



Join Us for the Next DD Community Forum

Wednesday, August 17

3:00 PM – 4:30 PM

[Click Here to Register \(www.tinyurl.com/AugDDForum\)](http://www.tinyurl.com/AugDDForum)



Join BHDDH for a DD Community Forum on Wednesday, August 17th from 3:00 PM – 4:30 PM to get the latest news from the BHDDH Division of Developmental Disabilities.

Everyone must register in advance. After you register, you will receive a confirmation email with your unique login details to join the forum.

When you register, you can enter your questions or comments about the RI DD System. Director Kevin Savage and the DD team will answer the questions and share other information and updates at this quarterly online event.

The forum will be hosted by Advocates in Action and will be held on Zoom. You will also be able to call in. If you can't join us, the forum will be recorded to watch later.

An ASL interpreter will be present at this event. For other accommodation requests, please email MichelleWhite@AdvocatesinAction.org no later than Wednesday, August 10th.

If you have any questions or need assistance registering, call Advocates in Action toll-free: 1-877-532-5543, or email aina@AdvocatesinAction.org.

Congratulations to the Graduates of the Advocates in Action Leadership Series Class of 2022!

On June 30th, Advocates in Action held a virtual Graduation Ceremony for the members of their 26th annual Leadership Series. The 12 graduates in this year's class met on Zoom every week from February through June to learn how to speak up for themselves and others. Along the way, they made friends, learned some important leadership skills, got connected to others in the community, and even helped host the virtual Statewide Self-Advocacy Conference!



To stay up-to-date about next year's Leadership Series, get on AinA's mailing list by signing up here:

<https://www.advocatesinaction.org/contact.php>

Technology Fund

A public forum was held on August 10th about the Technology Fund. Following the October 2021 Consent Decree Action Plan, a \$2 million Technology Fund was created. This one-time Fund is intended for individuals to purchase hardware or software that will assist, improve, increase and/or maintain their ability to meet the outcomes of their Individual Support Plan (ISP) goals, and will facilitate participation in employment and integrated community activities.

Visit <https://bhddh.ri.gov/developmental-disabilities/initiatives/technology-fund> for useful information, including:

- Guidance for what the funding can be used to purchase and how to access the fund.
- Recordings of the April 6th and August 10th information forums on the Technology Fund. The forums were supported by both ASL and Spanish interpreters.
- The request form.
- A 'Frequently Asked Questions' document based on questions asked during the Forum.

A library of information will soon be added to the website, including accessible apps for travel, safety, work, and learning; training tools for individuals, families, and provider agencies; and other helpful technology resources.

Request Process

1. Before making a request for funding, research what technology you might be interested in and how it could benefit you.
2. Complete the [request form](#) to request a purchase through the Technology Fund.
 - a. The form is available in English or Spanish. Select your language in the first question.
 - b. Please remember that the technology request needs to align with one or more goals in your ISP.
 - c. The request form may be submitted online or sent to your social caseworker. If the form is submitted online, once completed a window will open with a confirmation message thanking you for the submission.
3. A Tech Review Committee will review requests on a quarterly basis. The first review will occur in June 2022. Applicants will be notified of the determination shortly after.

Research Project

The Paul V. Sherlock Center on Disabilities at Rhode Island College will engage in a research project on use of the Technology Fund in order to understand individuals' experiences with their purchased technology. This will help the State to think about how to address technology needs and supports in the future.

Community Supports in Crisis: No Staff, No Services

[Click Here to read the report](#)

Community Supports in Crisis: No Staff, No Services is a report published by the [Institute for Community Integration](#).

The report explores the current crisis of labor shortages and pervasive high turnover rates in the direct support professional (DSP) workforce, and the impact of this crisis on people with intellectual and developmental disabilities in the U.S. The report gives a background on the DSP network, drivers of the DSP crisis, the impact on the community, and initiatives to enhance workforce stability and competence.

People with I/DD at Risk:

The June 2022 Joint Commission Sentinel Event Alert

[Click here to view the Press Release](#)

Juanita is a 53-year-old woman. She has a long history of anxiety and depression. Juanita also has cerebral palsy and an intellectual disability and lives in a community residence for people with intellectual/developmental disabilities (I/DD).

