may include a group complaint process for submittal to the Public Education Department, an organization consisting of parents that meet with local school boards, or give support to others providing special education advocacy. There have been 18 clinics held across the state with 1160 persons trained. These clinics will continue into the future as public comment from community forums indicates the need for this assistance within New Mexico communities. The transition project trained early childhood parents to become community leaders and local trainers for other families in their communities. Trainings were conducted on community resources, early child hood to public school and parental rights.	

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Section 3 - HO-2/3: Housing - Outcomes & Narrative

SECTION 3: HO	
2.COUNCIL RESULTS FOR REPORTING YEAR IN HOUSING(HO): Adults choose where and with whom they live:	
HO01. Individual have homes of their choice through Council efforts:	0
HO02. People moved from congregate setting to homes in the community:	0
HO03. Dollars leveraged for housing :	0
HO04. Banks made mortgage funds available to enable people to their own homes:	0
HO05. Housing programs/policies created/improved :	0
HO06. Units of affordable, accessible housing made available:	0
HO07. People facilitated home ownership/rental:	0
HO08. People trained in housing :	0
HO09. People active in systems advocacy about housing :	
Breakout number by type person:	
(1) Self-advocates:	

(2) Family members:	
(3) Other:	
HO10. People Trained in systems advocacy about housing:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
HO11. Other(1):	210
HO11. Other(1): Description Information and Referral Services provided.	
HO11. Other(2):	0
HO11. Other(2): Description	
HO11. Other(3):	0
HO11. Other(3): Description	
3. Narrative Description Of Council Results For Reporting Year In Housing. (Maximum 2,500 Characters):	

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Section 3 - HE-1: Life Goal Area (Health) Goal HE 2 DDMI Pilot & Replication

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
HEALTH(HE): People are healthy and benefit from the full range of needed health services.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: HE
(i) Implementer:	<input type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Department of Health, Developmental Disabilities Supports Division	
(iii) Beginning date: 10/01/2006	Ending date: 09/30/2009
(iv) Part B \$31,846	Other(s) \$25,000
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)UNM Health & Sciences Center, Center for Community and Family Medicine	
b)Community Mental Health Centers	
c)Statewide Dual Diagnosis Committee	
d)Transdisciplinary Evaluation and Supports Clinic, University of New Mexico	
e)Taos County ARC	
f)Developmental Disabilities Supports Division, DOH	

g) Value Options - Contractor for State Mental Health Services (BHMO)	
(vi) Check Primary Type of Activity:	
Outreach	Training
Technical Assistance	Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
<input checked="" type="checkbox"/> Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. Create a service delivery system for persons with DDMI through 5 pilot sites. 2 Medicaid codes approved to establish a permanent funding stream for comprehensive services and evaluations.	

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Section 3 - HE-2/3: Health - Outcomes & Narrative

SECTION 3: HE	
2. COUNCIL RESULTS FOR REPORTING YEAR IN HEALTH(HE): People are healthy and benefit from the full range of needed health services.	
HE01. People have needed health services through Council efforts:	799
HE02. Dollars leveraged for health services:	60,000
HE03. Health programs/policies created/improved:	20
HE04. People improved health services :	276
HE05. People trained in health services :	692
HE06. People active in systems advocacy about health:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
HE07. People trained in systems advocacy about health:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
HE08. Other(1):	225
HE08. Other(1): Description Information and Referral services provided	
HE08. Other(2):	0
HE08. Other(2): Description	
HE08. Other(3):	0
HE08. Other(3): Description	

3. Narrative Description Of Council Results For Reporting Year In Health. (Maximum 2,500 Characters):

The Friends Curriculum project concluded its mission to train advocates to become mentors to advocates in areas of social skills and sexuality awareness. Over the course of the year 35 advocates were trained to be mentors. As a mentor they provided class demonstrations when a skill was taught and they partnered with students who needed extra support in carrying out the activity. 200 advocates were trained by the mentors. 145 classes were held this FFY. This project is continuing through the University of New Mexico funding. The DDMI project provided funding to replicate the Taos DD/MI pilot project clinic's successful practices in implementing programs/services for persons with dual diagnosis in local communities. A total of 5 sites have been implemented and have expanded the project to offer treatment in Taos, Farmington/Shiprock, Silver City, Roswell, which serves Clovis and Carlsbad. 12 clinics were held with 29 clients receiving services. Plans are to establish the DDMI model as a national best practice based on research over the next year. The training and utilization of the model is being implemented statewide thru the State Behavioral Health programs. This project will be funded one additional year to formalize training structures but a permanent funding stream has been established thru Medicaid to cover service and evaluation cost.

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Section 3 - CH-2/3: Child Care - Outcomes & Narrative

SECTION 3: CH	
2. COUNCIL RESULTS FOR REPORTING YEAR IN CHILD CARE: Children and families benefit from a range of inclusive, flexible child care options.	
CH01. Children in inclusive child care settings through Council efforts:	0
CH02. Dollars leveraged for child care programs:	0
CH03. Child care programs/policies created/improved:	0
CH04. People facilitated inclusive child care:	0
CH05. People trained in child care:	0
CH06. People active in systems advocacy about child care:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
CH07. People trained in systems advocacy about child care:	
Breakout number by type person:	
(1) Self-advocates:	
(2) Family members:	
(3) Other:	
CH08. Other(1):	37
CH08. Other(1): Description Information and Referral Services provided.	
CH08. Other(2):	0
CH08. Other(2): Description	
CH08. Other(3):	0
CH08. Other(3): Description	

3. Narrative Description Of Council Results For Reporting Year In Child Care. (Maximum 2,500 Characters):

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Section 3 - RE-2/3: Recreation - Outcomes & Narrative

SECTION 3: RE	
2. COUNCIL RESULTS FOR REPORTING YEAR IN RECREATION(RE): People benefit from inclusive recreational, leisure, and social activities consistent with their interest and abilities.	
RE01. People active in recreational activities through Council efforts:	26
RE02. Dollars leveraged for recreation :	0
RE03. Recreation programs/policies created/improved:	1
RE04. People facilitated recreation:	3
RE05. People trained in recreation:	0
RE06. People active in systems advocacy about recreation:	
1. Self -advocates	
2. Family members	
3. Others	
RE07. People trained in systems advocacy about recreation:	
1. Self -advocates	
2. Family members	
3. Others	
RE08. Other(1):	28
RE08. Other(1): Description Information and Referral Services provided.	
RE08. Other(2):	0
RE08. Other(2): Description	
RE08. Other(3):	0
RE08. Other(3): Description	
3. Narrative Description Of Council Results For Reporting Year In Recreation. (Maximum 2,500 Characters): Though the Grassroots Network, recreational activities have been created to promote community participation, awareness and advocacy. These recreational activities include: dances, parent meetings, getting to know your local policy makers, movie night and bowling. The one policy change was to include the graduates of the Eastern New Mexico University DD program with the regular graduation ceremonies of the University.	

