AMINA DONNA KRUCK: Good morning.

They're all in their places

with bright sunny faces.

You guys are so beautiful.

Well, we looked

over your feedback.

Fabulous feedback.

Very helpful.

Our apologies to those of you when we use acronyms that you didn't

know what AAA was,

Area Agencies on Aging,

or ADRC, Aging and Disability Resource Centers.

So we're going to ask you to

call us on that today and don't let us get away with it,

whether you know what the acronym means or not, to make sure that

at least a couple times we're saying what the full thing means.

And then reminding you also

that the trainers are here.

So if you have other more

specific questions,

we're here during breaks, lunch.

Feel free to come up to any one

of us to ask further questions.

One of the questions that came up was around ‑‑ there are a couple

people about transportation issues, particularly in rural areas, and so we wanted to remind

you about Resources from APRIL which is the organization for

the rural independent living.

And it's just april.org, right?

No?

What is it?

How do they find it?

AUDIENCE MEMBER: You can Google it or

if you want to jot this down,

it's April‑rural.org and I'll say it a couple times.

It's April‑rural.org.

AMINA DONNA KRUCK: April‑rural.org.

So that's a really good resource for you.

And then also up on the ILRU website, there's some tutorials and information.

So remember these Wikis that are up there are on any of the trainings that have happened.

So there's materials in your packet, and can I look in your packet for one second?

I want to draw attention, particularly ‑‑ you pulled

it for me, the service record.

Oh, here it is.

There's one right here.

Thanks Deb.

You have in your packet from

day one an introduction to

consumer service records and independent living plans for CILs.

This is fabulous.

It has forms and everything

we've been talking about

today and yesterday.

Keep in mind yesterday was the first day, today is another day,

and we'll be addressing

in particular systems

advocacy tomorrow,

although we'll just be dipping

in because that could be

easily a three‑day workshop,

but ‑‑ to know.

So this is there for you.

And then we put up here to remember, this is at the end of Deb's presentation yesterday, resources and tutorials.

And what Darrell was telling me is that the same material that's in here is in ‑‑ there's some different tutorials up there.

And if you walk through,

you actually can get a

certificate when you're done.

This you're just

reading on your own.

I read through that first night just to see what all was in here, the stuff about the whole intake process and everything.

It's really very interesting.

I realize I don't work directly ‑‑ I work directly with consumers,

but not with CSRs usually

because I like problem solving

for advocacy stuff.

But I did have a program this last year where I had to do that and

I had to learn how to open up people in our database and stuff,

but I didn't know until I read that I was supposed to send a closure letter out to everybody.

So really good resources.

Your challenge will be

to find time to use them.

I think that's the hard part.

You get here and then you

leave and you go yikes,

I was going to do all of this cool stuff and now I don't have time.

So let's see.

What else came up in that?

There was a lot about strength‑based and some

concern about getting

into counseling.

So, again, I just want to remind you that really this is a systems change for many of us, and I know where it comes from.

It comes from our eligibility where we have to ask people ‑‑ we have to prove they have barriers.

So we get into the barriers and it's just an attitude difference.

It's just an interviewing technique that is used in all kinds of different fields.

It's not counseling therapy.

It's just an interview technique about bringing out with people what their strengths are and not just focusing on their weaknesses,

and doing that part first so we're not tearing them down and then having to build them up.

But from the very get‑go we're helping them recognize those things.

And what I noticed when we were doing that goal setting session yesterday is that all of the sudden, you get nervous.

I have resources.

Does that mean I can't offer them resources?

No.

But at that point, you're offering them resources and then always good.

You know, they're always thinking the S&L, what do you want to do?

What will you be doing about this?

You know, some of us have been around a long time and know about how you learn to notice if you're

working harder than the

person you're working with,

there's something wrong.

I see some nodding heads.

So, but I just got that line yesterday from that training.

I will what?

Get them to tell us what they're going to do right from the get‑go.

That's part of that as well.

And then there was a

question about, well,

how long do you set goals for?

Well, you can set goals for

10 years, if you want to,

but you and your consumer

won't feel very satisfied.

So you want ‑‑ that's why another thing I loved about that form,

to break it down into the

action steps.

Because that helps you get some short goals that they said they will do that can get accomplished, maybe within a day.

That's great.

Because then you have

the strength to build on.

Good job, great.

So now we'll do the next thing

and then the next thing.

So it's okay to have some long‑term goals, but I don't think

you want to set those up

as the goals that you're

working on right now.

When keeping that in mind,

we know that's your

heart's desire,

we know that's where you're going.

You can even document it somewhere, but I wouldn't put that down as the goal that we're

working on right now if it's,

you know, like to get a college

degree because then you're not going to get any little

successes on the way.

At the end of the day,

what do they have to do?

They have to get a catalog,

they have to do this,

they have to do that.

So does that make sense?

Yeah, so, and I think all of us can ‑‑ I like to think of it as like your grocery shopping list.

Like I shop at Costco and I shop at Whole Foods and I shop at Safeway because I can get better,

cheaper, organic vegetables there than Whole Foods sometimes.

So I make that shopping list

and then I decide,

where do I have time to go today?

I can't go to all three of them today, you know what I mean?

And I don't want to.

So am I strong enough to push the cart at Costco?

You know, that kind of thing.

So does that make sense for that?

And feel free to talk to Deb.

There were lots of kudos

about the I&R.

Not that you didn't have kudos for Deb's but lots of very specific statements about what you

appreciated about that and

lots of questions about the session that Deb did.

And I think ‑‑ so she's going to talk more in a way this morning

that's going to help some of it come together a little bit more for you, and then also she's around to talk to.

Let's see, what else?

Oh, yeah, the ADRCs and how

do we get them more and that

kind of thing.

So there was some discussion around that, and you guys can chime in if I missed something,

but the thing with the Aging Disability Resource Center

really is a system change.

Because literally when I came into the independent living movement, we were all about getting away

from the aging community because we'd been lumped in with them

with that medical model.

And in most places, it's an aging administration that got those grants and have more control and more of the money.

It doesn't have to be that way, but that's true.

In fact, a lot of that money

is going to be going away.

But the administration really got behind this push and in some ways realistically so.

And it's part of their

longer range plan.

So there is this new administration on community living, and we have a

great person there.

They're the ones that are

putting out these ADRC grants

and guidance on ADRCs,

and Elizabeth works there and

she used to work at NCIL.

She's so cool and she totally knows it and she's your friend and a good resource and she's happy to

talk to you about if you need some ideas about how to work better.

And then some of my colleagues are saying, and you just have to be persistent and keep your nose in their business.

Because some of it ‑‑ how many people here feel like they have a really collaborative relationship with their agencies on aging?

A few, good.

And how many people like

they're working with them,

but it's like you're always

trying to get in there?

Yeah, that's right.

Yeah.

I'd say that's how

we feel in Arizona.

But ironically because I had a WIPA program for 12 years,

I worked very closely with our area agency on aging benefits

counseling and SHIP program all the time, but that's a tiny

corner of their universe.

They've got a pretty

good universe here.

Yeah?

AUDIENCE MEMBER: Acronym, WIPA?

AMINA DONNA KRUCK: Okay.

WIPA, thank you.

Work incentive planning assistance program, grant to do benefits and work incentive counseling.

AUDIENCE MEMBER: I'm sorry, could you say that again, WIPA?