For the past couple of days, Juanita has been experiencing increased anxiety. She tells her supporters she feels more tired than usual, has a poor appetite, and has been having “dizzy spells.” Her supporters reached out to Juanita’s primary care provider, who recommended they give her lorazepam, as outlined in her as-needed medication protocol. But it doesn’t help, and Juanita now says she feels like she is going to die.

While it is not uncommon for Juanita to suffer from acute anxiety, her supporters contacted the primary care provider again, saying, “something just isn’t right with Juanita.”

A telehealth appointment was arranged, during which the provider met with Juanita and her supporters. The provider ultimately recommended Juanita be seen in the emergency room to evaluate her symptoms. A diagnostic workup was done, and it was determined that Juanita was having a heart attack and needed immediate intervention.

Fortunately for Juanita, she can communicate her symptoms, has supporters who know her well and have been educated in healthcare advocacy for people with I/DD, and has a relationship with a primary care provider who understands the value of “looking beyond the behaviors” to explore the potential for an undiagnosed medical condition.

But this outcome is a best-case scenario and not the typical outcome for people with IDD because of a phenomenon known as “**diagnostic overshadowing**,” the topic of a recent [Sentinel Event Alert](#) issued by The Joint Commission, a global driver of quality improvement and patient safety in healthcare and a leading accreditation body for healthcare entities.

Diagnostic Overshadowing

Diagnostic overshadowing stems from cognitive bias and poses a serious health risk for people with disabilities. Often, particularly in the case of people with IDD who have co-morbid behavioral health conditions, symptoms that would otherwise be addressed through immediate medical evaluation are discounted and attributed to their IDD. No further assessment is conducted, differential diagnoses are not considered, and medical conditions continue untreated, often while psychotropic medications are being given to “treat” the person’s symptoms.

“Diagnostic overshadowing is a serious safety and quality concern as an initial misdiagnosis can have a significant impact on quality of life, including the physical and psychological wellness of patients,” says Ana Pujols McKee, MD, executive vice president, chief medical officer, and chief diversity, equity and inclusion officer, The Joint Commission.

According to the alert, the medical literature provides extensive evidence that diagnostic overshadowing exists within clinicians’ interactions with patients of all ages with physical disabilities or diagnoses such as autism, mobility disabilities, and neurological deficits. Unfortunately, most clinicians are unaware of this because medical and nursing schools do not typically include curricula on healthcare for people with IDD, and most practicing clinicians have not had the benefit of education in disability-competent healthcare.

The Joint Commission Alert recommends the following to address the serious, life-limiting, and sometimes life-threatening consequences of diagnostic overshadowing.

1. Create an awareness of diagnostic overshadowing during clinical peer and quality assurance reviews and by addressing it in training and education programs.
2. Use listening and interviewing techniques designed to gain better patient engagement and shared decision-making.
3. Collect and aggregate data about pre-existing conditions and disabilities and create EHR prompts for clinicians.
4. Use an intersectional framework when assessing patients in groups prone to diagnostic overshadowing to overcome cognitive biases and look beyond previous diagnoses.
5. Review your organization’s ADA compliance using the added perspective of diagnostic overshadowing to ensure that it meets the needs of patients with physical disabilities.

An independent, not-for-profit organization, [The Joint Commission](#) is the nation's oldest and largest standards-setting and accrediting body in health care. The mission of The Joint Commission is to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. Its vision is that all people always experience the safest, highest quality, best-value health care across all settings.

Contacting DD Staff

See the full Division Contact List attached to this newsletter.

Monday-Friday 8:30-4:00
for questions or support
(401) 462-3421

Para español, llame
(401) 462-3014

Send general questions to the
AskDD email address.

BHDDH.AskDD@bhddh.ri.gov

Please do not email critical issues.