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Section 3 - TR-2/3: Transportation - Outcomes & Narrative

SECTION 3: TR	
2. COUNCIL RESULTS FOR REPORTING YEAR IN TRANSPORTATION: People have transportation services for work, school, medical, and personal needs.	
TR01. People have transportation services through Council efforts:	0
TR02. Dollars leveraged for transportation:	0
TR03. Transportation programs/policies created/improved:	0
TR04. People facilitated transportation:	0
TR05. People trained in transportation:	0
TR06. People active in systems advocacy about transportation:	
1. Self-advocates	
2. Family members	
3. Others	
TR07. People trained in systems advocacy about transportation:	
1. Self-advocates	
2. Family members	
3. Others	
TR08. Other(1):	107
TR08. Other(1): Description Information and Referral Services provided.	
TR08. Other(2):	0
TR08. Other(2): Description	
TR08. Other(3):	0
TR08. Other(3): Description	
3. Narrative Description Of Council Results For Reporting Year In Transportation. (Maximum 2,500 Characters):	

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Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 1 Conference & Training Stipends

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: QA
(i) Implementer:	<input type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): ARC of New Mexico UNM/Center for Development and Disability	

iii) Beginning date:10/01/2008		Ending date:09/30/2009
(iv) Subtitle B \$28,705		Other(s) \$46,081
(v) Intermediaries/Collaborators:		<input checked="" type="checkbox"/> State Protection and Advocacy System <input checked="" type="checkbox"/> University Centers of Excellence
List Other Collaborators:		
a)NM ARC		
b)Independent Living Centers		
c)Dept. of Health Developmental Disabilities Supports Division		
d)Governor's Commission on Disabilities		
e)		
f)		
g)		
(vi) Check Primary Type of Activity:		
Outreach	Training	
Technical Assistance	<input checked="" type="checkbox"/> Supporting & Educating Communities	
Interagency Collaboration & Coordination	Coordination with related Councils and Committees	
Coalition Development & Citizen Participation	Informing Policymakers	
Demonstration of New Approaches to Services and Supports	Other(s)	
Programs Barrier Elimination, Systems Design & Redesign		
(vii) Briefly Describe the Project, Strategy, or Activity. Provide scholarships/stipends to self-advocates, families to participate in-state conferences & trainings including a legislation & policy making day at the legislature.		

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Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 2 Native American People First

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State:NM - New Mexico	Life Goal Area:QA
(i) Implementer:	<input checked="" type="checkbox"/> In house <input type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Arc of New Mexico	
iii) Beginning date:10/27/2008	Ending date:09/30/2009
(iv) Subtitle B \$12,018	Other(s) \$0
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)Department of Indian Affairs	

b)Arc of New Mexico	
c)People First of New Mexico	
d)Division of Vocational Rehabilitation	
e)Tribal Governments	
f)	
g)	
(vi) Check Primary Type of Activity:	
<input checked="" type="checkbox"/> Outreach	Training
Technical Assistance	Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. Consumer-based advocacy in NM's Native American communities where a coordinator is working to establish 4 People First Chapters on on native American lands.	

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**Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 3 NM
Center for Self Advocacy**

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State:NM - New Mexico	Life Goal Area:QA
(i) Implementer:	<input checked="" type="checkbox"/> In house by contract/grant
(ii) Grantee/Contractor name (if appropriate): NM Center for Self Advocacy	
iii) Beginning date:10/01/2008	Ending date:09/30/2009
(iv) Subtitle B \$4,850	Other(s) \$158,667
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)State & Local People First Chapters	
b)Special Ed Dept. University of New Mexico	
c)Albuquerque Public Schools	
d)Friend of the Center for Self Advocacy (501 c 3)	
e)State Wide Transition Coordinating Council	
f)	

g)	
(vi) Check Primary Type of Activity:	
Outreach	<input checked="" type="checkbox"/> Training
Technical Assistance	Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. CSA is a DDPC state funded project. A recurring budget has been awarded with 2 FTEs.1 is used to employ 2 Self Advocates p/t. SA's Develop trainings and do peer training across the state and nation.	

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Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 4 Self-Advocacy Advisory Committee

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: QA
(i) Implementer:	<input checked="" type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Arc of New Mexico	
(iii) Beginning date: 12/02/2008	Ending date: 06/30/2009
(iv) Subtitle B \$15,000	Other(s) \$0
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a) Developmental Disabilities Services Division, Department of Health	
b) State & Local People First Chapters	
c)	
d)	
e)	
f)	
g)	
(vi) Check Primary Type of Activity:	
Outreach	<input checked="" type="checkbox"/> Training
Technical Assistance	Supporting & Educating Communities
<input checked="" type="checkbox"/> Interagency Collaboration & Coordination	<input checked="" type="checkbox"/> Coordination with related Councils and Committees

<input checked="" type="checkbox"/> Coalition Development & Citizen Participation	<input checked="" type="checkbox"/> Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. The Self-Advocacy Advisory Committee is designed to provide self-advocates direct input into state programs serving persons w/DD & develop leadership and understanding of choice among self-advocates.	