AMINA DONNA KRUCK: WIPA, work incentive planning and assistance.

So those with the Social Security grants that were to help Social Security beneficiaries understand

what work incentives were available to them,

and how to understand the role

of Social Security and how it affects employment.

How many CILs here

had WIPA programs?

A few, yeah.

Not too many.

Well, that was a big tragedy that hit all of us this last year that Social Security interpreted that

they could not continue those grants because congress didn't reauthorize it.

It was part of the ticket

to work legislation.

And so they let

those programs drop.

And all that expertise and training, at least half of it,

got lost and people went off

to other jobs.

It was really a heartbreak.

Now finally DOJ, Department of Justice, has ruled that Social Security could have spent the money all along.

And in the continuing resolution it just went through for the budget, they had money in there also.

And I'm thinking some language for permission for them to understand

they don't have to get reauthorization, but I'm trying to get clarification about that.

So just for those of you interested in that area,

there is a national group,

National Association for Benefits and Work Incentive Specialists, nabwis.org,

and it's folks who have been working in the field.

Many of them on the side are Virginia Commonwealth University technical assistance folks.

And we are an association.

I'm president of that association, and we are working to help

influence getting that program going again in a way that's good for beneficiaries.

So you could join that group and get ‑‑ we send out regular e‑mail alerts about things.

So that's nabwis.org.

But so that was ‑‑ so I used another acronym SHIP.

So, somebody else might be able to explain better than me, but they are state health insurance plans ‑‑ programs, thank you.

State health insurance

programs, SHIPs.

And that is ‑‑ they

get national money.

They come down through the

Aging Administration which is now called the Administration on Community Living.

And they are specifically

to provide Medicare counseling

and help people make choices around Medicare,

but they're usually really good clearinghouses for healthcare and understanding Medicaid and

how Medicaid and Medicare

work together,

and helping people find

resources when they don't

qualify for either one.

And in our state, that money comes down then for benefits counseling through the area agencies on aging.

And so that's what that is.

And those are really good resources and helpful people and they like to ‑‑ and ‑‑ a lot of

them that do that counseling

are volunteers, but these are

like ex‑insurance plan executives and stuff.

They really get some highly trained volunteers to do this counseling.

Okay.

So, one, two ‑‑ I think

I did everything.

So I know Deb's up next,

but I'm going to make them

listen again one more time.

So just to get you going,

break up into pairs.

Find an X and a Y.

We're not doing chromosomes here.

Did anybody hear ‑‑ have you heard we have a bathroom bill in our legislator right now about who can

go into which bathroom and

do you have a birth certificate

to prove it?

Arizona, what can I say?

I live in Arizona.

I'm a California born girl

who lives in Arizona.

Perfect for the independent

living movement.

X, Ys, have you figured

it out yet?

Raise your hand.

You're the Y.

Ys?

Here's a Y.

I see some Ys over here.

Y, X, Y.

Great, thank you.

So, okay.

So, Xs are going to talk first.

And what I want you to do is tell your Y listener your earliest

memory in any way at all

of a physical or emotional or mental difference.

Whether it was somebody else or yourself noticing you had a difference, your earliest memory as young as you can go.

Go.

Your earliest memory of

physical or mental difference

any way at all.

Could be TV, could be a movie, could be family, could be school.

Just your early memory and say it over in as much detail as you can while doing your time.

What do you remember about that?

How old were you?

What was the weather like?

What were people's

attitudes about it?

Surrounding.

Say it again.

If you're done, say it again.

Tell it again in as much

detail as possible.

Okay.

Stop.

Who's going to be the

listener next?

Y.

Are you going to be the

talker this time Ys?

Xs are going to be the listeners and you're going listen like what?

Treasure box, treasure box.

Go.

Okay.

Thank you.

Thank you.

I know you thought it was weird, but it's interesting, isn't it?

This is one thing I like to do.

I do a training called, "Disability Liberation: Attitude, no Barriers" workshop.

And the more you do this,

the more memories you reclaim.

And you can do this with people living without disabilities.

I find often helping professionals in the disability field that are really good at what they do had

family members that had disabilities, so they got to

know the person first.

I remember a story a woman talked about playing poker with her blind

grandmother and how much fun

they used to have and she was a helping professional.

So this is a fun thing to do, and you can do it for longer than 45 seconds, but this got us going.

So, Deb, you're next.

Deb's going to come and follow up some more and talk about integration of services.

Talk about how ‑‑ we talk so much about how, like, some of the centers that are smaller have staff that do more than one job.

But then you have that issue of somebody making fun of somebody else's territory, and in the bigger center you have a problem

with people being so focused on their narrow piece of the pie, that do they remember what's going

on over here and the other piece of the pie and how you put it all together.

So Deb's going to help us with that this morning, and then we're going to do a panel and you're

going to get a chance to share some more about it yourselves too because I'm learning from you all,

as much as I'm quite sure you're learning from us as trainers.

Thank you.

You guys are so engaged.

Fabulous.

DEB LANGHAM: Good morning.

AUDIENCE MEMBER: Good morning.

DEB LANGHAM: How was your evening last?

Good?

Who was warm?

AUDIENCE MEMBER: What?

DEB LANGHAM: Warm.

I don't know if I told you, but I flew ‑‑ I had airplane reservations to come to Arizona

at 0100 early hours on Monday morning, and all day Sunday it was snowing.

I mean, just blowing sideways.

I mean, just ‑‑ and for those of you who know snow, when it comes down sideways,

you get worried about whether or not you're going to be able to

shovel out in time to get anywhere and worry about the airport closing.

But luckily I got here so I was pretty happy and I really,

really am enjoying this hotel

and being here with all of you

and the weather.

It's been wonderful.

Okay.

So let's talk a little bit about how easy we can make things for our consumers.

When I first was asked to

do this presentation,

I was a little worried about what direction to go,

how should I ‑‑ how

should I start?

And I kind of had one idea and then we all talked with the group

and then Amina said something and all of the sudden, I knew what I wanted to say.

And she said, "Well, we're really different, for goodness sakes.

Who else deals with or asks anyone what their heart's desires are?

Who does that?

Nobody else that our consumers work with or come in contact with ever do that."

Up here you can see we are the go‑to place for people with

disabilities to become

empowered to have the life that they dreamed of.

The picture up there is a gentleman in a ‑‑ using

a wheelchair who is about

to bungie jump off the end

of a building.

And I thought that was a great picture because someone helped

him to do that.

Not us.

But it reminds me of Harvey on our staff here ‑‑ I'll pick on him a second ‑‑ who plays quad Rugby.

And I used to think when he told me what he was doing when he was an intern with us.

Now he's a full‑time staff person but he told me that he played quad Rugby.

And I couldn't understand for the life of me why anyone would want

to put their lives into danger like that because he said,

"You know, it used to be

called murder ball."

[LAUGHTER]

DEB LANGHAM: Really now?

So then I'm thinking, when he becomes a staff person,

I'm going to have to lay down some ground rules here because I want

him to come to work every day healthy and in one piece.

So then he gave me a

video of what he did.

I have yet to make it to one of his games, but it sure is a lot of fun and I don't think Harvey would

be very happy with me telling him that he can't play quad Rugby.

How are we different?

How are independent living

centers different than any other place that works with folks

with disabilities?

Well, we're consumer led and consumer driven.

