

AIDD Grant # 90DDUC0122

University Center for Excellence in Developmental Disabilities

Program Performance Report Annual Report FY 2023

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Submitted to:
Office of Intellectual and Developmental Disability

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Fiscal Year 2023 University Center for Excellence in Developmental Disabilities (UCEDD) Program Performance Report to the Administration on Developmental Disabilities (OIDD)

| Date of Report | July 27, 2023 |
|-------------------------|--|
| OIDD Project Officer | |
| OIDD Grant Officer | |
| OIDD Grant Number | 90DDUC0122 |
| UCEDD Name | The Ohio State University Nisonger Center (UCEDD/LEND) |
| Address | The Ohio State University OSU Wexner Medical Center/Office of Health Sciences 357 McCampbell Hall 1581 Dodd Dr Columbus, OH 43210 http://nisonger.osu.edu |
| Phone | 614-685-3192 |
| Period of Performance | July 1, 2022 - June 30, 2023 |
| Approved Project Period | July 1, 2022 - June 30, 2027 |
| Project Title | The Ohio State University Nisonger Center, University Center for Excellence in Developmental Disabilities |
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| Author of this Report | Marc J. Tasse tasse.1@osu.edu 614-685-3193 |
| | The Ohio State University Nisonger Center was among the first group of federally funded University Affiliated Facilities (now called University Centers for Excellence in Developmental Disabilities; UCEDD). We have a strong and dynamic interdisciplinary team of researchers, clinicians, teachers, staff (including adults with lived ID/DD experience, and family members) and trainees that strives to empower and support all people with developmental disabilities and their families through interdisciplinary training, research, and service. |
| | Nisonger Center is proud to be part of the Ohio State Wexner Medical Center's Office of Health Sciences, College of Medicine, as well as the Neurological Institute. Nisonger Center has approximately 120 faculty and staff from more than 12 professional disciplines across six university colleges (Arts & Sciences, Education & Human Ecology, Dentistry, Medicine, Nursing, and Public Health). In addition, Nisonger Center has close collaborations with Nationwide Children's Hospital and a strong community engagement throughout the state. |

This past project year (2022-2023) we completed 54 projects and 601 activities. These activities have touched the lives of more than 27,100 children, adolescents, and adults with developmental disabilities and their families. More than 17,800 persons with lived ID/DD experience, family members, students, para-professionals, and professionals received training and/or participated in one of our many courses, training programs, conferences, and/or workshops.

We are excited to report that we provided intensive interdisciplinary pre-service/graduate/post-graduate education and training in providing clinical care and conducting research to 35 long-term trainees from 14 different disciplines, including: (1) audiology (2), developmental-behavioral pediatrics, (3) education/special education, (4) genetics/genetics counseling, (5) health administration, (6) nursing, (7) nutrition, (8) occupational therapy, (9) physical therapy, (10) psychology, (11) public health, (12) social work, (13) speech-language pathology, and (14) youth/parent/family advocacy.

The broader group of 17,800+ individuals that received training through the Nisonger Center, included 194 Ohio State University College of Dentistry pediatric and general dentistry students, pediatric dentistry & general practice dentistry residents, and dental hygiene students (dental hygienists). The Ohio State College of Dentistry is truly exemplary because they require that all dental students and dental hygiene students at Ohio State complete a clinical rotation through the Nisonger Center dental services and requires that these students gain valuable clinical experience working with children and adults with developmental disabilities.

This project year again, our faculty and staff had several major accomplishments and were engaged in a number of professional leadership roles and we want to highlight a few examples:

L. Eugene Arnold, MD, MEd

- Co-chair of the American Association of Child and Adolescent Psychiatric Complementary-Integrative Medicine Committee.
- Received the Elaine Schlosser award for research in ADHD at the October American Academy of Child-Adolescent Psychiatry meeting held in Toronto, Canada. This award carries a \$5K prize, of which Dr. Arnold is assigning to a Nisonger Center development fund supporting New Treatment Research for children with ASD.

Steve Beetstra, DDS, MHSA

- Was invited to give the Keynote Address at the SAID Conference in Chicago, IL.
- Developed a first-in-the-country university-sponsored Certificate Program to train practicing dentists in working with individuals with intellectual disability/developmental disabilities.

Christine Brown

 Was invited to give a plenary presentation on competitive wage opportunities for adults with intellectual disability through Ohio's Employment First mandate at the 134th American Association on Intellectual and Developmental Disabilities Annual Meeting.

Introduction

Jessie Green, PhD

• Jessie Green successfully defended her doctoral dissertation in the College of Education and Human Ecology at The Ohio State University (December 2022) titled "Undergraduate Student Attitudes and Perceptions about Students with Intellectual Disability: A Mixed Methods Explanation." Dr. Green is now an Assistant Research Professor of Psychiatry and Behavioral Health at the Nisonger Center.

Susan M. Havercamp, PhD

 Served on the Advisory Committee to the NIH Director Working Group on Diversity's Subgroup on Individuals with Disabilities.

Luc Lecavalier, PhD

 Associate editor for the American Journal on Intellectual and Developmental Disabilities.

Diego Solis, DDS

• Dr. Diego Solis has been recognized as a top Dentist in the Pediatric Dentistry for 2023 topDentists for the 7th year in a row!

Marc J. Tassé, PhD

- Elected President of the American Psychological Association's Division 33 (IDD/ASD).
- Invited to give the Plenary address at the 40th anniversary celebration conference of the Association Trisomie 21 Pyrénées-Atlantiques. Pau, France.

Jennifer Walton, MD

• Appointed the National Academies of Science, Engineering, and Medicine's (NASEM) Committee on Improving the Health and Wellbeing of Children and Youth through Health Care System Transformation.

Andrea Witwer, PhD, NADD-C

 Member of the Local Arrangements Committee for the planning of the 134th American Association on Intellectual and Developmental Disabilities Annual Meeting in Pittsburg, PA.

Our faculty and staff endeavor to seek extramural funding to support our many new/innovative and ongoing projects and activities across all our mission areas, including research, training, and supports/services. The Nisonger Center team remains strongly engaged in scholarly activities as illustrated by the combined 79 publications (peer-reviewed journal articles, chapters, and books published or in press) and more than 143 conference and poster presentations this past 2022-2023 project year. This past project year, we also leveraged the funding received from the Administration on Community Living's Office on Intellectual and Developmental Disabilities (ACL/OIDD; \$577,735) to obtain an additional \$11.7 million in funding to support progress towards achieving our mission, representing a leverage of 20 X the annual funding amount we have received from ACL/OIDD.

Nisonger Center's research program continues to focus on issues that lead to

improving the health, behavior, learning, social participation, independent living, competitive-wage employment, and overall quality of life of people with developmental disabilities and their families. This past year we secured more than \$3.8 million in federal, private, and industry grants to support our research projects.

In closing, we hope you find our annual program performance report informative as you read about the work and efforts of the Nisonger Center faculty/staff/trainees on providing leadership in advising Federal, State, and community policymakers about, and promoting opportunities for individuals with developmental disabilities to exercise self-determination, be independent, be productive, and be included in all facets of their community.

Optional Attachments

OIDD Program Performance Report, Part 1A. Detailed Work Plan Progress Report

Each UCEDD has a 'work plan' for the 5-year plan. To this end, application guidance requires the UCEDD to provide quantitative monthly or quarterly projections of the accomplishments achieved for each function or activity in such terms as the number of people served and the number of activities accomplished. Data may be organized and presented as project tasks and subtasks with their corresponding timelines during the project period. For example, each project task could be assigned to a row in the first column of a grid. Then, a unit of time could be assigned to each subsequent column, beginning with the first unit (i.e., week, month, quarter) of the project and ending with the last. Shading, arrows, or other markings could be used across the applicable grid boxes or cells, representing units of time, to indicate the approximate duration and/or frequency of each task and its start and end dates within the project period.

When accomplishments cannot quantify by activity or function, list in chronological order to show the schedule of accomplishments and their target dates.

The guidance also requires that the UCEDD provide a list of organizations, cooperating entities, consultants, or other key individuals who will work on the project, along with a short description of the nature of their effort or contribution.

This section would provide a progress report on the UCEDD work plan. They would use the work plan from the 5-year application to provide annual updates along with a narrative report of progress for each section of the work plan that has activities planned for the time-period. Activities not planned for during the reporting period can be reported but must be reflected in a revised work plan or Part 1.b. if the work plan is not revised yet.

UCEDDs would need to tailor this part of the report to the individual work plan style. UCEDDs should be sure to include information about faculty specialties, their experience with disabilities, and how their racial, ethnic, and spoken language reflects that of the communities in which they work. Additionally, discuss the UCEDD's plan for offering academic credit for interdisciplinary pre-service training.

We are proud of the many lives that we have touched through our interdisciplinary research, education and training, and services, as we endeavor to empower and support all people with developmental disabilities and their families through interdisciplinary training, research, and service.

We believe our 5-year workplan has helped guide our work and activities towards accomplishing the Nisonger Center's mission, vision, and values through a focused effort around the following four identified strategic priorities:

- >> Education and Learning in Schools, the Community, and the Workplace: To support the success and community inclusion of people with developmental disabilities through the creation, implementation, and dissemination of effective supports for education and learning across the lifespan.
- >> Employment, Community Engagement, and Interdependent Living: Provide services that enhance employment, community engagement, and interdependent living outcomes for individuals with intellectual

disability or developmental disabilities (ID/DD) and their families.

- >> Health: Become a national leader in promoting health and quality health care for people with disabilities.
- >> Behavioral Health: Conduct high-impact research, deliver training/technical assistance, and provide high-quality services to persons with behavior/psychiatric problems and/or developmental disability or autism spectrum disorder.

The Nisonger Center workplan provides a detailed reporting - both quantitative and qualitative of our progress towards our established priorities, goals, and strategies over the past project year (2022-2023). We have also interspersed a number of anecdotal case vignettes and quotes from individuals who have been touched by the Nisonger Center. These case vignettes and testimonials illustrate the outcomes and life impact of our services, education/training, research, and associated activities.

We have also attached here, reports from our dissemination and outreach efforts as illustrated by: (a) Media Report 2023; (b) Website analytics; (c) Facebook metrics; and (d) Twitter metrics.

Optional Attachments

| 1. | Media Report 2023 Nisonger Center.pdf |
|----|---|
| 2. | Nisonger Center Website Analytics Report FY23.pdf |
| 3. | OSUMC Facebook Metrics (Wexner Medical Center (SMU)) July 1, 2022 – June 14, 2023.pdf |
| 4. | OSUMC Twitter Metrics (Wexner Medical Center (SMU)) July 1, 2022 – June 14, 2023.pdf |
| 5. | Workplan FY23 - Combined 7-11-2023.pdf |

OIDD Program Performance Report, Part 1B. Summary of Evaluation Results

This section provides a summary report of the implementation of the evaluation plan described in the UCEDD 5-year core grant application. Other relevant information not reported elsewhere should also be reported in this section.

NISONGER CENTER - UCEDD CONSUMER ADVISORY COUNCIL

The Nisonger Center Consumer Advisory Council (CAC) is composed of stakeholders, including: persons with lived experience with developmental disabilities, siblings/parents of persons with developmental disabilities, DD Network partners, and representatives from relevant government agencies and advocacy groups. Our CAC members advise the Nisonger Center director and our executive committee as well as provide guidance and feedback regarding the development and progress towards successful completion of the goals and strategies contained in our 5-year workplan. Throughout the year, the CAC provides ongoing feedback on the implementation of the 5-year workplan, our activities, and progress towards the attainment of these goals. The CAC advises and guides the general work of the Nisonger Center, and works with the Center to constantly refine our strategic vision and goals. The CAC also serves as an informal bridge between the Nisonger Center, our constituency, and the DD community at large.

The Nisonger Center CAC meets at least four times per year to discuss Nisonger programs/activities, disability issues covering a wide array of topics, exchange on state policies and activities around DD matters, and other related issues.

The Nisonger Center CAC is made up of a total of 15 members, of which are a majority of individuals with lived DD experience or family members. We continue to work at making our CAC composition more racially and ethnically diverse and representative of Ohio's diversity.

We currently have two CAC members (13%; Ohio = 13%) who are African American but none identify themselves as Hispanic or Latino (Ohio = 4%). We have eight of our 15 (53%) CAC members who are either individuals with lived developmental disability experience (4 of 15; 27%) or identify as a family member of an individual with a developmental disability (4 of 15; 27%). The remaining seven CAC members include: the executive director of the Ohio DD council, the executive director of Disability Rights Ohio (Ohio's P & A agency), the director of the University of Cincinnati UCEDD, and four representatives from local and state DD agencies who provide services and supports to our constituency.

Our CAC members include:

- 1. Kim Baich is a parent representative (daughter with Down syndrome).
- 2. Patricia Cloppert is a parent representative (2 sons with ASD).
- 3. Kimberly Hauck is the Director of the Ohio Department of Developmental Disabilities.
- 4. Carolyn Knight is the Executive Director of the Ohio Developmental Disabilities Council.
- 5. Bobbi Krabill, Chief, Center for Public Health Excellence, Ohio Department of Health
- 6. Stephanie Leppert is a self-advocate and is involved with the Down Syndrome Association of Central Ohio.
- 7. Rebecca (Becky) Love is the Director of Early Intervention Services for the Franklin County Board of Developmental Disabilities.
- 8. Joyce Martin, JD is a parent representative (daughter with cerebral palsy).
- 9. Jed Morrison is the superintendent for the Franklin County Board of Developmental Disabilities and current Chairperson of the CAC.
- 10. Samantha Perry is a self-advocate.
- 11. Ashley Poling is a self-advocate.
- 12. Ilka Riddle, PhD is the Director of the University of Cincinnati University Center for Excellence in Developmental Disabilities (UCEDD).
- 13. Amy Shuman, PhD is a parent representative and current Co-chairperson of the CAC.
- 14. Kerstin Sjoberg is the Executive Director of Ohio Legal Rights Service (P&A).

15. Nathan Turner is a self-advocate.

The Nisonger Center CAC met 4 times in this past project year (2022-2023), 3 meetings were virtual and 1 meeting was hybrid (some member joined virtually and some were in-person).

The CAC met on the following dates (meeting minutes attached):

- 07/26/2022 (3:00-4:30pm)
- 10/25/2022 (3:00-4:30pm)
- 02/28/2023 (3:00-4:30pm)
- 05/30/2023 (3:00-4:30pm)

We have attached the Minutes of our 2022-2023 CAC meetings. We have also attached two documents: (a) summarizing our university coursework offered through our UCEDD faculty that contribute to pre-service training in the area of intellectual disability, autism spectrum disorder, and related developmental disabilities; and (2) our Faculty and Personnel Qualifications.

| 1: | Academic Training in IDD and interdisicplinary practice Nisonger Center FY 2023.pdf |
|----|---|
| 2: | CAC Meeting Minutes FY22-23.pdf |
| 3: | Faculty and Personnel Qualifications - Nisonger Center FY23 Rev 7-11-2023.pdf |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Interdisciplinary Pre-Service Preparation

Instructional program offered by the UCEDD that: (1) integrates knowledge and methods from two or more distinct disciplines; (2) integrates direct contributions to the field made by people with disabilities and family members; (3) examines and advances professional practice, scholarship and policy that impacts the lives of people with developmental and other disabilities and their families; (4) is designed to advance an individuality academic or professional credentials; and (5) takes place in an academic setting or program.

It may: (1) lead to the award of an initial academic degree, professional certificate, or advanced academic credential; and (2) contribute to a discipline-specific course of study offered by the UCEDD or by another academic department.

Output Measures

Number and type (discipline, intermediate, long-term) of UCEDD trainees trained in the DD field

| Discipline | Trainee Type | Trainees # |
|--------------------------------|--------------|------------|
| Audiology | Long-term | 3 |
| Audiology | Intermediate | 0 |
| Genetics/Genetic Counseling | Long-term | 2 |
| Genetics/Genetic Counseling | Intermediate | 0 |
| Nursing-Family/Pediatric Nurse | Long-term | 1 |
| Practitioner | Intermediate | 0 |
| Nutrition | Long-term | 1 |
| Nutrition | Intermediate | 0 |
| Occupational Therapy | Long-term | 2 |
| Occupational Merapy | Intermediate | 0 |
| Other | Long-term | 7 |
| Other | Intermediate | 0 |
| Physical Therapy | Long-term | 2 |
| Friysical Trierapy | Intermediate | 0 |
| Psychology | Long-term | 10 |
| r sychology | Intermediate | 0 |
| Social Work | Long-term | 4 |
| Social WOIN | Intermediate | 0 |
| Speech-Language Pathology | Long-term | 3 |
| Speedi-Language Famology | Intermediate | 0 |

| | Total Long-term | 35 | |
|--|-----------------------------|--|--|
| | Total Intermediate | e 0 | |
| Total number of UCEDD trainees | | 35 | |
| Number of UCEDD interdi | ciplinary training progran | ms 2 | |
| List of interdisciplinary training programs. | | 1. LEND Short Term Trai 2. LEND- Medium Term | |
| Number of UCEDD discipl | line specific training prog | grams 11 | |
| List of discipline specific t | raining programs. | 1. LEND - Advanced Gencounseling 1 2. LEND- Advanced Gencounseling II 3. LEND- Foundations in Counseling 1 an 2 4. LEND-Masters Thesis for Genetic Counseling Graduate Program- Avwilloughby 5. LEND-Masters Thesis Advisor-Genetic Gradu Program-Emily Robers 6. LEND- Masters Thesis Genetic Counseling Graduate Program: Abigayle Rose 7. SOCIAL - Individual and Supervision 8. DENTAL- Clinical Train Johnstown Road and McCampbell Hall 9. ECE - Child and Youth Student Interns 10. TOPS: Practicum Student Neurodevelopmental Desired Programs and Neurodevelopmental Desired Programs Advanced Progra | etic Genetic Advisor dea dea dea Genetic Advisor dea |
| Diversity of UCEDD traine family member, race/cultu | | w/disability, 35 total trainees | |
| Race | Ethnicity | Gender | |
| | | | |

| Race Ethnicity | | | Gender | | |
|--------------------------------------|----|--------------|--------|--------|----|
| White | 25 | Hispanic | 0 | Female | 33 |
| Black or African American | 3 | Non Hispanic | 35 | Male | 2 |
| American Indian and Alaska Native | 0 | Unrecorded | 0 | Others | 0 |
| Asian | 7 | | | | |

| Native Hawaiian and Other Pacific Islander | 0 | | | | | | |
|---|------|---|---|----------------|---|---|--|
| More than one race | 0 | | | | | | |
| Unrecorded | 0 | | | | | | |
| Personal Relationshi with Disabilities | | | | | Primary Language | | |
| Person with a disability | 6 | Do you speak a language other than English at home? | | | How well do you speak English? (only trainees who answer YES to the previous question "Do you speak a language other than English at home?" will be answering this question). | | |
| Person with a special health care need | 0 | Spanish | | 0 | Very well | 4 | |
| Parent of a person with a disability | 3 | Another la | anguage | 6 | Well | 2 | |
| Parent of a person with a special health care need | 0 | No | | 29 | Not well | 0 | |
| Family member of a person with a disability | 7 | | | | Not at all | 0 | |
| Family member of a person with a special health care need | 1 | | | | | | |
| Unrecorded | 1 | | | | | | |
| None | 21 | | | | | | |
| Regarding pre-service | pre | paration t | rainings co | nduc | ted outside the UCEDD: | | |
| Number of training eve | ents | ; | 4 | | | | |
| Total number of hours events | for | training | 171 total ho | 71 total hours | | | |
| Number of hours for each training event | | | LEND - Advanced Genetic Counseling 1 - 42 hour(s) LEND- Advanced Genetic Counseling II - 42 hour(s) LEND- Foundations in Genetic Counseling 1 an 2 - 42 hour(s) NeuroSc4550 - Autism Spectrum Disorder and Related Neurodevelopmental Disorders - 45 hour(s) | | | | |
| Total number of participants/students trained 70 | | | 70 | | | | |
| | | | | | | | |
| Initial Outcome Measu | re | | | | | | |

| | Total Number surveyed | 32 |
|--|-------------------------|----|
| | Total Number responding | 32 |
| | Number responding | |
| | Strongly Agree | 16 |
| | Agree | 16 |
| | Disagree | 0 |
| | Strongly Disagree | 0 |
| Percent of UCEDD long-term trainees reporting an increase in knowledge or skills and/or change in attitude | 100% | |

| Consumer Satisfaction Measure | | | | | |
|-------------------------------|--|---|------------|--|--|
| Area of Emphasis | Definition | Consumer Satisfaction Measure | | | |
| Health-Related Activities | | For those activities in which the UCEDD was the lead: | | | |
| | | Number of activities | 1 | | |
| | | Total Number surveyed | 126 | | |
| | | Total Respondents | 126 | | |
| | | Response rate | 100% | | |
| | | | | | |
| | | Number Responding | | | |
| | | Strongly Agree | 88 (69.8%) | | |
| | | Agree | 35 (27.8%) | | |
| | | Disagree | 3 (2.4%) | | |
| | | Strongly Disagree | 0 (0.0%) | | |
| | Percentage of trainees who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) | 98% | | | |
| | Response Rate Explanation No explanation is required as the response rate was 30% or greater. | | | | |

| | Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) | We sample the entire group and response is voluntary. | | |
|--------------------------------|---|---|-----------|--|
| Education & Early Intervention | | For those activities in v UCEDD was the lead: | which the | |
| | | Number of activities | 1 | |
| | | Total Number surveyed | 0 | |
| | | Total Respondents | 0 | |
| | | Response rate | 0% | |
| | | Number Responding | | |
| | | Strongly Agree | 0 (0.0%) | |
| | | Agree | 0 (0.0%) | |
| | | Disagree | 0 (0.0%) | |
| | | Strongly Disagree | 0 (0.0%) | |
| | Percentage of trainees who reported satisfaction with the knowledge and skills gained to serve as a resource for achieving the developmental and educational goals of IWDD from birth to 22 years of age. (Strongly Agreed + Agreed) | 0% | | |
| Employment-Related Activities | | For those activities in v UCEDD was the lead: | which the | |
| | | Number of activities | 1 | |
| | | Total Number surveyed | 0 | |
| | | Total Respondents | 0 | |
| | | Response rate | 0% | |
| | | | | |
| | | Number Responding | | |
| | | Strongly Agree | 0 (0.0%) | |
| | | Agree | 0 (0.0%) | |
| | | Disagree | 0 (0.0%) | |

| | Strongly Disagree | 0 (0.0%) |
|--|-------------------|----------|
| Percentage of trainees who reported satisfaction with the knowledge and skills gained to serve as a resource for IWDD in increasing their employment, job choice, and career opportunities. (Strongly Agreed + Agreed) | 0% | |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Continuing Education

Seminars or courses of instruction offered by the UCEDD that: (1) serve to maintain professional credentials; (2) encourage professionals to expand their knowledge base and stay up-to-date on new developments; and (3) offer certificates of completion or CEUs (or their equivalents).

| Output Measures | |
|--|---|
| Number of professionals participating in UCEDD continuing education programs | 3541 |
| Number of UCEDD continuing education programs | 66 |
| Length (amount of course time) of CE program | 343 total hours |
| | FRNO Charting the LifeCourse Presentation - 2 hour(s) LEND- SHS 9987 Capstone - N/A LEND- SHS 8943 Externship Course - N/A LEND- SHS 7807 Pediatric Audiology II Course - N/A LEND- SHS 7743 Ethics and Evidence Course - N/A LEND- SHS 7742 Hearing Technology and Hearing aids for SLP'S - N/A LEND- Early Head Start Clinic - N/A LEND- Speech Language Hearing Clinic - N/A LEND- Advanced Nursing Practice in Pediatric Care course 7338.01, 7338.02, 7338.03 - N/A LEND- Advanced Pediatric Physical Assessment 7330 - N/A LEND- MEDDIET 5800: Advanced Nutrition Therapy in Complex Disease States - 80 hour(s) LEND- MEDDIET 5289: Dietetics Professional Practice II - 80 hour(s) LEND- HTHRHSC 4320: Clinical Interviewing and Risk Assessment in Healthcare - 80 hour(s) FRNO Charting the LifeCourse Presentation - 2 hour(s) FRNO Charting the LifeCourse Presentation - 1 hour(s) FRNO Charting the LifeCourse Presentation - 1 hour(s) FRNO Charting the LifeCourse Presentation - 3 hour(s) Technology - TechSummit 2022 - 8 hour(s) LEND- HTHRHSC 7718 Interdisciplinary |