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Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 5 House Joint Memorial 34/6

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: QA
(i) Implementer:	<input checked="" type="checkbox"/> In house <input type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Protection & Advocacy	
(iii) Beginning date: 04/02/2008	Ending date: 06/30/2009
(iv) Subtitle B \$0	Other(s) \$7,807
(v) Intermediaries/Collaborators:	<input checked="" type="checkbox"/> State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a) Administrative Office of the Courts	
b) Adult Protective Services	
c) Aging & Long Term Services Dept.	
d) Department of Health	
e) NM District Court Judges	
f) NM Guardianship Association	
g) Senior Citizens Law Office	
(vi) Check Primary Type of Activity:	
<input type="checkbox"/> Outreach	<input type="checkbox"/> Training
<input type="checkbox"/> Technical Assistance	<input type="checkbox"/> Supporting & Educating Communities
<input type="checkbox"/> Interagency Collaboration & Coordination	<input type="checkbox"/> Coordination with related Councils and Committees
<input type="checkbox"/> Coalition Development & Citizen Participation	<input checked="" type="checkbox"/> Informing Policymakers
<input type="checkbox"/> Demonstration of New Approaches to Services and Supports	<input type="checkbox"/> Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. Task force was create to review the processes by which guardians of adults under the Uniform Probate Code are appointed, trained, supervised & reviewed. Legislation was developed and passed into law	

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**Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 6
Grassroots Network**

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: QA
(i) Implementer:	<input checked="" type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Developmental Disabilities Planning Council - Coordinator 12 Local Grassroots Coordinators (Contract)	
iii) Beginning date: 10/01/2008	Ending date: 09/30/2009
(iv) Subtitle B \$109,996	Other(s) \$2,000
(v) Intermediaries/Collaborators:	<input checked="" type="checkbox"/> State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)Protection & Advocacy	
b)Arc of New Mexico And Local Chapters	
c)Disability Coalition	
d)Independent Living Centers	
e)Governor's Commission on Disabilities	
f)	
g)	
(vi) Check Primary Type of Activity:	
<input checked="" type="checkbox"/> Outreach	Training
Technical Assistance	Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. A network of 12 regional leaders w/ DD or family members of a person w/DD in 8 regions of the state promoting advocacy, awareness, training & support in areas relating to disability issues.	

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Section 3 - QA-1: Life Goal Area (Quality Assurance) Goal QA 7 Disability Coalition

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
QUALITY ASSURANCE(QA): People have the information, skills, opportunities, and supports to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration and inclusion in all facets of community life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: QA
(i) Implementer:	<input type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Protection & Advocacy	
iii) Beginning date: 08/08/2008	Ending date: 06/30/2009
(iv) Subtitle B \$30,000	Other(s) \$10,775
(v) Intermediaries/Collaborators:	<input checked="" type="checkbox"/> State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)State Independent Living Centers	
b)People First Chapters	
c)Protection & Advocacy	
d)Arc of NM	
e)Governor's Commission on Disability	
f)	
g)	
(vi) Check Primary Type of Activity:	
<input type="checkbox"/> Outreach	<input type="checkbox"/> Training
<input type="checkbox"/> Technical Assistance	<input type="checkbox"/> Supporting & Educating Communities
<input type="checkbox"/> Interagency Collaboration & Coordination	<input type="checkbox"/> Coordination with related Councils and Committees
<input checked="" type="checkbox"/> Coalition Development & Citizen Participation	<input type="checkbox"/> Informing Policymakers
<input type="checkbox"/> Demonstration of New Approaches to Services and Supports	<input type="checkbox"/> Other(s)
<input type="checkbox"/> Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. To assist self-advocates, family members & advocates in coming together to develop and present their recommendations & ideas to administrative & legislative bodies on disability issues in NM.	

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Section 3 - QA-2/3: Quality Assurance - Outcomes, Self Advocacy & Narrative

SECTION 3: QA
2. COUNCIL RESULTS FOR REPORTING YEAR IN QUALITY ASSURANCE: People have the information, skills, opportunities, and support to live free of abuse, neglect, financial and sexual exploitation, and violations of their human and legal rights, and the inappropriate use of

restraints or seclusion. Quality assurance systems contribute to and protect self-determination, independence, productivity, and integration in all facets of community life.	
QA01. People benefiting from quality assurance efforts of the Council:	16,055
QA02. Dollars leveraged for quality assurance programs :	460,398
QA03. Quality assurance programs/policies created/improved:	5
QA04. People facilitated quality assurance:	127
QA05. People trained in quality assurance:	299
QA06. People active in systems advocacy:	5,613
1. Self -advocates	1,851
2. Family members	1,842
3. Others	1,920
QA07. People trained in systems advocacy:	1,854
1. Self -advocates	900
2. Family members	399
3. Others	555
QA08. People trained in leadership, self-advocacy and self-determination:	854
QA09. People attained membership on public and private bodies and other leadership coalitions:	676
QA10. Number of entities participating in partnership or coalitions as a result of Councils efforts:	208
QA11. Other(1):	143
QA11. Other(1): Description Information and Referral Services provided.	
QA11. Other(2):	0
QA11. Other(2): Description See CC01/ CC02/ CC03 for numbers reported within the Grassroots Network Project	
QA11. Other(3):	0
QA11. Other(3): Description See RE01/ RE03/ RE04 for numbers reported within the Grassroots Network Project	
3. SELF - ADVOCACY:	
A. Is there a self-advocacy organization(s) in the state led by individuals with developmental disabilities, that receives direct funding from a private or public source? YES	
B. Does the Council directly or indirectly fund a self-advocacy organization in the state led by individuals with developmental disabilities? YES	
If yes, amount of funding Council contributes \$31,868	
C. Dollars leveraged for self-advocacy organization(s) in the state led by individuals with developmental disabilities. \$158,667	
4. Narrative Description Of Council Results For Reporting Year In Quality Assurance. (Maximum 2,500 Characters): 1) Goal addresses provisions of education & training opportunities to Self Advocates & Family members. DDPC provided stipends to self-advocates & family members for 5 different trainings & conferences provided by 2 different orgs. A total of 1217 self-advocates & family members participated. The conferences included trainings on Leadership Institute/Communicating Skills, Making a Difference & Legislative Training.2)The Native American People First Project is cultivating relationships to develop People First Chapters in 3 pueblos & 1 Apache reservation in New Mexico.3)The Center for Self Advocacy continues w/ State dollars of \$167,834. 124 self-advocates participated directly in training & skill development; 1045 persons have been trained in peer training models. Topics include: Communications & Relationships, Employer Awareness, Leadership & Problem Solving on the Job.4)The Self Advocacy Advisory Committee (SAAC)coordinated a summit on issues focusing on additional training & knowledge for self-advocates entitled, "Social Equality." Workshops focused on Employment - Charting your own Course, Transportation - Community Inclusion, Housing - Home Modifications. .5) Guardianship Taskforce addressed concerns of the Legislature regarding guardianship processes within NM: lack of oversight & accountability of private/family guardians, need for training & support, maximization of autonomy & self-determination, clarification of role & authority of guardians & guardianship administration. As a result of recommendations from the task force various laws were changed impacting protected persons.6) The Statewide Grassroots Network is operating: local communities network & collaborate promoting advocacy & awareness on DD issues.7)The Disability Coalition consist of Disability Rights NM, NM ARC, People First, SILC, the DDPC. The DC provides written & oral information for presentation to legislators & executive branch policy makers regarding the importance of funding sources of Medicaid services to persons w/disabilities. The DC focuses on: Medicaid Waiver Programs,(DD, Self-directed, Medically Fragile) Money Follows the Person, Medicaid Coordinated Long Term Care D&E waiver, & PCO. The collaborative effort with DRNM is part of DDPC's policy strategy to impact legislative & policy decision. Family members & self-advocates are informed & provide funding to participate in the decision-making process as a direct result of the collaboration.	

