COMMISSION FOR EFFECTIVE COMMUNITY INCLUSION OF INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

January 9, 2014

The Honorable Martin O'Malley Governor of Maryland 100 State Circle Annapolis MD 21401 The Honorable Thomas V. Mike Miller, Jr. President of the Senate State House, H-107 Annapolis MD 21401

The Honorable Michael Erin Busch Speaker of the House of Delegates State House, H-101 Annapolis MD 21401

Dear Governor O'Malley, President Miller, and Speaker Busch:

On behalf of the members of the Maryland Commission for Effective Inclusion of Individuals with Intellectual and Developmental Disability, I am pleased to submit to each of you our initial report as required under Executive Order 01.01.2013.04.

This Commission has approached its mission with incredible dedication, understanding, and urgency. Each member has contributed his or her time and expertise and the results are that in less than four months we have a vision and a path forward that will make Maryland a leader in community inclusion for individuals with intellectual and developmental disabilities.

While we were, in part, created from a tragedy, the plan emerging from the Commission today honors Ethan Saylor by demonstrating a renewed and strengthened commitment to the ideals of justice, equality, and dignity for all differently-abled citizens of Maryland and their families.

I am honored to Chair a Commission composed of talented and knowledgeable professionals, and I look forward to continuing our work in the months to come.

Sincerely.

Timothy P. Shriver, Ph.D.

Commission Chair

INITIAL REPORT OF THE COMMISSION FOR EFFECTIVE COMMUNITY INCLUSION OF INDIVIDUALS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES

EXECUTIVE ORDER 01.01.2013.04

MSAR# 9959

January 9, 2014

Submitted by:

The Commission for Effective Inclusion of Individuals with Intellectual and Developmental Disabilities

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FINDINGS

Governor O'Malley established the Commission for Effective Community Inclusion of Individuals with Intellectual and Developmental Disabilities on September 17, 2013 by Executive Order 01.01.2013.04. The Commission makes the following findings:

- Current training of law enforcement personnel in Maryland on how best to interact with individuals with intellectual and developmental disabilities is not offered in every jurisdiction and what is provided is inconsistent and not comprehensive. Furthermore, the effectiveness of the training has not been documented;
- Nationwide, in the area of law enforcement training curricula and legislation pertaining to
 first responders in situations involving people with intellectual and developmental
 disabilities, there is no one training curriculum or law that provides the scope of training
 across a variety of sectors that the Commission seeks for Maryland;
- The Commission will spearhead the development of recommendations for a plan of
 action that includes law enforcement and other first responders, as well as other public
 sectors such as the courts and hospitals. This strategy will promote a policy agenda
 needed to establish and implement improved or updated training for the public sector
 employees who work with and provide services to those with intellectual and
 developmental disabilities; and,
- The Commission will promote a person-centered approach to training that includes people with intellectual and developmental disabilities in all parts of the process as leaders and contributors to a strategy of change.

INTRODUCTION

In announcing the establishment of the Commission, the Governor noted that individuals with intellectual and developmental disabilities make up three percent of the world's population and that 90,000 Maryland citizens were among that group. As a result of achievements in areas such as housing, education, and employment, we are now living in times of greater inclusion in society of persons with intellectual and developmental disabilities. We have come far, but we know much more must be done to eliminate stigma and strengthen integration and access for all. Along with this is a recognition of our responsibility to protect each citizen. While first responders play a key role, the Commission believes that each of us can make a difference.

The Commission has begun its work with commitment and urgency and more broadly with a vision toward a better informed and more compassionate Maryland, one that is truly inclusive and delivers on the promise of access that the Americans with Disabilities Act made more than two decades ago.

Today, on what would have been Ethan Saylor's 27th birthday, we honor him by reaffirming our dedication to dignity, respect and concern for all. The Commission's Vision Statement, which will continue to guide our work, is as follows:

The goals of justice, equality, and dignity remain unfulfilled for people with intellectual and developmental disabilities. The mission of the Commission on Effective Inclusion of Individuals with Intellectual and Developmental Disabilities is to bring to life accurate, effective and comprehensive attitudes, policies and supports that will guide first responders in their work with and care for individuals with intellectual and developmental disabilities. We hope to build on the goals of the Americans with Disabilities Act and its accomplishments by creating a more compassionate, knowledgeable and understanding society that respects the life-saving work of our public servants along-side the valuable contributions of our citizens with intellectual and developmental disabilities. We seek to reduce stigma, increase safety, and inspire relationships of acceptance and support for all Marylanders.

With this statement, the Commission sets the foundation for the work that is still to come. In the nearly four months since the Commission was announced, the members have engaged in serious and thoughtful work about its mission. Members received a briefing that included an over view of nationwide trainings and legislative approaches; law enforcement training in Maryland on intellectual and developmental disabilities; and training programs for other Maryland first responders. Members have met in sub-committees, had conference calls, reviewed documents and attended Commission meetings. There has been robust discussion about what is needed, how best to accomplish it and how to ensure that whatever is recommended is achievable, sustainable, and effective.