- Perspective on Autism Course N/A
- 20. LEND-HTHRHSC 7717 Interdisciplinary
 Perspectives on Developmental Disabilities N/A
- 21. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 22. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 23. FRNO Charting the LifeCourse Presentation 1 hour(s)
- 24. FRNO Charting the LifeCourse Presentation 3 hour(s)
- 25. FRNO Charting the LifeCourse Presentation 3 hour(s)
- 26. FRNO Charting the LifeCourse Presentation 3 hour(s)
- 27. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 28. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 29. FRNO Charting the LifeCourse Presentation 1 hour(s)
- FRNO Charting the LifeCourse Presentation 1 hour(s)
- 31. HEALTH Including People with Disabilities in Healthcare Training 1 hour(s)
- 32. HEALTH "State of the State": People with Disabilities in Ohio 1 hour(s)
- DENTAL Special Care Dentistry Association 6 hour(s)
- 34. SOCIAL- Navigating the Cultural Competency of Neurodiversity 1 hour(s)
- 35. Bridging Mental Health and Developmental
 Disability Supports Webinar Series: AN
 INTERDISCIPLINARY APPROACH TO
 MEETING MENTAL HEALTH NEEDS IN IDD 1
 hour(s)
- 36. Bridging Mental Health and Developmental Disability Supports Webinar Series: Intellectual Disability and Autism Spectrum Disorder - 1 hour(s)
- 37. Bridging Mental Health and Developmental Disability Supports Webinar Series: Sexuality in Intellectual and Developmental Disabilities and Autism - 1 hour(s)
- 38. Bridging Mental Health and Developmental
 Disability Supports Webinar Series: Sexuality 2:
 LGBTQ+ and Intersectionality with IDD/ASD 1
 hour(s)

- 39. HEALTH Disability and Emergency Preparedness 1 hour(s)
- 40. ECE Oh, Behave Beginners Guide to Navigating Challenging Behaviors Part 2 - N/A
- 41. ECE PD Training for CELC Champion Location N/A
- 42. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 43. FRNO Charting the LifeCourse Presentation 1 hour(s)
- 44. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 45. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 46. FRNO Charting the LifeCourse Presentation 3 hour(s)
- 47. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 48. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 49. FRNO Charting the LifeCourse Presentation 1 hour(s)
- 50. HEALTH Considerations for people with disabilities, Community Health Worker Certification and Training 3 hour(s)
- 51. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 52. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 53. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 54. FRNO Charting the LifeCourse Presentation 3 hour(s)
- 55. FRNO Charting the LifeCourse Presentation 1 hour(s)
- 56. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 57. FRNO Charting the LifeCourse Presentation 6 hour(s)
- 58. Bridging Mental Health and Developmental Disability Supports Webinar Series: Supporting Communication for Adults with ID/DD and Complex Communication 1 hour(s)
- 59. FRNO Charting the LifeCourse Presentation 2 hour(s)
- 60. SOCIAL- Navigating the Cultural Competency of Neurodiversity 2 hour(s)
- 61. SOCIAL- Navigating the Cultural Competency of

| Neurodiversity - 2 hour(s) |
|---|
| 62. SOCIAL- Ace!- Autism and Neurodivergence: A |
| Primer in Cultural Competency - 2 hour(s) |
| 63. HEALTH - CDC Community Health Workers for |
| Covid Response and Resilient Communities - 2 |
| hour(s) |
| 64. SOCIAL- Ace!- Career Readiness & Employment |
| Focused World Cafe' 2 hour(s) |
| 65. SOCIAL- Ace!- Pitch; Rapid-fire Roundtable on |
| Autistic Research - 1 hour(s) |
| 66. SOCIAL- Navigating the Cultural Competency of |

| | | sity - 2 hour(s) | ompetericy of | |
|---|---|--|---|-------------|
| Consumer Satisfaction Measure | | | | |
| Area of Emphasis | Defini | ition | Consumer Satisfact | ion Measure |
| Health-Related Activities For those activities in UCEDD was the lead | | | | hich the |
| | | | Number of activities | 31 |
| | | | Total Number surveyed | 665 |
| | | | Total Respondents | 655 |
| | | | Response rate | 98% |
| | | | | |
| | | | Number Responding | |
| | | | Strongly Agree | 498 (76.0%) |
| | | | Agree | 153 (23.4%) |
| | | | Disagree | 2 (0.3%) |
| | | | | 2 (0.3%) |
| | Percentage of trainees who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation No explanation is required as the response rate was 30% or greater. | | 99% | |
| | | | | |
| | Sampling Procedur (Random sampling Indicate if non-rand procedures were us non-random sampli were used, explain | is anticipated. lom sampling sed. If ing measures | We sample the entire g response is voluntary. | roup and |

| Education & Early Intervention | | For those activities in v | vhich the |
|--------------------------------|---|---|-------------|
| | | Number of activities | 5 |
| | | Total Number surveyed | 506 |
| | | Total Respondents | 409 |
| | | Response rate | 81% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 342 (83.6%) |
| | | Agree | 67 (16.4%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of trainees who reported satisfaction with the knowledge and skills gained to serve as a resource for achieving the developmental and educational goals of IWDD from birth to 22 years of age. (Strongly Agreed + Agreed) | 100% | |
| Other - Assistive Technology | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 1 |
| | | Total Number surveyed | 260 |
| | | Total Respondents | 85 |
| | | Response rate | 33% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 72 (84.7%) |
| | | Agree | 10 (11.8%) |
| | | Disagree | 3 (3.5%) |
| | | Strongly Disagree | 0 (0.0%) |

| Percentage of trainees who reported satisfaction with the knowledge and skills gained to serve as a resource for IWDD in other areas. (Strongly Agreed + Agreed) | 96% |
|---|-----|
|---|-----|

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Community Services: Training

Training provided by UCEDD faculty/staff to enhance knowledge of a variety of community members (individuals with developmental and other disabilities, their families, professionals, paraprofessionals, policy-makers, students or others in the community).

Output Measures

Number of people trained by participant type (e.g., individuals with D/OD, family members, Service providers, professionals, paraprofessionals, Policy makers, Community members) IN AREA OF EMPHASIS

| Area of Emphasis | | | |
|--------------------------------|---|------|--|
| Quality Assurance | 3511 total | | |
| | Trainees Total | 0 | |
| | Classroom Students | 0 | |
| | Professionals & Para-Professionals | 3511 | |
| | Family Members/Caregivers | 0 | |
| | Adults with Disabilities | 0 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 0 | |
| Employment-Related Activities | 17 total | | |
| | Trainees Total | 17 | |
| | Classroom Students | 0 | |
| | Professionals & Para-Professionals | 0 | |
| | Family Members/Caregivers | 0 | |
| | Adults with Disabilities | 0 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 0 | |
| Education & Early Intervention | 3580 total | | |
| | Trainees Total | 81 | |
| | Classroom Students | 479 | |

| | 5 6 1 1 0 5 5 6 1 1 | | |
|-------------------------------|---|------|--|
| | Professionals & Para-Professionals | 2837 | |
| | Family Members/Caregivers | 160 | |
| | Adults with Disabilities | 3 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 20 | |
| Health-Related Activities | 3034 total | | |
| | Trainees Total | 97 | |
| | Classroom Students | 187 | |
| | Professionals & Para-Professionals | 1569 | |
| | Family Members/Caregivers | 743 | |
| | Adults with Disabilities | 435 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 3 | |
| Recreation-Related Activities | 31 total | | |
| | Trainees Total | 3 | |
| | Classroom Students | 7 | |
| | Professionals & Para-Professionals | 8 | |
| | Family Members/Caregivers | 3 | |
| | Adults with Disabilities | 0 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 10 | |
| Quality of Life | 416 total | | |
| | Trainees Total | 0 | |
| | Classroom Students | 36 | |
| | Professionals & Para-Professionals | 115 | |
| | Family Members/Caregivers | 242 | |
| | Adults with Disabilities | 15 | |
| | Children/Adolescents with | | |

| | Legislators/Policymakers | 8 | |
|---|---|-----|--|
| | General Public/Community Members | 0 | |
| Other - Assistive Technology | 150 total | | |
| | Trainees Total | 0 | |
| | Classroom Students | 0 | |
| | Professionals & Para-Professionals | 150 | |
| | Family Members/Caregivers | 0 | |
| | Adults with Disabilities | 0 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 0 | |
| Other - Leadership | 55 total | | |
| | Trainees Total | 1 | |
| | Classroom Students | 50 | |
| | Professionals & Para-Professionals | 4 | |
| | Family Members/Caregivers | 0 | |
| | Adults with Disabilities | 0 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 0 | |
| Other | 24 total | | |
| | Trainees Total | 18 | |
| | Classroom Students | 2 | |
| | Professionals & Para-Professionals | 1 | |
| | Family Members/Caregivers | 1 | |
| | Adults with Disabilities | 2 | |
| | Children/Adolescents with Disabilities/SHCN | 0 | |
| | Legislators/Policymakers | 0 | |
| | General Public/Community Members | 0 | |
| | | | |
| Number of discrete training events EMPHASIS | and/or training series IN AREA OF | 195 | |
| | | | |

| Area of Emphasis | |
|--------------------------------|-----|
| Quality Assurance | 1 |
| Employment-Related Activities | 3 |
| Education & Early Intervention | 61 |
| Health-Related Activities | 117 |
| Recreation-Related Activities | 1 |
| Quality of Life | 5 |
| Other - Assistive Technology | 1 |
| Other - Leadership | 3 |
| Other | 3 |

Initial Outcome Measures

For recipients of regular, on-going trainings, percent reporting an increase in knowledge gained IN AREA OF EMPHASIS:

| Area of Emphasis | Initial Outcome Measure | | | |
|-------------------------------|---|---|-------------|--|
| Consumer Satisfaction Measure | | | | |
| Area of Emphasis | Definition | Consumer Satisfaction Measure | | |
| Health-Related Activities | | For those activities in which the UCEDD was the lead: | | |
| | | Number of activities | 95 | |
| | | Total Number surveyed | 608 | |
| | | Total Respondents | 574 | |
| | | Response rate | 94% | |
| | | | | |
| | | Number Responding | | |
| | | Strongly Agree | 432 (75.3%) | |
| | | Agree | 138 (24.0%) | |
| | | Disagree | 0 (0.0%) | |
| | | Strongly Disagree | 4 (0.7%) | |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) | 99% | | |

| | Response Rate Explanation No explanation is required as the response rate was 30% or greater. | | |
|--------------------------------|---|--|------------|
| | Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) | We sample the entire gresponse is voluntary. | roup and |
| Quality Assurance | | For those activities in v UCEDD was the lead: | hich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 496 |
| | | Total Respondents | 63 |
| | | Response rate | 13% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 45 (71.4%) |
| | | Agree | 17 (27.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 1 (1.6%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to promoting quality assurance activities for IWDD. (Strongly Agreed + Agreed) | 98% | |
| Education & Early Intervention | | For those activities in w | hich the |
| | | Number of activities | 7 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |

| | | Agree | 0 (0.0%) |
|-------------------------------|---|---|----------|
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained to support the achievement of the developmental and educational goals of IWDD from birth to 22 years of age. (Strongly Agreed + Agreed) | 0% | |
| Recreation-Related Activities | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to IWDD accessing and participating in recreational, leisure, and social activities in their communities. (Strongly Agreed + Agreed) | 0% | |
| Other - Assistive Technology | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |

| | | Number Responding | |
|-------|---|---|----------|
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to IWDD in other areas. (Strongly Agreed + Agreed) | 0% | |
| Other | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate 0% | 0% |
| | | Number Responding | |
| | | | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | (Strongly Agreed + Agreed) | 0% | |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Community Services: Technical Assistance

Direct problem-solving services provided by UCEDD faculty/staff to assist programs, agencies, or other entities in improving their outcomes, services, management, and/or policies. This includes TA provided to self-advocacy organizations, family support groups, and other organizations.

| Output Measures | |
|---|-----------------|
| Number of hours of technical assistance provided in the areas of emphasis | 695 Total hours |
| Area of Emphasis | Hours |
| Quality Assurance | 74 |
| Employment-Related Activities | 40 |
| Education & Early Intervention | 24 |
| Health-Related Activities | 265 |
| Housing-Related Activities | 12 |
| Recreation-Related Activities | 12 |
| Quality of Life | 3 |
| Other - Assistive Technology | 21 |
| Other - Cultural Diversity | 2 |
| Other - Leadership | 53 |
| Other | 189 |
| Number of hours of technical assistance per type of organization | 695 total hours |
| Type of Organization | Hours |
| State Health Dept. | 114 |
| Clinical Programs/Hospitals | 8 |
| Other Health-Related Program | 9 |
| Medicaid | 39 |
| Development Disabilities Council | 149 |
| Protection & Advocacy Agency (P&A) | 70 |
| Another UCEDD | 62 |
| State/Local General Education | 1 |
| Post Secondary Education (Community College-University) | 160 |

| Employment/Voc Rehab | 40 |
|---|-----|
| State/Local DD Agency or Provider | 166 |
| State/Local Social Services | 71 |
| Aging Organization | 10 |
| Health Agency - Public/Private | 4 |
| Mental Health/Substance Abuse Agency | 15 |
| Housing Agency/Provider | 2 |
| Provider Organization | 100 |
| Consumer/Advocacy Organization | 116 |
| Legislative Body | 12 |
| National Association | 66 |
| Independent research or policy organization | 25 |
| Other | 291 |

| Initial Outcome Measures | | | |
|--|----------------------------|------|--|
| | Total number of activities | 4 | |
| | Total number surveyed | 18 | |
| | Total number responding | 18 | |
| | Number responding | ding | |
| | Strongly Agree | 16 | |
| | Agree | 2 | |
| | Disagree | 0 | |
| | Strongly Disagree | 0 | |
| For TA recipients with a sustained relationship with the UCEDD, percent reporting an increase in any of the identified or requested item(s):Enhanced resources, Enhanced services, Strengthened networking of public and private entities across communities, Increased awareness of evidence-based practices, Enhanced capacity to assess current practices in relation to evidenced-based approaches, Identification of policy changes needed within the areas of emphasis: (Strongly Agreed + Agreed) | 100% | | |

| Consumer Satisfaction Measure | | |
|-------------------------------|------------|-------------------------------|
| Area of Emphasis | Definition | Consumer Satisfaction Measure |

| UCEDD was the lead: Number of activities 3 Total Number surveyed 0 Total Respondents 0 Response rate 0% Number Responding Strongly Agree 0 (0.0%) Agree 0 (0.0%) Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) We were unable to sample these participants. We were unable to sample these participants. We were unable to sample these participants. | | | | |
|---|---------------------------|--|----------------------|----------|
| Total Number surveyed Total Respondents Response rate 0% Number Responding Strongly Agree 0 (0.0%) Agree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) We were unable to sample these participants. Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | Health-Related Activities | | UCEDD was the lead: | |
| surveyed Total Respondents Response rate Number Responding Strongly Agree 0 (0.0%) Agree 0 (0.0%) Agree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) We were unable to sample these participants. Sampling Procedures (Random sampling procedures were used. If non-random sampling measures were used, explain why.) For those activities in which the UCEDD was the lead: Number of activities 1 Total Number surveyed Total Respondents 0 Response rate | | | Number of activities | 3 |
| Response rate Number Responding Strongly Agree 0 (0.0%) Agree 0 (0.0%) Disagree 0 (0.0%) Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) We were unable to sample these participants. We were unable to sample these participants. Sampling Procedures (Random sampling procedures were used. If non-random sampling measures were used, explain why.) Sampling Procedures were used. If non-random sampling measures were used, explain why.) Sampling Procedures were used. If non-random sampling measures were used, explain why.) Sampling Procedures were used. If non-random sampling measures were used, explain why.) Sampling Procedures were used. If non-random sampling measures were used, explain why.) | | | | 0 |
| Number Responding Strongly Agree | | | Total Respondents | 0 |
| Strongly Agree 0 (0.0%) Agree 0 (0.0%) Disagree 0 (0.0%) Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Strongly Agree 0 (0.0.0%) We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | | Response rate | 0% |
| Strongly Agree 0 (0.0%) Agree 0 (0.0%) Disagree 0 (0.0%) Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Strongly Agree 0 (0.0.0%) We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | | | |
| Agree 0 (0.0%) Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | | Number Responding | |
| Disagree 0 (0.0%) Strongly Disagree 0 (0.0%) Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Por those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents Response rate Number Responding | | | Strongly Agree | 0 (0.0%) |
| Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health of the health oare needs of IWDD. We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | | Agree | 0 (0.0%) |
| Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. We were unable to sample these participants. We sample the entire group and response is voluntary. For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | | Disagree | 0 (0.0%) |
| community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. (Strongly Agreed + Agreed) Response Rate Explanation The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance Quality Assurance For those activities in which the UCEDD was the lead: Number of activities Total Number surveyed Total Respondents Response rate Number Responding | | | Strongly Disagree | 0 (0.0%) |
| The response rate is below 30%, please provide the reason(s). Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) Quality Assurance For those activities in which the UCEDD was the lead: Number of activities 3 Total Number surveyed Total Respondents 0 Response rate 0% Number Responding | | community who reported satisfaction with the knowledge and skills gained related to the health care needs of IWDD. | 0% | |
| (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) (Ruality Assurance) (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) (For those activities in which the UCEDD was the lead: Number of activities Total Number surveyed Total Respondents Response rate (Number Responding) | | The response rate is below 30%, | · | |
| UCEDD was the lead: Number of activities 3 Total Number surveyed 0 Total Respondents 0 Response rate 0% Number Responding | | (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures | | roup and |
| Total Number surveyed Total Respondents Response rate Number Responding | Quality Assurance | | | |
| surveyed Total Respondents Response rate Number Responding | | | Number of activities | 3 |
| Response rate 0% Number Responding | | | | 0 |
| Number Responding | | | Total Respondents | 0 |
| | | | Response rate | 0% |
| | | | | |
| Strongly Agree 0 (0.0%) | | | Number Responding | |
| | | | Strongly Agree | 0 (0.0%) |
| Agree 0 (0.0%) | | | Agree | 0 (0.0%) |

| | | Disagree | 0 (0.0%) |
|--------------------------------|--|---|----------|
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to promoting quality assurance activities for IWDD. (Strongly Agreed + Agreed) | 0% | |
| Education & Early Intervention | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 7 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained to support the achievement of the developmental and educational goals of IWDD from birth to 22 years of age. (Strongly Agreed + Agreed) | 0% | |
| Child Care-Related Activities | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | Number Responding | |

| | | Strongly Agree | 0 (0.0%) |
|-------------------------------|--|---|----------|
| | | | 0 (0.0%) |
| | | Agree | ` ' |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to appropriate child care for CWDD and serving as a resource for family members/caregivers of CWDD to access and use appropriate child care. (Strongly Agreed + Agreed) | 0% | |
| Recreation-Related Activities | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to IWDD accessing and participating in recreational, leisure, and social activities in their communities. (Strongly Agreed + Agreed) | 0% | |
| Other - Leadership | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 3 |
| | | Total Number surveyed | 32 |

| | | Total Respondents | 11 |
|-------|---|---|-----------|
| | | Response rate | 34% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 5 (45.5%) |
| | | Agree | 6 (54.5%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the knowledge and skills gained related to IWDD in other areas. (Strongly Agreed + Agreed) | 100% | |
| Other | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 3 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | (Strongly Agreed + Agreed) | 0% | |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Model Services

Specialized services delivered with the intention to enhance the well being and status of the recipient and not for testing new practices and may be integrated with training, research, and/or dissemination functions. Includes direct problem-solving services provided to assist individuals with developmental and other disabilities and their families.

| Output Measure | |
|---|----|
| Number of specialized services offered by the | |
| UCEDD to enhance the well being and status of the | 78 |
| recipient | |

| Initial Outcome Measures | | |
|--|--------------------------|--|
| Number of individuals who received specialized services from the UCEDD to enhance the well being and status of the recipient | 5747 | |
| Area of Emphasis | Number of Individuals | |
| Quality Assurance | 160 | |
| Child Care-Related Activities | 7 | |
| Employment-Related Activities | 46 | |
| Education & Early Intervention | 175 | |
| Health-Related Activities | 4690 | |
| Recreation-Related Activities | 199 | |
| Quality of Life | 306 | |
| Other - Assistive Technology | 161 | |
| Other - Leadership | 3 | |

| Consumer Satisfaction Measure | | | |
|-------------------------------|------------|---|-------------|
| Area of Emphasis | Definition | Consumer Satisfact | ion Measure |
| Health-Related Activities | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 17 |
| | | Total Number surveyed | 936 |
| | | Total Respondents | 787 |
| | | Response rate | 84% |

| | | Number Responding | |
|-------------------|---|---|-------------|
| | | Strongly Agree | 659 (83.7%) |
| | | Agree | 128 (16.3%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to healthy outcomes for IWDD. (Strongly Agreed + Agreed) | 100% | |
| | Response Rate Explanation No explanation is required as the response rate was 30% or greater. | | |
| | Sampling Procedures (Random sampling is anticipated. Indicate if non-random sampling procedures were used. If non-random sampling measures were used, explain why.) | We sample the entire g response is voluntary. | roup and |
| Quality Assurance | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to promoting quality assurance activities for IWDD. | 0% | |

| | (Strongly Agreed + Agreed) | | |
|--------------------------------|---|---|------------|
| Education & Early Intervention | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 8 |
| | | Total Number surveyed | 58 |
| | | Total Respondents | 58 |
| | | Response rate | 100% |
| | | Number Responding | |
| | | Strongly Agree | 55 (94.8%) |
| | | Agree | 1 (1.7%) |
| | | Disagree | 2 (3.4%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to achieving the developmental and educational goals of IWDD from birth to 22 years of age. (Strongly Agreed + Agreed) | 97% | |
| Child Care-Related Activities | | For those activities in v UCEDD was the lead: | vhich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |

| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to appropriate child care for CWDD and serving as a resource for family members/caregivers of CWDD to access and use appropriate child care. (Strongly Agreed + Agreed) | 0% | |
|-------------------------------|--|---|----------|
| Employment-Related Activities | | For those activities in which the UCEDD was the lead: | |
| | | Number of activities | 3 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to employment, job choice, and career opportunities for IWDD. (Strongly Agreed + Agreed) | 0% | |
| Recreation-Related Activities | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 4 |
| | | Total Number surveyed | 96 |
| | | Total Respondents | 44 |
| | | Response rate | 46% |
| | | | |
| | | Number Responding | |

| | | Strongly Agree | 31 (70.5%) |
|------------------------------|---|---|------------|
| | | Agree | 7 (15.9%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 6 (13.6%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to IWDD accessing and participating in recreational, leisure, and social activities in their communities. (Strongly Agreed + Agreed) | 86% | |
| Quality of Life | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 2 |
| | | Total Number surveyed | 499 |
| | | Total Respondents | 66 |
| | | Response rate | 13% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 46 (69.7%) |
| | | Agree | 19 (28.8%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 1 (1.5%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to IWDD in other areas. (Strongly Agreed + Agreed) | 98% | |
| Other - Assistive Technology | | For those activities in w | hich the |
| | | Number of activities | 36 |
| | | Total Number surveyed | 5,616 |
| | | | |
| | | Total Respondents | 936 |

| | | Number Responding | |
|--------------------|---|---|-------------|
| | | Strongly Agree | 828 (88.5%) |
| | | Agree | 72 (7.7%) |
| | | Disagree | 36 (3.8%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to IWDD in other areas. (Strongly Agreed + Agreed) | 96% | |
| Other - Leadership | | For those activities in w UCEDD was the lead: | hich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |
| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to IWDD in other areas. (Strongly Agreed + Agreed) | 0% | |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Community Services: Demonstration Services

Services that field test promising or exemplary practices and may be integrated with training, research, and/or dissemination functions.

| Output Measure | |
|--|---|
| Number of services offered solely by the UCEDD that are being field tested as promising or exemplary/best practices | 0 |
| Number of services offered in partnership with others that are being field tested as promising or exemplary/best practices | 1 |

Initial Outcome Measures

UCEDD and/or partnering agency adopts findings from field test to make at least one modification to the UCEDD services being field tested

1. SOCIAL - Aspirations - Monthly Reunions

No

| Consumer Satisfaction Measure | | | |
|-------------------------------|------------|--|-----------|
| Area of Emphasis | Definition | Consumer Satisfaction | n Measure |
| Recreation-Related Activities | | For those activities in wh UCEDD was the lead: | ich the |
| | | Number of activities | 1 |
| | | Total Number surveyed | 0 |
| | | Total Respondents | 0 |
| | | Response rate | 0% |
| | | | |
| | | Number Responding | |
| | | Strongly Agree | 0 (0.0%) |
| | | Agree | 0 (0.0%) |
| | | Disagree | 0 (0.0%) |
| | | Strongly Disagree | 0 (0.0%) |

| | Percentage of individuals in the community who reported satisfaction with the services and/or supports received related to IWDD accessing and participating in recreational, leisure, and social activities in their communities. (Strongly Agreed + Agreed) | 0% |
|--|---|----|
|--|---|----|

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Research

Implementation of basic and applied research, program evaluation, and analysis of public policy on issues impacting individuals with developmental disabilities.