Half of our staff management, board of directors are people with disabilities, right?

Have you guys had your coffee today?

Don't make me bring Amina back.

Okay.

Consumers are involved in making decisions about our agencies.

They help us to set our advocacy priorities and they determine for themselves what their goals are and what they're not.

They get to even determine whether or not they work with us.

Now, how many of you have received a phone call from the well‑meaning social worker, parent,

family member who say, "I've looked at your stuff on the website or I know about your

independent living center and that's a great place.

You have to make my son or my loved one go there and do your stuff because they would really

benefit and, boy, they just need to do that."

And I say, "Oh, you know what, you're right.

We probably would make a difference in this person's

life, but only if that's

what they want."

Because if they don't want it, it ain't going to happen folks.

Just like anyone else, if you're not into it, if you don't have

ownership or you're not buying into the whole proposition,

it's not going to work for you.

So we do encourage folks to come in and talk about what we do.

Be happy to meet with anyone,

but we're certainly not going

to coerce anyone into accepting our services.

"Nothing about us without us."

Oh, my goodness.

Just as anyone else runs their lives, people with disabilities are the folks who can determine

what the best thing is for them that they want to do.

What is their best option?

What do you want?

We can decide that for ourselves.

And I already talked about how half of our staff management are people with disabilities.

Our differences can positively affect how we provide services to our consumers.

We talk to people as our equals.

We talk to people like people.

I had a conversation I think over here at this table about, why do we call folks consumers?

Who said that?

Or aren't people just people?

People's a great word.

It describes a lot.

People.

And that's what people are.

People are people.

So we talk to everyone as if they are our equals because they are our equals.

We're partners in the IL experience working together.

But what we really, really want to avoid is the social service runaround.

Well, we can get transferred via the telephone from extension to extension only to be put on hold

for hours and hours and hours and then maybe eventually get hung up on and then never, never finding out the information that we need.

We show up for scheduled appointments and are told,

"Oh, you have the wrong day."

So you have scheduled transportation most likely,

child care, personal care and

now you have to reschedule

the whole business.

It's expensive because you have to pay for it twice.

You also could be given a list of resources to contact only to find

out after spending hours and

hours and hours on the phone,

no, we don't do that.

Or, oh, we used to do that,

but we don't do it now.

Or, no, we really don't do that.

And then again, my personal favorite, calling a resource given

to you by another resource only

to get referred back to the

first resource.

There just has to be an

easier way to do it.

So we should always be thinking, how can we make this easy?

How easy can we make this?

This is a very favorite quote

from somebody that we work

with at our agency.

"CILs can do a good job of addressing how services we can

provide can be as seamless

and interconnected as

humanly possible.

We want to reduce stress and frustration for our consumers

while giving them the tools

that they need to live

independent lives."

Where does it start?

Seamless delivery starts with us.

Starts at the center.

And I am going to steal from Darrel because I absolutely

love that.

It starts with I&R,

the gateway to your center.

A consumer maybe initially contacts the staff handling

the I&R, information's exchanged.

While the caller may want information on county long‑term services, skilled staff person will ask that open‑ended question

to try to get to the bottom

of whatever else this consumer

may need.

You can utilize your interview skills in those open‑ended questions.

How staff handled this internal referral is critical.

At our agency, a caller

is given referral information

and the option of,

they can make the contact themselves,

we can help them to make the contact for them, or we can

have staff do that for them

to connect them.

It's however that consumer

feels comfortable or the

caller feels comfortable.

Then we follow up.

So what we do at our center is we have a team of IL specialists who part of their job is to do information and referral.

Actually, all of our staff do information and referral,

but this group, the small group of folks have more training are AIRS certified and have a lot more experience than their coworkers.

AUDIENCE MEMBER: What's AIRS certified?

AUDIENCE MEMBER: What does AIRS stand for?

AUDIENCE MEMBER: Alliance of information and referral specialists.

DEB LANGHAM: Alliance of information and referral specialists.

Thank you.

They handle walk‑ins and all of the calls.

At our ‑‑ we've been in our current center for almost

five years, but the center

that we were at for many,

many years before was ‑‑ we were kind of tucked into a corner of

the city and we didn't have a lot of walk‑ins because we weren't really easy to get to.

But when we moved to our new location, we're right on the main street, a busy street, sign out front and we're very visible.

So all of the sudden, we started having a lot of walk‑ins and we thought, great, this is wonderful.

I was thrilled.

You know, I thought oh, my goodness, you know, people are finding us.

They're coming in, they're visiting our resource center, they're talking to us until my staff went, uncle!

What are we going to do?

We have all these walk‑ins and we have appointments that we have with our consumers and we're doing

phone calls and we're doing

that ever important data entry,

so how are we going to handle

all of this?

Well, my staff who are wonderful and smart came up with the idea

of developing an I&R team,

and they rotate days that they are responsible to be in the office and they handle walk‑ins on the day that they do.

So those are days that if they have appointments, they have them in the office.

They do their data entry that day.

They do lots of things.

They get interrupted just like all of us do, but they're the person responsible for that day.

So we like to deal with

trying to help them.

A lot of folks come in

with that piece of paper.

I don't know what this means, you know, so you read the bank statement from them or a letter

from Social Security telling

them that there's been an overpayment or their benefits

are going to stop.

Whatever that letter is, we try to help them with that right away.

Some folks are in domestic violence situations, so we want to make sure that we get them in touch with the right folks that

they need to be in touch with right away and make sure that their safety is ensured.

We take a lot of calls and

refer folks to shelters.

Some people walk in and say,

I don't have a place to live today.

I just got kicked out.

Or that Friday afternoon call.

It's 4:00.

We close at 4:30.

I'm getting evicted.

What are you going to do?

You hope that people

call you sooner,

but they don't because

they're in denial.

They don't really want to

believe that they're going to be out of a house, but they are.

A lot of evictions we help

folks with and referrals

to food pantries.

So when we talk to people about those things, we're also looking at what happened to get these

folks ‑‑ why are these folks

in this position that

they're in crisis?

Now, we obviously ‑‑ you're not going to say, oh, my goodness, I've got skills training,

I've got advocacy training for you, I've got this.

They're frantic.

They're pulling their hair out.

You know, I need this.

So that's what we help them with, but we call them back to say, hey, you know,

now that this is kind of calmed down in your life a little bit,

I think we have some other things that might be beneficial for you,

some training that might help you so that we can avoid these situations in the future.

It's kind of what I

talked about there.

In addition to working with consumers on their goals,

the specialist will also work

with consumers to connect them with other departments in the agency for us.

We have a ‑‑ again, a big center.

And so we have in our IL department, we have other little departments within them.

When I worked at a smaller center, we had folks who ‑‑ some folks who did ‑‑ specialized in this or specialized in that.

We had a housing person,

an A.T. person, somebody who did IL skills training.

You know, all like that.

But in the bigger center,

we have somebody who does assistive technology,

a person who does nursing home transition, disability rights discrimination,

sports rep, computer training and has some expertise in housing.

So we make sure that those

folks get that name or

they're contacted.

Somehow they get connected to the person that they need to be connected to so that, again,

we can help them in the future.

Additionally, your consumer

may be interested in other services offered at your agency.

So we have other departments in our ‑‑ at Independence First.

We have a personal assistant services program, we have benefits and employment that are separate from us.