Sign Up for Our Email List

If you aren't receiving email updates
and newsletters from BHDDH, you can
[sign up here](#) or on our website. Go to

<https://bhddh.ri.gov/developmentaldisabilities/events/newsandupdates/> to sign up or to see
past quarterly newsletters and issues of DD News.

 > SIGN UP FOR THE BHDDH NEWSLETTER

If you are experiencing a mental health crisis, BH Link is here for you

BH Link's mission is to ensure all Rhode Islanders experiencing mental health and substance use
crises receive the appropriate services they need as quickly as possible in an environment that
supports their recovery. Call 911 if there is risk of immediate danger. Visit the BH Link website
at www.bhlink.org or for confidential support and to get connected to care:

CALL **(401) 414-LINK (5465)** If under 18 CALL: **(855) KID(543)-LINK(5465)**

Visit the 24-HOUR/7-DAY TRIAGE CENTER at 975 Waterman Avenue, East Providence, RI

For Information on the Consent Decree

For information on the Consent Decree and BHDDH, see <https://bhddh.ri.gov/developmental-disabilities/consent-decree>.

COVID-19 Information

Rhode Island Department of Health COVID-19 Resources

Hotline (401) 222-8022 or 211 after hours;
Email RIDOH.COVID19Questions@health.ri.gov
Website <https://health.ri.gov/covid/>
Includes a link to ASL videos

RI Parent Information Network (RIPIN)

Website <https://ripin.org/covid-19-resources/>
Call Center (401) 270-0101 or email callcenter@ripin.org

Advocates in Action – for videos and easy to read materials

Website <https://www.advocatesinaction.org/>
Website offers BrowseAloud, which will read the website to you

Division of Developmental Disabilities - All Staff Contacts

Main Phone #: (401) 462-3421 **TDD:** (401) 462-3226 **Website:** <https://bhddh.ri.gov/>
Fax: (401) 462-2775 **Spanish Line:** (401) 462-3014 **BH Link:** 401-414-5465

To report abuse/neglect:
 (401) 462-2629

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Vacant	Administrator, Employment	462-3857	

Case Management Units

East Providence/Pawtucket/Central Falls region

Marguerite Belisle	Casework Supervisor	462-0714	Marguerite.Belisle@bhddh.ri.gov
Amie Adams	Social Caseworker II	462-2480	Amie.Adams@bhddh.ri.gov
Carl Desjarlais	Social Caseworker II	462-1555	Carl.Desjarlais@bhddh.ri.gov
Stacey Perry	Social Caseworker II	462-2418	Stacey.Perry@bhddh.ri.gov
Suzanne Porter	Social Caseworker II	462-1972	Suzanne.Porter@bhddh.ri.gov
Mary Beth Silveria	Social Caseworker II	462-2438	Marybeth.Silveria@bhddh.ri.gov
Heather Soares	Social Caseworker II	462-6097	Heather.Soares@bhddh.ri.gov

Northern RI/West Bay/Kent Region

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Mary Cameron	Social Caseworker II	462-1307	Mary.Cameron@bhddh.ri.gov
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Natalie Sam	Social Caseworker II	462-2529	Natalie.Sam@bhddh.ri.gov
Erin Simonelli	Social Caseworker II	462-2502	Erin.Simonelli@bhddh.ri.gov

South County/West Bay/Kent Region

Meredith MacDonald	Casework Supervisor	462-1329	Meredith.Macdonald@bhddh.ri.gov
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Providence/West Bay/Kent Region

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Eligibility Unit

Karen Lowell	Eligibility Supervisor	462-2209	Karen.Lowell@bhddh.ri.gov
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Kim Wright	Information Aide	462-2584	Kimberly.Wright@bhddh.ri.gov

SIS Unit

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Transition Unit

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Carolee Leach	Prof. Services Coordinator	462-1723	Carolee.Leach@bhddh.ri.gov

Support Staff

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Lori Vandall	Clerk Typist	462-6086	Lori.Vandall@bhddh.ri.gov

Supporting Meaningful Employment Training Series

A Person-Centered Approach to Career Planning, Job Development and Retention



In-Person Training

All sessions will be held in person at the Sherlock Center on Disabilities, Providence, or Creative Works, Warwick. See SME Training Schedule for details. The Sherlock Center follows RI College in-person COVID guidance. Masks may be required. In the event of a COVID resurgence, training will revert to an online format.