Output Measure

Number of active research activities

73

Initial Outcome Measures

Have you adopted research findings from research activities completed in current or prior years by modifying a fiscal year?

Yes

Year: 2022

CB - Direct Service Professional (DSP) Workforce Crisis Sur

HEALTH - DHP Needs Assessment Workgroup Meetings &

HEALTH - Fall 2021 DHP Meeting

HEALTH - Healthcare Needs Assessment Listening Session

Ohio's statewide consortium: Promoting sustainability of tran with intellectual disabilities

RRTC - DEEP Year 3 Evaluation

RRTC - Disability Experiences Expert Panel (DEEP) Meeting

RRTC - Study 2: Prevalence DIAAID Interviews

RRTC - Study 2: Prevalence DM-ID:2 Interviews

Year: 2021

RRTC - Research Experience Expert Panel (REEP) Monthly

RRTC - Study 1B Clinical Interviews

Year: 2020

DODD - Technology Project - Research: Prevalence of Rem

HEALTH--Ohio COVID-19 Vulnerable Populations Needs As

National Training Initiative SCOPE Grant

RRTC - Clinician Focus Group Session #1

RRTC - Development and Piloting of Quality of Life Survey

RRTC - Study 1: Measures Clinical Interviews

| RRTC - Study 1: Measures Cognitive Interviews |
|---|
| RRTC - Study 3: Guidelines Clinician Survey |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction CORE FUNCTION: Product Development and Information Dissemination

Distribution of knowledge-based information through UCEDD developed products and activities.

| Output Measures | | |
|---|-----|--|
| Number of products developed in the current Fiscal Year | 113 | |
| Number of products disseminated (regardless of whether they were created in the current or previous Fiscal Years) | 5 | |
| Number of conferences and conference presentations | 141 | |

Consumer Satisfaction Measure

How satisfied were individuals surveyed with the information on the UCEDD's website? (At least 50 people should be surveyed.)

| *Number surveyed | 62 |
|--|------|
| Number responding (auto filled from below) | 62 |
| Response rate | 100% |
| Number Responding | |
| *Highly satisfied | 46 |
| *Satisfied | 16 |
| *Satisfied somewhat | 0 |
| *Not at all satisfied | 0 |
| Total | |
| Percent of Total who were | 100% |

OIDD Program Performance Report, Part 2: Measures of Improvement and Consumer Satisfaction Leveraging

Outcome Measure Number of grants and contracts and other funds leveraged. 27

This report provides details on the funds leveraged by the UCEDD for a particular year. The OIDD core funds are subtracted from the figures provided in the project records.

| FY 2023 OIDD Program Performance Report (PPR) | | | | |
|---|-----------------|----------------------|--|--|
| OH-The Nisonger Center, UCEDD/LEND | | | | |
| TOTAL FUNDING LEVERAGED (excluding UCEDD core funding): | \$11,706,972.00 | | | |
| Source | Funds Leveraged | % of Total Leveraged | | |
| Federal | \$3,743,627.00 | 32 % | | |
| ACL | \$1,800,554.00 | | | |
| HRSA | \$738,000.00 | | | |
| CDC | \$572,500.00 | | | |
| Other HHS | \$136,719.00 | | | |
| Other Federal | \$1,073,289.00 | | | |
| State | \$375,013.00 | 3 % | | |
| Local | \$3,633,902.00 | 31 % | | |
| Other | \$3,954,430.00 | 34 % | | |
| Service Organization | \$32,077.00 | | | |
| Fee for Services | \$2,502,124.00 | | | |
| University | \$714,900.00 | | | |
| Donations | \$675,045.00 | | | |
| Other | \$30,284.00 | | | |

OIDD Program Performance Report, Part 3: Measures of Collaboration

Required Reporting Elements

*1. Identify the critical issues/barriers affecting individuals with developmental disabilities and their families in your State that the DD Network (The State DD Council, Protection and Advocacy Agency, and UCEDD) has jointly identified:

The Ohio DD network has identified several critical issues/barriers affecting people with developmental disabilities and their families in the state. The resources of the state network have been focused to address these priorities: 1) The care of individuals with Dual Diagnosis (ID/MI), 2) Training in legislative advocacy for people with disabilities, family members, and allies, 3) Improving supports to families of individuals with DD, 4) Use of technology to promote community living and increased self-determination for individuals with DD, 5) Improving the health of Ohioans with disabilities, including elevating Ohioans with disabilities to a priority population in the state's health equity efforts, and addressing health inequities resulting from structural racism and other social drivers of health, 6) Addressing the long-term impact of COVID 19 on underserved Ohioans with developmental disabilities and their families, and 7) Assessing and addressing barriers to creating a well-trained workforce to serve Ohioans with developmental disabilities and their families. Barriers encountered vary by issue and project and often overlap. For example: the care of individuals with Dual Diagnosis and improving the health of Ohioans with disabilities share the difficulties of a lack of adequately trained health care professionals. Both of these initiatives rely on a trained and knowledgeable workforce to improve the mental and physical health, well-being and quality of life of Ohioans with disabilities. The long-term effects of COVID 19 continue to frame network and state resources on the issues/concerns of individuals with DD and their families such as access to care, vaccine hesitancy, and evidence-based information dissemination. In addition, the network addresses the pressing problems of recruiting and maintaining a trained workforce of professional and direct care providers including childcare professionals. There is a targeted effort to address innovative solutions to increase the workforce for individuals with developmental disabilities and their family members, and to address health inequities among those from underserved populations.

2. Describe the strategies collaboratively implemented by the DD Network for at least one of the issues/barriers identified above:

*a. Issue/Barrier

Improving the mental and physical health and well-being of people with developmental disabilities and their families.

All network partners (and additional ACL partners: Aging, SILC, Assistive Technology) participated in a statewide Vaccine Access collaborative to improve COVID vaccine rates among ACL populations, including individuals with developmental disabilities, their family members, and direct service professionals. Nisonger has targeted addressing vaccine hesitancy and misinformation among the individuals with developmental disabilities and their family members who are Somali. Through a local Somali partner, we produced a video profiling leaders from the Somali community addressing misinformation about vaccines and are disseminating it through our DD network. Nisonger's Ohio Disability and Health project is an example of AIDD

| *b. Provide a brief description of the collaborative strategies to address issue/barrier and expected outcome(s): | partner collaboration on a critical health issue. We jointly operate, along with Ohio's Cincinnati UCEDD and the Ohio Department of Health, training and technical assistance activities to support the health and well-being of Ohioans with disabilities. The UCEDDs cooperatively work with the network and federal/state agencies to provide training and technical assistance to increase the capacity of healthcare providers to provide quality health care and access to care to people with disabilities. The network, in collaboration with other Administration on Disabilities (AoD) partners, is actively engaged in studying and implementing remote supports (monitoring) to expand the community living options of individuals with DD. Through focus groups and surveys, we have identified and are addressing concerns of advocates, family members and community providers. Another cross-cutting activity is the Family Resource Network of Ohio (FRNO) helping to support individuals with developmental disabilities and their families by providing resources, tools, and trainings to achieve an informed and engaged life. FRNO is a collaboration among the state Department of Developmental Disabilities, the 2 Ohio UCEDDs and the Ohio DD Council. Together the network provides trainings across the state on Charting the LifeCourse, a model to support individuals with disabilities and their families. All Ohio DD partners participate in the State DD Awareness and Legislative Advocacy Day to recruit advocates their family member, allies, and others to participate in a day long legislative advocacy event at the state capital. |
|---|---|
| *c. Check applicable areas of emphasis | Quality Assurance Health-Related Activities Employment-Related Activities Quality of Life Other - Assistive Technology Other - Leadership Other: Supporting Families |
| *d. Describe the UCEDD's specific role and responsibilities in this collaborative effort. Include any technical assistance expertise you can provide to other States in this area | The UCEDD provides interdisciplinary expertise for professional services (including direct support personnel), training, research, and program evaluation. We coordinate the state-wide Family Resource Network modeled after the Missouri UCEDD's Charting the LifeCourse framework for families and individuals with DD and provide training in Charting the LifeCourse across the state. We continue to maintain a Smart Home Discovery Place, (SHDP) a hands-on interactive demonstration site equipped with the latest technologies to support self-determination, independence and quality of life, and home choice. We developed and provided virtual tours of the SHDP to individuals and families during the pandemic and are now providing both virtual and in person tours. We also host a Technology Summit profiling smart home supports allowing individuals with DD and their families the opportunity to explore technology and discuss individual technology barriers with vendors, providers, and experts in the field. This project is a partnership between the Nisonger Center UCEDD, the Department of Developmental Disabilities, Ohio DD Council, Assistive Technology of Ohio, and private sector tech firms and providers. |

*e. Briefly identify problems encountered as a result of this collaboration, and technical assistance, if any, desired

Funding continues to be a major barrier to maintenance and expansion of several promising projects. The DD partners have been working closely for a number of years and have had little leadership turnover in the past 5 years and hence, work well together.

*f. Describe any unexpected benefits of this collaborative effort

We continue to collaborate and strengthen our partnership and collaborations with our State Department of Developmental Disabilities, Cincinnati UCEDD, P&A, the CILs, the Area Agencies on Aging, Ohio Brain Injury Program, and AT Ohio (Tech Act provider for Ohio). An emerging area of technical assistance from our Disability Experience Expert Panel (DEEP) is the incorporation of "Clear Language" in every aspect of the UCEDD but particularly in product development and dissemination. The DEEP provides technical assistance in the translation of UCEDD products so they are accessible to individuals with DD, those with low literacy, the underserved, and non-native English speakers. The issue of Clear Language accessibility is an area of interest for many of our partners and one in which we endeavor to share resources.

Optional Reporting Elements

3. Describe your collaborations with non-DD Act funded programs:

- a. List which disability populations benefited from your collaborations.
- b. Estimate the number of individuals with disabilities, other than developmental disabilities, who were affected by your collaborations with non-DD Act funded programs.
- c. Estimate the number of individuals with developmental disabilities who were affected by your collaborations with non-DD Act funded programs.

Our non-DD act funded partners are numerous and include: The Ohio Department of Developmental Disabilities, Ohio Department of Health, Opportunities for Ohioans with Disabilities (state Vocational & Rehabilitation office), Ohio Department of Mental Health and Addiction Services, Ohio Department of Education, and some CILs. We also interact closely with the Ohio Department of Jobs and Family Services and the Franklin County and Columbus City Public Health departments. a. List which disability populations benefited from your collaborations. Our efforts with the Ohio Department of Health have included all Ohioans with disabilities (developmental and acquired). Our Ohio Disability and Health Program (funded through the CDC) promotes improved health equity and access for Ohioans with disabilities across the state. This past year we extended our health wellness outreach through the work of a Community Health Worker. Our annual Tech Summit has encouraged the inclusion of technology options across many county boards of developmental disability and the state department of DD. b. Estimate the number of individuals with disabilities, other than developmental disabilities, who were affected by your collaborations with non-DD Act funded programs. Our increased collaboration with our AoD partners (Department of Aging, Ohio Brain Injury Program, and Assistive Technology of Ohio) has expanded the number and types of disability populations we have impacted. It is difficult to estimate because some projects impact people indirectly. Our best estimate is approximately 1,000 - 5,000. c. Estimate the number of individuals with developmental disabilities who were affected by your collaborations with non-DD Act funded programs. Approximately 400-500.

OIDD Program Performance Report, Part 4: UCEDD Government Performance and Results Act (GPRA) Measures

Data for the GPRA measures that has been collected through surveys of interdisciplinary pre-service trainees who are asked 2 questions at 2, 5, and 10 years post training.

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OH-The Nisonger Center, UCEDD/LEND

Data for the GPRA measures is collected through surveys of interdisciplinary pre-service trainees who are asked 2 questions at 2, 5, and 10 years post training (2021, 2018, 2013).

| Measure 1: | Survey Question | number of former trainees to whom surveys were sent | Number of former trainees responding | Reported number of individuals who are receiving services |
|---|---|--|--------------------------------------|---|
| Percent of individuals with | What is the number of | | 2 years: 11 | 2 years: 6859 |
| developmental disabilities who are receiving services through | individuals with developmental disabilities who are receiving | | 5 years: 10 | 5 years: 40587 |
| activities in which | direct services through | 66 | 10 years: 8 | 10 years: 4167 |
| UCEDD-trained professionals are involved. | activities in which you are involved? | | Total: 29 | Total: 51613 |
| Measure 2: | Survey Question | number of former trainees to whom surveys were sent | Number of former trainees responding | Number of "Yes" Responses |
| Percent of UCEDD trainees who | | | 2 years: 23 | 2 years: 13 |
| demonstrate leadership in the developmental disabilities field position in the field of | 66 | 5 years: 19 | 5 years: 13 | |
| at 2, 5, and 10 years after | · · | | 10 years: 16 | 10 years: 8 |
| completion of UCEDD training. | | | Total: 58 | Total: 34 |

| Number of individuals to whom surveys were sent. | 66 |
|--|----|
|--|----|

OIDD Program Performance Report, Part 5: Expanding the Public Health Workforce within the Disability Network Program Measures

Outcome Measures

*Types and Numbers of public health professional(s) FTEs hired

| Program Manager | 1.0 |
|--|-----|
| Laboratory Personnel | 1.0 |
| Total number of full-time equivalent staff hired | 2.0 |

* Summary of activities these public health professionals engaged in to advance public health

Through a memorandum of understanding with the Ohio Department of Health, we have a Health Policy Specialist who shares effort between the Nisonger Center and the Ohio Department of Health's Office of Health Opportunity to promote the inclusion of Ohioans with disabilities in all health/public health programs and policies. One program at the Ohio Department of Health, Creating Healthy Communities, offers health promotion grants to all Ohio county health departments. Through this relationship, changes were made to the grant application template requiring applicants to identify and plan for the inclusion of people with disabilities in all proposed programs. The Health Policy Specialist reviews all outgoing competitive grant solicitations to ensure that proposals had the potential to meet the needs of people with disabilities and do not widen existing gaps. He provides technical assistance to local and county health departments on including people with disabilities. This partnership resulted in a ten-fold increase in the number of community-based resources that were developed specifically for people with disabilities, ranging from creating accessible opportunities for active participation in the community to prioritizing disability and inclusion in community planning efforts. Nisonger Center, using ACL supplemental funding also recently hired (1) one full-time certified Community Health Worker (i.e., serves as a linkage coordinator) to address barriers to healthcare and health equity for Ohioans with developmental disabilities and (2) a clinical research assistant to increase efforts around public health and persons with developmental disabilities. The linkage coordinator is tasked with linking people with intellectual and developmental disabilities and their caregivers to community-based resources to improve their health and wellness. The Community Health Worker will create a guide of accessible opportunities for health and wellness, ranging from clinical services to inclusive exercise programs. The full-time clinical research assistant assists in these efforts. Leveraging the connections and resources compiled by the Community Health Worker and our relationship with Ohio Office of Health Equity, we will explore opportunities to provide telehealth training and health promotion programs in health disparate neighborhoods and regions in Ohio, including Appalachia. The newly hired clinical research assistant has also helped lead a study - funded by the Ohio DD Council on the nursing workforce shortage in Ohio. This study should wrap up by end of September 2024.

OIDD Program Performance Report, Optional Appendix

Other Outcomes or Highlights

You may supply additional noteworthy information. Please clearly note the applicable Areas of Emphasis and/or Core Function(s) for any outcomes or highlights presented in this section. This Appendix is not a component of the Program Performance Report, but is provided for your use at your discretion.

We are increasing our use of social media to expand our reach and increase our dissemination efforts. We generated 245 Facebook posts which is on track to be a slight increase from the previous year. Engagement numbers have increased as the number of "likes" has increased by 10%. The total number of people we reached with our posts was 213,910. This is a slight increase from the previous year and we anticipate this trend to improve as we have recently started an initiative for more strategic social media posting. We had a significant decrease in total impressions on our Twitter account, but this reflects both fewer posts due to an employment gap between social media managers and an overall trend of decreased engagement on Twitter which may be representative of a greater overall trend with Twitter as a platform. We are currently reevaluating Twitter to determine whether it will remain in our social media strategy moving forward. Based on Google Analytics, our website had a total of 96,115 unique visitors between July 1, 2020 and June 30, 2021. These visitors were predominantly from the US, but we had visitors from Canada, India, United Kingdom, Philippines, China, Australia, Germany, Ireland and many other counties from around the world. On average, these visitors visited approximately 2.2 different webpages per session and approximately 15% of our visitors were return visitors, with 85% new visitors. Our top 3 webpages after our front page were: Aspirations, Transition Options in Postsecondary Settings (TOPS) and Ohio Disability and Health Program Training.

Appendix A: Nisonger Center UCEDD Work Plan Outcomes (FY-2023)



ACL/OIDD Grant # 90-DDUC-0038 Program Performance Report PY23

WORK PLAN PROGRESS REPORT

STRATEGIC OBJECTIVE 1: TO SUPPORT THE SUCCESS AND COMMUNITY INCLUSION OF PEOPLE WITH DEVELOPMENTAL DISABILITIES THROUGH THE CREATION, IMPLEMENTATION, AND DISSEMINATION OF EFFECTIVE SUPPORTS FOR EDUCATION AND LEARNING ACROSS THE LIFESPAN.

Goal 1: Support success of students with disabilities in their transition to college and careers.

Strategy 1.1: Increase evidence-based services for supporting participation of students in college and careers in middle school, high school, and post-secondary.

UNMET.

Strategy 1.2: Provide training on evidence-based transition services including postsecondary education for families.

ONGOING.

All first-year students received the Pre-ETS curriculum. Additionally, grant funding was secured to increase the use of industry-recognized credentials and apprenticeships for TOPS students.

EIT has provided ongoing technical assistance as well as one curriculum training.

The NSF project has presented at two conferences on their STEM work. Also, the project has established a student organization focused on reciprocal mentorship. They have met at least monthly during the academic year.

Here is a testimonial from autistic participants of our NSF Alliance of Students with Disabilities for Inclusion, Networking, and Transition Opportunities in STEM:

"Last week, my colleagues and I had the privilege to attend the annual conference of the National Science Foundation (NSF)'s Alliance of Students with Disabilities for Inclusion, Networking, and Transition Opportunities in STEM (TAPDINTO-STEM) at the University of Missouri-Kansas City. During the conference, we held a panel session with two moderators and three neurodivergent students, including myself. We discussed strategies to proactively accommodate variability and improve campus climate to make college more accessible for individuals with disabilities. I really enjoyed networking and meeting with other students, faculty, and researchers across the nation who are a part of this initiative. I want to thank Dr. Andrew Buck, and Karen Krainz-Edison for their continued support and mentorship."

Goal 2: Increase the capacity of professionals and paraprofessionals to provide evidence-based services and supports for people with, or at-risk for, disabilities and their families in community, education, and work settings.

Strategy 2.1: Provide preservice training for 20 long-term trainees each year to support people with disabilities in educational and community settings.

UNMET.

Strategy 2.2: Provide training and technical assistance regarding disability inclusion that is rated as useful and high-quality by community childcare and early intervention providers in the state of Ohio.

ONGOING.

Five different members of the Early Learning Program staff are registered to provide training through Ohio's Professional Registry (OCCRRA) and have trainings available. We are working to disseminate these trainings both to our direct partners (e.g., Early Head Start, OSU Child Care Programs) and to other community centers. Staff have received several requests for additional training from schools and child care programs.

Strategy 2.3: Provide professional development resources for early childhood workforce to help them meet the needs of children and families impacted by the opioid crisis, addition and/or trauma.

UNMET.

Strategy 2.4: Provide professional development to OSU students on supporting postsecondary students with disabilities in a variety of settings (academic, social, employment).

ACHIEVED.

TOPS hosted 60 undergraduate mentors over the academic year. Two undergraduate students completed long-term placements with TOPS spending 8 hours each week in the fall and 20 hours each week in the spring focused on their individual interests. Finally, TOPS hosted two Occupational Therapist Doctoral students for their final capstones. One student was focused on building the TOPS sexual health curriculum and the other was focused on building capacity for TOPS students to use mobile technologies.

Strategy 2.5: Provide technical assistance to professionals supporting students in postsecondary settings.

ACHIEVED.

TOPS presented five conference presentations during FY23 on inclusive postsecondary education. The Ohio Statewide Consortia hosted eight partner meetings. The Great Lakes Inclusive Postsecondary Education Alliance hosted two meetings during FY23.

Strategy 2.6: Expand partnerships with private companies serving children with ID/DD to build capacity of providers practicing evidence-based family- and person-centered services to children with ID/DD/ASD and expand opportunities for funding, research, and public/private partnerships.

UNMET.

Goal 3: Increase accessibility of high-quality educational and vocational services to students and families from underserved communities and populations.

Strategy 3.1: Increase the racial, ethnic, and socioeconomic diversity of students/families receiving services from the Early Learning Program such that at least 10% of families served by the program are from underserved communities or populations.

UNMET.

Strategy 3.2: Engage in focused efforts to increase the diversity of the workforce within the Nisonger Early Learning Program.

IN PROGRESS.

We have worked to disseminate job ads more broadly to ensure we are recruiting a diverse pool of candidates to our program. This has been successful at recruiting high quality candidates from racial and ethnic minority backgrounds among recent hires. Currently about 20% of our program staff identifies as a racial or ethnic minority (nearly double the proportion from one year ago). However, notably (although not surprisingly, given overall demographics or licensed intervention professionals) the majority of these individuals are among our teaching staff, rather than intervention or administration staff. We have encouraged and invested in a current staff member participating in a minority leadership

cohort (including paying fees for the program) and continue to work actively to build opportunities for diverse staff members.

Strategy 3.3: Increase the diversity of students within the OSU TOPS program from an average 10% to 30%.

IN PROGRESS.

Scholarships increased significantly during this fiscal year. \$78,000 was brought in by JPMC for fall semester hardship scholarships.

Cultural competency trainings have not begun to be shared with TOPS and ACE! members.

TOPS is increasing diversity in its 2023 cohort. There is still more intentional work to be done.

Strategy 3.4: Increase postsecondary education opportunities in underserved areas of Ohio.

ACHIEVED.

TOPS and ACE! were shared in several new underserved areas of Ohio including Marion county, Licking County and Hocking County. Cleveland State University has planning for a new inclusive postsecondary program which will take its first students in Fall 2024. A database has been created for data collection, and IRB has been written and approved, and data collection will begin in August.