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**Section 3 - CS-1: Life Goal Area (Community Supports) Goal CS 1
 Information & Referral**

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
FORMAL & INFORMAL COMMUNITY SUPPORTS(CS): Individual have access to other services available or offered in a community, including formal and informal community supports that affect their quality of life.	
I. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: CS
(i) Implementer:	In house by contract/grant
(ii) Grantee/Contractor name (if appropriate): Center for Developmental Disabilities	
iii) Beginning date: 07/01/2008	Ending date: 06/30/2009
(iv) Subtitle B \$10,000	Other(s) \$80,100
(v) Intermediaries/Collaborators:	State Protection and Advocacy System ✓ University Centers of Excellence
List Other Collaborators:	
a) Department of Human Services, Medical Assistance Division	
b) Department of Health	
c) Division fo Vocational Rehabilitation	
d)	
e)	
f)	
g)	
(vi) Check Primary Type of Activity:	
Outreach	Training
Technical Assistance	✓ Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. Increase the availability of informational services resulting in increased access to inclusive life choices for individuals w/ disabilities and family members. I&R Center aligned with a LEND Library.	

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**Section 3 - CS-1: Life Goal Area (Community Supports) Goal CS 2 Direct
 Care Organization**

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS

FORMAL & INFORMAL COMMUNITY SUPPORTS(CS): Individual have access to other services available or offered in a community, including formal and informal community supports that affect their quality of life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: CS
(i) Implementer:	In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Education & Training Workforce Consultants	
iii) Beginning date: 01/24/2008	Ending date: 09/30/2008
(iv) Subtitle B \$64,904	Other(s) \$0
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)Regional Independent Living Centers	
b)Non Profit Servcies Providers	
c)Arc of New Mexico	
d)Department of Aging and Long Term Services Department	
e)	
f)	
g)	
(vi) Check Primary Type of Activity:	
Outreach	Training
Technical Assistance	<input checked="" type="checkbox"/> Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. The state-wide Direct Care Coalition was formed to address issues pertinent to Direct Care Staff. HM 37 was passed and a report to the legislature will be presented	

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Section 3 - CS-1: Life Goal Area (Community Supports) Goal CS 3 Big Brothers Big Sisters

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
FORMAL & INFORMAL COMMUNITY SUPPORTS(CS): Individual have access to other services available or offered in a community, including formal and informal community supports that affect their quality of life.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: CS
(i) Implementer:	In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate):	

Big Brothers Big Sisters of Northern New Mexico	
iii) Beginning date:07/01/2008	Ending date:06/30/2009
(iv) Subtitle B \$40,000	Other(s) \$10,000
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)Santa Fe School District	
b)Arc of New Mexico	
c)Behavior Health Institute @ Las Vegas, NM.	
d)Mark Gordon, Friends Curriculum	
e)	
f)	
g)	
(vi) Check Primary Type of Activity:	
Outreach	Training
Technical Assistance	<input checked="" type="checkbox"/> Supporting & Educating Communities
Interagency Collaboration & Coordination	Coordination with related Councils and Committees
Coalition Development & Citizen Participation	Informing Policymakers
Demonstration of New Approaches to Services and Supports	Other(s)
Programs Barrier Elimination, Systems Design & Redesign	
(vii) Briefly Describe the Project, Strategy, or Activity. Model & training materials were developed and implemented & distributed to include self advocates as bigs/littles in BBBS network with mentors.	

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Section 3 CS-2/3: Community Support - Outcomes & Narrative

SECTION 3: CS	
2. COUNCIL RESULTS FOR REPORTING YEAR IN FORMAL/INFORMAL COMMUNITY SUPPORTS(CS): Individuals have access to other services available or offered in a community, including formal and informal community supports that affects their quality of life.	
CS01. Individuals benefit from formal/informal community supports as a result of Council efforts:	213
CS02. Dollars leveraged for formal/informal community supports :	56,250
CS03. Formal/informal community supports programs/policies created/improved:	55
CS04. People facilitated formal/informal community supports:	56
CS05. People trained in formal/informal community supports:	70
CS06. People active in systems advocacy about formal/informal community supports:	
Breakout number by type person:	
1. Self-advocates	
2. Family members	
3. Others	
CS07. People trained in systems advocacy about formal/informal community supports :	

Breakout number by type person:	
1. Self-advocates	
2. Family members	
3. Others	
CS08. Buildings/public accommodations became accessible	0
CS09. Other(1):	5,409
CS09. Other(1): Description Information and Referral Services provided.	
CS09. Other(2):	0
CS09. Other(2): Description	
CS09. Other(3):	0
CS09. Other(3): Description	
3. Narrative Description Of Council Results For Reporting Year In Formal/Informal Community Supports. (Maximum 2,500 Characters): The Information and Referral Center service links self advocates and family members and other stakeholders to providers, support groups, other local, state and national resources and maintains an operational preparedness to research additional information not available in the database. A disability resource directory is available online. The Direct Care Staff Organization Project has made extensive progress over the past year. The Direct Care Coalition was established. The Coalition meets at least 8 times a year statewide to gather input from Direct Care Staff themselves. Other participants included persons with developmental disabilities, family member and service providers and other relevant state agency personnel. Official brochures were developed and vendor booths were present at 2 state-wide disability conferences. The Coalition is now recognized as 501 c 3 status and will hold its first summit in the upcoming FFY. The Coalition has established bylaws. The BBBS project has concluded. There were 6 matches with 6 awaiting Bigs at the close of the project. The project experienced barriers and concerns on part of both parents and mentors. NNMBBBS continues to match individuals with DD with mentors.	