KEY COMMISSION ACTIVITIES

Since the Commission members were announced in October 2013, the Commission has met three times as follows: October 28, 2013, November 19, 2013, and December 18, 2013. In addition, the Commission established three sub-committees to address policy, curriculum and training, and community engagement.

Each sub-committee has met twice to establish its priorities and develop avenues for further exploration. The sub-committees have looked at a number of issues surrounding training for law enforcement and other first responders, including the need to develop core elements that should be part of required training for all Maryland first responders. Such elements would include communication techniques, recognition indicators to assist a first responder in making a rapid determination as to whether an individual may have an intellectual or developmental disability (without regard to a specific diagnosis), intervention strategies (such as disengagement,

de-escalation, alternatives to use of strong or lethal force, and use of prone restraints), and other components to be developed.

The Commission recognizes the need to move quickly, but also understands the importance of collecting data to more fully understand the scope of the issues, as well as the need to have evidenced-based curriculum content and methodologies. The Commission is mindful of not wishing to create requirements and mandates that are inflexible and plans to include ongoing evaluation in order to ensure that any mandates developed are modified as circumstances change or more relevant or effective methodologies are identified.

The subcommittees concluded that training should be practical and should include scenario-based learning. Further, training teams should include first responders along with a co-trainer who understands intellectual and developmental disabilities, as well as a person(s) with an intellectual or developmental disability. Training materials should also be diverse and include apps, wallet cards and other quick-to-review information.

An important consideration for the Commission is the education of individuals with intellectual and developmental disabilities about what to expect from first responders. Much like the community policing model where law enforcement officials go to schools, a similar model might be developed for law enforcement personnel to go to the places where people with intellectual and developmental disabilities live, work and learn.

Finally, the sub-committees identified the need to better educate the community about how first responders will be handling situations that involve people with intellectual and developmental disabilities in order to help increase understanding and acceptance.

NATIONAL REVIEW

The Commission looked at materials and approaches offered by various states, disability organizations and universities for training first responders, with a focus on training for law enforcement in the area of intellectual and developmental disabilities. There are states, such as California, Delaware, New Jersey, Indiana, Louisiana, and New Mexico, which have legislation requiring some or all first responders to receive training on how to interact with individuals with intellectual and developmental disabilities. Other states, such as Massachusetts, Oregon, and New York, have implemented training programs without a legislative mandate, and these trainings are not necessarily statewide. Organizations such as The Arc (its national office and some local chapters), Pathfinders of Maryland, and Providing Relief to Autistic Youth (a local Maryland organization), as well as universities, such as the University of New Mexico and the University of Niagara, have also developed training curricula that are provided to police departments and other first responders, generally in the absence of a statewide mandate or a comprehensive statewide training program. The Commission has been impressed with the overall quality of a variety of the training programs it has reviewed and believes that there are elements of existing programs that may be included in a comprehensive inclusion plan.

STATUS OF TRAINING IN MARYLAND

a. Law Enforcement Training - General

Commission member and Executive Director of the Police and Correctional Training Commissions (PCTC), the agency in Maryland responsible for overseeing law enforcement training in Maryland, briefed the Commission about how law enforcement training is conducted in Maryland generally, as well as on the status of training in Maryland with regard to individuals with intellectual and developmental disabilities.

In Maryland, PCTC establishes the standards for entry-level and in-service training for all Maryland law enforcement. Nearly 12,000 entry-level officers in Maryland receive a minimum of 750 hours of training in numerous objectives. For in-service, specific topics are refreshed on a three-year cycle.

The process by which Maryland develops training curricula is not standardized statewide. PCTC is responsible for establishing the training objectives for the 19 Police Training Academies across the state. Each police training academy is then responsible for developing and implementing a training program that meets the established objectives. PCTC subsequently must approve each training curriculum to ensure it meets the required objectives. In addition, PCTC audits each training academy every two years, or as needed, to verify that each objective is being taught, tested and mastered.

b. Law Enforcement Training - Specific to People with Intellectual and Developmental Disabilities

The Commission heard about training currently offered to law enforcement in the area of intellectual and developmental disabilities. Such training is not conducted statewide in Maryland and what is taught varies by jurisdiction. In 2012-2013 training focused on Autism Spectrum Disorder awareness due to the broad legislative mandate that it be included in police training. Apart from meeting that requirement, training covered a variety of topics under the "behavioral health/disability" heading, including mental illness, deaf and hearing impaired, and ADA compliance.