Here is a short vignette illustrating a real-life ACE! participant and the beneficial outcomes of our program:

We work with an autistic individual who throughout his life watched his family struggle; he wanted a brighter future. Once he decided going to college would change his financial outcomes, he contacted the Ace! program to support navigation of college life. He works closely with staff from the Ace! program; he is open and they are non-judgmental. In addition, he utilizes every service and agency determined to support his success. He is in his third summer internship at JPMC, graduated May 2023 with his Associates of Arts in Finance from Columbus State Community College and is enrolled at OSU's Fisher College of Business where he will complete his Bachelor of Science Business Administration with a specialization in Finance. His goal is to provide financial literacy education and financial planning to lower income families.

Strategy 3.5: Support families of young children living in poverty with a family member with a disability.

UNMET.

Strategy 3.6: Improve early identification in underserved populations such as racial and ethnic minorities and those residing in rural areas.

Goal 4: Increase participation of community stakeholders, including people with disabilities, in research and clinical service projects.

Strategy 4.1 Develop and disseminate to researchers and stakeholder communities a consultation model to enable collaboration of stakeholders in the early autism intervention research process.

ACHIEVED.

Dr. Walton and collaborator Dr. Allison Wainer (Rush University Medical Center) completed a seven-chapter workbook for researchers titled, "A Workbook to Support Community-Engaged Autism Research: Lessons from Project STEER." It is freely available online at https://nisonger.osu.edu/wp-content/uploads/2023/04/A-Workbook-to-Support-Community-Engaged-Autism-Research Fillable.pdf. In addition, the team is working to publicize and disseminate this work through research articles (including one under review) and conference presentations. They have received several inquiries and requests for additional materials or consultation related to the project during the last year.

Strategy 4.2: Increase engagement of stakeholders at all phases of the research process.

IN PROGRESS.

Dr. Walton's existing and new projects continue to engage stakeholders, including autistic people, in research activities. Dr. Walton has actively recruited several lab members (e.g., undergraduate students, graduate students, staff collaborators) who identify as autistic and who are engaged in multiple projects. In addition, multiple projects with pending funding include formal stakeholder advisory boards to guide the research process from start to finish. Dr. Walton has included the active participation of stakeholder boards and stakeholder (especially autistic) collaborators across five different grant applications in the past year (allowing funding for these stakeholders to be appropriately compensated) and is committed to integrating stakeholder engagement across projects going forward.

Strategy 4.3: Conduct at least three annual outreach activities aimed at engaging parents in Early Learning Program activities.

ACHIEVED.

The Early Learning Program has been able to resume a range of parent engagement events during the past year, including a family barbeque, picnic park outing, preschool "graduation" and a holiday party. Teachers also hold twice annual conferences to educate and update parents about their children's health and development. These events have been well attended by families and staff and families have expressed great appreciation at being

able to meet in person again. Our staff continues to plan new activities for the upcoming year, including a mix of social and educational events.

Goal 5: Continue to develop the Nisonger Early Learning Program as a "model program" for early childhood inclusion.

Strategy 5.1: Formally assess and operationalize the NELP inclusion model to increase quality and facilitate dissemination of the model.

IN PLANNING PHASE.

During the last year we completed our first-year "pilot" of a new preschool intervention model involving fully itinerant services. This model has been successful in promoting full inclusion of children across all of our age groups and we plan to continue it in the coming years. In addition, Dr. Walton has joined a workgroup of professional involved with inclusive early childhood education to learn more about operationalizing high-quality preschool models.

Strategy 5.2: Develop relationships with early childhood programs to introduce our inclusion model and provide support to promote inclusion.

IN PROGRESS.

We have continued to grow and develop relationships with a network of child care programs in the Columbus, Ohio area through the Ohio State Early Head Start Child Care Partnership. Our staff visits classrooms and teachers in these programs, provides support for promoting development (with an emphasis on social emotional development), supports individualized behavioral and developmental plans, and performs developmental monitoring and referrals as needed. This has led to a substantial increase in the inclusion and maintenance of children with disabilities within early head start programs.

Strategy 5.3: Maintain 5-Star Step-Up-to-Quality rating throughout through 2027.

IN PROGRESS.

Staff have continued to conduct quality improvement activities required by the Step Up to Quality Program and maintain and submit records as needed for this program. We anticipate an unannounced visit sometime in Fall 2023.

Testimonials from Parents:

"We were connected with Nisonger before [our daughter with Down syndrome] even started attending through Help Me Grow and from some of those first interactions with the staff we knew there was a family atmosphere. The inclusive nature is unbelievable and as we are soon to be graduating from Nisonger I will miss the students who have been part of each of [my daughter's] classrooms who have

befriended her and helped her as have all of her teachers and support staff. I appreciate how even during a pandemic the staff was dedicated to getting the students back in the classroom and back together even with measures like masks, disinfection and no entry for parents, the love and dedication is felt even if as parents/children we do not express our thanks and appreciation enough. Overall the staff has also helped our family advocate for [my daughter] and I am so happy we petitioned to keep [her] at Nisonger instead of the district pre-school she needed the extra couple of years in this awesome environment."

"Our son has complex care needs, and I distinctly remember how delighted and surprised I was at our very first visit to his Nisonger classroom. Every question I asked was answered with an enthusiastic, "Yes, we can do that!" Then and now, I always describe our Nisonger experience as "dreamy" - and I wish the rest of the world could be living in the same dream!"

"Our son has really blossomed since beginning his time at Nisonger. He's happier, speaks more and we know it's due to the quality of teaching and environment."

"I feel my child is and safe and loved at the Nisonger center and I appreciate the opportunity to connect with children of varied backgrounds and abilities."

"Our son was born with a congenital heart defect and required open heart surgery at 18 days old. During an extended hospitalization and surviving multiple strokes, it was evident that our medically fragile son would require extensive ongoing therapies and services to promote his development during his recovery. We were told by his medical team that most parents have someone stay home with their medically fragile kids in order to ensure that receive all therapies to maximize recovery. As a young professional, this was devastating news and I worried about ensuring that my son received the best care to maximize his development while also launching my professional career to support our family. The task felt impossible until our family learned about the Nisonger Early Learning Program! Nisonger provided my family a supportive and safe environment for our son to receive his early invention services through Ohio's Help Me Grow Program. Not only did he receive his weekly physical and occupational therapy sessions at Nisonger but his teachers worked with his interventional specialist to ensure that he was practicing his skills every day in the classroom. When our son started at Nisonger, he could not use the right side of his body from his strokes, but over the course of 3 years our son regained function and is now a typically developing child. With Nisonger's help, our son is the poster child for the benefit of early intervention services. Nisonger provided us with the hope and support that our family needed at this critical time, and they allowed all of us to thrive. For that, we will always be thankful for the Nisonger Early Learning Program!"

Strategy 5.4: Increase the use of AAC for communication among infants and toddlers in the Early Learning Program.

IN PROGRESS.

Beth Gardner has worked to introduce AAC systems into toddler classrooms for at least one child and continues to plan professional development for teachers related to AAC use in this age group.

Goal 6: Enhance knowledge of best practices in learning and education throughout the lifespan through conducting and disseminating high-quality research.

Strategy 6.1: Conduct and disseminate high quality research related to the development and education of young children with disabilities.

IN PROGRESS.

The following papers and presentations related to early childhood development and disability have been produced by Nisonger faculty, staff, and students (bolded) in the past year:

Publications:

- Dynia, J.M., Walton, K.M., Sagester, G., Schmidt, E.K., & Tanner, K.J. (2023). Addressing sensory needs for children with autism spectrum disorder in the classroom. *Intervention in School and Clinic, 58*(4), 257-263.
- Witwer, A.N., Walton, K., & Held, M.K. (2022). Taking an evidence-based child- and family-centered perspective on early autism intervention. *Clinical Psychology: Science and Practice*, 29(4), 420-422.

Presentations:

- Walton, K. (2022, November). Panel member on *ABA Panel Discussion* for the Autism Spectrum and Developmental Disabilities Special Interest Group Virtual Pre-Conference, Association for Behavioral and Cognitive Therapies (ABCT).
- Tiede, G., Walton, K., & Putnam, O. (2023, May). Examining validity of eye-tracking for outcome measurement in social communication treatment for children with autism. Poster at the International Meeting for Autism Research, Stockholm, Sweden.
- Adedipe, O. & Walton, K. (2023, May). Effect of restricted and repetitive behaviors on imitation skills and parental stress in young children on the autism spectrum. Poster at the International Meeting for Autism Research, Stockholm, Sweden.

- Walton, K., Borowy, A., Taylor, C., & Lecavalier, L. (2023, May). The Q-SoCIAL: A new questionnaire measure of social communication in young autistic children. Poster at the International Meeting for Autism Research, Stockholm, Sweden.
- Borowy, A., Taylor, C., & Walton, K. (2023, May). *Parent and teacher refinement of a new measure of social communication for young autistic children.* Poster at the International Meeting for Autism Research, Stockholm, Sweden.
- Ramsey, R. & Walton, K. (2023, May). *Predicting discrepancies in broader autism phenotype ratings of parents from the Simons Simplex Collection.* Poster at the International Meeting for Autism Research, Stockholm, Sweden.

Both students and faculty also have several additional projects in progress, including projects focusing on conceptualizing well-being in young autistic children, understanding possible harms of early intervention, young children's understanding of disability, and promoting adaptive skill development in young children with disabilities.

Here is a small vignette of the indirect benefits of [clinical trials] research participation for the individual participant and their family:

A 13-year-old girl with autism spectrum disorder (ASD) came to the Nisonger Center Clinical Trials Unit with her caregiver. Their hope was to enroll in a randomized clinical trial of a new medicine to treat core deficits in social communication in adolescents with ASD.

During the routine screening blood test, the study doctor discovered that she had iron-deficiency anemia. This is the most common type of anemia, resulting in low hemoglobin, the oxygen-carrying protein in red cells that requires iron as a necessary component, and low hematocrit, the volume of red cells. It can cause symptoms such as tiredness, shortness of breath, fatigue, or dizziness (https://www.nhlbi.nih.gov/health/anemia/iron-deficiency-anemia).

The clinical research coordinator informed the participant's primary care physician, and the participant started taking a vitamin with iron, which normalized her hemoglobin and hematocrit. This important health issue would not have been discovered and treated if she had not applied to participate in the study. It illustrates one of the advantages of research participation.

In addition to bringing her blood count, hemoglobin, and hematocrit to normal levels, the participant will now be able to enroll in the clinical trial that she wants to enroll in. She will also have the benefit of monitoring her hematocrit and hemoglobin levels during the study blood tests.

Strategy 6.2: Create and perform preliminary validation of a measurement tool for social communication in young children with ASD.

IN PROGRESS.

This measure has been developed and multiple aspects of validation studies are ongoing.

A paper describing the focus groups that influenced the measure content and structure was recently accepted for publication:

• Walton, K., Borowy, A.*, & Taylor, C. (accepted). "It just depends": Parent, teacher, and expert conceptualization of social communication in young autistic children with autism. Submitted to *Autism: International Journal of Research and Practice*.

Additional data is currently being collected, including data on convergent and divergent validity from individuals who come for in-person visits (23 collected for far), and data collection just launched on a larger-scale data collection aimed at conducting factor analysis and test-retest reliability among an autism sample. Data from several aspects of this development project has been presented in several recent and upcoming conferences and talks:

- Walton, K., Borowy, A.*, Taylor, C., & Lecavalier, L. (2023, May). *The Q-SoCIAL: A new questionnaire measure of social communication in young autistic children.* Poster at the International Meeting for Autism Research, Stockholm, Sweden.
- Walton, K. (2023, June). Development of a New Questionnaire Measure of Early Social Communication in Autism: The Q-SoCIAL. Invited lecture for the Midwestern Autism Consortium lecture series (virtual).
- Pek, J., & Walton, K. (2023, August). Measuring Social Communication Skills for Young Children with Autism Spectrum Disorder. In J. Pek (Chair), *Psychometric Applications in Clinical Science*. American Psychological Association Annual Conference, Washington, DC.

STRATEGIC OBJECTIVE 2: PROVIDE SERVICES THAT ENHANCE EMPLOYMENT, COMMUNITY ENGAGEMENT AND INTERDEPENDENT LIVING OUTCOMES FOR INDIVIDUALS WITH ID/DD AND THEIR FAMILIES.

Goal 1: Conduct outreach and collaborate with other community providers and systems to design and deliver high-impact, diverse programs.

Strategy 1.1: Investigate expanding research and outreach to rural areas and areas without access to Columbus, where the greatest number of adults with ID/DD are living.

IN PROGRESS.

Research shows individuals with intellectual disability are often un- and underemployed. Even further, these individuals do not hold positions of authority. Wesley* entered the Transition Options in Postsecondary Settings (TOPS) program as a 30-year-old. Students in TOPS attend The Ohio State University to earn a 2 or 4-year Workforce Development Certificate. He had previous work experience in the hospitality industry but wanted more opportunity but unsure of what he wanted to do. Like many college students, Wesley needed a job for extra money. He decided very early into the semester to get a job in a dining hall on campus. TOPS staff supported him to fill out the application, fill out HR paperwork after the job offer, and advocate for a consistent weekly schedule.

In the dining hall Wesley begun serving food and quickly learning how to make food at the action stations. He also refilled spice containers for guest use, adhered to all safety precautions, and completed all required trainings. After six months in his position, Wesley begun to learn the Student Lead position within the dining hall. In this role, he has trained other student employees in the dining hall. His supervisor had the following to say:

"This would be a promotion and a leadership role for him. I am confident this is a role that Wesley is capable of doing. It does require some more training but Wesley has learned a lot of different positions throughout the restaurant. He is always willing and eager to help out any where he is needed. He has learned the operational flow of the building. He will offer to help out without being asked if he notices a certain area of the restaurant is struggling. He is a wonderful asset to our team. I am looking forward to having him as a leader of this operation."

Wesley will continue to hold this position in the next academic year while also taking on an internship. Not only balancing a fuller work schedule, he will also continue to engage in university coursework toward his certificate, and move into an off-campus apartment.

Strategy 1.2: Increase participation of students/adults with ID/DD from racial/ethnic minority groups in programs such as NCBC, TOPS, ACE, and Aspirations to 20% by 2025.

IN PROGRESS.

In 2023, staff from Transitions and Social Programs participated in The OSU Office for Diversity and Inclusion's *Inclusive Excellence Team Certificate* (IETC) program. During this time, we engaged in a comprehensive curriculum to examine what it looks like to embed diversity, equity, and inclusion in our work. As a result of the IETC program, our team became more cohesive, networked across the university, and expanded our cultural competence for serving people with ID/DD who are from minoritized identities. Through our work on the IETC capstone project, we translated 24 documents, ranging from marketing materials and webpages to program applications and policies, into clear language.

Another strategy we employed to increase participation of people with ID/DD from racial/ethnic minority groups is to include Nisonger Center's Fairness Statement on program materials, particularly those that are "forward-facing".

In 2023, NCBC staff increased targeted recruitment and realized a 66% increase in the number of participants from racial/ethnic minority groups. Staff also overhauled the NCBC lending library to accommodate member requests and increase the number of books featuring at least one main character with a minoritized identity (n=14).

Also in 2023, the number of people of color who participated in *Ace!* increased by 10%. Additionally, we were able to increase participation of young people from economically disadvantaged backgrounds through a donation from JP Morgan Chase to support fee scholarships for *Ace!* and TOPS students with financial hardship.

The Family Resource Network of Ohio was able to provide training for Charting the LifeCourse to participants from every county in Ohio, by virtual sessions in 2023. All county boards have been invited to attend these training courses and several sessions have been developed and instituted primarily for family members. We have done in-depth training for county board members in Hancock County to help them utilize the tools of Charting the LifeCourse with their families who experience disability.

Goal 2: Diversify and expand funding/revenue sources to increase capacity and

enhance services to address participants' critical needs.

Strategy 2.1: Seek funding to support research of evidence-based practices to improve awareness and acceptance of neurodiverse adults in daily living, employment, and community settings.

IN PROGRESS.

Transitions and Social Programs teams submitted two grants in 2023. First, TOPS was awarded a DODD grant to support the growth and use of Industry Recognized Credentials by TOPS students as part of their curriculum. Additionally, these two areas worked together to submit a Columbus Foundation grant to support and expand social activities for *Ace!* and TOPS.

Members of both Transitions and Social Programs have worked with OSU Development to secure \$76,000 in scholarships for the fall 2022 semester to be used by TOPS and ACE! Students. JPMC has already committed an additional \$198,000 for next fiscal year for the same purposes. In FY23, 14 *Ace!* students received scholarships.

Program staff also continue to work with College Autism Summit's research symposium, forging partnerships for future funding and research opportunities.

Goal 3: Facilitate successful employment outcomes for individuals with ID/DD.

Strategy 3.1: Increase capacity of programs to build skills for acquiring and maintaining employment.

IN PROGRESS.

Outreach efforts to various academic, public, and private sectors for the purpose of expanding neurodiversity employment initiatives are ongoing. In 2023, staff provided training to multiple units across campus as well as presented to OSU Master of Public Health alumni on *The Intersectionality of Neurodiversity Cultural Competency & Self-Advocacy* in the workplace to improve employment outcomes for neurodivergent employees.

We further increased capacity in 2023 by hiring a Program Coordinator for *Ace!* to support continuous improvement, evaluation efforts, and the development of a curriculum to support students' executive functioning. As *Ace!* and TOPS continue to grow, staff anticipate hiring a business development coordinator by the end of 2024 or Spring 2025.

We continued "JPMC Campus Conversations" to offer students opportunities to build social capital and to stimulate engagement among JP Morgan Chase personnel for employment for Autistic and Neurodivergent (AU/ND) students. Staff also participated on the UCONN committee for Neurodiversity Hiring Initiatives.

Further, staff are working with Carnegie Mellon and JP Morgan Chase to develop the Great Lakes Neurodiversity at Work Hub, to connect AU/ND students, employers, college autism support programs and a range of stakeholders to improve employment outcomes for AU/ND adults. This Hub will support colleges and universities in Ohio, West Virginia, western Pennsylvania, and western New York.

Additionally, program staff updated and enhanced the Aspirations' EmployAbility curriculum to include financial literacy and empowerment. We will soon begin participant recruitment for this enrichment group and facilitate the new curriculum in fall 2023.

Strategy 3.2: Partner with DODD and VR to increase outcomes.

IN PROGRESS.

TOPS has increased in the number of students receiving authorizations from OOD as well as in the types of services being authorized. Additionally, ACE! Has its first two students receiving OOD services from Nisonger this summer (2023). TOPS brought in \$5,525.24 during FY23 to the earnings account from OOD authorizations.

Jessie Green has begun the training process for becoming a Medicaid Waiver provider. At this time, no money has been collected.

Goal 4: Provide more frequent and meaningful community engagement opportunities among individuals with ID/DD.

Strategy 4.1: Improve neurodiversity awareness and acceptance across OSU campus and community by enhancing inclusive programming.

IN PROGRESS.

A staff member from Transitions (Ashlee Leslie) took leadership of the Diversabilities Employee Resource Group before leaving Nisonger in March 2023. Several staff members from Nisonger remain on the ERG, however not in leadership roles. All members can disseminate information on Teams. Flyers and events have continued to be pushed through this channel.

Program staff promoted neurodiversity awareness and acceptance across campus by supporting the formation of the Autistic Student Union (ASU), providing leadership opportunities as well as forming an on-campus community for AU/ND students. Karen Krainz Edison serves as advisor for the ASU.

Staff continue to promote collaborations among peer and student organizations (ASU, TAPD, Buckeyes for Accessibility) to enhance acceptance and inclusion of AU/ND across campus and within STEM majors. These student organizations will support development of participants' ability to self-advocate, participate in leadership roles, and mentor first-year and incoming transfer students.

Strategy 4.2: Increase services offered to community.

IN PROGRESS.

TOPS offered a summer workshop series in July 2022 and June 2023. In June 2023, registration was very low causing some workshops to be cancelled. This program will be reevaluated for future offerings.

All first year TOPS students (7) were offered Pre-ETS through OOD. Only 5 were eligible for billing through OOD.

In February 2023, program staff added a new NCBC to reach individuals in un/underserved parts of the community. This club meets in the Hilltop branch of the Columbus Metropolitan Library. Recruiting efforts are ongoing to fill this club and to add four more clubs by 2026.

Goal 5: Maximize self-determination and independent living skills among individuals with ID/DD.

Strategy 5.1: Enhance Next Chapter Book Club (NCBC) program with initiatives promoting self-determination and independent living skills.

IN PROGRESS.

A key facet of NCBC is the emphasis on promoting independence and self-determination. To this end, we identified and trained three NCBC Members to transition to the role of NCBC Facilitator. These three individuals are among the most reliable and effective facilitators in our volunteer base. We do not anticipate delay in achieving the goal of five NCBC Members transitioning to the role of Facilitator by 2024.

After a successful pilot with NCBC members in 2022, we provided one-on-one independent living skill coaching through Literacy IRL (In Real Life). In Literacy IRL, project staff and NCBC members (or others with ID/DD) meet for six sessions to work on a focused, personcentered learning goal. Goals range from creating meal plans and grocery lists, to sorting and reading mail/email, to learning/practicing common sight words. Feedback from participants and families has been positive.

Testimonial from K.C., Literacy IRL participant:

"I thought it was really helpful when you came to help me. My sister really appreciates you guys doing that. I've been using [the grocery key] to text my sister. I'll be like, 'Hey, this is what I want for this week.' She'll be like you need to make a list and then stick to that list." So that way I don't get in trouble with my money, so that way I can do the activities that I want to do."

Strategy 5.2: Implement and expand Aspirations enrichment groups Autism Self-Advocacy Program (ASAP), Employability, Relate to Me and subsequent support groups.

ACHIEVED.

Given the clear need for accessible sexual health education for adults with IDD, we opened the Aspirations enrichment group *Relate to Me* (RTM) to individuals beyond Aspirations alumni. In RTM, participants learn about boundaries, consent, dating, and sexual decision-making, among other topics. Recent RTM participants have been referred by service coordinators, behavior support specialists, providers, and families.

Additionally, in 2022 we hired a self-advocate social work facilitator to expand and implement the 8-week ASAP curriculum. We will offer the program three times per year as part of the Emerging Advocates grant from the Ohio DD Council. Project activities, including curriculum and resource development, are ongoing.

Ace! continues to collaborate with Aspirations/ASAP to engage *Ace!* members in additional social activities and advocacy opportunities to strengthen communication skills.

Strategy 5.3: Continue to support and provide caregivers with information and resources to help foster independence and self-determination for individuals with IDD.

IN PROGRESS.

In 2023, staff increased caregiver engagement of the Aspirations' Caregiver Group in weekly 12-week sessions, monthly reunions, and caregiver-specific activities for 80% of Aspirations participants. Parent and caregiver engagement includes both in-person and virtual participation in weekly sessions, volunteer work, planning and organizing for quarterly events, and ongoing social connections between caregivers outside of structured events.

Strategy 5.4: Disseminate information to stakeholders and connect with resources to maximize self-determination and independent living through use of technology.

ACHIEVED.

More than 150 people participated in a tour of technology solutions at the Smart Home Discovery Place and 27 of 28 participants agreed that their knowledge had increased as a result of participating in a tour. One participant said "I thought it was very informative and interesting to see some of the newest technology being used to promote independence. I thought it was great!"

At TechSummit 2022, 285 participants had access to a full day of 8 presentations from professionals, people with developmental disabilities and their family members. These sessions were all focused on Technology use to enhance independent living. Attendees

additionally had access to 16 different vendors and the resources they offered. 95% of survey respondents said they would recommend TechSummit 2022 to others, 83% said their knowledge/skills in the topic area increased and 93% said they were at least somewhat satisfied with presentations. One participant said "... nice and informative conference. Vendors were helpful, especially the ability to see various technology." another said "Overall, I get a lot of value from attending TechSummit. I learn a lot every year and it reignites my passion."

In 2023, *Ace!* improved and expanded a hybrid service delivery model.

The Family Resource Network of Ohio is web based and we have over 750 resources for people with disabilties and their families on our website. We have an event calendar on our website for all people to visit to see what disability friendly events are happening within the state. We utilized virtual resources such as Zoom and Teams to provide over 135 Charting the LifeCourse trainings in 2023. The resources and tools of Charting the LifeCourse are person centered and focus on self-determination. One of the key planning features that we implore is how to utilize technology for independence and to increase life satisfaction.