We have a loan and group that works with folks to help them get low cost loans to purchase assistive technology that they

might need to be more independent in their home or to purchase equipment that they can work from home in.

So we really try to

connect people right away.

We don't want them ‑‑ well, here's a list of people you can call.

You know, you might have to do that.

That might be the avenue that you go, but you don't have to do that.

Pick up the phone.

Hey, my friend, this person I think could really use some personal assistant services,

and who's up today and who

can come out and maybe talk

with this person?

So we try to connect, and obviously we are all working real

hard at our center to interact with each other so that we know what's happening.

You know so that Jack knows what Jill does.

You know, everybody knows what's happening at the center.

So we'll make the call if we have to, or we'll give information to the consumer to make the call.

But if they're a walk‑in, we try to connect them right away so at

the very least they're walking out with an appointment card for a later date.

We also try again when we're meeting with consumers if we have ‑‑ have referred them to

either somebody else in IL

or someone else in a

different department,

we try to meet with them so

we all three are together.

You know, whoever the consumer had the first interaction with,

the consumer and the person that they're going to be working with in another department.

Could be that they're working a lot of different people.

That happens a lot at our agency, but we all want to sit down and talk about that.

This is why so and so is here because this is what they need.

What does she need to do,

you know.

So we talk about that.

Is that clear to you?

Do you understand that?

Making sure that the

consumer knows exactly what's expected of them, what their responsibilities are.

What's going to happen and

that consumer knows that we care about them and we're not just hanging them out to dry.

It also allows you to troubleshoot.

Can you tell I'm really into troubleshooting?

We've had issues.

Sometimes even though what we do is great, wonderful, and we do tons, we don't do it all.

There are agencies out in the community that can help too.

And a lot of times the referral agency could be somebody that

has some control,

say so or opinion over your consumer's life,

Social Security, Medicaid.

When we help consumers connect with another agency, we always try to call that agency,

contact that agency by e‑mail prior to the visit so that we know what they do.

We visit other agencies.

We have a good knowledge of what they do, what their eligibility criteria is.

We know what a good referral is hopefully.

Yes?

Yes, Shannon?

AUDIENCE MEMBER: I just wanted to see if you could clarify.

Are you talking about the I&R team right now or the IL department or kind of everyone?

DEB LANGHAM: Generally the IL team, but it could be the I&R team as well, specialists.

Whoever's working with that person at the time.

Sorry, that that wasn't clear.

Okay.

So we visit these agencies, learn their eligibility criteria and how do we access that?

Then we're telling our consumer in confidence, hey, this is what you can get.

I know this happens for you.

And then if it doesn't, we follow up to say, hey, this person met your criteria.

What gives?

We like to develop relationships with people outside other agencies.

Sometimes we join groups that they might be a part of.

Sometimes if we have a good relationship with somebody there, it's a good way to ‑‑ you know, you have an in.

You can call that person and say, hey, I have this situation going with someone I'm working with.

What do you think?

Can you guide me or can you give me some suggestions on how I can help them?

And we also try to look at situations from the other agency's point of view or perspective.

This helps us to become a better mediator when we're trying to advocate with our consumers.

Some examples of outside agencies could be any state agency, a transportation agency,

county entities, the ADRCs,

Aging and Disability Resource Center, aging groups,

children's services, rehab, housing agencies such as HUD or WHEDA, targeted disability organizations, M.S.,

mental health groups, any kind of agencies serving people with cognitive disabilities,

anything like that, any relationships that you can form,

any services that you can offer them and their consumers would be great, a great way to get your foot in the door.

And other advocacy organizations, protection and advocacy places.

And, again, to enhance how we do services through networking, our staff has joined state,

local and national task forces, coalitions, committees, groups, all who are working on issues that affect people with disabilities.

This allows us an opportunity to network with other professionals and build relationships to help work together for the common good.

Some examples are long‑term care, some assistive technology, housing organization, nursing home transition, housing authorities,

NCIL, task force subcommittees, National Coalition of Independent Living Centers, task force and

subcommittees such as our SILC, the State Independent Living Council.

So that's kind of what we do,

but how do we do that?

How do we make that all happen?

How do we prepare for that?

Well, we hire staff with disabilities, qualified staff

with disabilities,

successful service delivery

begins at the point of hiring.

We ‑‑ we ‑‑ quality centers, Independence First hires people with disabilities,

not because we're mandated to,

but because it's the right

thing to do.

Philosophically,

ethically it's what we do,

it's what we believe in.

How do you find those

staff with disabilities?

Advertise.

It doesn't all cost by the way.

You get the word out to try to be seen by people with ‑‑ where are people with disabilities?

Well, they can be at universities, they can be in other centers.

You can send your ad out,

maybe somebody is looking

to make a change.

Look at the disability publications in your areas,

at junior colleges, universities,

the division of vocational rehab, job centers, all of that.

Get the word out.

And also on the Internet.

And accommodations.

Make sure that you're

providing accommodations.

At your center make sure applicants know ‑‑ make sure that your center makes sure that

applicants know that if they apply for a job at your center and they need an accommodation, that would be provided for them.

Some accommodations could

be interpreters, large print materials, braille,

ergonomic furniture.

Set the precedent for your staff on what consumers can expect when they come to your center.

If I'm getting an accommodation, for sure our consumers are going to be getting that.

And supply a clear job description and/or a work plan that's ‑‑ so it's clear what your new IL specialist can expect.

Our folks go through a

series of two interviews,

our potential staff,

and then they have a third interview and that's with

their coworkers.

So a group of folks, generally three, four staff who meet with the potential employee,

and may have a heart

to heart talk.

We're not in the room.

They have a heart to heart talk.

What happens in Vegas

stays in Vegas.

They can ask them any question that they want about what is

this job really like?

I mean, I've explained it.

They've heard about the job, they've seen the job description, they've seen a sample work plan.

This is what you do.

But they don't really

know what it is.

They don't know how hard it

is to be an IL specialist.

They don't know how

hard the job is.

So this is an opportunity for

them to ask those questions and

it has helped a lot.

They either stay or run screaming.

Also quality centers understand the importance of comprehensive basic training for their staff.

Some of the things that we use, some documents that have been written, IL history and philosophy, independent living,

a historical perspective

of a movement and philosophy, orientation,

independent living centers, history of independent living.

It all sounds kind of repetitious, but, you know, it really is helpful to totally, you know,

submerge yourself into IL

history and philosophy,

especially for somebody new.

You know, just because somebody has a disability doesn't mean that by osmosis, they absolutely,

you know, worship Justin Dart

and Ed Roberts.

You know, it doesn't happen.

We hope that it does,

but it doesn't always.

And there those guys are.

The great thing about independent living is I had an opportunity to meet Justin Dart, you know, before he passed, but I got to meet him.

How cool is that?

I didn't have an opportunity to meet Ed Roberts, but a lot of people at my center have met him.

And Marca Bristo, I met her.

She's a neighbor in Illinois.

She works at Access Living.

She's the executive director

there and she is very, very big

in the IL community.

So when you meet her you should [gesture] and tell her that

I said that.

Some other articles that I have really liked, and this is all included in our orientation packet for our new staff.

They do a lot of reading and a lot of work before we turn them loose.

"And Justice For All."

Ed Roberts, the founder of the independent living movement.