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Section 3 - CC-1: Life Goal Area (Cross Cutting) Goal CC 1 Printing & Public Relations

SECTION 3: AREAS OF EMPHASIS AND PERFORMANCE TARGETS	
CROSS CUTTING(CC): The following represent those Council activities that impact all Areas of Emphasis.	
1. PROJECTS, STRATEGIES AND/OR ACTIVITIES:	
State: NM - New Mexico	Life Goal Area: CC
(i) Implementer:	<input type="checkbox"/> In house <input checked="" type="checkbox"/> by contract/grant
(ii) Grantee/Contractor name (if appropriate): Crick Design - Monica Crick	
iii) Beginning date: 10/03/2008	Ending date: 06/30/2009
(iv) Subtitle B \$1,261	Other(s) \$0
(v) Intermediaries/Collaborators:	State Protection and Advocacy System University Centers of Excellence
List Other Collaborators:	
a)	
b)	
c)	
d)	

Section 4: Consumer Satisfaction with Council Activities

Customer Satisfaction				
Number of responses: 72				
1. Respect - I (or my family member) was treated with respect during project activity.			Yes: 99.00%No: 1.00%	
2. Choice - I (or my family member) have more choice and control as a result of project activity.			Yes: 99.00%No: 1.00%	
3. Community - I (or my family member) can do more things in my community as a result of this project.			Yes: 100.00%No: 0.00%	
4. Satisfied - I am satisfied with project activity.	4 Strongly Agree: 49.00%	3 Agree: 48.00%	2 Disagree: 2.00%	1 Strongly Disagree: 1.00%
5. Better Life - My life is better because of project activity.	4 :Strongly Agree: 38.00%	3 Agree: 56.00%	2 Disagree: 6.00%	1 Strongly Disagree: 1.00%
6. Rights - Because of this project activity, I (or my family member) know my rights. (optional)			Yes: 70.00%No: 3.00%	
7. Safe - I (or my family member) are more able to be safe and protect myself from harm as a result of activity. (optional)			Yes: 73.00%No: 7.00%	
Comments: (Maximum 2,500 characters) Surveys were collected from participants attending DDPC programs. Questions 6 and 7 had an additional category "Not Applicable" For Question 6) 14% checked not applicable and for question 7) 7% checked not applicable. Not all surveys collected were on the current survey form. Some contractors were using older version of the survey so questions 6 - 7 may not have appeared on the surveys collected. The percentages collected for questions 6 -7 reflect percentages of those surveys with those questions asked.				
Stakeholders Satisfaction				
Number of responses: 16				
Impact - Council activities have improved the ability of the individuals with developmental disabilities.				
1. Make choices and exert control over the services and support they use:	6 :Strongly Agree: 63.00%	5 Agree: 38.00%	4 Somewhat Agree: 0.00%	3 Somewhat Disagree: 0.00%
2. Participate in community life:	6 :Strongly Agree: 56.00%	5 Agree: 44.00%	4 Somewhat Agree: 0.00%	3 Somewhat Disagree: 0.00%
Satisfaction - Council activities promote self-determination and community participation for individuals with developmental disabilities.	6 :Strongly Agree: 69.00%	5 Agree: 31.00%	4 Somewhat Agree: 0.00%	3 Somewhat Disagree: 0.00%
Comments: (Maximum 2,500 characters) The Council includes the satisfactions surveys in each project reporting requirements and gathers statistics from each project funded. Individual project descriptions will provide greater detail on the various activities of the council. Not all surveys collected were on the current survey form. Some contractors were using older version of the survey so questions 8 - 10 may not have appeared on the survey's collected. The percentages collected for questions 8 - 10 reflect percentages of those surveys with those questions asked.				

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Section 5: Council Progress in Achieving Goals Goal ED 1

SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS	
GOALED	GOAL Number # 1
Goal Achievement :	
Met	
Partially met <input checked="" type="checkbox"/>	
Not met	
Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters): The council has adopted a strategy to contract with Disability Rights New Mexico to provide statewide IEP Parent Clinics. These clinics provided technical	

assistance to families on how to deal with school systems and IEP non-compliance. There have been 18 clinics held across the state with 1160 persons trained. This project will continue into the future. The clinics have met their intended purpose but we consider this partially met due to continued clinics.

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Section 5: Council Progress in Achieving Goals Goal ED 2

SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS	
GOALED	GOAL Number # 2
Goal Achievement :	
Met <input checked="" type="checkbox"/>	
Partially met <input type="checkbox"/>	
Not met <input type="checkbox"/>	
Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters):	
<p>Family Mentors were active in the recruitment and identification of Family Leaders in the designated communities to participate on the transition teams. The project Coordinator and Family Mentors met regularly with the members of the transition teams and attended meetings to gain insight on group dynamics and willingness to include family members on teams. Family Mentors were recruiting family members to participate on local family networks. Each family network provided their collective experiences, guidance and resources to Family Leaders. Two more sites in addition to the Taos Project were started, one in Silver City and the other in Roswell. 278 parents were trained regarding their child's educational rights this FFY. The project has been concluded.</p>	

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Section 5: Council Progress in Achieving Goals Goal HE 1


SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS	
GOALHE	GOAL Number # 1
Goal Achievement :	
Met <input checked="" type="checkbox"/>	
Partially met <input type="checkbox"/>	
Not met <input type="checkbox"/>	
Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters):	
<p>1)Healthy Sexuality: Self-advocates, once trained, participated in training new self advocates promoting awareness & socialization skills. This FFY 35 advocates were trained to be mentors. Mentors provided class demonstrations when a skill was taught & partnered with students who needed extra support in carrying out an activity. 200 advocates were trained by the mentors.145 classes were held this FFY. The project will be funded by DOH. The project is concluded with DDPC.2)The DDMI pilot project was a successful first step as a research based best practice (the 1st in the US). There are 5 sites replicating the Taos Pilot Project. Locations are- Farmington/Shiprock, Silver City, Roswell, Clovis/Carlsbad, Written agreements have been established, clients identified at sites & clinics are conducted. 2 Medicaid codes have been approved for comprehensive evaluations & service plan delivery. This FFY a total of 29 clients were seen & 9 clinics were held. DDPC will fund 1 additional year.</p>	

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Section 5: Council Progress in Achieving Goals Goal QA 1


SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS	
GOALQA	GOAL Number # 1
Goal Achievement :	
Met	
Partially met 	
Not met	
<p>Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters):</p> <p>1) This goal addresses education & training opportunities to Self-Advocates & family members. Stipends to Self-Advocates & family members to 4 trainings & conferences by 3 organizations for policy making, w/1200+ Self-Advocates & family members participating. 2) Native American People First project-established a steering committee & hired coord.3)The Center/Self Advocacy in its 5th year w/ 124+ self advocates directly involved in training & skill development, trained over 1045 individuals using a peer training model.4)Self-Advocate Advisory Council held summit issues relating to individuals w/ DD. 5) Guardianship Task Force policy change recommendations approved by 2009 Legis. Impacting 5 statutes. 6) Grassroots Project: statewide outreach & education w/12 regional state coordinators. Local networks relating to disability issues w/ legislators & within communities, across DD network & other disability advocacy organizations to coordinate trainings & outreach. 7) The Disability Coalition has impacted legis. & leveraged millions of Medicaid & state funds. Self-Advocacy & families are active during the legislative session, testifying & talking directly to legislation & policy makers.</p>	

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Section 5: Council Progress in Achieving Goals Goal CS 1

SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS	
GOALCS	GOAL Number # 1
Goal Achievement :	
Met	
Partially met 	
Not met	
<p>Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters):</p> <p>1)The Info Center continues to provide statewide toll-free information about Medicaid and other services. This referral service links self-advocates and family members and other stakeholders to providers, support groups, others local, state and national resources and maintains an operational preparedness to research additional information not available in the database. 6,424 calls/contacts were received and routed. 2) The Direct Care Coalition meets 8 times a year, bylaws have been adopted, and membership is growing along with community awareness of Coalition. State-wide summit in FFY10. Goal: direct care standardization/credentialing. 3) Big Brothers/Big Sisters Project: developed strategic plan/model & project materials and implemented matching processes. Kentucky DDPC used model. Presented at NACDD Conference on the project findings and was asked to present at the Nat'l BBBS Conference in the spring. At the conclusion of the project there were 6 confirmed matches with 6 awaiting "Bigs". The project has concluded.</p>	

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Section 5: Council Progress in Achieving Goals Goal CC 2

SECTION 5: COUNCIL PROGRESS IN ACHIEVING GOALS
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GOALCC	GOAL Number # 2
Goal Achievement :	
Met ✓	
Partially met ✓	
Not met	
<p>Narrative- Please provide a description of the extent to which the goal was achieved. If not achieved, a description of factors that impeded the achievement. (Maximum 1,000 Characters): CR02) Provided professional quality publications to include annual reports, newsletters, pamphlets, brochures, flyers, manuals, DVD's, exhibit booth materials, re-printing of existing materials & creation of new materials. CR01 and CR03 are numbers reported out by the Grassroots Organization primarily reported under QA.</p>	

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Section 6: Reporting Year Expenditures

A. Type of Recipient

Recipient	Sub Title B \$	Match \$	Total
A. Type of Recipient			
1. State Councils on DD	\$164,268	\$527,141	\$691,409
2. Designated State Agency	\$0	\$0	\$0
3. Other(s) State Agency	\$31,846	\$25,000	\$56,846
4. State P & A Agencies	\$69,000	\$33,441	\$102,441
5. University Centers for Excellence	\$76,595	\$88,100	\$164,695
6. Non-Profit Organizations	\$91,276	\$208,748	\$300,024
7. Other	\$133,666	\$15,000	\$148,666
8. Total	\$566,651	\$897,430	\$1,464,081

B. Cost Categories- Areas of Emphasis

Category	Sub Title B \$	Other(s) \$	Total
B. Cost Categories- Areas of Emphasis			
1. Employment	\$298	\$0	\$298
2. Education and Early Intervention	\$96,000	\$22,666	\$118,666
3. Housing	\$0	\$0	\$0
4. Health	\$56,895	\$40,000	\$96,895
5. Child Care	\$0	\$0	\$0
6. Recreation	\$0	\$0	\$0
7. Transportation	\$0	\$0	\$0
8. Quality Assurance	\$191,142	\$217,523	\$408,665
9. Formal/Informal Community Support	\$116,571	\$90,100	\$206,671
10. General management (Personnel, Budget/Finance/Reporting)	\$105,745	\$527,141	\$632,886
11. Functions of DSA	\$0	\$0	\$0
12. Total	\$566,651	\$897,430	\$1,464,081

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Section 7: Dissemination of Annual Report

Section 7: Dissemination Of Annual Report. (Maximum 2,500 Characters):

The annual report is based on PPR information as well as additional information from the various agency activities and programs. Annually a contract is utilized for the development and printing of a high quality professional Annual Report. 1000 copies were printed. The report is disseminated as follows: 5 Copies will be in placed in the DDPC archives State Library 20 copies Governor's office 10 copies State legislators 112 copies Federal Delegation 5 members @ 2ea 10 Copies Relevant State Agencies Health ALTSD, HSD, CYFD, total 50 copies Public Ed Dept Spec ED and DVR, Housing Authority, GCD, Commission for the Blind, Commission for the Deaf, DD Network + NAPAS 9 copies Independent Living Centers 12 copies Self Advocacy & Advocacy organizations 10 copies Total Distributed 238 The remaining copies are distributed at various conferences trainings meetings and public forums throughout the year In addition the Annual Report will be posted on the NMDDPC web site and notices will be sent to All public and state supported schools, 2 and 4 year post secondary institutions, Community providers. The Annual report is available upon request in alternative format.