Goal 6: Evaluate programs and services to determine efficacy and disseminate evidence-based practices.

Strategy 6.1: Evaluate programs and services to determine efficacy.

IN PROGRESS.

We continue to implement existing assessments as well as develop and refine evaluation tools and protocols for *Ace!*, Aspirations, FRNO, NCBC, and TOPS.

For NCBC, we administer an annual satisfaction survey to all members. In 2023, 83% of NCBC members who responded to the survey were satisfied or highly satisfied with their experience in book club. We also received highly positive qualitative feedback from NCBC members and families.

Testimonial from S.M., NCBC member:

"Book club is going really well. It's a perfect fit for me. Everyone is so welcoming and I feel like I am clicking with everyone at book club and I can't wait to see where this takes me. I am loving it so far."

Testimonial from N.B., parent of NCBC member:

"I know Jackie loves the books that they read and tells me about the book and who attends book club. I have always encouraged Jackie to take part in lots of activities, and book club is an important one. When Jackie is home, she and my husband read

each night. Actually, Jackie does the reading and she reads with lots of voice inflection, which I attribute to Next Chapter Book Club."

For NCBC volunteer facilitators, we are developing a needs assessment survey to determine ongoing training and support needs among club facilitators. Data from this survey will be used to create quarterly hybrid training and networking opportunities for NCBC facilitators in 2024.

Testimonials from Aspirations family participants:

"This has been eye opening for me as a parent. I have gratitude for the ways my son doesn't struggle and more tools and insight about how to best support him with his challenges. It's hard not to be overly self critical for the ways I now see I could have better advocated for and parented my son, and I appreciate that the environment was free of judgement and full of compassion, so I could learn without the baggage. My son learned and grew from his participation as well, and we had great conversations on the way home each week. Definitely recommended! Thank you!" "You guys are AMAZING . Thank you for all the information & relevant, relatable stories. I've tried very hard to be informed & proactive, but have learned so much. I've already recommended Aspirations to friends."

"This was the most informative class I have taken. I learned things that I would not have even known existed if not for this class. Thank you so much for all the useful information and the ladies and speakers who made it such a phenomenal experience."

Strategy 6.2: Disseminate program results and evidence-based practices.

IN PROGRESS.

In 2023, project staff presented the following:

- Cowgill, J., Harris, E., & Krainz Edison, K. (March 2023). Campus to Career: Overview pf Collaboration to Support Neurodivergent Emerging Talent. Paper presented at the Kennedy Krieger Institute Neurodiversity at Work conference. Washington D.C..
- Harris, E., & Krempley, T. (October 2022). Autistic Self-Advocacy: ASAP! Paper presented at the College Autism Summit. Nashville, TN.
- Harris, E., Krainz Edison, K., & Menssen, R. (September 2022). DBT & ASD: Skills for Adults. Paper presented virtually at Annual Global Exchange Conference.

Ace! project staff supported a panel of AU/ND students at the Focusing on the First Year Conference at OSU and Some Assembly Required National Science Foundation's conference to share their lived experience as Autistic college students as well as barriers and strategies for success.

PRIORITY 3. BECOME A NATIONAL LEADER IN PROMOTING THE HEALTH OF PEOPLE WITH DISABILITIES ACROSS THE LIFESPAN.

Goal 3.1: Address health inequities among people with disabilities, especially those with additional marginalized identities.

Strategy 3.1.1: Explore social and political determinants of health.

PARTIALLY ACHIEVED.

Nisonger's Health Policy Specialist represents the interests of Ohioans with disabilities on the Ohio Department of Health Equity task. This task force was very active during the COVID-19 public health emergency. Although this task force has been less active recently, we maintain relationships with our state office of minority health.

At the 2022 Ohio State University College of Medicine Annual Education Symposium titled Eliminating Bias and Fostering Inclusion, Susan Havercamp provided a keynote addressing ableism and intersecting marginalized identities in health care.

Dr. Jennifer Walton is actively engaged in Nationwide Children's Hospital, AUCD, and serves on the Board of Directors of the Society for Developmental and Behavioral Pediatrics' and as chair for the Pediatric Section of the National Medical Association Through the American Academy of Pediatrics, she serves on both an advisory committee and an expert group for the organization. She also previously held positions as a past National Vice President and past Professional Board Member of the Student National Medical Association. Through these roles, she promotes anti-racist and Diversity Equity Inclusion initiatives, raising awareness of disability as a marginalized identity.

Related publications:

- Walton, J., Freeman, B., Tyler-Hill, Y., Brooks, O., & Smitherman, L. (2021). Racism in pediatric health: How to talk to children about racism. *Contemporary PEDS Journal*, 38(02).
- Walton, J. R., & Spinks-Franklin, A. (2021). Discrimination and the Role of the Clinician. *Pediatrics*, 148(6).

Strategy 3.1.2: Provide disability training to current and future health care professionals.

ACHIEVED.

Nisonger Center offers several online training programs for healthcare providers on caring for patients with disabilities. Each of these trainings offers continuing education for

physicians and nurses. With funding from the Ohio department of Medicaid through MEDTAPP, we developed an online training for healthcare professionals about caring for Deaf and hard of hearing patients. Funding from the Centers for Disease Control and Prevention allowed us to share two online responsive practice trainings, Providing Health Care and Screening for Individuals with Disabilities and Accessible and Adaptive Communication. The Centers for Disease Control and Prevention also supported the development of Healthcare Access: People with Physical and Sensory Disabilities and Healthcare Access: People with Disabilities. The combined number of healthcare professionals who completed training in FY2023 was N=1520.

In partnership with the OSU College of Medicine, we developed, embedded, and continue to provide disability content in the undergraduate medical curriculum. We introduced disability content into all four years of the undergraduate medical curriculum. We continue to provide technical assistance and recruitment support for the existing Simulated Patient Experience, a clinical encounter with standardized patients who have disabilities. This experience is required for all third-year medical students at Ohio State University.

Related Publications:

- Tarasoff, L.A., Lunsky, Y., Havercamp, S.M., Welsh, K., Vigod, S.N., & Brown, H.K. (In press; accepted May 26, 2023). The disability-related education and training experiences of perinatal care providers in Ontario. *Journal of Obstetrics and Gynaecology Canada*, DOI: https://doi.org/10.1016/j.jogc.2023.05.032
- Tarasoff, L.A., Lunsky, Y., Welsh, K., Proulx, L., Havercamp, S.M., Parish, S.L., & Brown, H.K. (In press; Accepted March 2, 2023). Unmet needs, limited access: A qualitative study of postpartum health care experiences of people with disabilities. *Journal of Advanced Nursing*.
- Tarasoff, L. A., Saeed, G., Lunsky, Y., Welsh, K., Proulx, L., Havercamp, S. M., Parish, S. L., & Brown, H. K. (In press). Prenatal care experiences of childbearing people with disabilities in Ontario, Canada. *Journal of Obstetric, Gynecologic, & Neonatal Nursing*.
- Bacherini*, A., Havercamp, S.M., & Balboni, G. (2023). A new measure of physicians' erroneous assumptions towards adults with intellectual disability: A first study. Journal of Intellectual Disability Research, https://dio.org/10.1111/jir.13013
- Brown, H. K., Taylor, C., Vigod, S. N., Dennis, C. L., Fung, K., Chen, S., Guttmann, A., Havercamp, S. M., Parish, S. L., Ray, J. G., & Lunsky, Y. (2023). Disability and in-hospital breastfeeding practices and supports in Ontario, Canada: A population-based study. The LANCET Public Health, 8-1, pp. e47-e56, https://doi.org/10.1016/S2468-2667(22)00310-3.
- Schmidt*, E. K., Beining, A., Hand, B. N., Havercamp, S. M., Darragh, A. (2022). Healthcare providers' role in providing sexual and reproductive health information to people with

intellectual and developmental disabilities: A qualitative study. *Journal of Applied Research in Intellectual Disabilities*, 35:2029-1027. DOI: 10.1111/jar.12861

- Saeed, G., Brown, H. K., Lunsky, Y., Welsh, K., Proulx, L., Havercamp, S., & Tarasoff*, L. A. (2022). Barriers to and facilitators of effective communication in perinatal care: a qualitative study of the experiences of birthing people with sensory, intellectual, and/or developmental disabilities. BMC Pregnancy and Childbirth, 22(1), 1-13.
- Bacherini*, A., Havercamp, S.M., Balboni, G. (2021). Physicians' Attitudes about individuals with intellectual disability and health care practices toward them: A systematic review. Conference paper in *Psychiatria Danubina*, 33-11, 79-90.
- Havercamp, S.M., Barnhart, W.R., Robinson, A.C., & Whalen Smith, C.N. (2021). What should we teach about disability?: National consensus on disability competencies for health care education. *Disability and Health Journal*. https://doi.org/10.1016/j.dhjo.2020.100989
- Havercamp, S.M. (2021). Competency-based Curriculum Development: Essential disability competencies for medical education. *Academic Medicine letter to the editor*.
- Crane* JM, Strickler* JG, Lash AT, Macerollo A, Prokup* JA, Rich* KA, Robinson AC, Whalen Smith CN, Havercamp SM. (2021). Getting comfortable with disability: The short- and long-term effects of a clinical encounter, Disability and Health Journal, https://doi.org/10.1016/j.dhjo.2020.100993.

Strategy 3.1.3: Promote interdisciplinary learning opportunities across Nisonger programs.

PARTIALLY ACHIEVED.

The Dental program completed an application and was approved by OSU to offer a certificate/fellowship program on providing oral health services to patients with IDD. Twenty providers have already expressed interest in this fellowship, which will begin this fall and winter 2023. The Dental Program is fully embedded in the LEND training program. Dental student trainees participate in the interdisciplinary developmental clinic, helping all trainees appreciate how dentistry fits within the healthcare team. Dental students, in turn, appreciate the role of other health professions and how to interact professionally and make appropriate referrals. Finally, the dental program is currently recruiting two LEND trainees to collaborate with the Nisonger dental clinic to create training videos that we can upload on our website to help prepare new patients for a dental visit at our office.

Goal 3.2: Improve health outcomes for all Ohioans with disabilities.

Strategy 3.2.1 Develop partnerships with local health departments to promote inclusion of people with disabilities in public health programs and services.

PARTIALLY ACHIEVED.

Through a memorandum of understanding, the Health Policy Specialist works at the Ohio Department of Health Office of Health Opportunity to promote the inclusion of Ohioans with disabilities in all health programs and policies. One program at the Ohio Department of Health, Creating Healthy Communities, offers health promotion grants to local health departments. Through this relationship, changes were made to the grant application template requiring applicants to identify and plan for the inclusion of people with disabilities in proposed programs. The Health Policy Specialist reviewed all outgoing competitive grant solicitations to ensure that proposals had the potential to meet the needs of people with disabilities and do not widen existing gaps. He provides technical assistance to local and county health departments on including people with disabilities. This partnership resulted in a ten-fold increase in the number of community-based resources that were developed specifically for people with disabilities, ranging from creating accessible opportunities for active participation in the community to prioritizing disability and inclusion in community planning efforts.

Strategy 3.2.2: Provide services and supports to health disparate communities.

IN PROGRESS.

Nisonger recently hired a full-time, certified Community Health Worker to address barriers to healthcare and health equity for Ohioans with developmental disabilities. The linkage coordinator is tasked with linking people with intellectual and developmental disabilities and their Caregivers to community-based resources to improve their health and wellness. The Community Health Worker will create a guide of accessible opportunities for health and wellness, ranging from clinical services to inclusive exercise programs.

Leveraging the connections and resources compiled by the Community Health Worker and our relationship with Ohio Office of Health Equity, we will explore opportunities to provide telehealth training and health promotion programs in health disparate neighborhoods and regions in Ohio, including Appalachia.

Strategy 3.2.3: Promote screening and surveillance of health and social determinants of health in ID/DD community.

ACHIEVED.

The dental program provides a dental needs assessment to all children attending preschool and Head Start programs at the county board of developmental disabilities every year. The results of these assessments are shared with the families and facilities to ensure follow-up care is arranged. Most families have elected to receive follow-up care at the Johnstown Road dental clinic.

Parent Testimonial:

THANK YOU for taking such good care of Patrick for the dental surgery. I am so amazed and impressed by our experience. So much better than I had hoped for. You and your team are a God Send and I can't express my gratitude enough for such a good outcome.

Goal 3.3: Increase availability, efficiency, and enhance quality of oral health services/care.

Strategy 3.3.1: Upgrade Nisonger Center's McCampbell Hall and Johnstown Road dental clinics.

PARTIALLY ACHIEVED.

We had initially planned to replace inefficient and noisy equipment at Johnstown Road with electric hand pieces similar to what was done at the McCampbell Hall clinic. Due to issues with existing equipment, we learned that electric hand pieces are not possible at this location. Instead, new smaller air driven handpieces were purchased to ensure quieter operation which improves patient experience. The McCampbell Hall clinic is undergoing a major renovation, including new cabinetry, dividers, and dental units in the clinic and sterilization area. This renovation will be completed in the Fall of 2023. Flooring at the Johnstown Road Dental clinic will be replaced in the winter of 2023.

STRATEGIC OBJECTIVE 4: CONDUCT HIGH-IMPACT RESEARCH, DELIVER TRAINING/TECHNICAL ASSISTANCE AND PROVIDE HIGH-QUALITY SERVICES TO PERSONS WITH BEHAVIORS /PSYCHIATRIC PROBLEMS AND/OR DEVELOPMENTAL DISABILITIES OR AUTISM SPECTRUM DISORDER.

Goal 1: Increase the capacity to provide psychiatric and mental health care both locally and nationally.

Strategy 1.1: Provide training through didactics and clinical placements to graduates and professional students in mental health and ID/DD.

IN PROGESS.

LEND faculty mentors continue to complete pre/post evaluations of all LEND long-term trainees on 11 competency domains (Health Promotion and Disease Prevention; Interdisciplinary Team Building; Family-Professional Partnerships; Cultural Competency; Community Based Systems of Services; Life Course; Policy; Research; Health Information Technology and Communication; Autism; and Mental Health) using the Individualized Learning Plan.

Through our LEND training clinics we build the capacity for graduate students in psychology and social work to meet the mental health needs of individuals with IDD/ASD. This is accomplished through the Introduction to Developmental Disabilities Class taught by Dr Lecavalier and the Autism class taught by Dr Rabidoux. In addition, psychology and social work students gain hands on experience in the Transition Age, School-Age, and Interdisciplinary Developmental Clinic where they administer and interpret evidence-based assessment. Working with Erin Harris, trainees gain valuate experience in treatment in ID/ASD populations.

Behavior Support Services has one part-time psych student, Jesse Strickler.

Erin Harris, Clinical Social Work Manager, has provided supervision and training to undergraduate and graduate social work students through Ace!, Aspirations, and clinical treatment and diagnostic services. She also provided supervision and training to 1 IDD psychology student providing individual psychotherapy.

Dr. Arnold had 2 med students on summer research scholarship and currently has one medical student volunteering for research experience.

Strategy 1.2: Provide continuing interdisciplinary education about mental health in ID/DD to various professionals.

ACHIEVED.

In 2021, Dr. Witwer (Co-I) was awarded a UCEDD National Training Initiative (ACL Grant Award Number: 90DDTI0045-01-00). In collaboration with her state team, it has been determined that the grant will fund 2 ECHOs per year, beginning in October 2023. The Nisonger team, in coordination with their state team are currently in the process of finalizing the curriculum, and structure which we believe will help us to build a community of practice on Mental Health in IDD in the state of Ohio for mental health and developmental disability professionals.

In our ongoing webinar series "Bridging Mental Health and Developmental Disabilities Supports" – specifically designed for clinicians and other professionals who provide supports to adults with ID/DD and mental health disabilities. This webinar series is organized through the **Building Bridges Project** and consists of 1-hour long webinars on a series of didactic topics.

The voice of individuals with lived experience is included via co-presenters, videos, or quotes as appropriate to the topic. Participants seem to enjoy voices of lived experience members immensely. One participant stated:

"The presenters were the best! Jason did a great job of sharing based on his personal experience, which really enhanced the presentation. This was such a great training, and I could not have been happier."

In total, we have held five Webinars over the course of this past project year. Every webinar consists of questions and discussion among members of the group. A postevaluation survey is also given to the participants after the completion of the webinar.

The post-evaluation survey questions includes whether participants were satisfied with the materials presented as well as anything they felt they wanted to share. Participants indicated that they felt heard, seen, and open to new perspectives. "I love all the webinars I attend with OSU! These are very valuable, and I appreciate everyone that takes the time to facilitate them!!". Another participant stated "I'm also queer, trans, and self dx'd but not open about it. Thank you so much for talking about this and being willing to share your experiences and knowledge. It was heartwarming."

In addition, participants also expressed positively on introduction to new perspectives, "I had never thought about communication should be more than what someone wants. But that is what we focused on." Overall, Bridging Mental Health and Developmental Disabilities supports webinar series received many positive feedback comments.

Strategy 1.3: Enhance cultural/racial competency through strategic and deliberate efforts to address institutional racism in Behavioral Health education and training.

UNMET.

Goal 2: Provide high-quality behavioral health care.

Strategy 2.1: Enhance cultural/racial competency of our collective work through strategic and deliberate efforts to address institutional racism in Behavioral Health clinical services.

UNMET.

Strategy 2.2: Provide High Quality Mental Health and Behavioral Support Services to the Community.

ACHIEVED.

Behavior Support Services continue to offer services in Franklin County. In addition, over the past year, they have provided services in the following counties: Athens, Delaware, Summit. Beyond the clinical services, the program has developed and began marketing a Crisis Prevention and Support Implementer and Trainer Courses. This started in May 2023 and is offered monthly.

Here are a few clinical vignettes illustrating the powerful outcomes attained by the staff in our Behavior Support Services program.

A. was referred to Nisonger Center for physical aggression, property destruction and running from the home/day program. At the time, A. had just moved out of her

mother's home into a supported living home with two roommates. Over the past five and a half years, A.'s team has helped to establish safe and trusting relationships between A. and her staff as well as creating a home environment that meets A.'s needs. Through working together with FCBDD and Creative Housing, Inc, A.'s front yard and garage were remodeled to create calming and safe spaces for her to go when she needs some space. A. now utilizes these spaces when she is feeling anxious instead of running from the home. Another key to A.'s success was finding the right day program. She started attending Dreamshine in April 2019 and she has thrived at that program! A. loves participating in cooking and outdoor activities. She has many friends and enjoys going on outings and getting in the hot tub. With consistent support and implementation of positive behavior supports, A.'s target behaviors have greatly decreased, and she is very happy in her home and day program.

S engaged in severe self-injurious behavior and physical aggression in his youth. He received behavior supports services from multiple agencies during his youth and early adolescence but the severity of his needs warranted a short-term admission to an inpatient facility. He was re-referred to Nisonger in 2018 upon discharge with interventions developed by the facility that included manual and mechanical restraint and restricted access to items. With consistent staffing and implementation of Nisonger supports, all restrictive strategies were able to be removed from supports in 2022. In 2023, Nisonger discontinued involvement in the monitoring of supports due to S's success. Prior to Nisonger involvement, parents were unable to leave the home due to S's anxiety with separation and ensuing self-injury. S also had a difficult time leaving the home with staff if he knew his father was home. This is no longer a concern. S goes out into the community with his staff regularly regardless of his father's presence. Additionally, dad was able to take a vacation without S for the first time.

C. has received Nisonger Clinical Support Services from 2015 to 2019 and again from 2020 to present. Due to being in crisis in 2019, he lived at the Columbus Developmental Center. Historically, C. has engaged in challenging behaviors including running away by taking the city bus to various places, suicidal ideation and attempts, and fire setting. The trauma-informed care strategies and consistency put in place by Zachary Christian, Clinical Behavior Specialist, and the joint effort of his team, have enabled C. to increasingly live a more independent, safe life. He has learned to challenge negative thoughts often associated with his mental illness and past trauma, as well as build healthier, long-lasting relationships with his staff and team members. He now has time at home without staff present and has achieved a long-term goal, having maintained employment at a local grocery store for several months.

Lastly, here are some of the comments sent to us from the individuals, their staff, and family members involved in receiving services through our Behavior Support Services program:

"J. has improved dramatically. He is far more responsive and aware now. He communicates his needs and wants rather than acting out his frustrations." – Parent.

"The specialists are willing to come by & meet with me or client to go over questions. And they have trained so many staff as we've had a lot of turnover." – Parent.

"Their strategies are amazing & can be understood." – Service Provider.

"(about the BSS, Zach) - He is nice guy and communicate and encourage me to do great and make better choices." – Adult with lived ID/DD experience.

"Rachael Menssen have help me to get where I an now." – Adult with lived ID/DD experience.

In the last year, the Dual Diagnosis Clinic had a total 108 patients seen over 440 appointments. The Psychiatry clinic had 201 patients over 618 appointments. Dr. Arnold had over 100 phone consultations.

Strategy 2.3: Provide MH Services to Nisonger Center Consumers.

ACHIEVED.

All Nisonger consumers who are evaluated in the three LEND evaluation clinics are screened for mental health conditions.

We have expanded clinical services in areas of mental health support for Ace, Aspirations and Tops including individual psychotherapy offerings, DBT skills group and quarterly "Wellness" check-ins with participants. Erin Harris is the Clinical Social Work Manager that provides these services and supervise trainees providing these services. Specifically, Individual mental health psychotherapy services were provided to 23 participants across programs. Dialectical Behavioral Therapy (DBT) skills group was facilitated 3 times serving ~18 participants across programs. Family and/or individual transition and mental health related supports were provided to approximately 4 families 3-5 times throughout the year.

Behavior Support Services has regular monthly meetings with dual diagnosis clinic. BSS in contact with Dental Program to see how we its crisis prevention and support training could be adjusted to meet their needs.

Goal 3: Conduct high-quality research on mental/behavioral problems.

Strategy 3.1: Pursue grant funding in area(s) related to goals of Behavioral Health Priority Area, including: a) building upon the Nisonger RRTC scope of work, and b) whenever feasible, incorporating randomized controlled trials (RCTs) to measure intervention/treatment effectiveness into grant research design.

ACHIEVED.

Havercamp submitted another NIDILRR RRTC grant proposal in response to a RFP on health and function in persons with ID/DD. Lecavalier submitted one grant proposal to NIH that was a clinical trial.

In addition, there have been a number of presentations and peer-reviewed publications on the topic. Behavior Support program presented at two conferences this year:

- Kim, S. Y., & Lecavalier, L. (2022). Psychometric properties of self-report instruments in individuals with autism spectrum disorder in the context of psychiatric assessment: A systematic review. *Journal of Autism and Developmental Disorders*, 52, 4355-4374. doi: 10.1007/s10803-021-05323-y
- Witwer, A. N., Walton, K., Held, M. K., Rosencrans, M., Cobranchi, C., Fletcher, R., Crane, J. M., Chapman, R., & Havercamp, S.M. (2022). A scoping review of psychological interventions, accommodations, and assessments for adults with intellectual disability. Professional Psychology: Research and Practice. Advance online publication. https://doi.org/10.1037/pro0000474
- Walton, K., Krahn, G. L., Buck, A., Andridge, R., Lecavalier, L., Hollway, J. A., Davies, D. K., Arnold, L. E., Havercamp, S. M. & the Nisonger RRTC on Health and Function. (2022). Putting "ME" into measurement: Adapting self-report health measures for use with individuals with intellectual disability. *Research in Developmental Disabilities*, 128(2022), 1-14, 104298. Available https://doi.org/10.1016/j.ridd.2022.104298.
- Witwer, A.N., Rosencrans, M.E., Held, M.K., Cobranchi, C., Crane, J., Chapman, R., Havercamp, S.M., & The Ohio State University Nisonger RRTC on Health and Function. (2022). Psychotherapy treatment outcome research in adults with ID: Where do we go from here? *Clinical Psychology: Science and Practice*. https://doi.org/10.1037/cps0000053

Strategy 3.2: Explore ways to conduct further research on the effects of COVID-19 on persons with ID/DD and their families in relation to any of the following: health outcomes (in particular mental health), quality of life, services/supports received, and long-range impacts due to social isolation and disruptions/changes in employment, services/supports, or lifestyle.