"Leaders for Now and

the Future Profiles"

by Harriet McBryde Johnson.

Marca says, "Unspeakable Conversations,"

again by Harriet McBryde Johnson.

Wade Blank, the mother of the ADA.

Elizabeth Savage and

Pat Wright and another article

on Ed and the Gulag.

There are countless

materials available for free

at the ILRU website.

Just Google it.

Since I discovered Google,

I am a happy camper.

There hardly isn't anything

you can't find.

But, again, really important

to train your staff.

Don't skimp on this.

This is not an area

where you skimp.

Make sure your area has a

very good background.

Peer support.

You're going to hear some great stuff from our peer support

staff coming up later,

but what we do is we provide training and practice for our specialists.

We have policies and procedures for our peer support volunteers.

They're not paid staff, but they go through the same process as our ‑‑ as regular staff do.

They are bound by

confidentiality ethics.

They fill out a job application and they go through a

background check.

We take it serious.

Little review from yesterday

about goal development.

Again, the purpose of the independent living goal is

to empower our consumers.

They get to write their own goals.

They're accountable for

their own goals.

Hopefully they're taking ownership.

If they're not taking ownership, you need to sit back and take

a look at how the process is

going with you.

And, again, if you're doing more work than your consumer, something's wrong.

And it is quite the responsibility to assist another person on to empowerment and independence.

We make sure that staff are prepared to, at a minimum,

listen to consumers and document their needs, wants and desires,

write goals with our consumers that are achievable, measurable and have a time frame.

I didn't add that.

Activities, again, should represent a logical sequence to achieving the goal.

And take care to separate goals when they just need help.

And if your goal's entering the third page, you might go, huh, this could be too long.

We assist consumers when it's necessary to identify the steps needed for their success and

we communicate often.

How you communicate with your consumers whether it's a face‑to‑face meeting, phone call.

We talked about that before.

Whatever that means to you

and your center, do it often

and document, document,

document everything.

We also provide life skills training and independent

living to our staff.

So they get training on personal care, coping, financial management, social skills, household management.

This may also include education and training necessary for living in the community and participating in community activities.

That's the 704 definition.

But before your staff can train their consumers, what?

They have to be trained.

Pardon me.

Absolutely they have

to be trained.

These are some of our topics.

We do a ton and this has been developed over the years,

believe me, over the years.

My very first job in Georgia at a center there, I was handed a box very much like our consumer gave ‑‑ consumer from yesterday,

"Here's my stuff."

It was the IL box that had

some information in it.

And my executive director said,

"You know, we should be teaching our consumers stuff about independent living."

And I kind of went, "Yep, that's probably a good idea."

And she goes, "But, you know, first you have to write out some lesson plans for them."

And I'm thinking, "Oh, okay.

Education and deaf rehab counseling.

I don't think I wrote many." So I got on ‑‑ I went to the library,

I looked up stuff about curriculum and kind of wrote, like, five or six lesson plans that I thought would be good.

It never occurred to me at the time to ask the group of folks

I was working with, hey, what

do you want to learn?

So, again, I told you I'm really bossy and I'm a big know it all.

So I sort of, well, these

are things these folks should

know about.

Later they told me what they wanted to learn, so we knew

quite a lot of things.

Some of the really popular

lessons are setting goals and making decisions and avoiding frauds and scams.

This has become just an amazingly popular session that we do.

So much so that we actually wrote a grant and we've recently got notified that we're being funded.

We're going to expand upon this and make it like a three‑day workshop for folks and really delve into things that people

should be avoiding and looking

out for so people with disabilities aren't taken advantage of.

Our staff used ‑‑ oh, yes?

AUDIENCE MEMBER: Before you move on, the stance piece of it, I'd like to hear from anybody in the room, yourself, of course,

whether or not you have seen an uptick in Payday lenders targeting persons with a guaranteed income?

DEB LANGHAM: We have at our center quite some time ago which is kind of what led us to this frauds and scams.

Has anyone else?

Yeah?

AUDIENCE MEMBER: In our area ‑‑

DEB LANGHAM: Use that microphone.

AUDIENCE MEMBER: Oh, sorry.

Sorry.

Yeah, in our area, we have the ‑‑ a lot of these money lenders in the area because

the ‑‑ the area is inundated with military because we're at a military base, military retirees,

people on Social Security,

Social Security disability.

And once they get into that system, they cannot get out.

It is very difficult because

of the interest rates.

And they will give them –

I really wish there was more legislation in our state on this,

but what they will give them

is these phone cards that they

are telling them that they

are buying them,

but it's ‑‑ it's all a scam

and there's so many names to

these money lenders.

Many of them are national.

Montel, if people see it on TV

and Montel said it, you know they're going after that.

And I won't use their names,

but they're one of the worst ones.

So, yes, we have seen that,

and I would say it's gotten

worse in the last three years

in our areas, but it is very, very bad and I wish there was more legislation on that.

DEB LANGHAM: Anyone else have that experience?

We also have experienced not

so much now because the banks

have tightened up,

but five years ago some of our consumers coming in saying,

"Hey, I just refinanced my house.

I didn't know it was

worth that much.

I have all this money to spend on maybe making an improvement or I'm going to take a vacation or I'm going to do this, this and this."

And I'm thinking to myself, whoa, it's because your house isn't worth that, you know, that much.

So folks find themselves in straights and it certainly isn't just folks with disabilities,

but happened to a lot of people who are now losing their homes.

But now you're seeing as our resources are dwindling and need in our communities is increasing,

folks really need to be aware

of predators out there who would try to swindle them out of

their income.

So oftentimes when we share our curriculum with our consumers,

it helps them to say, oh, yeah,

I might want to learn this or, yeah, that would really help

me with this or that or the

other thing.

So skills training is a great

way and a good avenue towards achieving a goal.

An example, we have a consumer who uses a wheelchair and he wanted to

go into his neighborhood grocery store because they had a wine bar that had just been put in.

So he thought, this is great.

I'm going to go over there and, you know, I can do my Saturday afternoon shopping,

I can have a glass of wine, taste some different brands that I might like and this will be great.

So he got in the door okay,

but could not get down the aisle because the aisles are all stacked up with their stuff.

So the grocery store had a stock room, but it was too full for all their other stuff.

So he also wanted to park his

car there, bring his van in and park his van.

He could get to and from the store with his chair, but he didn't want to use the juice.

He thought, well, you know,

why should I spend my charge on that, I can just drive over there.

However, the parking

lot was full of dirt.

Guess where the dirt was piled?

In the accessible parking space just where they pile all the snow.

Same thing.

Because he was making some ‑‑ making an outside area,

deck area for the consumers

of his wine bar.

So this consumer called us

and said, "Hey, I really want

to get in here.

Could you guys give him a call and tell him that, you know, he needs to take that stuff out of his aisle and he needs to take the

dirt out of my parking space" ‑‑ not your parking space,

it's the parking space ‑‑ "so that I can go to this store and I can take part in wine tasting?"

Well, after talking with our IL specialist, we looked at maybe he might want to improve his advocacy skills by receiving training in

assertiveness and communication so that he could then speak to the store manager with confidence.

And, again, this is what the consumer wanted to do.

He really didn't want us to

go in with him, he wanted to

do it by himself.

So we're like, yeah!

So once he developed what he felt was good enough skills and practiced with him and practice

on what to say, how he could talk to the store owner and who he knew, by the way, in his area,

he went in and he talked.