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Section 8: Developmental Disabilities Network Collaboration

SECTION 8: DEVELOPMENTAL DISABILITIES NETWORK COLLABORATION

A. Provide information related to only those issues/barriers affecting individuals with developmental disabilities and their families in your State that the DDC, P&A, and UCEDDs (the DD network) have jointly identified as critical State issues/barriers.

Using short titles, list 5-10 areas that the DDC, P&A, and UCEDDs have identified as critical State issues/barriers.

1. Legislative Medicaid Reform
2. Money Follows the Person
3. Information and Referral
4. Collaboration/Coordination of efforts on State Advisory Committees Specifically Guardianship
5. Behavioral Health And Autism
6. Waiver Waiting List
7.
8.
9.
10.

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Section 8: Network Collaboration-Description (Issue/Barrier) 1 Legislative Medicaid Reform

Section 8: Developmental Disabilities Network Collaboration.	
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:	
1. Issue/Barrier number (from A in Section 8): 1	
2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters): The DD network collaborates to educate the legislature & governor on Medicaid & the impact of changes in services, service delivery & eligibility. We inform consumers about impending changes to Medicaid & increase their skills & comfort level in testifying to the legislature & yr-round advocacy. Conduct Disability Rights Day at the legislature as part of raising awareness re: disability issues to the legislature & the general public.	
3. Check applicable Area(s) of Emphasis:	
<input type="checkbox"/> Employment	<input checked="" type="checkbox"/> Housing
<input checked="" type="checkbox"/> Health	<input checked="" type="checkbox"/> Education & Early Intervention
<input checked="" type="checkbox"/> Formal & Informal Community Support	<input type="checkbox"/> Child Care
<input type="checkbox"/> Recreation	<input type="checkbox"/> Quality Assurance
<input type="checkbox"/> Transportation	
4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters): NMDDPC members and staff work together to educate the legislature & governor on the importance of Medicaid & the impact of changes in available service, service delivery & eligibility. The council is a major funding agency and organizing partner in efforts to increase SAs/Families skills & comfort level in testifying to the legislature & year-round advocacy & informing them on impending changes to Medicaid. The council provided funding to assist SAs/families w/ expenses to testify at the legislative session & interim committee meetings. Staff provided training and assistance to persons with DD & stakeholders to advocate for a full continuum of Medicaid services. The council assisted in organizing and provided funding to send individuals with DD/families to Disability Rights Day at the legislature last year as part of the disability community's raising awareness re: disability issues to members of the legislature and the general public.	
5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters): No major problems were encountered.	
6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters): These efforts are contributing to increasing self advocates and family members who are active in the legislative process.	

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Section 8: Network Collaboration-Description (Issue/Barrier) 2 Money Follows the Person

Section 8: Developmental Disabilities Network Collaboration.	
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:	
1. Issue/Barrier number (from A in Section 8): 2	
2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters): The Network has supported the lead of the SILC in the passage of the MFP 2 legislation session ago. The Provider association added an amendment to the bill intending to exclude ICF (MR)s from the bill. The language did not in effect exclude the ICF (MR)s and so was not opposed. Unfortunately the Aging & Long Term Services Department has failed to enact the legislation and this is a continuing focus of the Network and disability community.	
3. Check applicable Area(s) of Emphasis:	
<input type="checkbox"/> Employment	<input checked="" type="checkbox"/> Housing
<input type="checkbox"/> Health	<input type="checkbox"/> Education & Early Intervention
<input checked="" type="checkbox"/> Formal & Informal Community Support	<input type="checkbox"/> Child Care
<input type="checkbox"/> Recreation	<input checked="" type="checkbox"/> Quality Assurance
<input type="checkbox"/> Transportation	

4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters):
 The Council through it's nursing home study helped bring attention to the persons with DD under 55 years old being housed in nursing homes which brought attention and added support for MFP. The Council's Policy Analyst has also been active in tracking the legislation, informing self advocates/family members and others and testifying at various committee meetings. She has also been active in the discussions concerning the exclusions of the ICFs (MR). The Council has written a letter to the Secretaries expressing concern at the refusal to enact the legislation.

5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters):
 No problems are seen in the collaboration. Any problems stem from the fears of the providers that MFP will have a negative impact on their financial viability and the refusal of the administration to enact the bill which was signed by the Governor.

6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters):
 No unexpected benefits have yet to be identified. There has been no effort by the state to develop regulation around the legislation and the question of ICFs(MR) is still pending.

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**Section 8: Network Collaboration-Description (Issue/Barrier) 3
Information and Referral**

Section 8: Developmental Disabilities Network Collaboration.
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:

1. Issue/Barrier number (from A in Section 8): 3

2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters):
 NMDDPC and the UCE continue to collaborate on the Information Center for New Mexicans w/Disabilities/BabyNet coordinated with the UCE LEND library, housed at the UCE. Also, LEND training was provided for newly create DDPC state-wide grassroots network coordinators.

3. Check applicable Area(s) of Emphasis:

	<input checked="" type="checkbox"/> Employment
<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Health
<input checked="" type="checkbox"/> Education & Early Intervention	<input checked="" type="checkbox"/> Formal & Informal Community Support
<input checked="" type="checkbox"/> Child Care	<input checked="" type="checkbox"/> Recreation
<input checked="" type="checkbox"/> Quality Assurance	<input checked="" type="checkbox"/> Transportation

4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters):
 The Information Center for New Mexicans with Disabilities/BabyNet is funded through federal Part B \$10K in addition the DDPC has increased state and Medicaid match funding so that the UCE receives \$75K from the state general fund and \$75K from Medicaid flow-through funding. This is a decrease of \$7,000 in state funding and \$25,000 in Medicaid funding over the past 2 years. These informational services are being accessed by about 3,000 members of the general public who are seeking information about disabilities, services and programs.

5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters):
 The complex funding through the state and the University Health Sciences financial department has cause some confusion in the billing and payments in this project. These are due mainly to sources outside of the UCE or DDPC. Both partners continue to work with their respective State and University agencies to clear the confusion.