ACRE Certificate

To earn an ACRE Certificate, learners must attend an orientation session, 12 instructor-led modules, 3 mentor/fieldwork sessions and successfully complete fieldwork assignments. SME Training Schedule is below.

The Sherlock Center offers two paths to earn an ACRE Certificate. The recommended path is to register for the full ACRE series, which allow learners to complete the required modules and fieldwork assignments within 6 months.

The alternative path is to build an ACRE Certificate by completing three SME mini-series and required fieldwork assignments within a 24-month period. Complete details are available on the SME Training page of the Sherlock Center website www.sherlockcenter.org.

Learner Technology Requirements for Online Mentor/Fieldwork Sessions

Learners will participate in instructor-led sessions using Zoom. To participate, learners will need a computer, laptop or tablet with reliable internet access with sufficient bandwidth, and a camera. It is recommended that learners have dedicated time and space when attending sessions.

Learner Time Commitment

Each training module is 3.5 hours. Learners are also required to participate remotely in an orientation session (1.5 hours) and three mentor/fieldwork sessions (1.5 hours each), in addition to satisfactory completion of fieldwork assignments.

To support course completion, learners are expected to begin fieldwork during the course and meet projected assignment due dates. Learners are encouraged to access 1:1 fieldwork support offered through the Sherlock Center.

REGISTRATION

Register Online: <http://bit.ly/2Lt4vTP>

Registration and training schedule are also available on the Sherlock Center website www.sherlockcenter.org. Register by **August 19**.

Fees: Sessions are offered free of charge to participants working for a RI organization/school, including Self-Directed Supports staff/representatives.

Requests & Questions: If you need a reasonable accommodation (e.g. ASL Interpreter, large print), please make your request known when you register. For registration questions, email Elaine Sollecito at esollecito@ric.edu 401-456-2764. For training questions, email Vicki Ferrara at vferrara@ric.edu.



Build an ACRE!
SESSION MODULES

Module 1: Foundations in Community Employment Services and Supports

Module 2: Work Incentives to Support Employment and Retention

Module 3: Vocational Assessment I - Getting to Know the Job Seeker

Module 4: Vocational Assessment II - Person-Centered Employment Planning - the process

Module 5: Vocational Assessment III - Strategies for Community Exploration & Individualized Job Search Planning

Module 6: Employment Law, Americans with Disabilities Act (ADA), and Disability Disclosure

Module 7: Job Development I - Job Search Practices to Support Meaningful Employment

Module 8: Job Development II - Employer Assessment and Individualized Approach to a Job Match

Module 9: Job Development III - Employer Relationships and Negotiations

Module 10: Job Retention and Coaching I - Foundations in Job Retention Success

Module 11: Job Retention and Coaching II - Teaching the Job - Task Analysis and Systematic Instruction

Module 12: Job Retention and Coaching III - Fading Support, Quality Services and Career Development





Your Advocacy Can Make a Difference This August!



Each August, members of Congress leave Washington, D.C., and return to their home states. During this time, they meet with constituents in their districts to learn about issues that matter to them.

At town hall meetings, community events, virtual visits, and more, members of The Arc will be advocating for and educating members of Congress about vital programs for people with disabilities. It is important that they also hear from YOU during this time!

To help you advocate during this August recess and year-round, we have created a [FREE toolkit \[r20.rs6.net\]](https://www.thearc.org/resources/free-toolkit). Use it to help educate your elected officials about key services that affect people with disabilities and their families, such as:

- Increased funding for home and community-based services
- Better wages for direct care workers
- Key changes to increase the amount that people who receive Supplemental Security Income can save

The toolkit includes advocacy tips, sample social media posts and graphics, key resources, and more.



For people with intellectual and developmental disabilities

The Arc promotes and protects the human rights of people with intellectual and developmental disabilities and actively supports their full inclusion and participation in the community throughout their lifetimes.