UNMET.

Goal 4: Expand technical assistance and consultation (community outreach).

Strategy 4.1: Offer programs/workshops to clinicians and others in the community who are interested in learning about MH in ID/DD.

PARTIALLY ACHIEVED.

Five webinars on topics related to mental health in IDD were completed through the Building Bridges project. These has been well-attended by county board of DD employees, mental health professionals and other providers within the state of Ohio.

Strategy 4.2: Develop recommendations and criteria for delivering high-quality health care to adults with dual diagnosis.

PARTIALLY ACHIEVED.

A draft of the treatment guidelines is in the process of being finalized. Previous versions have been presented at a number of national conferences. Input has been obtained from both clinicians and adults with ID. Once finalized these will be available on the Nisonger website. We will then use the guidelines to create a guide for adults with ID to use with their mental health providers.

Strategy 4.3: Expand ECHO framework at Nisonger in order to provide education and ongoing assistance to our partners on MH and ID/DD.

PARTIALLY ACHIEVED.

Through a UCEDD National Training Initiative, 2 ECHO projects per year will be funded beginning in October 2023. The Nisonger team led by Dr. Andrea Witwer, in coordination with their state team, are currently in the process of finalizing the curriculum, and structure which we believe will help us to build a community of practice on Mental Health in IDD in the state of Ohio for mental health and developmental disability professionals.

Appendix B: Academic Training in IDD (FY-2023)

AIDD Grant # 90-DDUC-0038

Program Performance Report

ACADEMIC TRAINING IN IDD (PRE-SERVICE) FY 2023

The Nisonger Center UCEDD is strongly committed to pre-service training and education. We offer a number of university courses, including two undergraduate courses each year that focus on intellectual and developmental disabilities (IDD): one in the Department of Psychology (PSYCH 4571) and the other in the Department of Neuroscience (NEUROSC 4550).

PSYCH 4571: Psychology of Developmental Disabilities. The purpose of this course is to introduce students to some important issues that psychologists and other professionals encounter when providing services for and interacting with individuals with intellectual and developmental disabilities (IDD). This course will cover topics related to a wide variety of types of disabilities, including intellectual disability (ID), genetic and medical conditions, and autism spectrum disorders. At the conclusion of this course, students should have a basic understanding of how developmental disabilities are diagnosed, common problems (e.g., behavior problems, mental health issues, health problems) that co-occur with developmental disabilities, how individuals with developmental disabilities are supported in their daily lives (e.g., education, treatment, medication), and some of the historical and ethical issues that relate to individuals with developmental disabilities and their families. Contact: Katie Walton, PhD.

NEUROSC 4550: Autism Spectrum Disorder and Related Neurodevelopmental Disorders. Autism spectrum disorder (ASD) is a complex neurodevelopmental disorder characterized by intense and repetitive interests and patterns of behavior and difficulties with social communication and interactions that have an onset during early childhood. This course will explore different aspects of ASD by examining current state of knowledge regarding genetics, neurology, neurobiology, early intervention, and behavioral science. The learning objectives for this course for the students at the end of the semester are that they: be able to list the diagnostic criteria and the core features of autism spectrum disorder (ASD) along with the methods commonly used to diagnose ASD; know the conditions found under the DSM-5 Neurodevelopmental Disorders; kow the diagnostic criteria and main considerations of intellectual disability; demonstrate an understanding of prevention and treatment methods targeting ASD; be able to critically review and explain the common evidence-based treatments/interventions as well as some of the current fad treatments targeting ASD; be able to explain the current evidence regarding the etiological factors and biological bases of ASD and discuss the current knowledge base regarding the epidemiological data of ASD across sex, race, ethnicity, geography, and SES; demonstrate an understanding of the psychosocial aspects and neurodevelopmental underpinnings of ASD, including the diagnostic process/determination and assessment of relevant functioning, such as: intellectual functioning, adaptive behavior, mental health, social communication, challenging behavior, etc. Contact: Marc J. Tassé, PhD.

The faculty at the Nisonger Center – UCEDD also offer several interdisciplinary graduate level courses specifically in the area of developmental disabilities as well as offer several clinical practicum, predoctoral internship and post- doctoral fellowship experiences through our clinics and community clinical services.

Two such courses that we offer have both an interdisciplinary focus and are offered across Departments and Colleges at Ohio State, including:

- 1. **Developmental Disabilities: An Interdisciplinary Perspective (HTHRHSC7718)**. This course is designed to provide students with information about developmental disabilities across the life span from a variety of perspectives and disciplines. Participants are introduced to pertinent philosophical, ethical, legal, and practice issues concerning individuals with developmental disabilities. This graduate level course is cross-listed in 6 departments (psychology, special education, speech & hearing, rehabilitation health school, nursing, and public health). Contact: Luc Lecavalier, PhD
- 2. Interdisciplinary Seminar on Autism Spectrum Disorders (SPCH 7717). The goal of this course is to teach the analytical skills necessary to comprehend and formulate an interdisciplinary framework relating to major scientific and theoretical perspectives in autism spectrum disorders. This graduate level course is cross-listed in 6 departments (psychology, special education, speech & hearing, rehabilitation health school, nursing, and public health). Contact: Paula Rabidoux, PhD

Nisonger Center also partners with The Ohio State University Department of Psychology to offer perhaps the only PhD psychology program offering a specialization in *IDD*.

The *Intellectual and Developmental Disabilities* (IDD) Psychology Graduate Program (IDD Psychology Program) is designed to train in the clinical practice and scientific research in the area of IDD and leads to a PhD degree in IDD Psychology.

The science of psychology applies to individuals with IDD just as to non-disabled groups, although this is a specialization in its own right. Intellectual and Developmental Disabilities as a field includes disorders such as intellectual disability (formerly called mental retardation), autism spectrum disorders, cerebral palsy, Down syndrome, Williams syndrome, and other related disabilities that originate during the developmental period.

Since December 2021, the Intellectual and Developmental Disabilities (IDD) psychology graduate program is nationally accredited by the *Psychological Clinical Science Accreditation System (PCSAS)*. In 2023, the IDD Psychology program was accepted as a Doctoral Program Associate by the *Association of Psychology Postdoctoral & Internship Centers (APPIC)*. This means that our students are eligible to enter the APPIC internship "match" to complete a range of accredited internships around the country.

Students who graduate from this program will be well equipped to pursue a career in Intellectual and Developmental Disabilities psychology as a researcher, teacher, administrator, or in private practice. They will have experience in conducting research, and they are expected to present results at professional conferences, and to publish in peer-reviewed scientific journals. They will be particularly knowledgeable in areas such as causes of developmental disabilities (e.g., intellectual disability, autism spectrum disorders), psychological and physical characteristics of these populations, assessment and diagnosis, and prevention and treatment approaches. Students in this program will be expected to be proficient in related areas such as measurement/test development, psychopharmacology, psychobiology, quantitative methods, and applied interventions. Program graduates will have research skills to extend the boundaries and application of this knowledge. By achieving this, they can adapt to the changing needs of professional practice in the field.

Graduate Level IDD Courses

The Nisonger Center faculty teaches a number of graduate courses specific to developmental disabilities. The following courses are expected to be taken by all students in the IDD Program:

Ethics and Professional Issues in Psychology (PSYCH 6850): This course will be designed to address ethical principles and dilemmas encountered in professional practice. Topics addressed will include professional competence, human relations, privacy and confidentiality, advertising and other public statements, record keeping and fees, education and training, research and publication, assessment, and therapy. The course will elicit discussion and debate on ethical principles and case examples will be drawn from the field of intellectual and developmental disabilities. Contact: Susan Havercamp, PhD.

Topic in Developmental Disabilities (PSYCH 7899): Students in the IDD Program are required to participate in "Topics in Developmental Disabilities" (Topics in DD) held at Nisonger Center. They enroll in this course with its course code and receive graduate class credit. The *Topics in DD* features presentations by a group of interdisciplinary guest speakers including, OSU faculty, faculty from other universities, post-doctoral fellows, and other guest speakers. The *Topics in DD* is intended to emphasize the central role of research, practice, and policy issues, promote informal contacts (across multiple fields of study), and to familiarize all Nisonger trainees with ongoing research, clinical, and policy issues. Contact: Luc Lecavalier, PhD and Katie Walton, PhD.

Assessment in IDD (PSYCH 7858). The speakers present general information on widely-used measures in the field of mental retardation covering the following areas: cognitive development, adaptive behavior, achievement, autism, rating scales, language assessment, and disorders seen in IDD. Contact: Luc Lecavalier, PhD.

Empirically-supported Treatments for People with DD (PSYCH 5652). This course focuses on the basic principles and procedures of applied behavior analysis and behavior modification with children and adults with intellectual disability, autism spectrum disorder, and related developmental disabilities. Contact: Katie Walton, PhD.

Appendix C: Faculty and Personnel Qualifications (FY-2023)

ACL/OIDD Grant # 90-DDUC-0038

Program Performance Report

Faculty/Personnel Qualifications (FY23)

Our key personnel include Marc J. Tassé, PhD (Professor of Psychology), UCEDD Director, who also serves as PI for the AIDD grant and oversees the Center operations. He is a former UCEDD trainee, having completed a psychology postdoctoral fellowship at The Ohio State University Nisonger Center (1994-1995). He has also worked at two other UCEDDs, including the University of North Carolina Center for Development and Learning (1999-2006) and the University of South Florida - Florida Center for Inclusive Communities (2006-2009), before returning to the Nisonger Center in 2009 as the Director. He is also a licensed psychologist and Professor in the Departments of Psychology and Psychiatry at The Ohio State University. Dr. Tassé's experience includes 30+ years of conducting research and providing clinical services in the field of intellectual disability, autism spectrum disorders (ASD), and other related developmental disabilities. He has conducted over 310 trainings, workshops, and presentations related to developmental disabilities. His publication record includes more than 180 articles in peer-reviewed journals, chapters, and books in the area of intellectual and developmental disabilities. He is a co-author of the AAIDD (2002; 2010; 2021) Terminology and Classification Manual and AAIDD User's Guide (Schalock et al., 2007; 2012). He has also co-authored several published standardized assessment instruments in the field of intellectual and developmental disabilities, including the assessment of adaptive behavior (Quebec Adaptive Behavior Scale, Diagnostic Adaptive Behavior Scale), assessment of problem behavior (Nisonger Child Behavior Rating Form), and measurement of support needs (Supports Intensity Scale & SIS for Children). Dr. Tassé is a Fellow of the American Association on Intellectual and Developmental Disabilities, the American Psychological Association, and the International Association for the Scientific Study of Intellectual and Developmental Disabilities. His work has been recognized by the AAIDD (Exceptional Service Award: 2007, 2009 & 2011), the American Psychological Association (Division 33's 2017 John W. Jacobson Award for "meritorious contributions to the field of intellectual and developmental disabilities in an area related to behavioral psychology, evidence-based practice, dual diagnosis or public policy"), and he was recognized in 2020 for his significant national contributions to the field of IDD in the U.S. (National Historic Recognition Project: 2000-2020). He is a past President of the American Association on Intellectual and Developmental Disabilities (2012-2013). Dr. Tassé is also actively involved in conducting evaluations and giving expert testimony in capital cases where intellectual disability is an issue (Atkins hearings).

Paula Rabidoux, PhD (Speech-Language Pathology; Associate Professor of Clinical Psychiatry & Speech and Hearing Sciences) is the Associate Director of the Nisonger Center UCEDD as well as the PI on our MCHB LEND training grant. For the past 30 years, Dr. Rabidoux's clinical and research interests have focused on social communication and literacy issues for both children and adults with autism, communication impairments, and intellectual disability. Dr. Rabidoux's research

interests include parent - child story book interactions led to the development of an inclusive literacy model: *Interactive - to - Independent Literacy* that served as the theoretical foundation for the inclusive literacy strategies of the Next Chapter Book Club (a social literacy program for adolescents and adults with intellectual disability). Drs. Rabidoux and Fish published a book on the Next Chapter Book Club model in 2009. Dr. Rabidoux is also the Co-director of the LEND program and has been PI on two Social Security Demonstration grants to address improved pediatric SSI determination. She has also received funding from the Ohio DD Council. As the Faculty Coordinator of Speech Language Pathology services, Dr. Rabidoux participates on interdisciplinary teams, coordinates parent education programs, and completes interdisciplinary assistive technology assessment and intervention planning. She has taught graduate level classes in language development and disorders and autism spectrum disorders and has supervised and mentored over 150 graduate trainees.

L. Eugene Arnold, MD, MEd (Emeritus Professor of Psychiatry) is a child-adolescent psychiatrist with more than 50 years of research and clinical experience in intellectual disability, autism spectrum disorder, ADHD and related neurodevelopmental disorders. Dr. Arnold's research focuses on new drug development and alternative and complementary treatments for ASD and ADHD. His research includes clinical trials include the study of aromatic essential oil therapy for autism spectrum disorder, omega-3 fatty acids for mood disorders, neurofeedback for ADHD, nutrition and mental health, and related clinical trials focused on improving ID, ASD, and ADHD. Dr. Arnold's clinical interests include aromatic essential oil therapy and autism spectrum disorder, omega-3 fatty acids and mood disorders, neurofeedback and ADHD, nutrition and mental health, clinical trials, new drug development, alternative and complementary treatments.

Stephen Beetstra, DDS, MHSA, (Assistant Professor of Dentistry), is the Program Director of the Nisonger Center Dental Services. Dr. Beetstra began his career in Oregon as a Chief Dental Officer for the Indian Health Service. He went on to serve in Florida and North Carolina as a Chief Dental Officer and Director for the Health Resources and Services Administration (HRSA). From 1999 to 2005, Dr. Beetstra was an Assistant Professor and Chief of the Division of Dental Services at the University of New Mexico School of Medicine. In 2006, he joined the faculty at the University of Arkansas for Medical Sciences. He held several teaching positions, and was Professor and Chair of the Department of Pediatric and Special Needs Dentistry. Dr. Beetstra has been the Chief of Dental Services at the Arkansas Children's Hospital Department of Dentistry since 2014. Dr. Beetstra is also a member of the American Dental Association, Special Dentistry Association, Academy of Dentistry for Persons with Disabilities, American Association of Hospital Dentists, Central District Dental Society, National Academies of Practice, and the American College of Dentists.

Emma Lunn (new hire; non-faculty) is the assistant to the director and provides administrative support to the entire Center. Ms. Lunn also supervises administration student employees, assists with building issues, travel, purchasing, time keeping, and has a number of other administrative duties.

John Yamada (non-faculty) is a business operations analyst. Mr. Yamada is responsible for the coordination of community contracts, billing/invoicing, gifts/development, and other fiscal matters at the Center.

Susan M. Havercamp, PhD (Professor of Psychiatry and Behavioral Health) is the Director of Health Promotion and Healthcare Parity Program as well as Director of Behavior Support Services. Dr. Havercamp is also a mentor in the IDD Doctoral Program. She focuses her research, clinical work, and training on improving health and healthcare for children and adults with disabilities. She is a consulting editor for Intellectual and Developmental Disabilities and the book review editor for the Journal on Mental Health Research in Intellectual Disabilities. Dr. Havercamp's research and clinical work focuses on physical and mental health issues in persons with developmental disabilities. She is engaged in developing disability training for healthcare providers and developing health promotion materials for persons with developmental disabilities and their caregivers. She recently received a 5-year Rehabilitation Research and Training Center (RRTC) grant to study the health and function of adults with intellectual and developmental disabilities.

Luc Lecavalier, PhD (Professor of Psychology) is the Coordinator of the Ohio State Department of Psychology's IDD Doctoral Program. Dr. Lecavalier is the mentor for several long-term IDD doctoral trainees. He graduated from the Université du Québec à Montréal (Canada) in 2001 with a Ph.D. in Psychology. He then completed a postdoctoral fellowship at the University of North Carolina at Chapel Hill. Dr. Lecavalier is interested in diagnosis and measurement and behavior/psychiatric problems in individuals with intellectual disability and/or autism spectrum disorders. He has authored or co-authored more than 110 scholarly publications on the topic. In 2008, he was recipient of the Early Career Awards given by AAIDD and Division 33 of the American Psychological Association. He is the Principal Investigator of a NIH-funded multi-site controlled scale development grant to develop a measure assessing sleep in children with ASD. Dr. Lecavalier is an Associate Editor of American Journal on Intellectual and Developmental Disabilities and serves on the Editorial Boards of the Journal of Autism and Developmental Disabilities.

Karel Smith, CPA (non-faculty), is the Center's Administrator and helps with general center administration issues, establishing and maintaining MOUs between the Nisonger Center and respective Academic Departments, oversight of our clinical revenues and billing, provides budget support to Center programs, oversees administrative functions – including purchasing and travel, and interfaces with the grants/contracts manager.

Jordan Wagner (project coordinator; non-faculty) has the responsibility of being the Center's NIRS data coordinator and oversees NIRS data entry and training of other Center staff.

Katherine (Katie) Walton, PhD (Associate Professor of Psychology) is the Program Director for the Early Intervention/Early Childhood Education program. Dr. Walton is a graduate of the PhD program in clinical psychology at Michigan State University. She came to Nisonger Center with expertise in early childhood education and autism spectrum disorder. Dr. Walton received a

R21 research grant from the National Institute on Deafness and other Communication Disorders that focuses on Measurement of Social Communication Outcomes in Young Children with Autism Spectrum Disorder. Dr. Walton is also leading a Patient-Centered Outcomes Research Institute (PCORI)-funded stakeholder engagement project, which has recruited 30 community stakeholders across two sites to develop a research agenda and stakeholder consultation framework for early ASD intervention.

Jennifer R. Walton, MD (Assistant Professor of Clinical Pediatrics) is the Nisonger Director of Community and Clinical Services and Co-Director of the Nisonger Center MCH LEND Program. Dr. Walton is also a Developmental Behavioral Pediatrician at Nationwide Children's Hospital. Dr. Walton is the Developmental Behavioral Pediatrics Resident Rotation Director for Nationwide Children's Hospital's pediatric residency program, and the Co-Director of the hospital's Williams Syndrome Clinic. Dr. Walton specializes in the identification and management of children with Williams syndrome, Autism Spectrum Disorder, ADHD, developmental delay, intellectual disability, and other behavioral and developmental disabilities, as well as the interdisciplinary collaboration and management of these individuals.

Craig Williams, MD (Emeritus Professor of Psychiatry) is an experienced child/adolescent psychiatrist and Director of the Nisonger Neurodevelopmental Dual Diagnosis Clinic. Dr. Williams has more than 40 years of clinical and research experience working with individuals with developmental disabilities and complex psychiatric and behavioral health needs.

Andrea Witwer, PhD (Associate Professor of Clinical Psychiatry & Psychology) is the Director of Training and Community Outreach and Director of the Nisonger Autism Program and a member of the Nisonger Executive Committee. Dr. Witwer is also the Director of the Nisonger Autism Program and provides psychology training oversight/supervision for several Nisonger Center clinics. Dr. Witwer is a former trainee of the Nisonger Center who has risen to a leadership role since graduating from Ohio State University in 2010 from the Psychology Department with a PhD in Intellectual and Developmental Disabilities Psychology.

| | Number of Faculty | | |
|------------------|-------------------|--|--|
| | TOTAL: 10 | | |
| GENDER | | | |
| | | | |
| Women: | 5 | | |
| Men: | 5 | | |
| Ethnici | ty/Race | | |
| African American | 1 | | |
| White | 9 | | |
| | | | |
| Hispanic | 0 | | |
| Non-Hispanic | 10 | | |

ACL/OIDD Grant #90-DDUC-0038: The Ohio State University Nisonger Center

We are working at increasing our faculty racial and ethnic diversity. Although our state has a population representation of approximately 12% African Americans, our faculty has 9% African American but we continue to make efforts to recruit more diversity among our faculty and staff. The state population also includes, according to the most recent US Census estimates, approximately 3% Hispanic or Latino. We have initiated in the last 3 years important efforts to recruit and hire faculty members of diverse backgrounds. We have more diversity in the larger body of our personnel. Of our current staffing, excluding our faculty, we have a total of approximately 120 staff of whom more than 10% are black/African American and 4% are Hispanic or Latino.

7-7-2023





Consumer Advisory Council Meeting Minutes

VIRTUAL MEETING (July 27th, 2022 - 3:00 - 4:30pm)

Attendees: Amy Shuman, Ashley Poling, Carolyn Knight, Christine Brown, Corey Ferguson, Darlene Byler, David Ellsworth Ilka Riddle, Jed Morison, John Yamada, Joyce Martin, Lauren Hackenberg, Marc Tassé, Pat Cloppert, Paula Rabidoux, Stephanie Leppert

3:00 - 3:08 Welcome and Introductions

Jed Morison

- Welcome everyone, brief introductions
- Approval of Minutes (04/26/2022)
 - o Motion: Pat Cloppert
 - Second: Amy Shuman
- Replacement for Patti Ruble (Person with lived DD experience)

3:08 - 3:33 State-Wide Leaders Update

DODD (Corey Ferguson), FCBDD (Jed Morison) Ohio DD Council (Carolyn Knight) Cincinnati UCEDD (Ilka Riddle)

DODD Update (Corey Ferguson)

- o OhioISP
 - Timeline
 - September 2022: Counties have started using online OhioISP
 - September 2023: Everyone using OhioISP
 - January 2024: Citations begin being issued.
 - Communications going out to plan authors, providers, people with disabilities, families
 - ICF's onboarding now too.
- Blackout Dates for PSM
 - Medicaid Provider Network Module (PNM)
 - DODD Provider Services Management (PSM)
 - 8/5/22: Deadline: Initial Applications for IP and renewals for all providers
 - Go live October 2022
- Appendix K

- Public Health Emergency renewed
- Currently PHE ends Oct 12
- Winddown ends April 12

MDA RFP

- The result will be the redesign, modernization, and simplification of current processes related to assessments, funding, rate setting, data collection, and establishing individual budgets for Medicaid Home and Community-Based Services Waivers administered by DODD.
- Ohio Buys: Waiver Reimbursement System Modernization
- Waiver Changes 7/1/2022 (https://dodd.ohio.gov/waivers-and-services#:~:text=DODD%2C%20in%20partnership%20with%20stakeholders,and%20those%20who%20support%20them.)
 - L1
- 5 New Services
 - PDGS
 - (Cap \$2,500) services, equipment, or supplies not otherwise provided through the waiver or Medicaid state plan services that address a specific assessed need and outlined in the Individual Service Plan
 - Self-Directed Transportation
 - -available around the clock, including weekends and holidays, to accommodate on demand or scheduled transportation needs through public transportation options or

facilitated through a Financial Management entity

- Functional Behavioral Assessment:
 - an assessment that helps a person understand why they do things that they
 do, why they sometimes feel upset or stressed, and helps to explain the
 relationship between actions and the environment
- Clinical Therapeutic Intervention:
 - helps a person meet the needs identified in a Functional Behavioral Assessment. It includes things like help from a counselor or a psychologist, help making plans to limit challenging behavior, and training for people who support the person on how to carry out the plan.
- Participant/Family Stability Assistance
- training and counseling that enhance a person's ability to direct services received and/or enable them and/or family members who live with them to understand how best to support.
- SELF Waiver
 - Add Home delivered meals (2x/day)
- Self-Directed Transportation added to all waivers
- Community Capital Assistance Program
- \$25 million to fund the Community Capital Assistance (CCA) program which builds, buys, and renovates homes for independent living options across the state.
- June 21: Governor Mike DeWine signed Senate Bill 239, which was amended to address
 Intermediate Care Facility (ICF) rates beginning July 1, 2022. The language in the bill allows

the ICF reimbursement methodology to run as outlined in statute. DODD anticipates that the formula will result in an overall increase for the ICF program for state fiscal year 2023.