6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters):
 Additional interface with the Aging and Long -Term Services Network Info center has brought addition information into the system. In addition, our Center for Self-Advocacy is located next door to the UCED Information Ctr. therefore increasing the collaboration on self-advocacy activities between the two centers.

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Section 8: Network Collaboration-Description (Issue/Barrier) 4 State Advisory Committees

Section 8: Developmental Disabilities Network Collaboration.	
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:	
1. Issue/Barrier number (from A in Section 8): 4	
2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters): Collaboration and communication re: interface with state advisory councils, committees, task forces to facilitate self advocate and family inclusion, choice and voice in the various disability service and community options and opportunities. Special emphasis was provided to Guardianship issues with P&A	
3. Check applicable Area(s) of Emphasis:	
<input type="checkbox"/>	<input checked="" type="checkbox"/> Employment
<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Health
<input checked="" type="checkbox"/> Education & Early Intervention	<input checked="" type="checkbox"/> Formal & Informal Community Support
Child Care	Recreation
<input checked="" type="checkbox"/> Quality Assurance	<input checked="" type="checkbox"/> Transportation
4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters): NMDDPC and its network partners continue to meet on a regular basis to discuss issues and develop joint strategies to address various concerns. Additionally, Network partners continue to be active participants in a number of state advisory councils, etc. These include but are not limited to the Medicaid Advisory Committee; Advisory Committee on Quality of Services for Individuals w/DD and their Families; Behavioral Health Planning Council and its Medicaid Subcommittee; Behavioral Health Purchasing Collaborative; Guardianship Advisory Committee; State IDEA Panel, State Rehabilitation Council; State Independent Living Council; The Disability Coalition with P&A; The Autism Advisory Committee; Coordinated Long-Term Care Services Committee; DD/MI Oversight Committee	
5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters): No problem have been encountered in the collaboration.	
6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters): Network partners continue to be of benefit to each other by participating in the development of programs & systems change and also by sharing information gleaned from participation on various bodies. Significant changes were made to 5 different state Guardianship statutes during the year	

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Section 8: Network Collaboration-Description (Issue/Barrier) 5 Behavioral Health & Autism

Section 8: Developmental Disabilities Network Collaboration.	
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:	
1. Issue/Barrier number (from A in Section 8): 5	
2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters): Behavioral Health services were consolidated into a Statewide Entity, Optium Health (OH)coordinates & subcontracts BH services including those for people w DD. DDPC has been successful in its efforts in receiving 'reinvestment dollars' from OH to expand our DD/MI project.	
3. Check applicable Area(s) of Emphasis:	
<input type="checkbox"/>	<input checked="" type="checkbox"/> Employment
<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Health
<input checked="" type="checkbox"/> Education & Early Intervention	<input checked="" type="checkbox"/> Formal & Informal Community Support
Child Care	Recreation
<input checked="" type="checkbox"/> Quality Assurance	Transportation
4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters):	

DDPC continues to be an active member of the BH Purchasing Collaborative composed of 17 state agencies. DDPC is active in representing the Behavioral Health needs of persons with DD including but not limited to autism spectrum disorders, co-occurring cognitive disabilities and mental illness/substance abuse, etc. The Council has provided funding to develop a service delivery model for the DDMI population and has advocated for a consumer-based system where family members and consumers comprise 51% of the 15 local BH collaborative. The BH has established a DDMI Task Force to work towards legislation for implementation of DDMI service delivery model project.

5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters):
No problems are identified across the collaborative network.

6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters):
Increased efforts by the South West Autism Network and families have brought the autism concerns to high profile. The Autism movement is finally beginning to see its benefits: \$4.1 million was appropriated for evaluations, services to children with Autism, and the development and operation of a new Autism service center. DDPC is part of the Autism Task Force.

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Section 8: Network Collaboration-Description (Issue/Barrier) 6 Waiver Waiting List

Section 8: Developmental Disabilities Network Collaboration.	
B. Provide the following information for at least one of the issues/barriers selected for DD Network collaboration:	
1. Issue/Barrier number (from A in Section 8): 6	
2. Provide a brief description of the collaborative issue/barrier and expected outcomes(s). (Maximum 500 Characters): Large numbers of individuals continue to be on the central registry for both the DD and D/E waivers. 4380 people are waiting for the DD waiver and 12,221 are on the wait list for the D/E waiver. DD waiting time is over 8 yrs, D&E is over 7yrs. The Self Directed waiver has transferred individuals from other waivers which is the only way individuals can enter the self directed waiver. The Med Frag waiver waiting list appears to be adequately served under the recent modification to the EPSDT program.	
3. Check applicable Area(s) of Emphasis:	
<input type="checkbox"/> Employment	
<input checked="" type="checkbox"/> Housing	<input checked="" type="checkbox"/> Health
<input type="checkbox"/> Education & Early Intervention	<input checked="" type="checkbox"/> Formal & Informal Community Support
<input type="checkbox"/> Child Care	<input type="checkbox"/> Recreation
<input type="checkbox"/> Quality Assurance	<input type="checkbox"/> Transportation
4. Describe the Council's specific roles and responsibilities in this collaborative effort and technical assistance expertise your Council can provide to other States. (Maximum 1,000 Characters): NMDDPC continues to work closely with network partners to educate and advocate for additional allocations to the waiver system. NMDDPC continues to collaborate with partners and provide funding to assist persons with DD and family members to educate and inform legislators about the need for additional allotments for waiver services. NMDDPC, together with its partners was active in the work that lead up to the submission of an application for a Self-Directed 1015 Waiver in early 2006 and the development of the various support systems around the waiver.	
5. Briefly identify problems encountered as a result of this Collaboration, and technical assistance, if any, desired. (Maximum 1,000 Characters): There are no encountered problems with the collaboration across the network.	
6. Describe any unexpected benefits of this collaborative effort. (Maximum 1,000 Characters): Not only have these collaborative activities increased cooperation across the DD network, they have also increased interface with other advocacy-oriented groups and augmented the skills and participation of self-advocates in the political process that controls and funds the delivery of services.	