Talked to the consumer ‑‑ or he talked to the store manager.

He also learned about the ADA

and he learned about accessibility laws in Wisconsin.

The store owner was very apologetic when our consumer went in to talk to him and said,

"Oh, you know what, we're going to remove those barriers right away.

I had no idea that this was causing you some distress,

so I really want to make sure

that you can come in here and spend your money."

Okay.

So that was great.

So some time went by and the dirt was still there and the aisles were still kind of full.

So he went back in again

and he says, "Hey, how about removing that stuff?

I thought you were going to do that?"

"Oh, yes, yes, yes,

we're working on that.

We've got stuff in the storeroom and we're moving that here and there and then we're going to

move all of that stuff."

So he did and it was within,

like, three weeks he had

the stuff out of there.

However, it was much later that he got the dirt moved out of there.

In fact, we were almost ready to kind of go in with both guns,

but we didn't have to do that.

He did move it.

So now he can go in and

do his wine tasting.

Bottom line, our consumer learned advocacy, assertiveness skills, communication skills.

He developed laws of the ADA and the access laws in Wisconsin,

and we sure did document his progress all along the way and we

also recruited him for one of

our consumer advocacy teams,

ADA enforcement.

So he works with us on that.

So what can happen when IL

skills and an IL specialist come together in a good curriculum?

Success.

How do we do that?

Learning can be fun.

I always kind of thought when

I wrote a curriculum or something, it was the golden word.

You know, please don't change anything because I have written

it just perfectly.

And what could be a better way

to spend your afternoon than listening to me and you just sit

there with attention while

I convey my knowledge to you.

Okay.

Snore fest.

Nope, that wasn't happening.

So about four years ago,

Harvey and I went to a meeting

in Madison of a group of folks

who had received funding to do Peer Power.

Thank you.

Went out of my head for a moment.

Peer Power, support group for teenagers with disabilities.

So there was a whole nice curriculum and we were meeting with people from around the

state to talk about how

they did Peer Power.

How did it look for them?

Harvey talked about what he did, and then this one person said,

"I've got a demo for you."

I said, "Really?

What is your demo?"

Because here's my wonderful curriculum here.

And he started with games.

Okay.

I really like to play games.

"Trivial Pursuit" is one of my favorites.

And she started going on and

I knew also, by the way, that our

specialist also played games

and did some learning activities with our consumer.

I really didn't care about that much until I started playing

these games that day.

It changed my life in a

very dramatic way.

Interactive games, Hollywood Squares, Jeopardy, you don't

have to be boring.

You can use a multimedia

approach to learning and it was just a blast.

So we received templates of these games on our PowerPoints, and we were able to make up games from

whatever skills training, exercise or workshops that we're doing

and I'll share.

You just e‑mail me, I'll tell you what we have and send it off to you and how fun.

So I thought, you know, our coordinator meetings are pretty boring, our specialist meetings are pretty boring.

So Autumn and a couple other

folks from our staff,

put together some training materials on what you need to

know about IndependenceFirst.

And so we had our meeting.

We divided up into groups and Autumn started the game.

What do you think happened?

AUDIENCE MEMBER: Had a good time.

DEB LANGHAM: Holy cow.

Mild‑mannered people became vicious competitors.

It was very, very important that they got ‑‑ I hit my button first.

What are you talking about?

That didn't happen.

So I thought if we were having

so much fun learning and experiencing these games, that maybe our kids in Peer Power,

as well as the adults that we trained, would have some fun too.

So we've incorporated that.

Cheap, easy, it's a PowerPoint.

Other games that we have, Payday, Life, Monopoly, UNO, play money, The Cosby Show game.

Who saw the episode with Theo?

You know what I'm talking about?

He decides he's going to get a job and he's going to earn whatever it is, whatever he thinks is a large

amount of money, $500 a month

or something like that.

And so he wasn't going

to go to college.

So Cliff, the dad gives him

$500 in Monopoly money and so

he's holding it like this.

"Okay.

How much is your rent?"

"Well, I think my rent

will be $200."

So Cliff takes $200 from the pile.

"Okay. How much is food?"

"Well, I might spend $100 on food," and so on and so on.

And so he's down to his last $50 and he's getting a little worried.

It's noticeable on his brow.

And he says, "Well, I have to have money to have fun and to date."

And Cliff goes,

"Nope, you don't have that.

This is miscellaneous."

So it was pretty funny and we

do that in the high schools

that we teach.

It's a fun, fun and

enlightening exercise.

And then later as our funds allowed at our agency,

we did purchase some

educational games.

A lot of things are available on the Internet.

We purchased allowance and life stories.

Very, very good at money management for young people.

And other things we purchased

were anger management and

cooking skills.

I was talking with Roger and some other folks at that table.

There's Roger.

And he said something really

funny that I could relate to.

"Somebody told me a long time ago, I'd never have people in my center cooking, I would have told them they were crazy."

Something like that.

I'm paraphrasing.

I said, "Dang, that's exactly what I thought until our Peer Power group decided that they wanted to cook." So yeah!

So skills training

can be anything.

It can be whatever somebody wants, a skill that they need to live independently.

And if that's baking chocolate chip cookies at your center so you can eat them later, so be it.

That's a skill.

Learning how to cook, learning how to bake, learning how to measure,

learning how to time something in the oven, taking it out at the right time, all of that.

Other curricula that we developed was requests from our community.

Several years ago we received funds from our SILC, our State Independent Living Council,

to develop a high school transition curriculum,

so we did.

That one of the classes addressed safety tips ‑‑ personal safety tips for teens and discussing good

relationships, bad relationships and learning how to say no and what to do when experiencing abuse and violence.

The class became so popular that the teachers requested that we come and teach it not just to the

kids with disabilities, but to all of their kids.

And so the Court ‑‑ the specialist came back to the agency and said,

"You know what they want?

They want us to teach it to everybody.

Do you believe that?

I know that we can't

teach other people."

And I said, "Well, let's think about this for a minute.

We have ‑‑ they're asking us to teach other kids who are in the same grade who go to school with

our kids, kids with disabilities, and they want us to teach everybody together."

And I thought, that sounds

like a good deal to me.

So that's what we did.

We did that and we still do it if they request that because it

really does help to promote better understanding, develops relationships for kids that are involved.

And also because of the demand,

we did modify the class for middle school students and for adults with developmental disabilities.

So this class, the boundaries of personal space morphed into safe relationships, safe places where

we covered boundaries and self‑esteem, healthy relationships, dating and romance,

sexuality and relationships and relationship and community safety.

So we talk about a lot of things.

We also ‑‑ this kind of morphed into a class because the parents have to agree to let their kids come to this class, right?

So parents came and said, you know, it would be really nice

if I could learn about sexuality for my kid.

That might not be how they said it, but that's my interpretation.

So person that did this class developed another class educating parents on how to become sexual educators for their children.

I mean, that's just huge.

We just started that last year and we have different parent groups who are interested in that.

Rome wasn't built in a day.

It took us a long time to build our library and our resources.

And, again, I've been doing this for a long time.

I'm not going to tell you how long, but long.

And they started ‑‑ you start slow in building your resources.

I always like to say it was a long time ago in a galaxy far, far away because that's how it feels to me.