Instructors, methodologies, and approaches differed and it appears that there was little focus on providing useful communication on de-escalation techniques, and little in the way of assistance in recognizing when a situation might involve someone with an intellectual or developmental disability. In jurisdictions where Crisis Intervention Teams (CITs) exist, some included training on intellectual and developmental disabilities, but CITs are not available throughout the state. Lastly, it does not seem that local resources, such as disability groups, were always identified and scenario based training seemed minimal, limiting the effectiveness of the trainings offered.

c. Training of Fire and Emergency Medical Personnel in Maryland

The Maryland Institute for Emergency Medical Services Systems (MIEMSS), the regulatory agency for Emergency Medical service systems, oversees the training and certification of all levels of EMS providers in Maryland. Commission member and Director of the Office of Licensure & Certification at the Maryland Institute for Emergency Medical Services presented an overview of the training provided to basic life support (BLS) providers, Emergency Medical Responder (EMR) and Emergency Medical Technician (EMT). Like PCTC, MIEMSS develops training objectives and the various EMS teaching agencies, for example Maryland Fire and Rescue Institute (MFRI) and community colleges, develop training curricula that meet those objectives. MIEMSS provides a standardized syllabus, which includes the required course content and hours of instruction for the initial and refresher EMR and EMT programs. From these standardized syllabi, the EMS teaching agencies develop their own curriculum by utilizing the instructional material provided by the approved textbooks that meet the National EMS Educational Standards. MIEMSS adopted the National EMS Educations Standards in 2012 and that includes three areas that impact on educating providers on assisting patients with intellectual and developmental disabilities as follows: Therapeutic Communications, Special Populations, and Special Considerations in Trauma. In 2012, a 2.5 hour module on Autism Spectrum Disorder was added to the Emergency Medical Technician and EMR recertification training courses. While the training for Emergency Services Personnel includes some scenario-based modules, there is presently no training conducted by or including individuals with intellectual or developmental disabilities at the initial EMR provider training level.

COMMUNITY INCLUSION

More than a half century of laws, court decisions and public programs have led to greater numbers of persons with intellectual and developmental disabilities living independently in their communities, making their own choices, contributing to their own support and participating in active social lives. Yet stigma persists and overcoming it is everyone's responsibility in the 21st century. Better educating our communities and first responders remains one of our unfinished tasks.

A key focus of the Commission's initial work has been the policies and training for law enforcement and other first responders to safely manage situations that include people with intellectual and developmental disabilities. What has emerged, however, is a more complete picture of the challenge of community inclusion. The Commission believes that now is the time to establish training priorities in many areas in connection with individuals with intellectual and developmental disabilities such that wherever these individuals choose to be in our society, they are assured the same level of safety, understanding, and inclusiveness as anyone else. Areas of Commission recommendations for future consideration may include schools, residential supports and services, transportation, courts, and emergency rooms. This reflects the Commission mandate to further community inclusion -- ensuring that first responders and other individuals in positions of authority, particularly those in public sector positions, are well-trained and prepared for situations that may involve people with intellectual and developmental disabilities.

NEXT STEPS

To ensure that its work is as comprehensive and inclusive as possible, the Commission will hold four public hearings to solicit comments from key stakeholders on the Commission's plans. The Commission hopes that individuals from all over Maryland will provide remarks, either in person or in writing, to inform the Commission of issues and concerns that it might address in its final recommendations.

Our policy goal will be to put forth comprehensive strategic recommendations that are readily achievable and will help place Maryland on the cutting edge of inclusion. This will include a multi-year strategy initially focused on first responders. In addition, we plan to recommend better ways to assist other public sectors in a model approach to supporting and welcoming people with intellectual and developmental disabilities into all aspects of community life.

In March, following the final public hearing, the Commission will meet to discuss its timeline for short- and long-term development and implementation of its recommendations and will make that timetable available to the public.

The Commission understands that a strategy to address community inclusion in a comprehensive manner will take time and it plans to engage experts as necessary to assist in the development of individual components.

Commission Membership

Timothy Shriver Chair Special Olympics International

Colonel Marcus L. Brown Maryland State Police

Officer Scott A Davis Montgomery County Police Department

Lt Dwayne Embert Queen Anne's County Sheriff's Office

Hon. Anne Colt Leitess State's Attorney for Anne Arundel County

Secretary Sam Abed Department of Juvenile Represented by Joseph (Jay) Cleary

Secretary Gary D. Maynard Department of Public Safety and Correctional Represented by Dr. James Holwager

Secretary Cathy Raggio Maryland Department of Disabilities

Secretary Joshua M. Sharfstein Department of Health and Mental Hygiene Represented by Dr. Lisa Hovermale

Robert Bass Maryland Institute for Emergency Medical Services Represented by Rae Oliveria

Tammy Brown Governor's Office of Crime Control and Prevention Represented by James Hedrick

Charles Rapp Police and Correctional Training Commission Brian T. Cox Maryland Developmental Disabilities Council

Thomas Curtis Maryland Department of Disabilities

Andrew J. Imparato Association of University Centers on Disabilities

Joanna L. Pierson The Arc of Frederick County

Theresa R. Sparks Maryland Disability Law Center

Sara Hart Weir National Down Syndrome Society

Erica Wheeler Emeritus Assisted Living

Speaker of House Michael E. Bush Represented by Delegate Pete Hammen

President of Senate Thomas V. Miller