FCBDD Update (Jed Morison)

- Involved with the ISP in Franklin County; done over 4000.
- Department of DD, Department of Medicaid and CMS have approved a Direct Service Professional retention program.
- Dr. Angela Ray is retiring after 27 years in August.

DD Council (Carolyn Knight)

- Council member cannot find transportation; will have to increase the amount being paid
- Will be collaborating with Nisonger Center on a nursing contract

Cincinnati UCEDD (Ilka Riddle)

- Ohio Nursing Collaborative is working on a brochure to give to families to better nursing services.
- Ohio Rise is going to be implemented and monitored closely.
- Developed a collaboration between ODECD, Disability rights Ohio and Cincinnati where they are providing training for parents to become Special Education Champions.

3:33 - 3:34 Legislative Update

Jed Morrison

 Please complete the Disability Rights Ohio Public input survey on their goals and objectives here: https://disabilityrightsohio.org/survey

3:34 – 3:57 Nisonger Center Update

Marc J. Tassé

- General Information
 - Andrew Buck, PhD successfully defended his doctoral dissertation.
 - Gene Arnold, MD gave a lecture to the University of Florida residents on 07/19/2022.
 - Stephen Beetstra, DDS received the Outstanding Leadership Award from the Special Care Dentistry Association.
 - John Yamada is Nisonger Center's new Business Operations Analyst.
 - 178 people registered for the 2022 Nisonger Institute; 74% Professionals, 19% family members/individuals with a disability, and 6% students.
 - Barabara Sapharas, MA, SLP was presented with the 2022 Nisonger Center Champion Award.
 - VACcess Project is almost complete; check out this video made by Somalican at https://www.youtube.com/watch?v=NBIc35Fsvol
 - TechSummit 2022 is August 12 from 9:00am-4:00pm at the Renaissance Columbus Westerville- Polaris Hotel. Contact Jordan Wagner at <u>Jordan.wager@osumc.edu</u> for more information.
 - Year-in- review 2021-222:
 - 26,000 Individuals with DD received services
 - 19,800 students, professionals & para-professionals received training

- 26 grants were submitted
- New Mission: The mission of The Ohio State University Nisonger Center is to empower and support all people with developmental disabilities and their families through interdisciplinary training, research, and service.
- New Vision: To cultivate an inclusive environment for all individuals, through the highest quality of interdisciplinary care, education, and research to support people with developmental disabilities
- New values: Person/Family Centered Approach, self-determination, diversity and inclusion, equity, community, excellence, and innovation.
- New Grants/Contracts
 - Marc Tassé, PhD received \$3 million from the Administration for Community Living for five years.
 - New Donations/Gifts:
 - Smart Home Discovery place was award \$25,000 from the Columbus Foundation.
 - ACE! Program received \$21,00 donation.

3:57 - 4:20 Program Presentation: The Direct Support Professional Workforce

Christine Brown, David Ellsworth, & Lauren Hackenberg

- Project purpose was to gain a deeper understanding of the DSP workforce crisis and create a policy brief to educate policymakers and stakeholders.
- 950 DSPS responded to the survey, representing every region of Ohio.
- The survey showed DSPS care about their clients, but feel unsupported with low wages, inadequate benefits, lack of paid time off, and limited career development.
- Next steps include seeking additional funding and conducting in depth data analysis of extended responses

4:20-4:25 New Business

Jed Morison

4:25 Next Meeting

Jed Morison

- October 22, 2022 3:00 4:30pm
- Call for agenda Items

Meeting adjourned at 4:25pm

Minutes: Darlene Byler



Consumer Advisory Council Meeting Minutes

VIRTUAL MEETING (October 25th, 2022 - 3:00 - 4:30pm)

Attendees: Corey Ferguson, Darlene Byler, Ilka Riddle, Jed Morison, John Yamada, Joyce Martin, Kim Baich, Marc Tassé, Nathan Turner, Pat Cloppert, Paula Rabidoux, Stephanie Leppert

3:00 - 3:09 Welcome and Introductions

Jed Morison

- Welcome everyone, brief introductions
- Approval of Minutes (07/26/2022)
 - o Motion: Nathan Turner
 - Second: Pat Cloppert
- Welcome Nathan Turner
- Proposal of new schedule for 2023:
 - February 28th, 2023
 - o May 30th, 2023
 - August 29th, 2023
 - November 28th, 2023

3:09 - 3:31 State-Wide Leaders Update

DODD (Corey Ferguson), FCBDD (Jed Morison) Cincinnati UCEDD (Ilka Riddle)

DODD Update (Corey Ferguson)

- PHE Extended re: Appendix K Flexibilities
 - PHA currently set to end January 11, 2023
 - o Winddown period ends: July 10, 2023
- Workforce Crisis Task Force Continues
- Regional DSP Forums forth coming to for feedback and learning.
 - 6 regional in-person mtgs
 - o 2 virtual mtgs
- RFPs

- Innovation Technology Solutions Grant: support residential providers in Ohio in building technology capacity and increasing the use of supportive technology within service delivery and service operations
- Pathways for Careers: improve post-secondary education options for young adults with developmental disabilities related to industry-recognized credentials and apprenticeships that lead to successful employment offering higher pay and benefits.
- Tech 1st & DSP Crisis: Ohio's Future Paved by Technology
- Tech 1st Updates now available
- OhioISP
 - October trainings presented and recorded for following groups:
 - People with disabilities
 - ICFs
 - Families/Guardians
- Capital Housing Funding Available via Community Capital Assistance Program
 - o funds made available by the state used to develop community housing for people with developmental disabilities who are or will be receiving waiver services
- Expanded Use of Capital Funds for Acquisition of Housing for Youth with Intensive Behavioral Support Needs
 - OAC 5123-1-02
- MDA: Provider Network Management (PNM) module launched 10/1
 - o New single point of entry to DODD's Provider Services Management (PSM) system.
 - Module for all activities related to their certification for DODD waiver and nonwaiver services. This includes applications for initial certification, renewal certification, address changes, etc

FCBDD Update (Jed Morison)

- Community Star Awards took place on October 26th where FCBDD recognized twelve different categories of people and organizations.
- Have done close to 5,000 ISPs.

Cincinnati UCEDD (Ilka Riddle)

- Received research grant from NIDILRR to look at ableism and how it impacts people with disabilities.
- Received a grant from ACL which will look at health care disparities, and the intersectionality of disability and race.
- Collaborating with the Cincinnati Children's Hospital to do outreach in underserved communities for flu and COVID vaccines.
- Hired two new graduate students, one of which is focusing specifically on the public health workforce.

3:31 – 3:46 Nisonger Center Update

Marc J. Tassé

General Information

- The Ohio State University and The Ohio State University Wexner Medical Center received the Governor's Inclusive Employer Award. Congratulations to Ashley Leslie who is the leader of the Diversabilities ERG group and promotes disability inclusion.
- Dr. Stephen Beetstra and Dr. Jennifer Walton presented in Paris, France at the 26th
 International Association of Disability and Oral Health Congress.
- Dr. Marc J. Tassé was invited to give the closing address at Dincat's 35th Congress
 "Constructing the Future for People with Intellectual Disability" in Barcelona, Spain.
- Dr. L Eugene Arnold received the Elaine Schlosser Award for Research in ADHD at the AACAP annual meeting in Toronto.
- Dr. Margo Izzo received the 2022 Institute of Higher Education Leadership Award at the 2022 State of the Art Conference in Syracuse, New York.
- Dr. Vanessa Rodriguez was awarded an OSU Career Development Grant to fund half a day learning experience for NBSS in the amount of \$1,875.
- Nisonger Center received a generous gift from St. Brigid of Kildare Knights of Columbus, which will be used to purchase new technologies for children and adults with intellectual disability and autism.
- The 4th annual TechSummit had nearly 290 registrants and was a successful event.
- Nisonger Dental Services received \$25k from the TeCharities Golf Outing.
- Nisonger Dental Services received \$30k from the KiDDS Cup Golf Tournament.
- ACE! Program received a \$40,000 donation from JP Morgan Chase. Aspirations Fall Festival is Saturday, October 29th at the Highbanks Mansion Shelter.
- Annual Nisonger Center Donor Event will be Thursday, December 8th at 6:00pm. The programs who will be presenting are LEND & Psychology, Behavior Support Services, and Research on Sleep Disorders in ASD.
- Marc J. Tassé, PhD received a \$600,000 3-year grant called *Using Remote Support Services Technologies to Enhance Independent Living* from the National Institute on Disability, Independent Living, and Rehabilitation Research.
- Andrea Witwer, PhD received \$280,000 from the Administration for Community Living for a five-year subaward to a grant called *Project of National Significant: Co-Occurring* Resource Center for Individuals with ID/DD.
- Jessie Green, MEd received a new \$1,623,356 subaward 5-year subaward from OOD.
- Marc J. Tassé received \$85,637 from the Ohio DD Council for a grant called DD Nursing Workforce Study.
- 3:46 3:52 Program Presentation: DD Nursing Workforce Study Marc J. Tassé
 - The goal of this project is to assess and report on the home care nursing crisis and provide recommendations that could help alleviate this workforce crisis.
 - Will be using online survey questions and focus groups to better understand areas that need to be improved.

 Goal of this study is to prepare a "clear language" summary with bulleted findings/recommendations for dissemination to: families, agencies/providers, county boards of DD, policy makers, and other stakeholders.

3:52-3:54 New Business Jed Morison

3:54 Next Meeting Jed Morison

■ February 28, 2023 – 3:00 - 4:30pm

Call for agenda Items

Meeting adjourned at 3:54 pm

Minutes: Darlene Byler



Consumer Advisory Council Meeting Minutes

HYBRID MEETING Nisonger Center Rm 250, Zoom (February 28, 2022 - 3:00 - 4:30pm)

Attendees: Corey Ferguson, Ilka Riddle, Jed Morison, Kerstin Sjoberg, Carolyn Knight, John Yamada, Joyce Martin, Kim Baich, Marc Tassé, Nathan Turner, Pat Cloppert, Paula Rabidoux, Stephanie Leppert, Christine Brown, Samantha Perry, Rebecca Love, Andrea Witwer

3:00 - 3:07 Welcome and Introductions

Jed Morison

- Welcome everyone, brief introductions
- Approval of Minutes (10/25/2022)
 - Motion: Paula Rabidoux Second: Corey Ferguson

3:07 - 3:40 State-Wide Leaders Update

DODD (Corey Ferguson)
FCBDD (Jed Morison)
Ohio DD Council (Carolyn Knight)
Cincinnati UCEDD (Ilka Riddle)
DRO (Kerstin Sjoberg)

DODD Update (Corey Ferguson)

- State Budget
 - \$701 million in support for Ohioans with developmental disabilities. Double the Governor's first budget, which was the largest increase in the history of the DD system
 - Invests \$579 million into provider rates for the primary purpose of increasing direct care wages to stabilize the workforce
 - Array of HCBS Services increasing by 16.5%; some others by 10%
 - Budget includes language that County Boards must have people with DD as board members
 - Investment in Advocacy and Protective Services (APSI) to lower caseloads
 - Priority areas include technology support and youth with complex needs
- Waiver Redesign Initiative

- Deloitte Consulting has been contracted
 - Initiative will focus on the redesign, modernization, and simplification of current processes related to assessments, funding, rate setting, data collection, and establishing individual budgets for Medicaid Home and Community-Based Services Waivers administered by DODD
- Learning Aid Ohio
 - Providing free 1-1 tutoring sessions for children/youth with IEP or 504 plans
- Ohio Individual Service Plan (OhioISP)
 - Were once over 500 ISP templates in OH and now transitioning to 1 plan for all ICFs and County Boards
 - All plans for waiver recipients and ICFs must be in OhioISP by end of June 2024
- Innovation Series: April 4 May 9
 - Strategies and address obstacles related to Employment, Technology, Transition, Complex Needs, and Plans & Outcomes.
- Multisystem Youth (MSY) & families.
 - DODD awarded funding to 46 county boards through the Keeping Families Together (KFT) program. County boards used the award to offer respite and other services, thereby enabling youth to remain in their homes and communities.

FCBDD Update (Jed Morison)

- Focus on the state budget working with legislative groups to see if rates can be increased as it relates to . There is a campaign with a coalition, the Ohio Budget Coalition, to lobby legislators regarding an investment in DSPs in the DD community can find out more about the work being done by the coalition at www.ohioddcrisis.com
- March is DD Awareness month
 - Statehouse event March 1, sponsored by DD Council
- Legislative Advocacy Day through FCBDD, March 31st at 10:30, held at one of FCBDD facilities, will invite all central Ohio legislators.
 - Emphasize Medicaid buy-in
 - Emphasize DSP Workforce crisis and wages
- Provider Fair on April 27th, opportunity for individuals and families to learn more about different providers and opportunities for recruitment

DD Council Update (Carolyn Knight)

 Wrote a long article regarding the East Palestine situation which will be out in the next few days

Cincinnati UCEDD Update (Ilka Riddle)

- Ohio Family 2 Family Health Information Team (Ohio F2F) in partnership with OhioRISE is going well
 - Have done some presentations
 - Working on making info fact sheets regarding Medicaid changes and eligibility redetermination to help families have this information
- Received funding from DODD to develop a health care transition module geared toward youth and young adults with disabilities on what health care transition is and what to think about in the process

- Received funding from the Thomas Foundation to work on virtual health care transition modules geared toward family members of youth and adults with disabilities on different areas of transition such as supported decision making, financial planning, etc.
- Partnership with Ohio Coalition for the Education of Children with Disabilities (OCECD)
 and Disability Rights Ohio (DRO) on developing training modules that will increase
 capacity in Ohio for parent education champions regarding special education and
 individualized education programs three modules developed so far with a fourth in the
 works
- Rubenstein-Taybi syndrome Conference in June, received some funding to be able to offer scholarships to potential attendees

DRO Update (Kerstin Sjoberg)

- Positive Outcome with special education complaint filed with the Ohio Department of Education about students with disabilities and the lack of individualized instruction at Warren County Educational Service Center (ESC) – involved multiple school districts in addition to Warren County ESC
- Voting
 - o DRO is monitoring and educating the public on changes from HB 458
 - This includes changes to require photo ID to vote in-person which is important because voters may be turned away if they don't have the right kind of ID
 - Absentee voting timelines have been changed and drop boxes have been instituted which are the only locations that ballots can be taken to
 - The Secretary of State (SOS) is expected to provide additional guidance around disabled voters
 - Language change to curbside voting which was an option for people who can't physically go in to vote – directives state that claims of this physical incapacity cannot be challenged and this is a hopefully positive outcome
- Focus on minimum wage participating with the 14C Task Force with other advocates including many DD partners to talk about subminimum wage and what can be done to phase this out
- Also focusing on workforce crisis gathering and sharing stories through a series called "Everyone Deserves Care" which maps stories according to areas in the state and their representative districts -featured on the DRO website
- Budget Overview
 - The budget has been introduced as HB 33
 - Ohio Department of Medicaid (ODM), Ohio Department of Aging (ODA), and DODD are proposing large investments into the direct care workforce to increase wages to \$16/hr. with an emphasis on parity to ensure higher wages in one system doesn't negatively impact another system
 - Discussion that \$20/hr. may be a better wage but \$16 is a great starting point
 - Currently, we are not seeing any language that requires these additional dollars to be spent directly on wage increases, long-term sustainability of wage growth, or additional support to retain providers through training, benefits, etc. but would like to see this in the budget or in future advocacy

- Ohio Department of Education (ODE) is proposing a \$190M line item to pay for one SRO in each school, DRO does not believe this is the right policy move, DRO keeping an eye on this development
- Opportunities for Ohioans with Disabilities (OOD) will be pulling down its full federal match for VR and receiving a \$9M grant to move 1450 individuals out of subminimum wage
- Important Dates
 - OMHAS will be testifying on March 9th
 - DODD will be testifying on March 14th
 - o ODM will be testifying on March 16th
 - Public testimony will be occurring the week of the 14th and 21st
 - Amendments are due early April

3:40 – 3:57 Nisonger Center Update

Marc J. Tassé

- General Information
 - Jessie Green, PhD successfully defended her doctoral dissertation on November 16th
 - Jenae Miller, LEND self-advocate trainee was recently elected to the Board of Directors of Greenleaf Job Training Services, term start date January 1, 2023
 - Gene Arnold, MD received the National Association for the Dually Diagnosed's (NADD)
 2022 Steven Reiss Research Award
 - Gene Arnold, MD received the American Psychiatric Association's 2023 Frank J.
 Menolascino Award
 - Carly Gilson, PhD received the Early Career Award from the American Association on Intellectual and Developmental Disabilities (AAIDD)
 - Alice Bacherini, a doctoral student at the University of Perugia (Italy) who completed a research internship in 2022 at the Nisonger Center, was selected to receive the AAIDD 2023 Student Award
 - Walton, MD, MPH, was appointed to the National Academies of Sciences, Engineering, and Medicine's (NASEM) Committee on Improving the Health and Wellbeing of Children and Youth through Health Care System Transformation
 - Katie Walton, PhD just launched a website for Project STEER (Stakeholders Engaged in Early Intervention Research) which was developed with funding from DODD
 - Abe Graber, PhD, new faculty at Nisonger Center, is a bioethicist and has published in the area of intellectual disability and autism and various ethical issues
 - Craig Williams, MD, is retiring but will return as a faculty retiree. Retirement date 2/28/23, return date 5/1/23
 - John J Warner, MD, MBA is the new CEO of the Ohio State Wexner Medical Center and executive vice president of University Health Affairs – will start 4/1/23
 - Year-in-review video going over the previous year and the highlights
 - Development event was on 12/8/23 which is an event we hold annually for our donors to highlight our programs and our accomplishments
 - Nisonger Center 2023 calendars have been mailed out, please let us know if you still need one

- Charting the LifeCourse 2023 Ohio Showcase will be held on 3/17/23. Event is in partnership with University of Cincinatti UCEDD and DD Council, still a few spots left
- Nisonger Institute will be held Friday 5/19/23 from 1pm-4pm. This year's theme will be "The ABCs of Inclusive Research: Accessible Measures and Better Therapy Guidelines Through Community Engagement"
- Marc J. Tassé received \$124,277 for a project called DODD Family/Guardian Caregiver Survey from DODD
- Marc J. Tassé received \$32,400 for a project called Outcome Evaluation of the Ohio StationMD Pilot Project from StationMD
- The Nisonger Center Dental Clinic received a \$50,000 donation from the GLOW Foundation to help with dental renovations
- The Nisonger Center Dental Clinic received a \$10,000 donation from the Delta Dental Foundation of Michigan, Indiana, Ohio, and North Carolina to send faculty, staff, students, and a resident to the National SCDA Meeting
- JPMorgan Chase has pledged \$198,000 to fund program fees for 14 Ace! and 6 TOPS students for the 2023-2024 academic year as part of JPMorgan's Autism at Work Emerging talent Intern Program

3:57 – 4:15 Program Presentation: Building Bridges

Andrea Witwer

- The goals of this project are to learn how individuals with intellectual and developmental disabilities (ID/DD) and mental health disability (MHD) can get the care they need and to improve the services and supports for these individuals
- Currently wrapping up phase 1 which was to identify state resources, needs, gaps, and priorities that can be addressed through training to lead to more seamless cross-system collaboration
- Eventual plans include creating Project ECHO shared learning groups to develop a community of practice, develop a certificate program to help train other professionals, and curate a list of existing trainings and resources

4:15 New Business

Jed Morison

4:16 Next Meeting

Jed Morison

May 30, 2023 – 3:00 - 4:30pm

Meeting adjourned at 4:16pm

Minutes: John Yamada



Consumer Advisory Council Meeting Minutes

HYBRID MEETING Nisonger Center Rm 230, Zoom (May 30, 2023 - 3:00 - 4:30pm)

Attendees: Jed Morison, Corey Ferguson, Kerstin Sjoberg, Carolyn Knight, John Yamada, Joyce Martin, Marc Tassé, Nathan Turner, Pat Cloppert, Paula Rabidoux, Stephanie Leppert, Christine Brown, Samantha Perry, Bobbi Krabill, Kim Baich, Ashley Poling, David Ellsworth, Durga Mishra, Emma Lunn

3:00 - 3:07 Welcome and Introductions

Jed Morison

- Welcome everyone, brief introductions.
- Welcome: Bobbi Krabill New Consumer Advisory Council Member
- Approval of Minutes (2/23/2023) John Yamada

Motion: Pat CloppertSecond: Paula Rabidoux

3:08 - 3:56 State-Wide Leaders Update

DODD (Corey Ferguson)
FCBDD (Jed Morison)
Ohio DD Council (Carolyn Knight)
DRO (Kerstin Sjoberg)

DODD Update (Corey Ferguson)

State Budget

- DODD has been meeting with Senator's on the state budget.
- The Senate Medicaid and Finance Committee has heard testimony on the DODD budget.
- The Senate has not made changes to the bill yet, so there hasn't been much to update.
- June 6th The Senate is set to unveil a substitute bill.
- Most budget conversation has been around DSP wages.
 - The Governor's budget increased rates to \$16/ hour
 - The House added to that to get to \$18/ hour in the second year of the budget.

Waiver Redesign

Department is working with Deloitte with work on a redesign of the DD waiver.

OISP

- June 2024 Deadline
- Support for OISP and plan writers being provided at regional gatherings throughout Ohio for QIDPs & SSAs

DODD/ODE/OADSP: DSP-U

 The program provides opportunities for currently enrolled high school students interested in working with people with developmental disabilities to be better prepared for a career in the field. Students participating in the DSP-U program can earn professional credentials while receiving credit toward high school graduation requirements.

Podcast, Disability Connect & Disability Connection

 Department has new communication and connection opportunities coming for people served by our system.

FCBDD Update (Jed Morison)

Reached the end of the school year 2022- 2023 for early childhood classes and West Central school of the FCBDD.

Public health emergency concluded May 11th.

Jed announced retirement effective December 31st, 2023, following 54 years of public service. Step down as Superintendent and CEO for FCBDD. Board working with a search firm for a replacement.

DD Council Update (Carolyn Knight)

- Pleased to announce New Representative for Medicaid approved and will be joining in June 2023.
- Representative will speak to the issues among other duties, introduce resolutions and serve on committees.

DRO Update (Kerstin Sjoberg)

- Pleased to announce the appointment of Suzanne Musleh as Legal Advocacy Director started April 2023
- Working with the board on a Diversity plan: recently work began on a Diversity Plan for the Board of Directors, with a clear and concise understanding that DRO needs to have a board that reflects the diversity of Ohioans with disabilities. This diversity will ensure

that DRO is considering the needs of all Ohioans with disabilities, including those who are most disconnected from the disability service system and may not know about DRO.

Coming soon in mid-June – survey for Ohioans with disabilities, their families, service
providers, and advocates to learn about their experiences and gain a better
understanding of the challenges they are facing. The results will be used to inform and
refine goals and objectives for the next year.

Legislative Update:

- The house passed budget has included historic investments.
- Raising average wages for direct care workers to \$17 an hour in 2024 and \$18 an hour in 2025.
- Additionally, modifications to the language around appointments for eligible individuals
 to county boards of disabilities needs changed to ensure greater representation of
 disabled individuals at the decision-making table.
- In the Senate, on May 11th, the Senate Medicaid Committee is planning on accepting testimony. Even though the dates are unconfirmed, we anticipate the Senate Health Committee will be accepting public testimony on May 10th or 11th.
- Special election in August (2nd Tuesday) changes to the voting requirements. State ID, photo ID needed.

3:40 – 3:57 Nisonger Center Update

Marc J. Tassé

- General Information
 - Welcome New member of the Consumer Advisory Council Bobbi Krabill who is the Chief of the Center of Public Health Excellence at the Ohio Department of Health.
 - Presented Awards and recent publications from faculty / staff.
 - The McCampbell Hall Dental Clinic Renovations are complete and the clinic reopened May 1st, 2023.
 - Congratulations to Kelly Barnett who has been appointed as the Director of Clinic and Community based services, effective 7/1/2023.
 - 2023 Nisonger Center Champion Award goes to Nikole Loew, DD Clinician Netcare Services. Nikole Loew is a consultant to the Developmental Disability services community regarding crisis management and Netcare services.

