

Minutes
**Statewide Health Care Transition Services Task Force
for Youth and Young Adults with Disabilities**

**Education & Training Subcommittee
Teleconference Call
September 23, 2008**

ATTENDEES:

John Reiss, Ph.D., Subcommittee Chair, Institute for Child Health Policy at UF
Diane Straub, MD, MPH, Division of Adolescent Medicine, USF
Bambi Lockman, Department of Education
Laurie Blades, MA, BCBA, Department of Children & Families
Bill Palmer, Division of Vocational Rehabilitation
Susan Corse Adams, Down Syndrome Association, Jacksonville
Kristi Chapman, Florida Independent Living Council
Susan Redmon, RN, MPH, Children's Medical Services
Patti Parisian, MPH, CHES, FSU College of Medicine
Susan Haverkamp, Ph.D., Florida Center for Inclusive Communities, USF
Becky Maguire, Agency for Persons with Disabilities
Janet Hess, MPH, CHES, Project Facilitator, Early Childhood Council

CALL TO ORDER:

Dr. Reiss called the meeting to order at 10:05 AM.

DISCUSSION

- Dr. Reiss and Ms. Hess asked for corrections and/or feedback on the 9/5 meeting minutes.
 - The group reviewed the recommendation to include information on VR in CEU/CME training (e.g., disability module to be offered through AHEC). Everyone agreed that it would be beneficial to have a short web-based VR tutorial available to physicians, healthcare providers, and families, to supplement printed VR materials. The consensus was to expand on the original training concept by including a) an explanation of barriers to getting a job, and 2) what physicians can do to help their patients get a job. Dr. Haverkamp reiterated that current funding will support development of the 1st module only and additional funding will need to be sourced.
 - Ms. Parisian asked whether there was an initial assessment done to determine the level of need for development of the disability module. Ms. Haverkamp responded that it was not part of the project. However, the literature suggests there is a strong need for disability education among physicians, and that a web-based venue is particularly feasible for those with little or no travel budget. A recommendation was made to determine what physicians need, and to ask patients what they think physicians need.
 - Ms. Parisian asked whether there were plans to publish after project implementation. A recommendation was made to considering publishing in *MCH Journal*; it would provide a means for showing other communities/states how to address some of these issues. It was also noted that disseminating information about the project will be important for advocacy purposes, i.e., we need to raise awareness about health care transition issues in order to generate funding support from the legislature and other sources.

- The group discussed the matrix of education and training programs in Florida that Ms. Hess developed.
 - A question was raised about the status of the health care transition supplement for FDOE's "Standing Up For Me" curriculum; the supplement was in development but was not yet completed and/or approved for dissemination. Ms. Lockman will check and get back to the group.
 - It was suggested that the matrix include a legend for acronyms if it is included in the legislative Report and/or is available to the general public.
 - The group agreed to include education materials from allied programs on the matrix, e.g., VR, mental health, child welfare/foster care, etc. Ms. Hess requested that materials be emailed or mailed to her.
- Ms. Blades indicated she has many materials concerning transitioning out of foster care. Obtaining and maintaining health care insurance is very important for foster care youth and other high risk populations since many have medical as well as mental health issues. They may not have chronic diseases but still need extensive help with transition. Ms. Blades suggested that the Independent Living Coordinator from DCF's Family Safety Program provide assistance to this subcommittee. She will follow up with that person.
- Ms. Hess noted a previously identified training need for mental health providers who can serve individuals with developmental disabilities. She included information about NADD (National Association for the Dually Diagnosed) on the matrix and asked Dr. Haverkamp, who is a member of NADD, to talk to this group about their activities and materials. NADD's focus is on people who have developmental disabilities and mental health problems. It has developed a compendium for the DSM (Diagnostic & Statistical Manual of Mental Disorders), i.e., compiled information and suggested changes to criteria, substitutions, and things to look out for in individuals with DD/MR. It has many online courses and modules available to professionals and is developing a dual diagnosis certification program for agencies and direct care providers.
- Another area of interest is guardianship, which is an issue that should be addressed in all 3 subcommittees (Education, Financing/Legal fees, Services). It was suggested that Melinda Coulter, who is from APD and is very knowledgeable about guardianship, join us on our next call. Becky Maguire will invite her.
- The group agreed that we should identify programs and practices in other communities and states that relate to education and training so that the matrix is as comprehensive as possible. Ms. Parisian will request information about transition programs from the AAMC (American Association of Medical Colleges), which is the centralized entity for medical schools in the U.S.
- Dr. Reiss and Ms. Hess noted that there are an abundance of educational materials concerning health care transition available to us, and that, moving forward, our task will be to identify strategies for dissemination, integrating into practice, and funding.

ADJOURNMENT:

The meeting was adjourned at 11:50 AM.