I began in the very beginning with an outline when I talked to my consumers about what they wanted

to learn, and then, again,

I talked about how I

researched stuff and the

Internet wasn't around.

Had I known it was coming,

I might have waited.

I don't know.

I built on information I found, used my own experiences and came up with a training structure.

I have learning objectives, vocabulary words, activities

for different things we do.

Other centers might have a life skills training curriculum they'd be willing to share.

I'll share.

I'll share mine.

I play nice in the sandbox.

That was actually written on my performance evaluation one year, that I didn't play nice in the

sandbox and that I ought to consider playing nicer in the sandbox with other centers and sharing my resources.

So I went, "Okay."

That was a long time ago too.

It really opened the doors to a very good exchange with our centers in Wisconsin that we all

share and share alike and I'll share with you.

Whatever materials you use, your staff need to become familiar with it and observe training and action to build on their skills so that they can become an effective guide for their consumers.

And, again, I cannot stress the importance of your staff learning whatever it is, whatever tools you're using, they need to know it upside‑down and backwards.

AUDIENCE MEMBER: Excuse me, over here.

DEB LANGHAM: Yes?

Yes, Hi.

AUDIENCE MEMBER: In our center in Dayton, the Access Center for Independent Living, we have skills training we do with people out in the community that it's called, "Think This is Easy?

" We take them through different steps of different disabilities.

Like mobility, we do ‑‑ we take ‑‑ we have a bus system in Dayton called RTA.

We take them on a bus ride.

We put them in a manual chair, take them on a bus ride.

We do speech and hearing and within that four‑hour period during the day, they learn about different disabilities and this goes through people out in the community like other agencies, rehab, Social Security, whatever.

And it's amazing how these people work with other people with disabilities, don't realize what somebody goes through during a day with a certain disability, like a mobility issue or being blind or hearing loss or whatever.

And at the end of that four hours, people are like, "Oh, my God, we didn't realize that, you know, this happens."

And people are especially freaked out by the bus system in Dayton because they get on the bus, and even some of the bus drivers treat them rudely or not good.

And the funny part is, everybody that works for the bus system has to come through that program, and you would think that, okay, I get it now, but, you know, it's an eye‑opening experience.

And we're getting to the point now where we're having our consumers come in with a particular disability to do this training also with the other agencies.

So it's been a real good experience.

DEB LANGHAM: Oh, that sounds great.

Are you willing to share that?

AUDIENCE MEMBER: Sure.

DEB LANGHAM: Yahoo!

AUDIENCE MEMBER: For a price.

DEB LANGHAM: I've got those red velvet cupcakes.

That's good.

Thank you.

AUDIENCE MEMBER: You're welcome.

AUDIENCE MEMBER: I just wanted to share that you all know ‑‑ some of you probably know how hard it is to get into the school districts, and our center had come up through some training with some people in Montana, a really nice curriculum to use with 9th to 12th graders in high school.

And I had a teacher call me and ask me to come in, and I did, and she had a group of nine in her class and they were struggling with communication how to get their needs met appropriately, some boundary issues.

And we started playing the games and the curriculum and these kids just started talking and communicating.

It was awesome.

And, of course, the school district said, "Well, we don't know if we want WILR in the school three days a week or two days a week." So they wanted us to only come in quarterly.

So, the teacher said, "Well, we can still do this." Her and I got together in the evenings many times and went through the entire curriculum so she could continue it in her classroom.

And I heard from her last week and she said those students have not only done well in her class, but in the other classes the teachers have noticed they're improving better communication skills and boundaries.

So even if you're having ‑‑ struggling getting into the school district, sometimes there is a way around it, but it was awesome watching the kids just through the games, like you said.

DEB LANGHAM: Yes.

AUDIENCE MEMBER: Reminded me through games how much they learn from playing games, and it opens them up to ‑‑ once they were shy.

When they start playing games, it becomes very competitive and even the shyest kids come out of their box.

DEB LANGHAM: It's amazing.

It's a wonderful, wonderful thing.

Thank you.

Thank you for sharing that.

It was difficult for us to break into our school system when we wanted to teach our high school transition.

And we went to several PTA meetings.

They're not called that anymore, but that shows you how old I am, and, you know, whatever else they were called.

And so we went and we met and had our little booth and had our curriculum that we carefully wrote, and everybody just kind of walked by our booth.

Oh, yeah.

And one teacher went by and went, "Oh, life skills.

Hey, you know what, it's in ‑‑ some of the kids in my class that I teach, it's in their IEP, their individual educational plan, that they should have some life skills training.

So what would you do?

" I said, "Well, we would come in once or twice a week, take up a class period and kind of go through some of the skills training that we developed.

And also, if there's anything you'd like us to work on with the ‑‑ your class, we could do that too." So she's like, "That sounds cool." So we signed up with her and I'm like, "Yeah, we have one school." And we had written in the grant that we were going to do whatever ridiculous, 15, 20 schools or classes.

You know, just overemphasize what we would do.

And then we taught in the class.

After that she went and told her friends who told their friends.

We now ‑‑ that was like nine years ago.

We currently have a waiting list to get into schools that's two years long.

[Applause]

DEB LANGHAM: So it's really successful.

It is.

It's just wonderful.

So I'm sure the kids are enjoying the classes much better because they get to play games now.

Unfortunately, we are limited, depending by schools, on how many community outings we can do.

Sometimes we get to do them with them.

But it's just a blast.

And how empowering is it when you have somebody with a disability go into a classroom with kids with disabilities and teach them.

I have a funny story for you.

Leah, one of our specialists went into teach in one of the high school classes, and she walked in and Leah is deaf and she's also young.

And she's young looking and she's thin and she has blonde hair and she wears it in a ponytail.

She's a cutie petutie.

So she walks into the class and she's trying to teach them and hands go up and another hand goes up.

"How did you get here today?

" "I drove." "You have a driver's license?

" "Yeah.

Yeah, I've had a driver's license since I was 16." "You're deaf.

How can you drive?

" "Well, the same way that you do." And so somebody else raises their hand and says, "Do you think you'll ever get married?

" "I'm married.

I have two kids." "Where do you live?

" "My husband and I bought a house.

We live in a house."

So that whole class period was taken up by them learning everything that Leah had experienced in her life.

You know, and I tell that story over and over and over again because I just think it's just a wonderful empowering story.

You can't beat, you know, the power of somebody with a disability coming in and talking to a group of kids with a disability to help to empower them.

Oh, another thing we do, advocacy.

We train our folks.

We make them learn about the ADA.

Rehab act, civil rights act and also other learning materials that are available through ILRU's website.

And it's important for staff to know how to advocate first before they can help somebody.

I mean, sometimes we're thrown into situations where, yep, we're on it and we'll do the best we can, but it's really better if you know what you're doing a little bit before you walk in the door.

Our work plans include advocacy and legislative goals.

And I did that because we were kind of leaning one way and being more service than we needed to be.

So we needed to do an about‑face and really be more into advocacy.

What had happened was is, "Oh, I can't do this advocacy with my consumer.

Diane is our disability advocate.

She can do that." "No.

I think you can handle this."

So, you know, it was just sort of a little shift into learning what ‑‑ getting back to our basics.

Because if it weren't for advocacy, we wouldn't be here today.

So I asked them to visit their city person, their county supervisors, their state senators or representatives.

And they have to visit an elected official at least once during the year and talk about what their ‑‑ what is on their disability agenda.