- New security project has been approved at McCampbell Hall, Renovations will start July
 2023 improvements will include security and safety of our NELP / ECE spaces.
- ACL / OIDD Program Performance Report Annual Report due July 28, 2023.

3:57 – 4:15 <u>Program Presentation: Ohio Linkages Project – Connecting People with Intellectual and</u> Developmental Disabilities to Accessible Healthcare

David Ellsworth & Durga Mishra

- The goals of this project are to learn how individuals with intellectual and developmental disabilities (ID/DD) and mental health disability (MHD) can get the care they need and to improve the services and supports for these individuals.
- Currently wrapping up phase 1 which was to identify state resources, needs, gaps, and priorities that can be addressed through training to lead to more seamless cross-system collaboration.
- Eventual plans include creating Project ECHO shared learning groups to develop a community of practice, develop a certificate program to help train other professionals, and curate a list of existing trainings and resources.

4:15 New Business Jed Morison

4:16 Next Meeting - Nisonger Center Consumer Advisory Council meeting - Jed Morison

- Tuesday, August 2023 3:00pm 4:30pm
- Meeting adjourned at 4:16pm: Minutes: Emma Lunn

Appendix E: Media Report (FY-2023)



Public Affairs and Media Relations Suite 135 650 Ackerman Rd. Columbus, OH 43202

Eileen.Scahill@osumc.edu

Nisonger Center Media Coverage & Opportunities 2022-2023

By Eileen Scahill, Public Affairs & Media Relations

TOTAL AUDIENCE: 148.5 MILLION

MEDIA COVERAGE 2023

6/8/23: The Waynesboro Public Library has become affiliated with the Next Chapter Book Club. This development allows the library to offer book clubs for teens and adults with intellectual and developmental disabilities. **The Nisonger Center** is mentioned.

The News Virginian
Print audience: 4,107
Online audience: 9,193

5/14/23: The month of May ushers in a season of renewal and growth, much of it directed toward motherhood. The days leading up to Mother's Day are punctuated by advice, affirmations and poetic verse about moms, both current and future, and why the role is so cherished. **Megan Ryan** and the **Nisonger Center** are mentioned.

Columbus Dispatch
Print audience: 35,235
Online audience: 411,265

4/25/23: Over and over again I hear from fellow wheelchair users, "My doctor knows little or nothing about spinal cord injury." Or, "It's really hard to find a urologist who has any real understanding of SCI." **Susan Havercamp** is mentioned.

New Mobility

Print audience: 85,000 Online audience: 14,005

4/17/23: Hormones are chemicals that dictate many aspects of human health. From when a woman is able to conceive a child, to pregnancy, energy levels and even body temperature, all of these functions are controlled to some degree by delicate hormones. **Eugene Arnold, MD**, is quoted.

WTOP-FM (Washington DC via U.S. News & World Report)

Online audience: 458,152

3/3/23: Here's why men can't blame their mothers for their receding hairline anymore. **Dawn Allain** is quoted.

The Healthy

Online audience: 545,970

1/27/23: Hormones are chemicals that dictate many aspects of human health. From when a woman is able to conceive a child, to pregnancy, energy levels and even body temperature, all of these functions



THE OHIO STATE UNIVERSITY

WEXNER MEDICAL CENTER

are controlled to some degree by a delicate balance of hormones. **Dr. Irina Azaryan** and **Dr. Eugene Arnold** are quoted.

U.S. News & World Report
Online audience: 15.4 million

WTOP-FM (Washington DC via U.S. News & World Report)

Online audience: 413,210

MEDIA COVERAGE 2022

11/28/22: How did you learn about sex? Sex education in school? Even in states that focus on abstinence-only sex education, girls typically get an overview of menstruation; boys likely get some basic anatomy. **Jessie Green** is quoted.

Giddy

Audience it not available

10/28/22: Do you have your mom's button nose? Did your dad pass on the curse of sneezing in bright sunlight? And where did your baby's red, curly hair come from when there hasn't been a redhead in your family for generations? **Dawn Allain** is quoted.

MSN Health & Fitness (via Reader's Digest)

Online audience: 59.7 million

10/4/22: Do you have your mom's button nose? Did your dad pass on the curse of sneezing in bright sunlight? And where did your baby's red, curly hair come from when there hasn't been a redhead in your family for generations? **Dawn Allain** is quoted.

MSN Health CA (via Reader's Digest)

Online audience: 67.2 million

Reader's Digest

Online audience: 2.5 million

7/13/22: A video clip circulating on Facebook claims attention-deficit/hyperactivity disorder was fabricated to disadvantage Black boys. **Dr. Eugene Arnold** is quoted.

Politifact

Online audience: 1.7 million

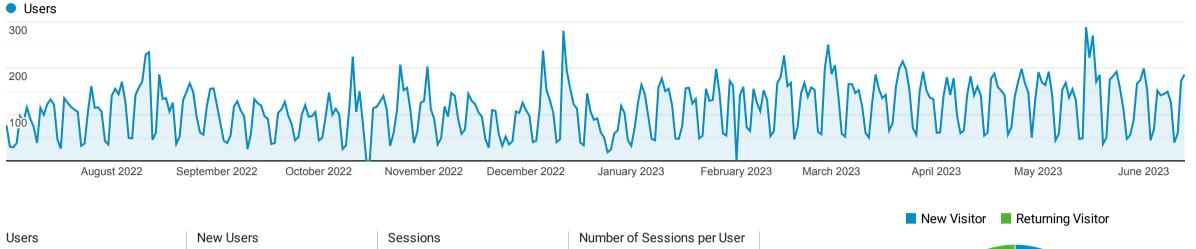
Appendix F: Website Analytics Report (FY-2023)

Audience Overview

All Users
100.00% Users

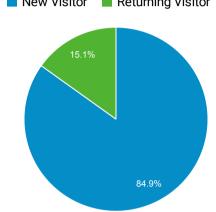
Jul 1, 2022 - Jun 13, 2023





New Users 30,661 43,767 1.43

Pageviews Pages / Session 2.20 Avg. Session Duration 00:02:02 62.73%



| Language | Users | % Users |
|------------|--------|---------|
| 1. en-us | 27,095 | 88.70% |
| 2. zh-cn | 2,247 | 7.36% |
| 3. en-gb | 314 | 1.03% |
| 4. en | 175 | 0.57% |
| 4. en 5. c | 171 | 0.56% |
| 6. en-ca | 70 | 0.23% |
| 7. en-au | 54 | 0.18% |
| 8. ru-ru | 39 | 0.13% |
| 9. fr-fr | 38 | 0.12% |
| 10. de-de | 25 | 0.08% |
| | | |

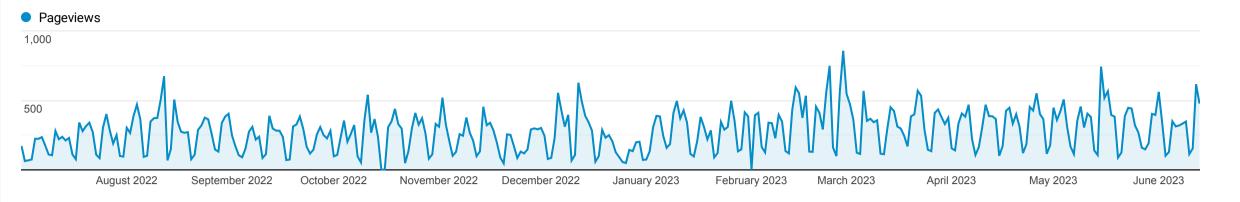
© 2023 Google

Overview

All Users
100.00% Pageviews

Jul 1, 2022 - Jun 13, 2023

Overview



| Page | | Pageviews | % Pageviews |
|---|----|-----------|-------------|
| 1. / | | 15,845 | 16.49% |
| 2. /adolescent/adolescent-clinics-services/aspirations-ohio-2/ | æ | 4,287 | 4.46% |
| 3. /adult/adult-clinics-services/tops/ | Œ. | 3,442 | 3.58% |
| 4. /education-training/ohio-disability-health-program/disability-healthcare-training/ | æ | 3,364 | 3.50% |
| 5. /clinics-services/child/ | P | 2,215 | 2.30% |
| 6. /adult/adult-clinics-services/ | P | 1,977 | 2.06% |
| 7. /clinics-services/child/early-childhood-education-programs/ | P | 1,914 | 1.99% |
| 8. /technology-project/techsummit2022/ | P | 1,369 | 1.42% |
| 9. /adolescent/adolescent-clinics-services/school-aged-autism-developmental-clinic/ | P | 1,346 | 1.40% |
| 10. /adolescent/ace-autism-college-experience-at-osu/ | æ | 1,333 | 1.39% |

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Appendix G: Facebook Metrics (FY-2023)



OSUMC Facebook Metrics The Ohio State University Nisonger Center

July 1, 2022 - June 14, 2023



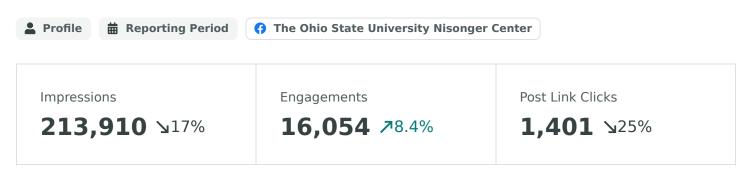
Facebook Performance Summary

View your key profile performance metrics from the reporting period.



Facebook Performance Summary

View your key profile performance metrics from the reporting period.



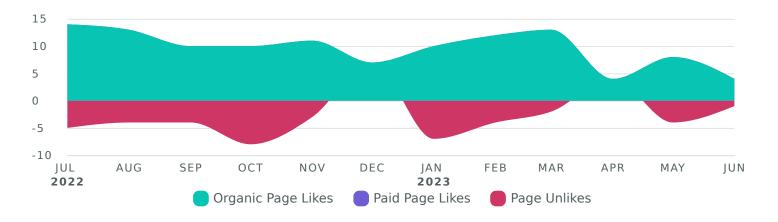


Facebook Audience Growth

See how your audience grew during the reporting period.



Net Page Likes Breakdown by Organic/Paid Likes, by Month



| Audience Metrics | Totals | % Change |
|--------------------|--------|----------------|
| Net Page Likes | 74 | \48.3 % |
| Organic Page Likes | 116 | ⅓ 46.3% |
| Paid Page Likes | 0 | →0% |
| Page Unlikes | 42 | ≥ 42.5% |

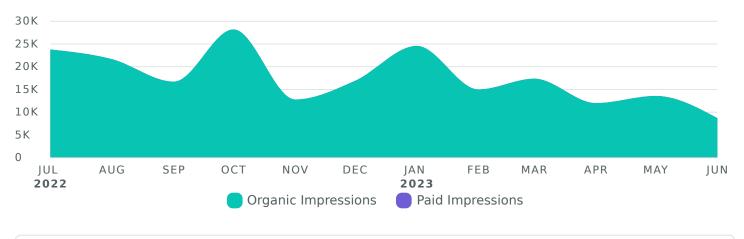


Facebook Impressions

Review how your content was seen by the Facebook community during the reporting period.



Organic and Paid Impressions Breakdown by Organic/Paid, by Month



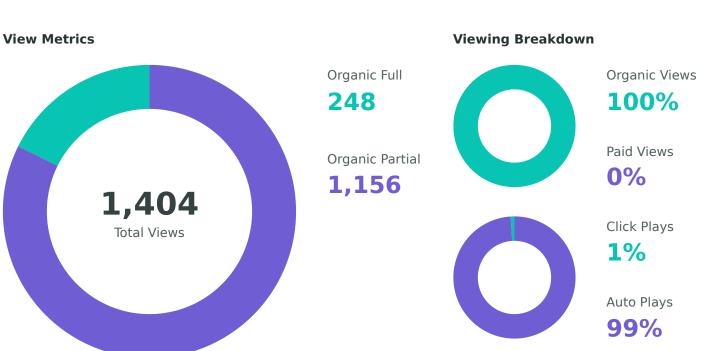
| Impression Metrics | Organic | Paid | Totals | % Change |
|--------------------|-----------------|-------|---------|--------------|
| Impressions | 210,079 🔰 17.4% | 0 →0% | 213,910 | ∖17 % |



Facebook Video Performance

View your aggregate video performance during the reporting period.





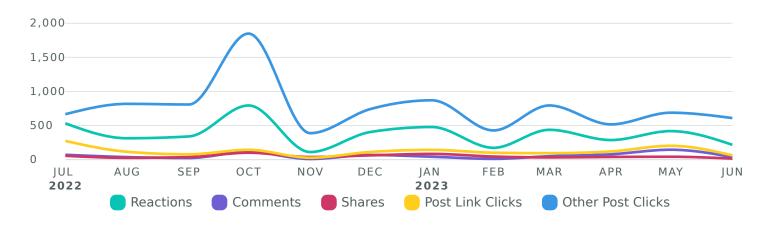


Facebook Engagement

See how people are engaging with your posts during the reporting period.



Organic and Paid Reactions, Comments, Shares, Post Link Clicks, ... Comparison by Engagement Type, by Month



| Engagement Metrics | Totals | % Change |
|--------------------|--------|----------------|
| Total Engagements | 16,054 | 78.4 % |
| Reactions | 4,432 | ≥ 17.7% |
| Comments | 614 | 才 32.3% |
| Shares | 505 | ≥ 9% |
| Post Link Clicks | 1,401 | ≥ 25% |
| Other Post Clicks | 9,102 | 才 39.3% |

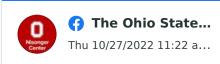


Facebook Top Posts

Review your top posts published during the selected time period, based on the post's lifetime performance.



Descending by Lifetime Engagements





| Total Engagements | 1,232 |
|--------------------------|-------|
| Reactions | 230 |
| Comments | 9 |
| Shares | 17 |
| Post Link Clicks | _ |
| Other Post Clicks | 976 |



The Ohio State... Sun 4/30/2023 3:32 pm ...

Congratulations to Nikole Loew, recipient of the 2023 Champion Award! Read mor...



| Total Engagements | 450 |
|-------------------|-----|
| Reactions | 135 |
| Comments | 81 |
| Shares | 3 |
| Post Link Clicks | 86 |
| Other Post Clicks | 145 |



The Ohio State...Wed 5/17/2023 1:41 pm...

Incoming TOPS student, Sabrina Wilson, was recently featured in her hometown...

Sabrina Wilson Prepa...



| Total Engagements | 413 |
|-------------------|-----|
| Reactions | 131 |
| Comments | 78 |
| Shares | 3 |
| Post Link Clicks | 80 |
| Other Post Clicks | 121 |

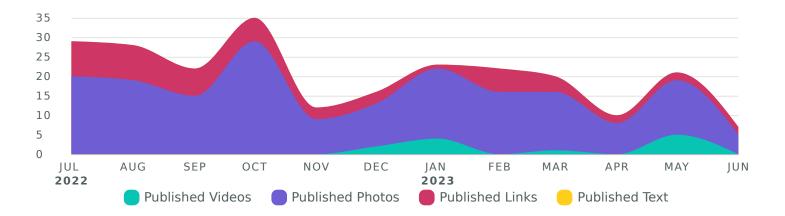


Facebook Publishing Behavior

View the different types of posts you published during the selected time period.



Published Posts Breakdown by Content Type, by Month



| Publishing Behavior by Content Type | Totals | % Change |
|-------------------------------------|--------|-----------------|
| Total Published Posts | 245 | 7 4.7% |
| Published Videos | 12 | ≯ 1,100% |
| Published Photos | 179 | ≯ 51.7% |
| Published Links | 54 | ⅓ 50.9% |
| Published Text | 0 | ≥ 100% |

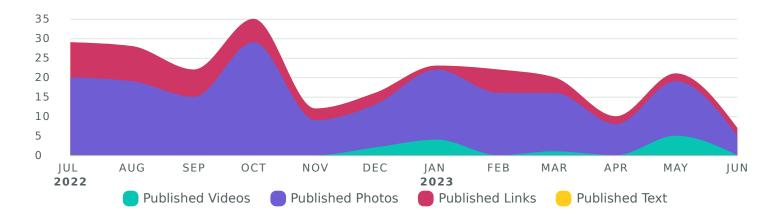


Facebook Publishing Behavior

View the different types of posts you published during the selected time period.



Published Posts Breakdown by Content Type, by Month



| Publishing Behavior by Content Type | Totals | % Change |
|-------------------------------------|--------|-----------------|
| Total Published Posts | 245 | 7 4.7% |
| Published Videos | 12 | ≯ 1,100% |
| Published Photos | 179 | ≯ 51.7% |
| Published Links | 54 | ⅓ 50.9% |
| Published Text | 0 | ≥ 100% |



Facebook Pages

Review your aggregate page metrics from the reporting period.

| Profile Reporting Period | f The C | 7 The Ohio State University Nisonger Center | | | | | | |
|---|---------------|---|--------------------|--------------|---------------|------------------------|--|--|
| Page | Fans | Net Page Likes | Published Posts | Impressions | Engagements | Post Link Clicks | Engagement Rate (per Impression) | |
| Reporting Period | 3,261 | 74 | 245 | 213,910 | 16,054 | 1,401 | 7.5% | |
| Jul 1, 2022 - Jun 14, 2023 | 才 6.7% | √ 48.3% | 才 4.7% | ⅓ 17% | ≯ 8.4% | ≥ 25% | 才 30.6% | |
| Compare to Jul 17, 2021 - Jun 30, 2022 | 3,057 | 143 | 234 | 257,679 | 14,805 | 1,867 | 5.7% | |
| The Ohio State University Nisonger Center | 3,261 | 74 | 245 | 213,910 | 16,054 | 1,401 | 7.5% | |

Appendix H: Twitter Metrics (FY-2023)



OSUMC Twitter Metrics @NisongerCenter

July 1, 2022 - June 14, 2023

OSUMC Twitter Metrics



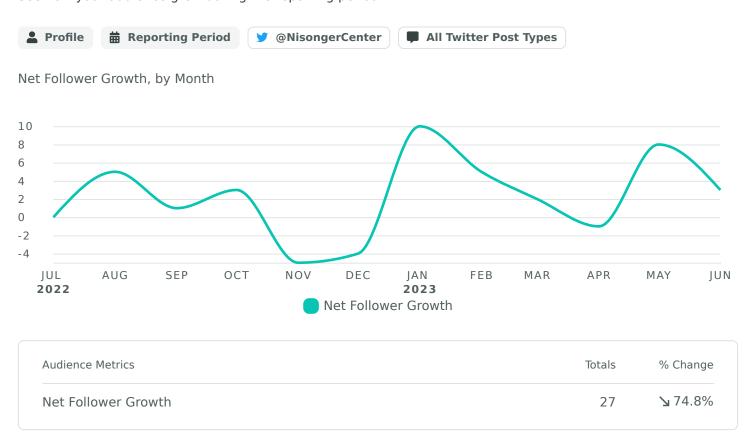
Twitter Performance Summary

View your key profile performance metrics from the reporting period.



Twitter Audience Growth

See how your audience grew during the reporting period.



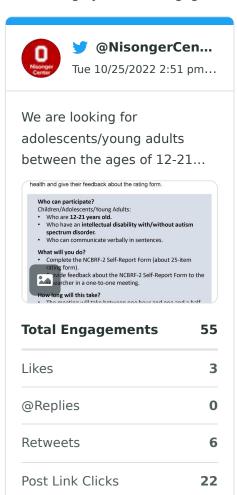


Twitter Top Posts

Review your top posts published during the selected time period, based on the post's lifetime performance.



Descending by Lifetime Engagements



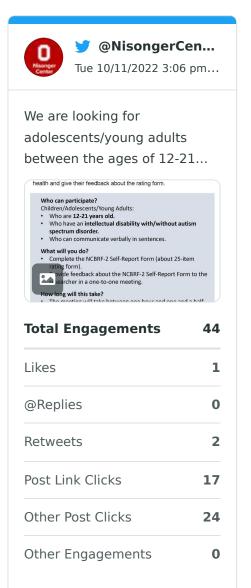
Other Post Clicks

Other Engagements

24

0



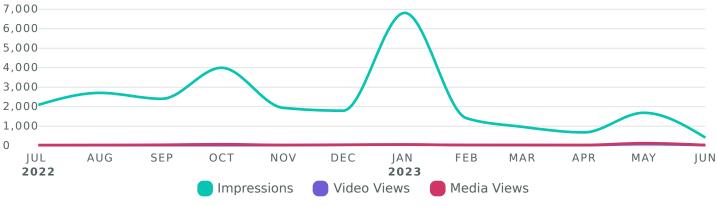




Twitter Impressions

Review how your content was seen by the Twitter community during the reporting period.





| Impression Metrics | Totals | % Change |
|--------------------|--------|----------------|
| Impressions | 26,631 | ⅓ 70.6% |
| Video Views | 110 | 7- |
| Media Views | 302 | ≥ 21.6% |

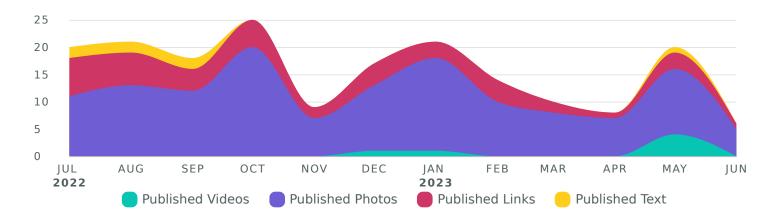


Twitter Publishing Behavior

View the different types of posts you published during the selected time period.



Published Posts Breakdown by Content Type, by Month

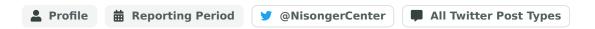


| Publishing Behavior by Content Type | Totals | % Change |
|-------------------------------------|--------|----------------|
| Total Published Posts | 189 | ⅓ 47.6% |
| Published Videos | 6 | 7- |
| Published Photos | 134 | 才 38.1% |
| Published Links | 42 | ∖ 66.4% |
| Published Text | 7 | ≥ 95% |

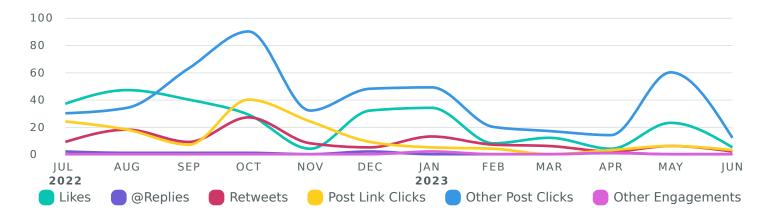


Twitter Engagement

See how people are engaging with your posts during the reporting period.



Engagements Comparison by Engagement Type, by Month



| Engagement Metrics | Totals | % Change |
|--------------------|--------|-------------------|
| Total Engagements | 1,010 | \ 44.8% |
| Likes | 275 | ≥ 49.2% |
| @Replies | 8 | > 55.6% |
| Retweets | 112 | ≥ 26.8% |
| Post Link Clicks | 143 | ≥ 21% |
| Other Post Clicks | 469 | ⅓ 49.9% |
| Other Engagements | 3 | 7- |



Twitter Profiles

Review your aggregate profile metrics from the reporting period.

| Profile Reporting Period MisongerCenter All Twitter Post Types | | | | | | | | |
|--|------------|---------------|---------------------------|--------------------|----------------|----------------|------------------------|--|
| Profile ▲ | | Followers | Net Follower Growth | Published Posts | Impressions | Engagements | Post Link Clicks | Engagement Rate (per Impression) |
| Reporting Pe | eriod | 835 | 27 | 189 | 26,631 | 1,010 | 143 | 3.8% |
| Jul 1, 2022 - Jun | 14, 2023 | 才 3.3% | ⅓ 74.8% | √ 47.6% | ⅓ 70.6% | ⅓ 44.8% | ≥ 21% | ≯ 88% |
| Compare to Jul 17, 2021 - Jur | n 30, 2022 | 808 | 107 | 361 | 90,709 | 1,830 | 181 | 2% |
| ○ y @Niso | ngerCenter | 835 | 27 | 189 | 26,631 | 1,010 | 143 | 3.8% |