What's our priorities as a state, as a center and what's happening for people with disabilities.

We also conduct with the other centers in our state a legislative visit day.

So it happens in February and we get together with our other CILs in the state and we send staff and they visit their legislators and talk about their ‑‑ yes Tim?

Tim: Five minutes.

DEB LANGHAM: Oh, thank you.

I want six minutes.

They visit their legislators and we prepare an agenda.

We have our priorities, our advocacy priorities.

We let them know how we feel about impending legislation, all that stuff, what we want them to do.

It's very empowering, by the way.

And so we go into groups.

We have little groups that we go visit our legislators with.

And there's always one person that we designate as the speaker, and usually that's someone with some experience and who isn't afraid to voice their opinion.

What's wrong with that?

AUDIENCE MEMBER: I was thinking that, well, it doesn't give others an opportunity to get outside of their comfort zone.

DEB LANGHAM: Right.

We defeated our purpose kind of.

So what we did was kind of recognized that early on that if you're really shy and you don't want to talk to your legislator, it's not a good way to encourage them.

So what we did is provide training before we go to visit on how to talk to your legislators, and we try to divide up our agendas evenly so everybody gets to say something.

Even if it's, Hi, we're from Independence First and we live in your district and this is so and so and so and so and you sit down.

That's okay.

You've said something.

We also train on, hey, how do you write a letter?

How do you send an e‑mail?

How do you do a phone call about disability rights legislation or laws to people who are in power?

We join together with other disability advocacy groups like ADAPT, Survival Coalition in our state.

It's a group of statewide service providers that get together and work together to improve long‑term care services in our state.

Make it Work Milwaukee, a group of service providers, consumers who work together to make things better in Milwaukee and the Milwaukee area for people with disabilities.

Maybe you're ‑‑ where you live you've got groups like that too that you could work with and voice your opinion and let them know that people with disabilities are here to stay.

Information and referral.

We talked about that.

We do tons and certainly we're going to do more, especially after the great presentation yesterday.

I jotted down actually a whole page of stuff I want to do differently.

Ethics and confidentiality.

A good thing for you to address with your new staff before employment starts.

I've provided you our code of ethics.

You might want to take a look at that if you don't have one already.

And, oh, help your staff to become familiar with everything else that goes on at your center.

There's nothing worse than having your staff call another agency and the agency says to you, well, if you're looking for benefits counseling, where are you sitting?

Okay.

Get out of your office and turn right and walk down until you see the redhead in the corner and then talk to her.

Know what your center does.

And also, what is your center's relationship to your Statewide Independent Living Council?

Learn what your SILC is doing.

Go to them.

Can they help fund you for some of the stuff you're doing?

They receive funding.

Is your center a part of the development for the state plan of independent living?

Do you contribute to that?

Consider safety guidelines.

Again, I've included another example in here, but I'm afraid to throw it up because I don't want to go ‑‑ here it is.

We want our staff to be safe when they're out in the community.

We encourage them to use the buddy system, observe and access their environment.

And our agency cell phones have a built‑in GPS.

Okay.

So Tim's getting up so I think my days are numbered.

They're sending Amina for me.

Also have some kind of sign in/sign out.

Provide some trainers.

In your community there's lots of ‑‑ like, the fire department, the police department have trainers that can come in and help your staff to learn how to be safe.

And tell your staff that it's okay if they have a gut feeling that they're going somewhere and something's not right, that it's okay for them to remove themselves from the situation.

That's a good thing for them to know.

Okay.

And then here's some more resources for you.

Online training.

And also, again, I'm going to point out this document that contains the text for CSR documentation, interviewing and assessing needs and goal setting.

It's really great if you have your staff go online and take the classes and they get a certificate for that.

When I started working with ILRU and NCIL, I asked my staff to take this and I thought they were going to be, oh, I really have to do this.

They did it.

Instead I got an e‑mail, I want a certificate to put in my file that I completed all of this.

So it's pretty cool and it's a very good brush‑up or very good training tool for staff.

Okay.

Videos.

We have ‑‑ we have lots of things.

Think about that.

Ask your colleagues, you know, for stuff.

What do you have that works for you?

I have a little cartoon down here of two cave persons.

One has a round wheel, the other one has a square one.

And the one says with the round wheel, "I have found out that this works a lot better." Okay.

Stuff that goes in your CSR.

We also talked about that with our staff.

The goal, the CAP/grievance form, your eligibility, accommodation, any kind of HIPPA documentation.

And also what I like to say, and I've heard it earlier during yesterday, as far as documentation is concerned, you didn't write it down, it didn't happen.

Also one other thing, as far as our intake packet or our CSR is concerned, we have a checklist that includes all of the steps for documentation that we need.

And I will tell you that it's a long one, but it started out being one page.

And as we grew and as we did different things, it kind of morphed into something bigger.

But you can consider that.

You know, if you're fearful you're not getting your documentation and things aren't going right, make a checklist when your staff calls a consumer, you check off that you did stuff.

Staff mentoring.

I cannot stress this enough.

Really have to provide somebody a seasoned mentor, somebody that knows the ropes that works with your folks.

At our center, they're called a cruise director and the cruise director from staff works with their newbie and mentors them along.

And cruise directors answer also any questions.

Hey, I don't want Deb to know this, but if I ask for a vacation day on blah, blah, blah, what will she say?

So, again, working with their mentors, consumer staff will learn the importance of being reliable.

That's so important.

Out of everything and everybody that they work with, they need to know that the buck stops here.

We're the reliability folks.

We're the person you can depend on.

They're going to learn observation skills.

Learning how to conduct a consumer‑driven discussion and how to find out what the consumer wants, what their strengths are and what their barriers to success are.

I'm going to add what their strengths are.

And, again, we're going to do the question part.

The good listener, taking good notes, document, document, document.

I also teach our staff why the documentation is important and what that means to our report and to our funders.

Practice, practice, practice.

Again, our new staff with their cruise directors open up a consumer.

They do everything from beginning to end.

Interview, open the file, do the goal, everything, and then they're offered constructive criticism afterwards.

Continue their growth.

Again, providing other trainings as well, and then we also have a good way for staff to learn how to close the file is having exchanged closed files with one another and reviewed them.

We have a form.

Can you tell I just have a form for everything?

I can't see it here.

Here it is.

Is everything in place?

Are signatures in place?

Is the goal signed?

Everything in there?

Are there entries for what needs to have an entry for?

And, again, we do every other monthly meetings with staff.

It's a good place for them to do peer support with each other.

Hey, I've got this consumer that's kind of problematic.

Well, you can try this.

Just a good forum for them to talk about their cases, their consumers and what's happening.

And, again, we try to encourage that our staff take a lot of training as well.

So when your center has a clear procedure on how to assist consumers, connect them to resources in your CIL, as well as outside when appropriate, staff are hired, trained and mentored and provide an ongoing support.

They'll be ready to offer valuable quality assistance and guidance to your consumers to reach their independent living goals.

There we go.

Sorry I went over.

I'm so sorry.

[Applause]

Any questions?

Okay.

You can see me after.

Hey, Deb, how about if we do a quick 5 to 10 minute break.

And so, if we could be back, that would make it about 10:50, that would be great.

I know that's tight.

I apologize, but if we can try to get a 5‑minute break, we'll be right back on track.